

UNIVERSITY OF WARWICK

Minutes of the meeting of the University Health and Safety Executive Committee  
to be held on 10 February 2017

- Present: Ms R Sandby-Thomas, (Registrar, Chair), Mr J Breckon (Director of Estates), Mr L Cartwright (Trade Union representative nominated by the University Health and Safety Committee), Professor J Davey (Chair of the University Health and Safety Committee), Dr J Ferrie (Lay member of Council), Ms G McGrattan (Director of Human Resources), Mrs K Ireland (The Head of Department within the Faculty of Social Sciences), Professor D Leadley (Head of Department within the Faculty of Science), Mr J Phillips (Director of Health and Safety, Mr M Roberts (Director of Campus Services and IT), Professor J Millar (The Head of Department within the Faculty of Medicine)
- Apologies: Dr A Phillips (The Head of Department within the Faculty of Arts), Mr A Smith (Finance Director), Ms C Wynne (Student representative nominated by the Students' Union)
- In Attendance: Mrs C Farren (Assistant Secretary), Ms S England (Programme Director for Keeping Campus Moving) (for item 35/16-17), Dr N Waterfield (Chair of the Genetic Modification and Biosafety Committee) (for item 40/16-17 (b))
- Note: *Restricted business (denoted by an asterisk {\*}) is confidential to members and attendees of the University Health and Safety Executive Committee.*

27/16-17 Apologies and Conflicts of Interest

REPORTED: (by the Chair)

- (a) That apologies were received from Mr A Smith (Finance Director) and Dr A Phillips (The Head of Department within the Faculty of Arts).
- (b) That, should any members or attendees of the University Health and Safety Executive Committee have any conflicts of interest relating to agenda items for the meeting, they should be declared in accordance with the CUC Guide for Members of Higher Education Governing Bodies in the UK.
- (c) That members of the Committee were encouraged, wherever possible, to inform the Secretary prior to the meeting of any potential conflicts of interest.

RESOLVED:

That no conflicts of interest be recorded.

28/16-17 Minutes

CONSIDERED:

The minutes of the meeting held on 12 December 2016.

RESOLVED:

That the minutes of the meeting of the University Health and Safety Executive Committee held on 12 December 2016 be approved.

29/16-17 Chair's Business

(a) Internal Audit on Health and Safety Management

REPORTED: (by the Chair)

- i. That the Internal Audit report on health and safety management presented at Audit Committee on 8 February had given health and safety a 'red' risk rating which was similarly reflected at institutional level.
- ii. That whilst this reflected where the University considered it was in summer 2016, a lot had been achieved since this time.
- iii. That on behalf of the Vice Chancellor and as Chair, actions needed to be taken forward to address the issues that have been reported as being in need of resolution.
- iv. That funding for an external health and safety audit would be sought to bring the planned date forward.
- v. That it was considered helpful having the Director of Health and Safety reporting into Steering Committee regularly, as this had helped to raise the profile of health and safety to the senior management team.
- vi. That the Vice Chancellor would help to drive implementation of the health and safety plan by addressing those Departments that do not demonstrate a positive health and safety culture.
- vii. That the presentation delivered by the Director of Health and Safety at the Head of Department forum had received positive feedback and some were looking to acquire additional resources to support them discharge their responsibilities.

(by Dr J Ferrie)

- viii. That there was concern expressed by Council members that the University were presenting as a 'red' risk for health and safety management.
- ix. That as a lay member of Council, members had been informed that the change in committee membership had resulted in delays being incurred in conducting the audit and in assigning more resources to support the Health and Safety Department.
- x. That recognition should be paid to the Estates Department who were being seen to be making progress in relation to health and safety.
- xi. That it was vital to be able to demonstrate progress in health and safety management to report back to Audit and Council.

- xii. That implementation of a safety management system on its own would not change the culture of the University; that there was a need for everyone to take responsibility.

