

UNIVERSITY OF WARWICK
UNIVERSITY HEALTH AND SAFETY EXECUTIVE COMMITTEE
OPEN MINUTES OF THE MEETING HELD Thursday 6 February 2020

Present	Rachel Sandby-Thomas	RS-T	Registrar (Chair)
	Steve Twynholm	ST	Operations Director of Estates
	Prof. Mike Ward	MW	Head of Department (Chemistry) and UHSC Chair
	Rupert Lawrie	RL	Commercial Director
	Caroline Farren	CF	Senior Health and Safety Advisor (Secretary to the UHSEC)
	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
	Geraldine Mills	GM	Director of Human Resources
In attendance	Duncan Stiles	DS	Head of Compliance and Assurance
	Graham Hakes	GH	Senior Health and Safety Advisor (Commercial, Estates, Professional Services)
	Hannah Friend	HF	Director of Wellbeing and Safeguarding
	Mayur Patel	MP	Assistance Secretary to the UHSEC

Ref	Item
034	<p>Apologies for absence</p> <p>Apologies were received from Prof. Andrew Lavender.</p>
035	<p>Declarations of Interest</p> <p>No declarations were made.</p>
036	<p>Minutes of last meeting on 4 November 2019</p> <p>The minutes of the meeting held on 14 January 2020 were received and approved.</p>
037	<p>Matters arising from last meeting on 14 January 2020</p> <p>The matters arising were as follows:</p> <p style="padding-left: 40px;">(a) Chemical Inventory Tool (minute 091-UHSEC140119)</p> <p>The Director of Health and Safety Services informed the committee that a letter of intention had been sent to the preferred service provider, (Labcup) and a contract was ready to be signed. Currently however, Labcup was not in a position to provide a timeline as to when the Chemical Inventory Tool could be started here at Warwick University. Discussions with Mike Roberts (Director of Campus Services and IT) had been had, which highlighted that a project for the implementation of the tool was required, involving an appointment of a systems administrator, but currently there was no funding available for this appointment.</p> <p>It was confirmed that the Chemical Inventory tool by Labcup was being utilised by other Universities and that they could be contacted for feedback if the committee required.</p> <p>The Committee raised concerns, that a contract should not be signed if a timeline could not be provided, and the contract should include a timeline for supply and details of penalties if this was not met. There was also concerns relating to the level of system support Labcup would be able to provide once the Chemical Inventory Tool had been supplied and implemented across the University.</p>

	<p align="center">(b) Menopause Policy (minute 029-UHSEC140119)</p> <p>The Director of Health and Safety Services informed the Committee that the menopause policy was not considered to be a health and safety matter and suggested it be taken to the Joint Consultative Committee (JCC) for discussion. The policy would be considered as a new standalone policy or to be incorporated within existing Human Resources policies.</p> <p>DECISION: The Menopause Policy was not considered relevant to this Committee, but instead, it be taken to the Joint Consultative Committee (JCC).</p> <p>ACTION: John Phillips to work with Geraldine Mills to prepare the policy for a future JCC meeting.</p>
Chair's Update	
038	<p>Chair's Business and Actions</p> <p>The Chair reported that the Health and Safety Executive (HSE) visit on 29 January 2020 had resulted in a letter of Notification of Contravention (NoC) and that the University would be required to pay for the visit under the HSE's Fee for Intervention.</p> <p>The Director of Health and Safety Services reported that Risk Assessments required further attention, in particular relating to emergency response procedures and that as an observation, there was a lack of engagement of Principle Investigators during the visit which was noticeably different to other universities that the inspector had visited.</p> <p>The Senior Health and Safety Advisor reported that during the HSE visit there was a laboratory door interlock which had been disconnected and therefore was not in use, but for the same or similar application (same hazard and risk), elsewhere in the department, a door interlock was fitted and being used. This lack of consistency across the department was therefore difficult to explain. In this instance, had the student working in the area been unable to articulate how they mitigated the risks, then in all likelihood an Improvement Notice would have been issued. The Director of Health and Safety Services reported that if an Improvement Notice had been served, that this would have gone down on the public register.</p> <p>The Chair also reported that the fatality at the University of Birmingham (UoB), where both the contractor (Balfour Beatty) and the client (UoB) were supporting the ongoing investigations of the matter had now been escalated to a Corporate Manslaughter charge. The Director of Health and Safety Services reported that the scenario, whereby a contractor and the university's own staff (or University contractors) were actively working in the same location was something that could foreseeably happen here and that any lessons learnt as a result of the investigation would be taken into consideration in connection with our own management arrangements.</p> <p>DECISION: The Committee agreed that once the HSE's Notification of Contravention had been received that the requirements be communicated out to departments, explaining what was expected of them.</p> <p>ACTION: That an action plan be generated as required by the NoC to move forward on the above.</p>
039	<p>Statutory Inspection and Compliance Programme Board</p> <p>The Director of Health and Safety, presented the report (039-UHSEC060220) which contained the minutes of the meeting held by the Statutory Inspection and Compliance Programme Board on Tuesday 17 December. The Committee received and noted the content of the paper.</p> <p>The Director of Health and Safety Services reported that a further meeting of the Statutory Inspection and Compliance Programme Board had taken place on Thursday 30 January 2020, but the minutes were unavailable for circulation for this meeting. The key points from the meeting were:</p> <p>(a) Water Hygiene – That there were circa 780 'Low Usage Outlets' (LUOs) and departments were responsible for raising dockets to have as many of these removed as possible. Departments were responsible for flushing LUOs in labs/workshops and Estates would flush the remainder. Further clarification was required to detail who would be carrying out the flushing and keeping records.</p>

