

UNIVERSITY OF WARWICK

Minutes of the meeting of the University Health and Safety Executive Committee
held on 11 February 2019

Present: R Sandby-Thomas (Registrar, Chair), J Breckon (Director of Estates), C Farren (Senior Health and Safety Adviser), Dr I Hancox (Research Technology Engagement Manager), Professor A Lavender (Head of School, Theatre Studies), Professor D Leadley (Head of Department within the Faculty of Science), G Mills (HR Director (Interim)), J Phillips (Director of Health and Safety), A Smith (Finance Director)

Apologies: L Cartwright (Trade Union representative nominated by the University Health and Safety Committee), B Dhingra (Student representative nominated by the Students' Union and appointed by the Steering Committee), Dr J Ferrie (Lay Member of the Council), R Lawrie (Commercial Director), Professor E Smith (Director of Centre for Education Studies), Professor L Young (Pro-Dean External Affairs)

In Attendance: M Patel (Health and Safety Administration Officer, Assistant Secretary)

Note: *Restricted business (denoted by an asterisk {*}) is confidential to members and attendees of the University Health and Safety Executive Committee.*

29/18-19 Apologies and Conflicts of Interest

REPORTED: (by the Chair)

- (a) That apologies were received from L Cartwright (Trade Union representative nominated by the University Health and Safety Committee), B Dhingra (Student representative nominated by the Students' Union and appointed by the Steering Committee, Dr J Ferrie (Lay Member of the Council), R Lawrie (Commercial Director), Professor E Smith (Director of Centre for Education Studies), Professor L Young (Pro-Dean External Affairs).
- (b) That should any member or attendees of the University Health and Safety Executive Committee have any conflicts of interest related 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.

30/18-19 Minutes

CONSIDERED:

The minutes of the meeting of the University Health and Safety Executive Committee that took place on 17 December 2018.

RESOLVED:

That the minutes of the meeting of the University Health and Safety Executive Committee held on 17 December 2018 be approved subject to the following amendment (additions underlined, deletions ~~Struck through~~).

18/18-19 Matters Arising on the Minutes, (c) Labelling of drinking water outlets (minute 29/17-18 refers).

- That all drinking water outlets ~~had been~~ were in the process of being identified.

31/18-19 Chair's Business

REPORTED: (by the Chair)

- (a) That the emergency evacuation process relating to the fire at Westwood Emscote student accommodation on 18/01/2019 was executed with efficiency.

(by the Director of Estates)

- (b) That no injuries were sustained.
- (c) That the immediate priority was to bring the kitchen back into use.
- (d) That the fire was as a result of grease build up in the ducting and not the cooker hood.
- (e) That the learning objectives were to include: reviewing other accommodation buildings for grease build up, to review the cleaning regimes, check that fuses were correctly installed and to replace older cooker hoods.

32/18-19 Matters Arising on the Minutes

- (a) Chemistry solvent store update (minute 18(a)/18-19 refers)

REPORTED: (by the Director of Estates)

- (i) That the Chemistry solvent store was registered as an Estates project.
- (ii) That planning permission had been granted.
- (iii) That a discussion was to be had with the Chemistry department as to the most suitable period for work to commence, as the old solvent store would

not be accessible during the demolition and construction. A meeting was yet to be arranged.

- (iv) That a work schedule would be developed.

(b) Labelling of drinking water outlet progress (minute 18(b)/18-19 refers)

REPORTED: (by the Director of Estates)

- (i) That labelling of drinking water outlets had commenced.
- (ii) That nine buildings had been completed.
- (iii) That additional resource had been taken on to complete the labelling task.
- (iv) That a more accurate date of completion would be provided.

(c) CL3 Laboratory Facility refurbishment progress (minute 26/18-19 refers)

- (i) That the CL3 Laboratory refurbishment works following the ceiling collapse had been registered as an Estates project.
- (ii) That funding was available and work was scheduled to start on 25 February 2019, the BSU manager was to be contacted to confirm this date.
- (iii) That work was to reinstate the ceiling only.
- (iv) That the CL3 fan replacement for the other CL3 laboratory was scheduled for May 2019.
- (v) That the date for the replacement of the control panel for this laboratory was to be provided.