(by the Director of Health and Safety)

- xiii. That the additional resources had enabled the Health and Safety Department to appoint new members to the Department (although some appointments were still in progress) and to start the procurement process for safety management software.
- xiv. That the audit should follow the implementation of a safety management system.
- xv. That the Head of Department forum presentation had resulted in a number of exchanges of email with the Health and Safety Department.

(by the Head of Department within the Faculty of Social Sciences)

- xvi. That it should be recognised that a Head of Department receives a lot of information and it is not always clear how important this information is upon receipt or the extent to which it should be disseminated.
- xvii. That understanding the context of the information and obtaining endorsement by the Vice Chancellor would help Heads of Departments recognise the importance of the communication.

RESOLVED:

That the Internal Audit report on health and safety management be brought to the meeting of this committee on 16 May.

(b) Closure of the Avon Incident Task and Finish Group

REPORTED: (by the Director of Health and Safety)

- i. That there was one outstanding action that related to the appointment of a Senior Building Manager.
- ii. That there were no candidates that met all of the essential criteria when this post was advertised, possibly because the role was both strategic and operational.
- iii. That a decision was made to appoint a Facilities Management consultant to conduct an independent review, with a view to obtain their findings within four to six weeks.
- iv. That consideration had been made to cluster buildings and look at whether a porter could be assigned responsibility, but this has not been considered further.

(by the Director of Estates)

- v. That there was a need for Departments to recognise that whoever owns a building will have to take degree of responsibility for the health and safety of it.
- vi. That if the University continues to develop more shared buildings, such as the Oculus, there was a need to decide how these could be managed once occupied.
- vii. That a 'Building Manager', who is appointed to this role would need to understand how the spaces were being used; the proposal from the consultant should outline how this could be achieved.

(by the Head of Department within the Faculty of Science, appointed by the Steering Committee)

- viii. That there would remain a problem allocating responsibility for centrally timetabled spaces.

(by Dr J Ferrie)

- ix. That there should be a timeline developed to resolve this matter.

RESOLVED:

That a timeline be developed to show the anticipated progress with the identification and appointment of Building Managers.

(c) Northumbria University Prosecution

REPORTED: (by the Director of Health and Safety)

- i. That the Health and Safety Executive (HSE) Press Office had reported a prosecution of the University of Northumbria after two students suffered "life-threatening" effects when they were given 100 times too much caffeine during an experiment; this had resulted in a £400,000 fine.
- ii. That whilst this type of research may not be conducted at the University of Warwick, it is the legal principle that was important to recognise:- any research of significant risk must be supported by a written risk assessment, conducted, and/or reviewed by a competent person, followed by sufficient supervision, such that it can be ensured that the methodology and controls indicated in the risk assessment are followed.
- iii. That this highlighted a need for research staff to recognise that a document entitled, 'Responsible Research' which was written for the research sector and has been available for several years, should be recommended to be used as a tool for staff to read and act on.
- iv. That information on this case had been sent out via the Head of Department forum and via a Safety Bulletin.

30/16-17 Chair of Chemical Safety Task and Finish Group (minute 20/16-17 refers)

REPORTED: (by the Chair)

- (a) That Mike Roberts would chair the next meeting of this group to ensure that the two actions outstanding were being addressed.

(by The Director of Campus Services and IT)

- (b) That a Chemical Safety Task and Finish Group meeting had been scheduled; there was a view that this group would be closed down by allocating the arrangements for the improved maintenance and record keeping of LEV systems action to the Estates Strategic Health and Safety Committee and the action to adequately segregate chemicals in laboratories and research areas allocated to the Chemical Inventory Project team.
- (c) That the procurement of a chemical inventory system would take several months to establish a partner; ideally a system that the University already used would be preferred.
- (d) That despite the time involved, there had been a lot of action taken by Departments to reduce the number of chemicals they hold and to segregate these; now the more lengthy process would begin to outline how chemicals are brought into the University and how they are used which would help to specify the inventory system.
- (e) That there was a need to engage sufficiently with Departments to ensure successful implementation of the system.

