

UNIVERSITY OF WARWICK

Minutes of the meeting of the University Health and Safety Executive Committee
held on 3 July 2017

Present: Ms R Sandby-Thomas, (Registrar, Chair), Mr K Edwards, (Chief Finance Officer, Estates vice 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), Mrs G McGrattan Director of Human Resources), Professor J Millar (The Head of Department within the Faculty of Medicine), Dr A Phillips (The Head of Department within the Faculty of Arts), Mr J Phillips (Director of Health and Safety), Mr M Roberts (Director of Campus Services and IT), Mr A Smith (Finance Director)

Apologies: Mr J Breckon (Director of Estates), Mrs K Ireland (The Head of Department within the Faculty of Social Sciences), Professor D Leadley (Head of Department within the Faculty of Science), Ms C Wynne (Student representative nominated by the Students' Union)

In Attendance: Mr 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.*

67/16-17 Apologies and Conflicts of Interest

REPORTED: (by the Chair)

- (a) That apologies were received from Mrs K Ireland (The Head of Department within the Faculty of Social Sciences), Professor D Leadley (Head of Department within the Faculty of Science), and Ms C Wynne (Student representative nominated by the Students' Union).
- (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.

68/16-17 Minutes

REPORTED:

That the minutes for the May meeting be approved.

69/16-17

Fire Safety Update

REPORTED: (by the Chief Finance Officer, Estates)

- (a) That both the Health and Safety and Estates Departments had been closely monitoring the information flow following the Grenfell Tower fire disaster in London.
- (b) That a review of all University residential, administrative and educational buildings, whether owned or leased, had been initiated, and none were considered to present a high risk.
- (c) That the review involved identifying cladding types, as well as other fire safety requirements, across all buildings.
- (d) That the HEFCE (response required by 5th July 2017) and other interested parties (such as the Health Centre) had requested information on the University's approach to fire safety, particularly on buildings over 18m high and having Aluminium Composite Materials (ACM).
- (e) That to date there were no buildings over 18m high, but the Estates Department remained active in reviewing all buildings with any form of cladding.
- (f) That advice had been requested from the Building Research Establishment (BRE) who agreed to confirm technical compliance to the relevant fire heat specification.
- (g) That cladding panels would be tested if necessary, but to date there had not been any identified which required testing.
- (h) That Estates and Accommodation representatives had visited Study Inn and Liberty Living on Friday 16th June 2017 and had received direct communications with Downing (currently under construction).
- (i) That Liberty House was part brickwork and had cladding on its external façade. Technical details had been requested of the use of aluminium containing material (ACM) and fire resilience.
- (j) That letters had been sent to all Off Campus Landlords on 29th June 2017, to seek reassurance that fire safety equipment was being serviced and tested to the minimum statutory testing requirements.

RESOLVED:

- (a) That the details of all buildings with full or part cladding be retained, following the review already carried out, and that any necessary checks be carried out on cladding.
- (b) That further checks be carried out as necessary on any accommodation buildings available to the University under nomination agreements.

70/16-17 Wellbeing Charter

REPORTED: (by the Director of Human Resources)

- (a) That the Wellbeing Charter was awarded to the University by Coventry City Council.
- (b) That the report referenced high quality risk assessments by the Estates Department.
- (c) That 'Healthy Eating' had not achieved a positive mark and an action plan was being worked on to address this.
- (d) That policies for Smoking/Tobacco were not considered to be published wide enough.

71/16-17 Chemical Safety Task and Finishing Group (minutes 55/16-17)

REPORTED: (by the Director of Campus Services and IT)

- (a) That a workshop had been arranged for vendors to attend and a number of issues were raised at this time.
- (b) That vendors did not satisfy all criteria, but four were selected.
- (c) That selected vendors were to be invited to deliver a presentation to key stakeholders.
- (d) That Procurement would like to see a larger list of vendors to be shortlisted.
- (e) That a larger shortlist would result in more time being required.

(by the Director of Health and Safety)

- (f) That significant vendor assessment had already been carried out to produce the current shortlist.
- (g) That if opened to more companies, the University could be faced with new vendors asking questions that have already been addressed and that this would delay matters unnecessarily, without adding much value.

- (h) That it should be possible for the University of Warwick to look at the inventory systems used by other Universities as a means to assess whether would meet our criteria.

RESOLVED:

That the Director of Campus Services and IT contact the Procurement Manager (Pauline Mealing) to discuss how to move forward, and all were urged to progress with this project as quickly as is possible.

72/16-17 Chemical Storage Westwood Campus (minutes 56/16-17)

REPORTED: (by the Director of Health and Safety)

- (a) That the teaching facility at Westwood was looked at by Robert Jenkins, the Health and Safety Officer from the Chemistry Department.
- (b) That 700 chemicals were identified at Westwood, but that after disposal of unrequired chemicals, 200 chemicals remained.
- (c) That all remaining chemicals are currently stored in secondary containment.
- (d) That chemical storage cabinets are currently being looked at and should be sourced by mid July 2017.
- (e) That there are currently a small number of gas cylinders which are no longer required, and means of disposal are currently being explored.
- (f) That ventilation at the Westwood Chemical Store are being assessed and improvements will be recommended if required.

RESOLVED:

That chemical storage cabinets are purchased and installed as a matter of urgency and all remaining chemicals placed in appropriately segregated storage as soon as possible thereafter.

73/16-17 University Risk Profile

CONSIDERED:

A presentation on the structure and content of the University's Health and Safety Risk Profiling Tool, as developed in line with OHSAS 18001 requirements.

