Minutes of the Health & Safety Assurance Committee held on Wednesday 21st October 2015 at 9.30 am in the Principal’s Meeting Room.

Present: Ms Chris Shoukry (Chair), Mr Gurpreet Dehal, Mr Gerry O’Hagan

In attendance: Mr Simon Higman, Professor Paul Hogg, Professor Katie Normington, Professor Bob O’Keefe, Mr Matt Purcell, Mrs Sarah Tattam (item 4), Mr Mike Berry (item 6)

Apologies: Professor Paul Layzell, Mr Mark Newlands

Minutes: Pauline Martin

1. MINUTES
RECEIVED the minutes of the last meeting held on 18th June 2015 M15/43 -15/88. 15/91

NOTED additional actions from the last meeting:
• 15/64: Health & Safety Director to ask Finance for information about the outcome of personal injury claims and report to next meeting. 15/92
• 15/84 Consideration to be given to Heads of Departments receiving a briefing about their responsibilities for health and safety from a legal professional.

2. MEMBERSHIP & TERMS OF REFERENCE
NOTED that the terms of reference were approved by Council at the October meeting with the addition of the position of Vice Chair and an additional independent member. Gurpreet Dehal was appointed as Vice Chair and Gerry O’Hagan, independent member, was welcomed to the committee. 15/93

NOTED progress in finding an individual to join the committee with health and safety experience. It was expected that Mr Simon Whitehead, Procter & Gamble would join the next meeting. 15/94

3. MATTERS ARISING FROM THE MINUTES
3.1 NOTED that training for major incidents (M14/57) (M15/04) would be carried out in early November. 15/95

4. FIRE ALARM ACTIVATIONS IN STUDENT RESIDENCES
RECEIVED a verbal report from the Student Life & Support Manager on work done by the Student Life team to prevent unnecessary fire alarm activations. 15/96

NOTED that most fire alarms in the residences were caused by cooking (usually with the fire door propped open, with shower steam, smoking, aerosols also contributing to activations. Malicious fire alarms had become more prominent over the past couple of years, often linked to other adverse behaviours in the residence. In 2014/15 fire safety issues were the most common reasons leading to disciplinary action (covering smoke detectors, misusing extinguishers, burning candles and incense, and smoking). All false activations were followed up to emphasise the impact of the individual’s behaviour and fines imposed if appropriate. In 2014/15...
fines totalling £3,300 were imposed for fire safety related disciplinary incidents in halls of residence.

15/98

NOTED the role of the College Fire Safety Officer and that each Hall of Residence had Residential Support Assistants with a role that included welfare and education on fire safety. They would also provide support and advice to students during an evacuation in the event of a fire. The Fire Safety Working Group met regularly to discuss practical approaches to reducing the risk of fires and false activation of alarms and educating students in fire safety and evacuation.

15/99

NOTED the range of proactive educational approaches aimed at reducing fire alarms and the risk of fire in halls of residence. Evaluations were conducted to adapt and improve the communication of fire safety information and procedures in response to different issues and changing student behaviours.

15/100

NOTED the reactive approach to reducing false activation of alarms. Meetings were held with individual students responsible for activating fire alarms. Issues would be escalated depending on the severity of the situation, ultimately to the Serious Offences Panel. All Students disciplined completed an online fire safety module to demonstrate understanding of the importance of fire safety, and Fire Safety Officer would, if necessary, meet with the student/flat members and a member of Residential Support. Students who failed to leave, or were late evacuating, for fire drills or alarms faced disciplinary action and offenders rarely repeated the offence.

15/101

NOTED the annual review of procedures and lack of benchmarking data for fire alarm activations

15/102

5. REPORT FROM HEALTH & SAFETY DIRECTOR
RECEIVED the report from the Health & Safety Director (H&SAC/15/11) which provided accident statistics, a summary of fire safety information including fire alarm activations, confirmed fires, drills, progress with the fire risk assessment review schedule and a progress report with the health and safety and specialist external audit programmes.

15/103

5.1 ACCIDENTS: NOTED that the increase in accidents in the Geography Department to 7 in 2014/15 related, in 2 cases, to poor judgement of a guide on a field trip, otherwise there was no obvious trend in the pattern of accidents. The procedure for risk assessment and the escalation of issues with field centres was discussed.

15/104

DISCUSSED the summary of reportable accidents and the length of time taken to complete the review process and implement the actions to prevent re-occurrence.

15/105

NOTED the lack of comprehensive benchmarking information in the sector, since the move of this data to HESA. The processes implemented to ensure incidents did not re-occur required College level oversight to reduce the frequency of accidents. It was NOTED the two Compliance Monitors moved to the Health & Safety Office in March 2015 and it was planned that formal inspections of Campus would commence early in 2016.

15/106

ACTION to set meaningful targets to reduce the number of incidents and to consider how benchmarking data could be established. Report on the Compliance Monitors site inspections starting in early 2016 to be provided at the next meeting.

15/107
5.2 **FIRE:** NOTED that there were 235 fire alarm activations in 2014/15 (down from 244 in 2013/14) actions to educate and ensure compliance with fire safety regulations were reported under item 4.

NOTED that there were three confirmed fires attended by the fire service during 2014/15 and previously reported to the Committee. Two fires in Halls resulted in minor damage and were dealt with according to the normal interview and disciplinary procedures, the third was in the Bourne Building and reported at the last meeting.