(by the Director of Health and Safety)

- (f) That the chemical inventory system had been scoped out and a tender document was currently being pulled together by Procurement and Insurance Services.
- (g) That Departments should continue to update and revise the inventories they have in place; this information would be imported into the new system, providing the University with a common approach to chemical inventory management and a means for chemical data retrieval and reporting.
- (h) That some of the systems currently in use were not viable to maintain or were considered unsuitable to use from a data security perspective.
- (i) That many chemicals in departments had been safely disposed of following the incident and much work had taken place with regards to improved chemical storage.
- (j) That the introduction of Health and Safety Officers across the Science and Medical Faculty would help monitor what is happening on the ground with regards to chemical segregation and storage.
- (k) That there were areas that demonstrated good discipline with regards to chemical segregation and storage and then others where it would be an ongoing issue.

- (l) That the Health and Safety Department were working closely with Heads of Department to tackle issues as they have arisen, with the option available to lock persons out of laboratory spaces if required.
- (m) That there did not appear to be a process in place to dispose of or re-allocate chemicals or equipment to new 'owners' when staff leave the University.
- (n) That it was a Head of Department's responsibility to allocate space out to researchers (space owners) and with that would come responsibility.

(by the Chair)

- (o) That it was vital to ensure that the chemical inventory stored data consistently and to ensure that the system was easy to use.

(by Dr J Ferrie)

- (p) That the University must continue to ensure that the storage of dangerous chemicals was being effectively managed in the absence of a robust chemical inventory system.
- (q) That there should be greater reporting to the centre in which to keep committee members informed of matters arising, so that any necessary action could be taken by the Chair.

(by the Trade Union representative nominated by the University Health and Safety Committee)

- (r) That at the University Health and Safety Committee it was reported that when researchers leave a space, it was likely that any chemicals and equipment would simply be inherited by the next space owner.

(by the Director of Estates)

- (s) That in relation to local exhaust ventilation, immediate actions were taken following the chemical incident; a project was now underway which involved collation of information from Departments and subsequent engagement with an external company to review and test local exhaust ventilation on the revised inventory.

31/16-17 Competency in Design of Specialist Facilities (minute 25/16-17 refers)

REPORTED: (by the Director of Estates)

- (a) That consideration had been paid to the competency of those engaged in the design of specialist facilities and it had been decided that a flag would be built into the Estates Project Management System, 'Concerto', to ensure that certain discussions take place during the design stage involving key stakeholders; such a process was currently being mapped out and would be embedded into the existing process.
- (b) That Estates Project Managers currently worked closely with Principal Investigators to identify any risks involved connected with their equipment or research activities.

(by the Head of Department within the Faculty of Social Sciences, appointed by the Steering Committee)

- (c) That concern had been raised in connection with a building on Westwood Campus which was being used as a chemical preparation room; it was observed to contain a multitude of chemicals and it was not known if they were being stored appropriately.

(by the Director of Health and Safety)

- (d) That the Health and Safety Officer from the Chemistry Department had visited this location to provide support in relation to the safe disposal of certain chemicals and some advice on storage and segregation.

RESOLVED:

That the Health and Safety Department provide some degree of assurance that chemicals are being stored appropriately in the preparation room on Westwood Campus.

32/16-17 Membership of the Committee

CONSIDERED:

A paper from the Director of Health and Safety outlining the changes to the membership, (UHSEC.13/16-17).

REPORTED: (by the Director of Health and Safety)

That there had been no change to the terms of reference, however the membership now reflected the new appointments made to fill the Faculty of Medicine, Social Sciences and Arts positions.

RESOLVED:

That the Committee approved the change to membership.

33/16-17 Contractor Management Action Plan

RECEIVED:

A paper from the Director of Health and Safety outlining the progress made to date and highlighting where further work was required, as reported to the Health and Safety Executive following the incident of May 2016 and Notification of Contravention Letter, (UHSEC.14/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That the wording in the action plan was developed on the advice of the current University solicitors.
- (b) That the HSE would expect the University to continue to address the issues outlined in the action plan.

