

UNIVERSITY OF WARWICK
UNIVERSITY HEALTH AND SAFETY EXECUTIVE COMMITTEE
OPEN MINUTES OF THE MEETING HELD Thursday 11th February 2021

Present	Rachel Sandby-Thomas	RS-T	Registrar (Chair)
	James Breckon	JB	Director of Estates
	Lee Cartwright	LC	A Trade Union representative nominated by the University Health and Safety Committee
	Prof. Rebecca Earle	RE	Head of Department within the Faculty of Arts
	Caroline Farren	CF	Senior Health and Safety Advisor (Academic)
	Dr John Ferrie	JF	Lay Member of the Council
	Dr. Ian Hancox	IH	Research Technology Engagement Manager
	Rupert Lawrie	RL	Commercial Director
	Prof. David Leadley	DL	Head of Department within the Faculty of Science
	Charlotte Lloyd	CL	Student Sabbatical Officer
	John Phillips	JP	Director of Health and Safety
	Andrew Smith	AS	Finance Director
Prof. Michael Ward	MW	Chair of the University Health and Safety Committee	
In attendance	Mayur Patel	MP	Assistance Secretary to the UHSEC
	Duncan Stiles	DS	Head of Compliance and Assurance

Ref	Item
031	<p>Apologies for absence</p> <p>Apologies were received from Sahar Duggan, Graham Hakes, Geraldine Mills.</p>
032	<p>Declarations of Interest</p> <p>No new declarations were made.</p>
033	<p>Minutes of last meeting held on 10 December 2020</p> <p>The minutes of the meeting held on 10 December 2020 were received and approved, following the minor amendment below, struck through, in relation to item 020-UHSEC101220 H&S Policy and L&M Document.</p> <p>The Head of Department within the Faculty of Arts, representing the Faculty of Social Science sought clarity on the Leadership and Management document emphasising departments providing support relating to 'Physical and Mental Health of Staff'</p>
	<p>Matters arising from last meeting on 10 December 2020</p> <p>The matters arising were as follows:</p> <p>(a) Drone policy (minute 025-UHSEC060220)</p> <p>The Chair informed the committee that the item was to be deferred until the next UHSEC meeting to be held on 25 March 2021, as other priorities and the latest lockdown had meant that this work had been put on hold temporarily.</p> <p>(b) International Travel report to UEB (minute 040-UHSEC060220)</p> <p>The Chair informed the committee that the item was to be deferred until the next UHSEC meeting to be held on 25 March 2021, as other priorities and the latest lockdown had meant that this work had been put on hold temporarily.</p> <p>The Chair sought clarification regarding the work of the International Travel group and was keen to understand if it applied to both students and staff and estimated that there were in the region of 400 students overseas.</p>

