

UNIVERSITY OF WARWICK
UNIVERSITY HEALTH AND SAFETY EXECUTIVE COMMITTEE
OPEN MINUTES OF THE MEETING HELD Wednesday 3 June 2020

Present	Rachel Sandby-Thomas	RS-T	Registrar (Chair)
	James Breckon	JB	Director of Estates
	Prof. Mike Ward	MW	Head of Department (Chemistry) and UHSC Chair
	Rupert Lawrie	RL	Commercial Director
	Dr. John Ferrie	JF	Lay Member of the Council
	Dr. Ian Hancox	IH	Research Technology Engagement Manager
	John Phillips	JP	Director of Health and Safety
	Andrew Smith	AS	Finance Director
	Charlotte Lloyd	CL	Student Sabbatical Officer
	Prof. David Leadley	DL	Head of Department within the Faculty of Science
In attendance	Graham Hakes	GH	Senior Health and Safety Advisor (Commercial, Estates, Professional Services)
	Mayur Patel	MP	Assistance Secretary to the UHSEC

Ref	Item
049	<p>Apologies for absence</p> <p>Apologies were received from Emma Brown, Caroline Farren, Geraldine Mills, Emma Smith.</p>
050	<p>Declarations of Interest</p> <p>No new declarations were made.</p>
051	<p>Minutes of last meeting on 6 February 2020</p> <p>The minutes of the meeting held on 6 February 2020 were received and approved.</p>
052	<p>Matters arising from last meeting on 6 February 2020</p> <p>The matters arising were as follows:</p> <p style="padding-left: 40px;">(a) International Travel (minute 040-UHSEC060220)</p> <p>The Director of Health and Safety Services, informed the committee that a paper had been submitted to the University Executive Board (UEB) at its last meeting in March 2020. The approval of the paper would be confirmed at the next meeting.</p> <p style="padding-left: 40px;">(b) Health and Safety Risk Register (minute 046-UHSEC060220)</p> <p>The Chair, informed the committee that the review of the Health and Safety Risk Register had been postponed until the July UHSEC meeting at which an update would be provided.</p> <p style="padding-left: 40px;">(c) Menopause Policy (minute 029-UHSEC140119)</p> <p>The Director of Health and Safety Services, informed the committee that the menopause policy was to be considered at a future meeting of the Joint Consultative Committee (JCC) and there was no further update at the time of the meeting.</p> <p>The Chair reported that four new health and safety policies considered at this committee (Biological Safety, Laser Safety, Explosives and Stress Management) had been approved by the University Executive Board at the 4 May 2020 meeting; that a Policy for the use of Drones across university campuses was under development; a response was made to the Health and Safety Executive (HSE) Notification of Contravention letter in relation to ionising and non-ionising radiation which included an action plan that departments were working through, and the</p>

	formulation of a committee was being prepared for the start of the new academic year; and the UHSEC Terms of Reference had been updated to incorporate the reporting path for Wellbeing and Safeguarding.
Chair's Update	
053	<p>Chair's Business and Actions</p> <p>The Committee received no updates from the Chair.</p>
Executive Update	
054	<p>Covid-19 Secure and Returning to Campus</p> <p>The Director of Health and Safety, presented the report (054-UHSEC030620) which contained information regarding Covid-19 Secure and Retuning to Campus. The committee received and noted the content of the paper.</p> <p>The Director of Health and Safety Services reported that prior to 'lockdown', the Major Incident process was initiated with regular Major Incident Team (MIT) Silver meeting being held. With lockdown easing the Silver MIT group had been replaced by the Campus Re-opening Working Group (CRWG). The group considered two complementary strand of work: Covid-19 secure Risk Assessment/SOP (054a-UHSEC030620) for space and activity, and a building level risk assessment covering statutory compliance. The Covid-19 Secure Risk assessment/SOP for space and activity had been developed by key stakeholders including the Science, Engineering and Medicine departments and the Trades' Unions; and piloted by the Research Technology Platform (RTP). Work was also being carried out in other areas where re-opening would have an impact, these related to additional cleaning within buildings and working environment to meet the government recommendations. A short audio-visual presentation was being developed to be screened around university campuses via existing screens to promote the importance of good hygiene practise; as well as the development of a Moodle training package to be rolled out shortly.</p> <p>The committee was keen to understand what activities around campus would be re-opening first and if a time scale was available for departmental return.</p> <p>The Chair informed the committee that the University Executive Board (UEB) were not aware at this stage, as decisions were made at the MIT Silver Meetings, but it was envisaged that research laboratories would be first, and the last would be administrative staff retuning through a staged return.</p>
055	<p>Health and Safety Annual Report</p> <p>The Director of Health and Safety Services, presented the report (055-UHSEC030620) on the Health and Safety Annual Report – Management Review ISO45001. The Committee received and approved the content of the report.</p> <p>The Director of Health and Safety Services informed the committee, that prior to the Annual Report being presented at the Audit and Risk Committee, approval was required from both the University Health and Safety Executive Committee (UHSEC) and the University Executive Board (UEB), and highlighted the main areas of the report as follows.</p> <ul style="list-style-type: none"> • That ISO45001 standard required 'top management' involvement with reviewing health and safety management system on a regular basis. • That in 2021 the OHSAS18001 was to be replaced by the new International Standard ISO45001, with the main differences included: higher level of management involvement; improved engagement with staff and stakeholders; an improved focus on Risk Assessment and Risk Management; increased focus relating to health and mental health issues; Health and Safety planning as part of the management system; and improved ability to integrate management systems such as ISO9001 (Quality), ISO14001 (Environment) and ISO27001 (Information Security). • That ISO45001 also required continual improvement for close out of actions; Statutory and Compliance records; regular review of activities related risk assessments; Risk Assessment and Risk Control Measures as required under the Control of Substances Hazard to Health Regulation and the Provision and Use of