- (c) That five substantive actions remained outstanding which would need support of members to implement the changes required, most of which were connected to University Procurement processes.
- (d) That there was a need for others to see the work required as a priority and support of members was felt to be required to address this.
- (e) That there remained some inconsistencies in connection with the appointment and engagement of contractors meaning that there was still evidence of contractors being directly appointed without having gone through a validation or assurance process.
- (f) That there remained work in progress in connection with the contractual terms that the University holds with landlords (off campus accommodation).
- (g) That there remained a lack of clarity in relation to what an 'approved contractor' meant to the University, noting that there were more than just health and safety considerations to be taken at the appointment of contractor stage.

(by the Director of Estates)

- (h) That to retain focus, it would be useful to merge actions that were interconnected and to provide greater clarity on what was mandatory and what would help close out on matters.

(by the Director of Human Resources)

- (i) That there were observed inconsistencies in the way in which processes were managed at the University, with some processes strictly adhered to and others that weren't necessarily done so.
- (j) That the Procurement and Insurance Services focus was based on the Financial Regulations, with a £35K limit above which more rigorous processes were required; there should be a change on focus to health and safety and where possible, look to streamline processes and hence quicken timescales involved.

(by the Trade Union representative nominated by the University Health and Safety Committee)

- (k) That there would always remain ways to circumvent the use of Estates when appointing contractors and the use of a credit card, to avoid the management systems in place.

(by Dr J Ferrie)

- (l) That it was necessary to set out clear policy on contractor appointment and management and to identify consequences that were not discretionary.
- (m) That the University could choose to agree that every University contractor has to go through the Central Procurement team for approval.
- (n) That those that circumvent the systems in place to protect the University should be reminded that they would be held responsible.



(by the Head of Department within the Faculty of Science, appointed by the Steering Committee)

- (o) That the Financial Regulations had grown over the years and the perception was that some regulations were mandatory, whilst for others it did not matter if they were applied.
- (p) That there was a need for a refocus, so that staff were pointed to the standards that were important and non-negotiable.

(by the Director of Campus Services and IT)

- (q) That to help to define the central processes required, the University should look at the failure points in the process and then work backwards to identify the steps required that would mitigate these.

RESOLVED:

That the Director of Estates and Director of Health and Safety take the priority action plan to the Director of Finance, to seek their support on the prioritisation of work for staff that they manage to help implement some of the actions required.

34/16-17 Health and Safety Plan Update

CONSIDERED:

A paper from the Director of Health and Safety on the revised Strategic Health and Safety Plan for the period 2016-2019, (UHSEC.15/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That the plan provided an update on status of delivery against the timeframes given; some matters remained, 'work in progress'.
- (b) That some target dates had been altered following receipt of comments and further comments were welcomed.
- (c) That the Strategic Health and Safety Plan would inform papers for Steering where a priority status would be presented.

(by the Director of Human Resources)

- (d) That it would be beneficial to make it clearer what actions individuals need to take, noting that the paper made reference to the 'safety system', but it was primarily staff that would have to take action to implement the plan.

(by the Director of Estates)

- (e) That he would support the need to clarify what staff need to do.

(by Dr J Ferrie)

- (f) That the word 'will' would be preferred to 'intends'.

RESOLVED:

That comments provided be reflected in a revision to the Strategic Health and Safety Plan.

35/16-17 Traffic, Pedestrian and Cyclist Safety

CONSIDERED:

A presentation from the Programme Director for Keeping Campus Moving on the arrangements for the mitigation of risk associated with vehicular, pedestrian and cyclist safety, with particular attention to the potential impact of capital projects.