	<p>(b) Local Exhaust Ventilation (LEV) Remedials – It was felt that the management of LEV had improved, and whilst there was still further remedial work to be completed, there was clarity as to the status of the work required.</p> <p>(c) Liquid Nitrogen Bulk Storage Remedials – There were 5 bulk storage tanks which had been identified as a priority to be replaced. All will need to overcome some challenges relating to the pipework. Financial decisions need to be made, for the work to be carried out.</p> <p>(d) Regulatory Remedials - Further work was required but there was clarity as to the status of the work required.</p> <p>The Chair required clarity as to a timescale for the replacement of the tanks and how long was it anticipated for a decision to be made.</p> <p>The Estates Operations Director informed the Committee that a decision was expected in the next 6-8 weeks, with replacement of all priority tanks within 18 months. The Statutory Inspection and Compliance Programme Board would need to note that a further letter from BOC had been received stating that they would no longer be delivering nitrogen to a further tank on the list after 3 months.</p> <p>The Director of Health and Safety Services informed the Committee that the Statutory Inspection and Compliance Programme Board noted that there had been good work, particularly on clarity of data and the LEV remedial work and testing. Thanks and acknowledged was expressed to the Director of Operations (Estates) and others in Estates who had been involved in addressing some of these legacy issues.</p>
040	<p>International Travel</p> <p>The Director of Health and Safety Services presented the report (040-UHSEC060220) on International Travel Risk. It was reported that the paper would thereafter be taken to the University Executive Board (UEB). A number of departments had been engaged to draw up the contents of the paper. As members may already be aware, the University had been using the University’s Travel Management Company, Key Travel. The paper’s key change was to make mandatory the use of the Travel Management Company, removing the £500 limit for online bookings to be made elsewhere, such that the University can readily support those who are overseas on University business. However, there were issues raised in connection with the way in which Key Travel was procured, requiring a purchase order to be raised each time before a booking could be made, and then in many instances staff would complain that the flight prices have increased during this time. Current the Financial Procedure FP16 allows staff to book travel directly up to the value of £500 and to claim back the cost using Concur, which is a much slicker process, but utilising alternative suppliers means travellers may not receive prompt support, if required, as there is no means to identify where they are in the first instance.</p> <p>The Chair suggested that a purchase order should be raised first, or look at having an open departmental travel purchase order. The Committee discussed, that the FP16, £500 threshold should be removed and all travel booking should be mandatory to use Key Travel, however the process to procure these services should be made slicker.</p> <p>DECISION: The Committee considered and approved the paper, providing there were no further comments, to enable it to be submitted to the UEB.</p> <p>ACTION: Paper to be submitted to the UEB at its March 2020 meetings.</p>
041	<p>Wellbeing and Safeguarding Strategy</p> <p>The Director of Wellbeing and Safeguarding provided a verbal update on the Wellbeing and Safeguarding Strategy. It was reported that the strategy for staff and students was near completion and almost ready for distribution. A proposal to set up two new groups (Workforce Wellbeing Strategy Group and Student Wellbeing Strategy Group) was put forward to the committee.</p>