	<p>Work Equipment Regulations; Introduction of a Learning Management System (LMS) to aid reporting on completed essential and mandatory H&S training; and Mental Health Awareness training for managers.</p> <p>Committee members were encouraged to forward any comments relating to the paper to the Director of health and Safety Services.</p> <p>DECISION: The Committee considered and approved the paper, providing there were no further comments, to enable it to be submitted to the Audit and Risk Committee.</p> <p>ACTION: Paper to be submitted to the Audit and Risk Committee at its next meetings.</p>
056	<p>OHSAS 18001 Audit Update</p> <p>The Director of Health and Safety Services, presented the report (056-UHSEC030620) on the six monthly surveillance visit carried out by the British Standards Institution (BSi) in March 2020. The Committee received and noted the content of the paper.</p> <p>The Director of Health and Safety Services informed the Committee that the visit by BSi involved 1-day reviewing the Central Health and Safety Management System, 1-day at Estates Operations and 1-day at Estates Compliance.</p> <p>From a previous audit visit, 1 minor non-conformity had been escalated to a major, and was to be reviewed virtually on 12 June 2020. Unfortunately, due to Covid-19, it was unlikely that the non-conformity would be closed, it was envisaged that the non-conformity would be carried forward to the next review to take place in September 2020 at which focus would be on the School of Life Sciences and Medical School. A date for the initial audit of the Commercial Group to ISO45001 was yet to be set.</p>
057	<p>Statutory Inspection & Compliance Programme Board</p> <p>The Director of Health and Safety Services provided a verbal update on the Statutory Inspection and Compliance Board. The committee was informed that there had been good progress in the completion of Standard Operating Procedures and RACI, but further work was required. The next Statutory Inspection and Compliance Programme Board meeting was scheduled later in June 2020, post of the UHSEC and so an update would be provided at the next UHSEC meeting.</p> <p>DECISION: The agenda item be carried forward to the next meeting of the UHSEC.</p> <p>ACTION: Item to be included on the agenda of the UHSEC July 2020 meeting.</p>
058	<p>Estates Covid-19 Report</p> <p>The Director of Estates, presented the report (058-UHSEC030620) on Estates Covid-19 Report. The Committee received and noted the content of the paper. The committee was informed that a meeting for Heads of Departments, led by Chris Twine was to take place on 8th June 2020 to provide them with an update of progress made by the Estates department moving toward re-opening of building and the Estates Covid-19 webpages were to be updated to provide up to date information shortly. Initial Building Risk Assessments had been completed as part of the re-opening process, but they needed to be reviewed to ensure that the recommendations could be facilitated before approved. In the coming months of June, July, August onwards, it was anticipated that further building would re-opened with stage return of staff in line with government social distancing guidelines.</p> <p>The Committee required clarity regarding the timeline of buildings re-opening and if Estates were on target for departments to return.</p> <p>The Director of Estates informed the Committee that, currently it was too early to establish any delays and there were no indications that there would be any slippage, building were anticipated to re-open on schedule with a buffer time of 1 week. Pilot areas had been assessed at Warwick Medical School to highlight what measures would need to be implemented, but these would still rely on a degrees of individual using their common sense. The University's Clinical Trials Unit had re-opened earlier in the week.</p> <p>The Chair was keen to understand if there had been any lessons learnt relating to health and safety when the university was closed.</p>