REPORTED: (by the Programme Director for Keeping Campus Moving)

- (a) That transportation and movement around campus was considered at every stage of a capital project, initially by the Principal Designer and then the Principal Contractor would be expected to respond to the risks within their tender.
- (b) That during construction phase, the Estates Project Manager and appointed Clerk of Works were responsible for monitoring progress, with any health and safety issues brought up at regular progress meetings; this would include logistical concerns.
- (c) That the Estates Department were scrutinising every logistics plan submitted, removing contractors if they were unable to adhere to the terms.
- (d) That a bigger logistics group consider the risk assessments and method statements of specific projects and that the distribution and timings of projects were then reviewed at the Capital Programme Board meetings.
- (e) That demand by the University can result in several projects taking place at the same time; under these circumstances, regular logistics meetings involving the lead Project Manager, representatives from 'Keeping Campus Moving' and Health and Safety meet each week to identify issues, including impact of deliveries, road/footpath closures or diversions.
- (f) That Project Managers and others within the Estates Department were being provided with further training to raise awareness on the importance of considering logistics and on the standards that need to be applied in relation to street works and traffic management.
- (g) That periphery parking and transport hubs were being considered to support the construction vehicle management strategy to, so far as reasonably practical, maintain vehicles off site for as long as possible before coming onto campus, whilst being mindful of the impact on neighbours and the environment.
- (h) That there would be a huge logistical impact with the new Maths and Stats development which would be starting in the vicinity of other large construction projects.
- (i) That the Cryfield development would have an impact on the Sustrans cycle routes and both cyclists and pedestrian diversions were planned.

- (j) That logistics were being considered in relation to the University House car park, Faculty of Arts and Arts Centre developments at an early stage.

(by the Head of Department within the Faculty of Science)

- (k) That it would be desirable for the runway between University House and central campus to be opened before closure of some of the spaces at Car Park 16 due to the distance staff would have to travel.

(by the Director of Estates)

- (l) That there had been some contingency built in for permitting the runway to be opened before the proposed car park development commences in September/October.

(by the Director of Health and Safety)

- (m) That there was a need to avoid cyclists crossing delivery areas and to minimise the number of locations which mixes cyclists with construction traffic; Designers that the University engages with should be educated to understand that these are the requirements of the University.

- (n) That an induction package was being developed online which would shortly be made available to all staff; traffic safety could be included as a topic.

(by the Head of Department within the Faculty of Social Sciences)

- (o) That there was a need for closer work with the Student Union to raise awareness of traffic risks, particularly in connection with cyclists using lights, wearing of cycle helmets and being visible at night.

(by the Trade Union representative nominated by the University Health and Safety Committee)

- (p) That at the University Health and Safety Committee, the Student Union had considered developing media material to raise awareness in this area, but this work had never been completed; this should be resurrected with the Student Union.

(by the Director of Human Resources)

- (q) That staff and students should be made to understand that everyone has a health and safety responsibility which includes the need to consider the risks to themselves (as well as to others) when driving, cycling or walking around campus.

- (r) That there are inconsistencies in the way in which health and safety inductions and training more generally were carried out across the University; the Commercial Group being considered a good example.

- (s) That the 'Welcome to Warwick' training session did not currently incorporate health and safety as it was designed to help new starters understand the University context.

- (t) That there was a need for the Higher Education sector as a whole to establish stronger mechanisms to outline legislation that applies to this sector; that there was a general lack of awareness of what is mandatory.
- (u) That mechanisms to get things completed at the University of Warwick were considered more difficult due to the University's structure.

(by the Chair)

- (v) That the flat organisational structure at the University of Warwick enabled departments to flourish in the directions that they wanted to travel; to aid compliance would require integration with departments and a need to embed systems and procedures into departmental processes.
- (w) That a flat structure enables Heads of Department to readily converse with the Vice Chancellor on matters of importance.

(by Dr J Ferrie)

- (x) That student and staff safety should not be something that was up for debate.