	<p>The Director of Health and Safety Services informed the committee that the guidance for International Travel did apply to both students and staff. Since the onset of Covid-19 the guidance had been review and updated. Pre-covid-19, discussions included what mechanisms were available to identify the location of travellers and so they could be tracked. Post-covid-19, discussions had progressed to include what level of medical cover would be available and how they be safely returned to the UK. The University Insurance Services Manager had provided reassurance that travellers would be covered by basic medical cover and arrangements would be made for their safe return, but questioned whether students and staff should be travelling overseas at this point in time.</p> <p>DECISION: The Chair requested that this be investigated further with input from members of the International Travel Group.</p> <p>ACTION: The Director of Health and Safety to progress with the International Travel Group.</p>
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Chair's Update	
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035	<p>Chair's Business and Actions</p> <p>The chair invited the Director of Health and Safety Services to provides and update as to the Chemical Inventory Tool project.</p> <p>The Director of Health and Safety Services informed the committee that implementation had not been progressed due to the onset of covid-19 and restricted working. University departments had started to reduce the amount of chemicals being held and disposing of old and unused chemicals which met COSHH guidance. The new Chemical Inventory Tool will enable chemical to be tracked across the university. There was no provider who met all requirements, and that three companies had been shortlisted from which LabCup was the company of choice, implementation was scheduled to start last year but was postponed due to covid-19.</p> <p>Software Engineers at Warwick Manufacturing Group (WGM) are developing a software tool as part of a research bid and which they will be offering commercially in the longer term. Part of the tool included an inventory tool element, the engineers are evaluating whether the tool could fit the requirements for a Chemical Inventory Tool the university were seeking. WGM had indicated that they would work with Health and Safety Services and were looking at Chemical Inventory Tool already available, but would need to secure funding for the work.</p> <p>Chair of the University Health and Safety Committee welcomed the development of the Chemical Inventory Tool being done 'in-house' and thought that this would allow better understanding of the specification required to meet the university's needs.</p> <p>The Lay Member of Council was surprised that here was no one using a similar Chemical Inventory Tool which would mirror the needs of the university, and questioned that if there was no one, was the university specification requirements too detailed and too high.</p> <p>The Chair suggested that the Chemical Tool Inventory specification should be reviewed and identify the must-haves and would-likes and then investigate if there was any off the shelf tool available. If there was an inventory tool available then we should consider acquiring the tool to save on resources and development time.</p>
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Executive Update	
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036	<p>OHSAS 18001 Audit Update</p> <p>The Director of Health and Safety presented the report (036-UHSEC110221) on the recent OHSAS 18001 Audit. The Committee received and noted the content of the paper. The Key Point from the audit was that during the latest audit the auditor escalated a Minor Non-conformity relating to Water Hygiene to a Major NC. The NC related to the outstanding number of Legionella assessments and risk assessment tracking spreadsheet not being up to date.</p>
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	<p>The Chair was keen to understand and sought clarity on the progress of Legionella assessments, where they were being conducted and how many had been completed. Also what was expected from the new consultant that was soon due to join Estates.</p> <p>The Director of Estates informed the committee that the documentation the OHSAS Auditor reviewed contained information of the number of planned assessments, this had seen some slippage in some areas, whereas in other areas, assessments had been conducted but was not recorded to reflect this. Resource had been reallocated to remedial work which had an impact on number of assessments being carried out and recording of data, but as this was not documented the auditor identified these as short fallings.</p> <p>The Head of Compliance and Assurance reported that a total of 161 assessments had been completed at the time of the OHSAS audit, but there was no documented evidence or plan of when they would be reviewed. Following the audit, a plan had been put together, starting with buildings of high risk, but the risk levels had been reduced due to flushing, chlorination and daily water checks. The new consultant would be instructed to concentrate on collating information, visiting buildings and reviewing risk assessments, and ensure that all documentation was up to date and current. The Estates director also emphasised that this would be treated as a major project, not dissimilar to fire stopping and compartmentation, but funds needed to be identified and allocated.</p> <p>The Head of Department within the Faculty of Science raised a concern that inspections could cause problems for departments concentrating on other tasks such as graduation of doctors and it was vitally important that communication and arrangements were made in advance.</p>
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Governance	
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037	<p>Statutory Inspection & Compliance Programme Board</p> <p>The Director of Health and Safety Services, presented paper (037-UHSEC110221) highlighting the key points of the paper. The committee received and noted the content of the paper.</p> <p>The Chair commented that the Statutory Inspection and Compliance Programme looked like it had seen some slippage and was operating behind schedule. The Chair also commented that it took a long time to get the RACI model to be finalised and now progress was slow, the Chair was keen to understand what steps could be taken to progress this more quickly.</p> <p>The Director of Health and Safety Services informed the committee that there had been some real progress in some areas at the next meeting of the Statutory Inspection & Compliance Board the focus would now shift to Water Hygiene and Natural Gas as these had moved to the top of the list of the eight priority areas previously identified.</p> <p>The Lay Member of Council was keen to understand why prioritised items took so long to progress, and felt that there should be no room for slippage, if resource was required then it should be sought and funding found, the Group Finance Director need to be made aware if required, with no progress the university was leaving itself legally open. The Chair confirmed that they were happy to talk to the Finance Director if required.</p> <p>The Director of Estates reported that the programme of building inspections was a rolling one and envisaged that it would be difficult to decrease and complete all outstanding inspections quickly, due to buildings deteriorating and building modifications giving rise to additional work. The onset of covid-19 had also had an effect on the progress of inspections being carried out but should be back on track this time next year, for this to happen certain works may need to be outsourced. A programme of work to get back on track needed be developed and proposed, which would be challenging but needs to be investigated.</p> <p>The Director of Health and Safety Services informed the committee, that even though slippage with inspections had occurred by Estates, they had made very good progress with the central Asset List and it was in a better place than it was.</p>
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	<p>The Head of Department within the Faculty of Arts was keen to understand, with the campus at low occupancy, to what extent had this been taken advantage of and utilised to carry out repairs and inspections. The Director of Estates indicated that resource had been moved to other areas but was now being returned to carry out more repairs and inspections and would report back to the committee at a future meeting.</p> <p>The Chair asked for clarification why ‘Natural Gas Systems’ had been moved up the priority list. The Director of Health and Safety Services explained that the university was a recipient of natural gas from a network provider, and then was responsible for both the network which transports gas around the campus and also for the systems which deliver gas into buildings. It had been moved up the priority list as it had come to light that it was not clear who within Estates was responsible for the network aspects and who was responsible for the installation aspects. Competent individuals needed to be identified so responsibility could be allocated, and so that records and certification located and maintained. There was no such evidence at the time of the meeting and, although this was an inherited legacy, it needs to be addressed as a matter of urgency.</p> <p>ACTION: The Director of Estates to provide an update on progress with natural gas networks and natural gas installations at the next Committee meeting.</p>
038	<p>H&S Performance Report – Phenol Incident</p> <p>The Senior Health and Safety Advisor (Academic) outlined the key points of the paper (038-UHSEC110221), the committee received and noted the content of the paper.</p> <p>The Senior Health and Safety Advisor brought the on-going ‘phenol’ issue to the attention of the committee and encouraged a discussion on how to move forward. The committee was informed that there had been a total of 10 recorded phenol incidents since April 2019 in the School of Life Sciences (SLS), a ‘Stop’ notice had been issued, all staff had been trained and phenol had been locked away with only a limited number of key holders.</p> <p>The Head of SLS had asked Health and Safety Services for help with dealing with the issue and could not pinpoint if the reoccurrence of incidents was due to training and supervision issues, or behaviour related as other items have also been found in the incorrect waste stream. He had however taken steps to move all phenol work into one laboratory to narrow the source of the incidents. The key points from the committee discussion are shown below.</p> <ul style="list-style-type: none"> • Concerns that incidents had not stopped and thought that it was time now to think about what action will be taken on individuals once identified. • If the department was unable to identify the individuals involved and the cause, then an investigation team could be sought from outside the department to tackle the issue. • It seems to be the case that some individuals must be aware of who the culprit is or are but are not willing to share such information. • Phenol was used to breakdown DNA, but alternatives were being looked at. When staff and students were asked to confirm who was using phenol and why, the engagement was poor and only a few users responded with feedback. • The Head of SLS asked staff/researchers to update their procedure to show how phenol waste was disposed and was informed that it had been done. • The Senior Health and Safety Advisor reviewed a sample of procedures and found that it was not clear how phenol waste was dealt with and what waste stream was to be used. • If a phenol substitute was identified, why should the university not stop buying it and ban the use moving forward. Not all committee members liked the idea of the enforcement of a ban • Discussions moved forward and it was mentioned that the phenol incident was potentially evidence of a systemic issue, which was behavioural and was indicative of a poor safety culture in some areas.