	<p>The Director of Health and Safety Services informed the Committee that the Workforce Wellbeing Strategy Group would replace the Stress Management Group and would provide regular papers to the UHSEC, then to UEB and Council.</p> <p>DECISION: Updates from the Workforce Wellbeing Strategy Group to be reported to this Committee.</p> <p>ACTION: Update the UHSEC Terms of Reference (ToR) to reflect the above.</p>
Governance	
042	<p>Report from the Water Group</p> <p>The Estates Head of Compliance and Assurance presented the report (042-UHSEC060220) from the Water Group meetings, 30 September 2019 and 13 January 2020, The committee received and noted the content of the paper.</p>
043	<p>Report from Statutory Inspection Group</p> <p>The Estates Head of Compliance and Assurance presented the report (043-UHSEC060220) from the Statutory Inspection Group, 17 January 2020. The Committee received and noted the content of the paper.</p>
044	<p>Health and Safety Performance</p> <p>The Senior Health and Safety Adviser outlined the key points of paper 044-UHSEC060220 which incorporated statistics presented via the Health and Safety Software 'SHE ASSURE' which showed that the close out following reactive monitoring was currently at 74% and following proactive monitoring was 72% which was way below the target figure of 95% for both.</p> <p>It was reported also that there had been a need to report 4 incidents to the Health and Safety Executive between 1 September 2019 and 31 January 2020. The internal 'Stop Notice' raised during the last reporting period relating to the series of phenol exposure incidents had now been closed out by the School of Life Sciences and lifted.</p>
Subsidiary and Sub-Committee Reports	
045	<p>Report from GMBSC</p> <p>The Senior Health and Safety Adviser outlined the key points from paper 045-UHSEC060220. This included the concerns raised by the Committee in relation to health and safety oversight of biological risks to staff and students partaking in research overseas. This was resolved that the GMBSC would offer advice and consider biological risks to researchers upon submission of their application form to BSREC and that the applications forms for ethical approval would incorporate additional questions to achieve this.</p> <p>Members of this committee discussed options available to sanction those principal investigators either who did not seek approval of the GMBSC prior to embarking on teaching and research involving biological materials or who did not routinely review their biological project risk assessments at the required frequencies.</p> <p>The Technical Assurance Manager (SLS/WMS) reported that the annual visit by the Plant Health and Seeds Inspectorate (PHSI) was due in February, and the Committee would be reviewing whether there would be changes made to the Plant Health Order in response to Brexit.</p> <p>The CL3 plant planned preventative maintenance (PPM) was anticipated to take place in January 2020, having been pushed back from November 2019 due to research needs.</p>
046	<p>Review of University H&S Risk Profile</p> <p>The Director of Health and Safety Services presented the report (046-UHSEC060220) on the University H&S Risk Profile; the Committee received and noted the content of the paper.</p> <p>The Committee was informed that since the creation of the Risk Profile tool in 2016 and the commencement of the OHSAS18001 audit process in 2018, all seven departments had moved from 'Red' to 'Amber' risk. To demonstrate progression, an introduction of a Critical Assurance Rating that identifies which departments have</p>

	made better progress with Risk Assessments, Emergency Plans and completion of corrective Actions has been incorporated into the process as demonstrated in the paper.
Items below this line are for receipt and/or approval, without discussion	
047	Review of Health and Safety Plan 2019-20 The Committee received and noted the report (047-UHSEC060220).
Other	
048	Any other business The Director of Health and Safety Services, informed the Committee of the Trade Union representative nominated by the University Health and Safety Committee (Lee Cartwright) not being available to attend this Committee, and that they would approach Trade Union Representatives from other Committees and invite them to the UHSEC in their absence. The Director of Health and Safety Services also reported that following the Bolton University Accommodation fire, the University of Warwick (UoW) received a letter from the Secretary of State in order for us to confirm that fire systems were in place at the UoW. The completion of Fire Risk Assessments (FRAs) across all UoW sites had identified that additional Dangerous Substances and Explosive Atmosphere Regulations (DSEAR) assessments were required across certain properties, which warranted additional resource to both conduct these assessments and to conduct any remedial work.
Next meeting: 10.00, THURSDAY 2 April 2020, CMR1.0	

DECISIONS AND ACTIONS			
ITEM	DECISION/ACTION	LEAD AND DUE DATE	STATUS
010 – Review of Risk Register	The Director of Health and Safety to re-score the risk rating for departments and report back to the February UHSEC meeting.	John Phillips	Completed
022- New Policies	DECISION: The Committee approved all four policies. ACTION: Policies to be endorsed at University Executive Board.	John Phillips	Completed
023 – Student Welfare Governance Structure	DECISION: The Committee agreed to defer this discussion until the next meeting. ACTION: Invite Hannah Friend to discuss the Wellbeing and Safeguarding Strategy at the next meeting.	John Phillips	Completed
025 – Report from the PTW Office	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	Carry Forward - Drone Policy/arrangements to be developed.
029 – Report from UHSC	DECISION: The Committee agreed to discuss a Menopause Policy with Human Resources.	Rachel Sandby-Thomas and John Phillips	Completed

	ACTION: The Chair and Director of Health and Safety to discuss whether the University should introduce a Menopause Policy with Geraldine Mills and report back to the next meeting.		
037 – Matter Arising	DECISION: The Menopause Policy was not considered relevant to this Committee, but instead, it be taken to the Joint Consultative Committee (JCC). ACTION: John Phillips to work with Geraldine Mills to prepare a policy for a future meeting of the JCC agenda.	John Phillips and Geraldine Mills	Carry Forward
038 – Chair’s Business	DECISION: The Committee agreed that once the HSE’s Notification of Contravention had been received that the requirements be communicated out to departments, explaining what was expected of them. ACTION: That an action plan be developed to move forward on the above.	Caroline Farren	
040 – International Travel	DECISION: The Committee considered and approved the paper, providing there were no further comments, to enable it to be submitted to the UEB. ACTION: Paper to be submitted to the UEB at its March 2020 meetings.	John Phillips	Completed – carry forward to UHSEC in July
041 – Wellbeing and Safeguarding Strategy	DECISION: Updates from the Workforce Wellbeing Strategy Group to be reported to this Committee. ACTION: Update the UHSEC ToR to include the reporting path for Wellbeing and Safeguarding.	John Phillips	Completed