36/16-17 RoSPA Awards

CONSIDERED:

A paper outlining the RoSPA award scheme with a proposal for departments with good health and safety performance to apply for a RoSPA Award in 2018, (UHSEC.16/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That the scheme offered an opportunity for the University to promote health and safety and the chance for well performing departments to look towards an award by a well-established health and safety recognition scheme.
- (b) That this could provide an incentive for departments, as opposed to the negative indicators that are otherwise used as a key performance indicator.
- (c) That the University Staff Awards scheme had been looked at as a vehicle for recognition for health and safety performance, but this was considered to fall outside the scope of the scheme.
- (d) That the award would address health and safety culture.
- (e) That other Universities were already considering or going through the RoSPA award scheme.

(by the Chair)

- (f) That whilst Steering were receiving negative reports on health and safety performance concern was raised as to whether this was the right time to look towards recognition by such a scheme.

- (g) That obtaining a national award may not be appropriate if there were areas of the University who were not performing adequately with regards to health and safety.

(by Dr J Ferrie)

- (h) That whilst the timing may be premature, the scheme could be used to encourage Departments or sections within Departments to improve in health and safety.

(by the Head of Department within the Faculty of Science)

- (i) That as a member of the panel for the Staff Awards, the current awards scheme could incorporate recognition of good health and safety performance of a team or individual if the nomination was well worded.
- (j) That as with the Athena Swan scheme, the RoSPA award scheme could be used as an 'aspirational track' to obtain such an award and Departments could look forward to joining the scheme when ready.
- (k) That one or two departments looking to take this up initially could encourage others to get on board.

(by the Trade Union representative nominated by the University Health and Safety Committee)

- (l) That acquiring a RoSPA award was difficult, but it could establish competition between departments.

(by the Director of Estates)

- (m) That the Estates Department had been looking to acquire an award and already held an award for ISO 14001.

RESOLVED:

- (a) That the Chair approach the Pro Vice-Chancellor (Academic Planning & Resources), to seek integration of health and safety into the internal staff awards scheme.
- (b) That the Committee consider the RoSPA award if it formed part of a departmental improvement plan and it was deemed both aspirational and achievable for the next year's cycle, which would need to be applied for in the early part of 2018.

37/16-17 Performance Update

RECEIVED:

A paper detailing incidents reported to the Health and Safety Department for the period September to December 2016 and the Metrics Dashboard which provides an indicator of health and safety performance, (UHSEC.17/16-17).

REPORTED: (by the Senior Health and Safety Adviser)

- (a) That the merger of Warwick Accommodation into the Estates Department had affected the statistics within this reporting period, with 60% of all 'significant' incidents having been reported by this Department.
- (b) That the increase in the numbers of contractors on site was being reflected in the accident statistics; this was likely to increase as the volume of work increases.
- (c) That the number of chemical incidents being reported had risen since the last reporting period.
- (d) That 'failure to follow rule/procedure' was the most frequently reported incident category.
- (e) That the Performance Metrics Dashboard had been developed for reporting regularly to Steering and for use at other committees.
- (f) That four internal Improvement Notices remained in place and the % completion of data required for the Quemis Hazard Management System database was currently 16%.
- (g) That the current group completing the Quemis Hazard Management System was the Science and Medical Faculty.

(by the Head of Department within the Faculty of Medicine)

- (h) That there was a lack of awareness with regards to the need to complete the Quemis Hazard Management system within the Medical Faculty.
- (i) That there was a perceived need for staff to be trained to use this system across the School of Life Sciences and Warwick Medical School.

(by the Head of Department within the Faculty of Science)

- (j) That the Departmental Health and Safety Officers were working with local academics to support them input relevant data into the Hazard Management System and the same support would be provided across the School of Life Sciences and Warwick Medical School.

(by the Chair)

- (k) That it could be useful for a meeting to be held with Heads of the School of Life Sciences and Warwick Medical School to better engage staff and ensure that principal investigators know that this is coming and that completion would be mandatory.

(by the Director of Health and Safety)

- (l) That there had already been engagement with the Technical Service teams within the School of Life Sciences/Warwick Medical School on the Quemis Hazard Management System.
- (m) That to seek closure of incidents there were currently three tiers of investigation carried out following a reported incident.