	<ul style="list-style-type: none"> • Training had been delivered by Health and Safety Services to raise awareness, but the issues persisted. • The responsibility lies with the Head of Department but it is sometimes difficult to identify who is responsible and what further steps could be taken. • The phenol incidents might continue if the culprits were not found, the suggestion to install mobile CCTV was discussed but was thought that this may give rise to additional issues, such as disposal of phenol via another incorrect route, behaviours may change in the short term but return once the CCTV cameras were removed. It was suggested that the installation of CCTV should be used as a threat and last resort. • If people know who the culprit(s) is/are, maybe then close the spaces in question, which would give rise to peer pressure to report the individual(s). <p>The committee agreed that the culprit(s) needed to be identified and an independent investigation from outside the department should be considered. Laboratory users should be made aware that if phenol incidents continue to be reported then a review of all procedures may need to be conducted.</p> <p>ACTION: The Chair to arrange a meeting with the Provost to discuss this item further and identify what action(s) can be taken.</p>
039	<p>Fire Safety Policy</p> <p>The Director of Health and Safety Services presented paper (039-UHSEC110221), the committee received and noted the content of the paper.</p> <p>The Director of Health and Safety reported that discussions were being held with West Midlands Fire Service to make them the University's Primary Authority for fire safety as certain areas of the campus fell under both West Midlands Fire Service and Warwickshire Fire Services.</p> <p>The Head of Department within the Faculty of Arts was keen to understand if Warwick had a tracking system which documented the types of Aluminium Containing Material (ACM) used in cladding on university buildings, and whether we have any of the type used in the Grenfell Tower building. The Director of Health and Safety Services assured the committee that there was a detailed register and that it was well understood which cladding was installed and that no building at Warwick presented a risk similar to that present on the Grenfell Tower building.</p> <p>The Director of Estates reported that a review of all cladding on university accommodation buildings had been conducted and we were at low risk, also the number of tall buildings at Warwick were minimal. Audits of private sector accommodation buildings for ACM's found that the level was also minimal and when found it was tested.</p>
Estates	
040	<p>Report from Water Group</p> <p>The Director of Estates presented paper (040-UHSEC110221), highlighting the key points from the meeting of the Water Safety Management Group. The committee received and noted the content of the paper.</p> <p>The Chair invited the Director of Estates to comment on any items that had not previously been covered during the meeting. The Director of Estates had no further comments to be recorded.</p>
Subsidiary and Sub-Committee Reports	
Items below this line are for receipt and/or approval, without discussion	
041	Report from GMBSC
042	Report from IRNIRC
043	H&S Plan Review
044	EAP Corporate MI