	<p>The Estates Director highlighted that building which had been closed, and in some cases, shut for as long as 10 weeks with the warm weather there was an increased risk of Legionella. Buildings which had continued flushing of outlets during the period, records would be reviewed. Otherwise a flushing programme would be introduced followed by chlorination. Each building would have its own individual risk profile as older building would have more dead-ends. There had also been lesson learnt from information provided by various working groups, such the Campus Re-opening Working Group and the Social Distancing Working Group.</p>
Governance	
Subsidiary and Sub-Committee Reports	
059	<p>Report from Genetic Modification and Biosafety Committee</p> <p>The Director of Health and Safety Services outlined the key points from paper (059-UHSEC030620) of the Genetic Modification and biosafety Committee. The Committee received and noted the content of the paper.</p> <p>CL3 lab A108 - remains closed and no PPM had been carried out, a contractor has been appointed to carry out remedial works, but had been halted due to the Covid-19 situation. BMRI CL3 labs – PPM carried out in February identified several issues involving leakage which did not permit fumigation to take place and so it was not possible to demonstrate that the laboratories are sealable and will not issue toxic fumigant into adjacent areas. This leaves the Schools with no operational CL3 facilities. If laboratories were CL3 approved these could have been made available to the National Health Service (NHS) to help with work on Covid-19. Antibody testing however was being carried out at Gibbet Hill which did not require CL3 status.</p>
Items below this line are for receipt and/or approval, without discussion	
Other	
060	<p>Any other business</p> <p>The Lay Member of Council raised a concern relating to the acquisition of the new Chemical Inventory Tool and what progress had been made.</p> <p>The Director of Health and Safety Services informed the Committee that the identified supplier was not forthcoming with a contract pre-Covid-19, but since the lockdown, had contacted the University for a decision. The University was not currently at a position to sign a contract due to the lockdown and further discussion was required on how to proceed. No response had been sent back to the supplier at the time of this meeting.</p> <p>The Chair encouraged that if a contract was to be signed that it was reviewed with urgency to reduce any further delays.</p> <p>The Senior Health and Safety Advisor reported that as a result of the Estates external audit against BSi OHSAS 18001 audit carried out on 12/ 13 March 2020. There was an action to update the University Health Safety Executive Committee on the Legionella Risk Assessment Action Plan for 2020.</p> <p>The impact of the Covid-19 lockdown had effected the Legionella Risk Assessment being progressed for 2020 as per the plan. All existing risk assessments had been reviewed to reflect the significant change imposed by the Covid-19 lockdown which is informing what is required for the mobilisation programme. Any risk assessment conducted now would not give a true reflection of the risk during business as usual activities.</p> <p>Action Plan and time frame</p> <ul style="list-style-type: none"> • We reported at the meeting on 6 February that 36 outstanding Legionella Risk Assessments were received by end of December 2019 and were being uploaded on to SharePoint for access by Departments, Water Safety Management Group and Estates designated staff. • 122 legionella risk assessments were identified for 2020 in accordance with the priority risk rating scoring matrix within the Water Safety Plan. There was a risk that the risk assessments would not be all reviewed within the 2020 timeframe and would go into 2021.

Estates would prioritise the risk assessments based on previous risk assessment findings and would be carried by our in house Water Hygiene Manager and Consultants.

Next meeting: 12.30, Monday 13 July 2020, Microsoft Teams

DECISIONS AND ACTIONS			
ITEM	DECISION/ACTION	LEAD AND DUE DATE	STATUS
022- New Policies	DECISION: The Committee approved all four policies. ACTION: Policies to be endorsed at University Executive Board.	John Phillips	Completed
025 – Drone policy – PTW report	DECISION: To identify whether there are any governance arrangements relating to drone use on campus. ACTION: Health and Safety Services to check the University Governance webpages and report back to the Director of Estates.	John Phillips	Drone Policy/arrangements to be developed.
037 – Menopause Policy	ACTION: Geraldine Mills to prepare a policy, or amend existing policies accordingly, and to progress through meetings of the Joint Consultative Committee.	Geraldine Mills	October
038 – HSE Notification of Contravention (NIR & IR)	DECISION: Risk Assessments need to be reviewed and signed off and departments need to be communicated with to identify what was expected of them. ACTION: That an action plan was required to move forward on the above.	Caroline Farren	Formal response submitted to the HSE.
040 – International Travel	DECISION: The committee was asked to consider and approve the paper, providing any further comments to the Director of Health and Safety Services and so it may be submitted to the UEB. ACTION: Paper to be submitted to the UEB at its March 2020 meetings.	John Phillips	Completed
041 – Wellbeing and Safeguarding Strategy	ACTION: Update the UHSEC ToR to include the reporting path for Wellbeing and Safeguarding in readiness for start of academic year.	John Phillips	October
055 – Health and Safety Annual Report	DECISION: The Committee considered and approved the paper, providing there were no further comments, to enable it to be submitted to the Audit and Risk Committee. ACTION: Paper to be submitted to the Audit and Risk Committee at its next meetings.	John Phillips	Completed
057 - Statutory Inspection & Compliance Programme Board	DECISION: The agenda item be carried forward to the next meeting of the UHSEC. ACTION: Item to be included on the agenda of the UHSEC July 2020 meeting.	John Phillips	July