(by the Senior Health and Safety Advisor)

- (vi) That the CL3 facility which experienced a ceiling collapse was found not to have been originally built to standard (being only single skinned); a CL3 laboratory should be double skinned.

RESOLVED:

- (a) That a progress update be provided in relation to the projects involving the Chemistry solvent store and water outlet labelling.
- (b) That a progress update be provided on the CL3 refurbishment works, including the remaining outstanding works that need to be considered (i.e. plant room bunding and the control panel refurbishment /replacement).

33/18-19 OHSAS 18001 Audit Update

RECEIVED:

A paper outlining progress against the BSi OHSAS 18001 Audit (UHSEC.23/18-19)

REPORTED: (by the Director of Health and Safety)

- (a) That the British Standards Institute (BSi) completed their implementation audit of the seven higher risk departments (Chemistry, Engineering, Estates (Operations), SLS, WMS, Physics and WMG) in November 2018, and were prepared to certificate the University's Occupational Health and Safety Management System to OHSAS 18001.
- (b) That the University Executive Board had requested that the Research Technology Platforms (RTPs) be bought within scope at the earliest opportunity.
- (c) That by entering into certification the University was committing to a three year cycle of surveillance visits, which would consist of three days auditing by the BSi every 6 months (essentially each of the seven departments would be audited by the BSi at least once during this period).
- (d) That the next audit by the BSi was scheduled for March 2019, at which point they would seek confirmation that previous Non-Conformities were being managed and closed-out.
- (e) That auditing of the University's arrangements relating to Statutory Inspections of higher risk equipment was to be carried out.
- (f) That the RTPs would be audited by the BSi during April 2019.
- (g) That progress with external and internal OHSAS 18001 audits would be reported to both the Audit and Risk and University Health and Safety Executive Committees.

34/18-19 Statutory Inspection Project

RECEIVED:

A verbal update on the progress with the Statutory Inspection Project.

REPORTED: (by the Director of Health and Safety)

- (a) That a Statutory Inspection Working Group had been established.
- (b) That the working group was looking at immediate fix and strategic planning for inspections of equipment which are subject to statutory examination and testing.
- (c) That workshop staff members were to be identified and invited onto the group to provide appropriate representation.

- (d) That asset tagging had highlighted more work than originally anticipated.
- (e) That Head of Departments were to be contacted with asset lists to indicate actions required to bring equipment to the required compliance standard.

(by the Head of Department of the Faculty of Science, Engineering and Medicine)

- (f) That asset lists should be provided to Heads of Department to indicate their responsibility and should advise if research activities were permitted to continue.

35/18-19 Statutory Maintenance Group and Dashboard

RECEIVED:

A paper on the most recent meeting of the Statutory Maintenance Group and a review of the maintenance metrics dashboard (UHSEC.24/18-19)

REPORTED: (by the Director of Estates)

- (a) That following the internal and BSi OHSAS 18001 audits, immediate actions identified had been completed and medium improvements were being monitored by the group.
- (b) That priorities for the group remained around compliance of Local Exhaust Ventilation (LEV), Pressure Systems, Lifting Equipment/Accessories, Power Presses, Bulk Gas Storage, Gas Cylinders and Regulators and Natural Gas.
- (c) That the asset tagging across the Science, Engineering and Medical Faculty of items requiring statutory testing was to conclude at the end of February 2019.
- (d) That the Zurich engineering inspection test data had identified 2 serious defects which had now been rectified.
- (e) That a cross-departmental group in the Science, Engineering and Medical Faculty were looking at University owned liquid nitrogen bulk storage tanks and pipework with BOC to ensure they were safe for supply.

36/18-19 Water Hygiene

RECEIVED:

A paper on the most recent meeting of the Water Hygiene Working Group (UHSEC.25/18-19)

REPORTED: (by the Director of Estates)

- (a) That an action plan was being worked through as part of the OHSAS 18001 external audit recommendations.