Other	
045	<p>Any Other Business</p> <p>No other business was recorded.</p>
Next meeting: Thursday 25 March 2021	

DECISIONS AND ACTIONS			
ITEM	DECISION/ACTION	LEAD AND DUE DATE	STATUS
064 – Matter Arising	<p>(a) Drone policy (minute 025-UHSEC060220)</p> <p>DECISION: The committee agreed that the item be carried forward to the next UHSEC meeting.</p> <p>ACTION: The Director of Health and Safety Services provide an update at the October 2020 UHSEC meeting.</p>	<p>John Phillips</p> <p>March 2021</p>	On-going
064 – Matter Arising	<p>(b) International Travel report to UEB (minute 040-UHSEC060220)</p> <p>DECISION: The Chair requested that this be investigated further with input from members of the International Travel Group.</p> <p>ACTION: The Director of Health and Safety to progress with the International Travel Group.</p>	<p>John Phillips</p> <p>March 2021</p>	On-going
009 - Statutory Inspection & Compliance Programme Board	<p>ACTION: The Director of Health and Safety Services to provide an update to the Audit and Risk Committee meeting relating to the risk rating of the university</p>	<p>John Phillips</p> <p>Dec 2020</p>	Closed
037 - Statutory Inspection & Compliance Programme Board	<p>ACTION: The Director of Estates to provide an update on progress with natural gas networks and natural gas installations at the next Committee meeting.</p>	<p>James Breckon</p> <p>March 2021</p>	Ongoing
038- H&S Performance Report – Phenol Incident	<p>ACTION: The Chair to arrange a meeting with the Provost to discuss this item further and identify what action(s) can be taken</p>	<p>Rachel Sandby-Thomas</p> <p>March 2021</p>	Ongoing