NOTED that, since the start of the 2015/16 academic year, fire alarm activations were higher compared to the same time last year (49 compared to 37) and this was directly related to contractors work. Annual fire drills for the student halls of residence were completed satisfactorily. There had been two minor fire incidents related to students both were interviewed by the Campus support team. A more complete report of activations for the 2015/16 year would be provided at the next meeting.

NOTED that the Fire Risk Assessment Review Schedule for 2015/17 had been established and reviews started in August 2015. The schedule included a formal review of progress with implementing the findings and the first report would be provided at the next meeting.

**ACTION** report of the progress with the implementation of the Fire Risk Assessment Review Schedule to be provided at the next meeting.

5.3 **HEALTH AND SAFETY AUDITING:** NOTED that the audit process was a learning curve for Departments and reviews with Department Heads supported this. Training about the importance of health and safety and implementing action from audit reports plans promptly was required to establish the right culture as small actions not completed could still have major consequences.

**ACTION** that the report should identify the areas where extensions were requested due to a need for investment. There was a need to use of Heads of Department meetings to provide information and find out what additional support was required.

**ACTION** training required to ensure all Department Heads are aware of the extent of their responsibilities for health and safety. Dates to be provided.

5.4 **SPECIALIST AUDITS:** NOTED the specialist audits conducted in 2014 where actions remained outstanding (11 of 22)

NOTED that the outstanding actions (7) on the noise and vibration assessment related to the implementation of a planned work equipment maintenance schedule and an equipment purchasing policy. Guidance and draft sample documents have been provided to relevant Departments.

NOTED that the outstanding actions with regard to the dangerous substances audits (DSEAR) were mainly due to budgetary issues, which would need to be picked up within the next planning round.

NOTED the Committees concern regarding the time lapse in progressing the outstanding actions of the DSEAR assessment of the Physics Department that was conducted in July 2014. The particular difficulties were due to the compounding effect of the need to address pressure systems and lifting equipment, which had affected progress.
NOTED the overdue action on the Earth Science Annual Radiation audit which was assessed as a low priority issue (when compared with other required actions) would now REQUIRED completion.

NOTED non-compliance with regard to explosive atmospheres which related to one experiment that was stopped and has not restarted leading to the evaluation that there was no imminent risk.

ACTION to consider how risk should be notified to the committee in terms of an absolute risk or a magnified risk due to being outside the timescale with an assessment of any consequential, compounding impact should an incident occur.

6. **UPDATE ON MANAGEMENT OF CONTRACTORS**

RECEIVED an oral report on the management of contractors with particular regard to ensuring the consistent reporting of incidents and the role of Estates Department.

NOTED that there were three clear points where management of contractors, health and safety issues and reporting were particularly relevant:

- Major projects – Library and Student Services Building, the Student Residences NA30, the Science Centre and the major infrastructure upgrade projects
- Recurrent cyclical maintenance work
- The College maintenance staff

NOTED that the long lead time of the major construction projects allowed for, and required, detailed consideration of how the construction process would be safely managed as part of the process. The statutory processes to obtain planning permission included a construction management plan which addressed all the health and safety issues within the Campus boundary and the plan required a hard perimeter for the major construction projects.

NOTED that the Estates Project Delivery Group had oversight of all operational activities with the Project Boards represented. Contractors on site and internal Project Managers had hands on responsibility for health and safety, flexing the ways of working, and making adjustments with an understanding of the risk and how to mitigate it.

NOTED that there was a clear understanding at a corporate level of health and safety and the main contractor carried out their responsibility to ensure that sure all sub-contractors understood and complied with the main contractor’s instructions and College processes.

ACTION to detail the interface and ownership regarding escalation of health and safety issues.

NOTED that there were approximately 40 recurrent cyclical maintenance projects undertaken on the Campus each year. All contractors received an induction from Project Managers which included the College policies and procedures and the importance of working in compliance with the risk assessment. Contractors or sub-contractors who failed to meet the College standards would not be allowed to continue working.

NOTED that with regard to the College employed maintenance staff there was no excuse for not knowing the culture or understanding the policies. A process of quality
controlling the work of new staff ensured greater adherence to policies that were firmly enforced for all maintenance staff and this had resulted in a 75% reduction in sickness.

7. **LIFTING EQUIPMENT AND PRESSURE SYSTEMS.**
   (Taken as item 6)
   RECEIVED an oral update on the review of the lifting equipment and pressure systems.

   NOTED that the original action plan was to be completed by 31 July and the remaining in-service pressure systems would be inspected this week. Following an inspection, where serious defects are identified, a formal report is issued to the College. Lifting equipment is taken immediately out of use and clearly marked, while pressure systems would be depressurised/disconnected.

   NOTED that with regard to ensuring the correct procedures were in place the College Compliance Manager had responsibility for this area, work would now commence on action plans to establish work still required to ensure an effective management system for future inspections.

   NOTED that training records were maintained in Academic Departments and that a process needed to be in place to ensure that training was undertaken in a timely manner.

   ACTION KN/SH to ensure an update on training requirements was sent to the person responsible for co-ordinating training.

8. **ANNUAL REPORT FROM THE HEALTH & SAFETY CONSULTATIVE COMMITTEE**

   NOTED the annual report from the Health & Safety Consultative Committee (H&SAC/15/12) and the role of the Project and Resources Committee in addressing the progress of audit reports.

9. **ANNUAL REPORT FROM THE HEALTH CENTRE**

   RECEIVED the Health Centre Annual Report (H&SAC/15/13) and NOTED the increase in consultations compared to the previous year.

10. **ANY OTHER BUSINESS**

    None

11. **DATE OF NEXT MEETING**

    22nd February 2016 at 10.00 am in the PMR