- (b) That a 'Flushing of Little Used Outlets' Technical Guide had been developed and communicated to departments and the Water Safety Group.
- (c) That the Water Hygiene Maintenance Contract was undergoing final review before going out to tender.
- (d) That the labelling of drinking water outlets had commenced starting with academic buildings.
- (e) That an audit by UUK looking at all accommodation buildings had just been completed.

37/18-19 Health and Safety Plan 2018-19

RECEIVED:

A paper outlining progress against the health and safety plan for 2018-19 (UHSEC.26/18-19)

REPORTED: (by the Director of Health and Safety)

- (a) That the first phase implementation of the SHE Assure software tool was anticipated to be finished by Easter 2019 as unfortunately a delay had been incurred during procurement.
- (b) That the SHE Assure software tool would enable easier reporting of incidents (via PC, phone, iPad or tablet), which could result in an increase in information being reported.
- (c) That the software tool should enable risk assessments to be uploaded and searched for, providing better transparency of information and the ability to easily review and develop further risk assessments from those already in the system.
- (d) That there had been a slippage in other areas of the action plan including: the introduction of a new global travel risk policy, the renewal of the University Drug Precursor Licence (application was currently with the Home Office) and fire stopping contract work (which was out to tender).
- (e) That the review of the Occupational Health contract had started but had been delayed due to the Senior Occupational Health Advisor retiring in March.

(By the Chair)

- (f) That there should be an update available regarding the Chemical Inventory Tool.

(by Head of School, Theatre Studies)

- (g) That a concern was raised as to the safety of female students on campus and should the committee discuss student welfare and campus safety.

RESOLVED:

- (a) That an update on the Chemical Inventory tool be provided at the next meeting, once the group had completed their scoring and decided on a single supplier.
- (b) That student safety be taken forward to the next UHSEC meeting to discuss an appropriate committee to discuss these types of issues.

38/18-19 Health and Safety Performance Report

RECEIVED:

A paper outlining performance for the period July to December (UHSEC.27/18-19)

REPORTED: (by the Senior Health and Safety Advisor)

- (a) That the overall number of incidents (including near misses) had increased by 17% during this period.
- (b) That the number of 'significant/serious' incidents had seen a substantial increase. This increase had been due to a new classifying criteria looking at the overall potential of an incident in anticipation of the new SHE Software.
- (c) That three of the 'significant/serious' incidents had been reported to the Health and Safety Executive (HSE), 1 involving Formalin having been microwaved, 1 involving a climbing wall incident (and two children becoming injured as a consequence) and 1 relating to a food allergen.
- (d) That the highest reported incident category was 'slip/trips/falls' but saw a decrease by approximately 2% for this period.
- (e) That an increase of incidents involving asbestos was reported, resulting in the removal of one contractor from the approved contractor list.
- (f) That the University had successfully revoked the Environment Agency Radiation Permit for Wellesbourne campus after it had provided sufficient evidence to demonstrate that the site was clear of all radiation sources and had been decontaminated across all areas (including drainage systems). No further radiation work can take place at Wellesbourne (including its storage).
- (g) That for the University, the total Health and Safety risk for this period was reported as 'Red' high risk, however it was raised that in the interim since the report had been produced, as the 'major' non-conformities raised by the BSi had been downgraded to 'minor', this had subsequently resulted in the overall risk moving to 'Amber' medium risk.

39/18-19 Report from Genetic Modification and Biosafety Committee*

RECEIVED:

A paper on the most recent meeting of the University Genetic Modification and Biosafety Committee (GMBC) (UHSEC.25/18-19*).

RESOLVED:

That no further comments be recorded by the members of the University Health and Safety Executive Committee.

40/18-19 Any other Business

REPORTED: (by the Chair)

That a Leadership in Health and Safety training session was to be attended by the whole University Executive Team.

41/18-19 Dates of Future Meetings

8 April 2019, at 12.45, in CMR1.0
20 May 2019, at 12.45, in CMR1.0
15 July 2019, at 12.45, in CMR1.0