- (n) That there remained a need to provide incident investigation training to managers.

(by Dr J Ferrie)

- (o) That there was concern on the number of incidents being reported relating to 'failure to follow rule/procedure' and a need to ensure that this category was being reported against appropriately and that these were being addressed appropriately by Departments.

(by the Director of Campus Services and IT)

- (p) That when analysing the incidents where persons failed to follow a rule or procedure, there should be an investigation undertaken as to why persons may be taking a different course of action.

RESOLVED:

That the committee be informed of the incidents relating to 'failure to follow rule/procedure' during this review period and be informed of the three tiers of investigation.

38/16-17 Major Projects Update

RECEIVED:

The PPG RAG status report as at 1 February (UHSEC.18/16-17).

REPORTED: (by the Director of Estates)

That the health and safety performance of the major projects currently in progress as detailed in the Major Projects Update report was for members to note.

RESOLVED:

That the Health and Safety status of capital projects, as set out in paper UHSEC.18/16-17, be noted.

39/16-17 Health and Safety Policies

CONSIDERED:

The health and safety draft policies for six priority areas; permits, working at height, legionella and water quality, lead, work equipment, and lifting operations and lifting equipment, (UHSEC.19/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That the six draft policies had been circulated via the University Health and Safety Committee, Health and Safety Newsletter communication champions and were available on the Health, Safety and Wellbeing webpages for comment.

- (b) That feedback from the Estates Department had been received.
- (c) That there were a number of other health and safety policies that needed to be published.

RESOLVED:

- (a) That the six policies be approved for publication and distributed via the normal network.
- (b) That the remaining policies in need of generation or review be discussed with the Chair and the Director of Estates to confirm the order of completion prior to their generation and publication.
- (c) That the target be to publish all remaining health and safety policies by the end of the year.

40/16-17 Reports from Health and Safety Committees

CONSIDERED:

- (a) University Health and Safety Committee (UHSEC.20/16-17).

REPORTED: (by the Chair of the UHSC)

- i. That the latest UHSC meeting on 10 October 2016 was for members to note.
- ii. That as the new Chair it was observed that there was excellent representation from the Trade Unions, Estates and Commercial Departments, but less from the academic side of the University.
- iii. That it was recommended that the Chairs of Departmental Health and Safety Committees (where these exist) be invited to future UHSC meetings.
- iv. That greater engagement with academic departments should support an increase in general health and safety awareness and ultimately a culture change.

(by Dr J Ferrie)

- v. That it was necessary to ensure that the institutional risk level, 'red', was disseminated to members of the UHSC.

RESOLVED:

That Chairs of Departmental Health and Safety Committees be invited to attend the University Health and Safety Committee.

- (b) University Genetic Modification and Biosafety Committee (UHSEC.21/16-17 {restricted}\*).

REPORTED: (by the Chair of the Genetic Modification and Biosafety Committee)



- i. That there remained difficulty in recruiting to the position of clinician on the membership of the GMBSC.
- ii. That biosecurity was agreed to be incorporated into the terms of reference of the committee.
- iii. That there were a number of matters that needed to be resolved following the last round of planned preventative maintenance (six monthly) shutdowns of the containment level 3 laboratories, mainly relating to pressure issues.
- iv. That the School of Life Sciences/Warwick Medical School Technical teams and Estates were trying to minimise the downtime and impact that this was having on academic staff and their research.
- v. That the GMBSC were providing oversight of the six monthly maintenance arrangements and closure against the matters arising.

41/16-17 Dates of Future Meetings

REPORTED:

That the next meeting dates of the Committee were:

Tuesday 4 April 2017	(internal only)	14.00-16.00	CMR1.2
Tuesday 16 May 2017		09.00-11.00	SMR1.13b
Monday 3 July 2017	(internal only)	10.00-12.00	CMR1.1