REPORTED: (by the Director of Health and Safety)

- (a) That scores were awarded by personal judgement from the Health and Safety team advisors.
- (b) That criteria was classified as high, medium and low.
- (c) That impact weighting related to risk/frequency.

- (d) That each department were scored in the following risk areas: physical, biological and chemical.
- (e) That departments were also scored on organisational and assurance, relating to controls implemented and how risks were managed.
- (f) That the summary score indicates department risk level.

(by the Chair)

- (g) That the Clinical Science Research Laboratory should be included on the Health and Safety Profiling Tool spreadsheet.

RESOLVED:

- (a) That the University's Health and Safety Risk Profiling spreadsheet be provided to Head of Departments in October 2017.
- (b) That departments with a risk classification of red/amber (high/medium risk) be considered first to try and improve their profile.

74/16-17 Building Managers

CONSIDERED:

A report on the deployment options for Building Managers in buildings/areas not currently serviced by such a role, following a review of existing arrangements by a Facilities Management specialist (UHSEC.32/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That a project had taken been carried out with support from a Facilities Management (FM) specialist to identify how many people should be deployed and where.
- (b) That the project outputs included a recommendation that Building Managers should be appointed on a zonal basis, looking after a number of buildings in a geographical area or zone, and that they should report into the Customer Services area within Estates.
- (c) That the number of required Building/Zone Managers was decided relating to floor space, complexity of buildings and how they would manage areas and was not driven by cost.

(by K Edwards)

- (d) That Mr James Breckon, Director of Estates, considered the Building Managers' proposed reporting line to be potentially problematic and that it was in need of further consideration before it could be implemented.
- (e) That James Breckon considered campus accommodation should have been classed at a risk level of amber, and that consideration should be

given to provision of Building Managers to cover on-campus accommodation buildings.

- (f) That the QuEMIS (Quantarc Estates Management Information System) draft report would be out soon; this had been initiated to review the Estates IT systems and how they do or could talk together. The project was very complex and could take over a year to complete.

RESOLVED:

- (a) That initially three Building/Zone Managers would be recruited at a level of FA6 (subject to job evaluation).
- (b) That further consideration be given to Building Manager provision relating to on-campus accommodation.
- (c) That the next stage of the project should consider other areas not covered above and should review existing building management provision before generating a future plan.
- (d) That the Building/Zone Manager positions required approval by the APSG and funds needed to be confirmed.

75/16-17 Local Exhaust Ventilation (LEV) System Maintenance

RECEIVED:

An update on progress made with maintenance arrangements for Local Exhaust Ventilation Systems across the University as reported to the June meeting of the Estates Strategic Health and Safety Committee (UHSEC.34/16-17).

REPORTED: (by the Head of Maintenance, Estates)

- (a) That fume cupboards were designed to work at a certain extraction rate.
- (b) That when fume cupboard sash windows are lowered, the extraction rate decreases but still maintains a low flow.
- (c) That the investigation relating to the LEV August 2015 incident showed that the chemical storage compartment under the fume hood was linked to the fume cupboard LEV, but when the fume cupboards LEV was operating at low flow this was not at a sufficient level to extract fumes.
- (d) That low flow cabinet operation has the benefit on saving energy, but was insufficient in certain cases to deal with fumes.
- (e) That centrally controlled fume cabinet, flow rates were reduced to low flow during the hours of 10pm – 7am.
- (f) That override switches were available on cabinets to keep the flow rate at a higher level.
- (g) That cabinets which get manually set to high flow rate would continue to operate at this level even upon a fire activation.

RESOLVED:

- (a) That an updated collated LEV asset list would be circulated to all relevant departments.
- (b) That all fume cupboard flow rates would be tested over the summer.
- (c) That cabinets with storage compartments linked to the LEV should be manually switched to high flow rate and not set at automatic.

76/16-17 Health and Safety Policies

CONSIDERED:

A review of the progress with the development of topic specific policy document (UHSEC.34/16-17).

REPORTED: (by the Director of Health and Safety)

- (a) That 21 topic specific policies had been identified.
- (b) That there had been a delay with the development of the identified policies and more time was required to complete and issue them.
- (c) That policies needed to be re-prioritised relating to risk level; the fire policy was to be given higher priority compared to manual handling, for instance.
- (d) That David Leadley, (Head of Department within the Faculty of Science), suggested a shorter period to be set for feedback and approval to be returned via email correspondence from members of both the University Health and Safety and University Health and Safety Executive Committees.

RESOLVED

That policies be consulted in correspondence if necessary in order to speed up completion.

77/16-17 Any Other Business

Report to the UHSEC for the Academic Year 2017-18.

REPORTED: (by the Director of Health and Safety)

- (a) That reports were made available from both the University Health and Safety and the Genetic Modification and Biosafety Committees (noting that some papers contain restricted content).
- (b) That issues should be brought to the UHSEC attention from a number of sub-groups including the Permit to Work group, Water Safety group, Asbestos group, Statutory Inspection group and Fire Safety group (a group with is in process of being established) through the University Health and Safety Committee, where necessary.

(by the Chief Finance Officer, Estates vice Director of Estates))

(c) That a lead from each group be identified, to report up to the committee.

RESOLVED

That arrangements be made for the above groups to provide reports to the Committee at suitable points throughout the 2017-18 academic year.

78/16-17 Date of Future Meetings

REPORTED:

That meeting dates of the UHSEC for academic year 2017-18 would be circulated as soon as they were published.