

UNIVERSITY OF WARWICK

Minutes of the University Health and Safety Committee
held on 12 October 2015

Present: Professor T Jones (Chair), Ms Lisa Burton, Ms S Crookes, Ms T Forsyiaik, Ms H Green, Ms Anna Grundy (vice Ms C Quinney), Dr A Marsh, Ms L McCarthy, Mr D Stiles

Apologies: Ms C Allender, Mr A Bastable, Mr L Cartwright, Ms Pippa Collins, Mr E Ryan, Mr R Eason, Mr M Joy, Mr D Mitchell, Mr J Phillips, Mrs A Pulford, Mr Alex Roberts, Mr S Stynes

In attendance: Ms C Farren, Ms H Reynolds.

01/15-16 Apologies and welcome

Apologies received from Mr J Phillips, Mr D Mitchell, Mr M Joy, Mr R Eason and Mr A Roberts.

The Chair welcomed Ms Anna Grundy who was representing the Sports Centre in Ms C Quinney's absence and advised that Mr Alex Roberts had been appointed as the new Students Union representative.

02/15-16 Minutes

RESOLVED:

That the minutes of the meeting of the Committee held on 14 May 2015 be approved.

03/15-16 Matters arising from the minutes

RESOLVED:

That there were no matters arising from the minutes.

04/15-16 Declarations of Conflict of Interest

REPORTED (by the Chair):

That no conflicts of interest were declared.

05/15-16 Chair's Business

REPORTED (by the Chair):

No Chair's business.

06/15-16 Terms of Reference and Membership

RECEIVED:

The Terms of Reference and Membership of the University Health and Safety Committee (paper UHSC.01/15-16 refers).

REPORTED (by Senior Health and Safety Advisor):

That the membership reflected a change to the Unison representative with Mr Steven Stynes (replacing Mr Pete Sweetman); and the Students Union representative this year being Mr Alex Roberts.

RESOLVED:

That the Terms of Reference and Membership of the University Health and Safety Committee be approved.

07/15-16 Report to the University Health and Safety Executive Committee

RECEIVED:

The Key Points Reported to University Health and Safety Executive Committee (paper UHSC.02/15-16 refers)

REPORTED: (by Senior Health and Safety Advisor):

That the paper provided a summary to the University Health and Safety Executive Committee of the minutes from the UHSC meeting held on 14 May 2015.

RESOLVED:

That the Key Points Reported to University Health and Safety Executive Committee were noted.

08/15-16 Incident Report

RECEIVED:

A paper from the Senior Health and Safety Advisor on the incidents reported to the Health and Safety Department for the period May to August 2015 (paper UHSC.03/15-16 refers).

REPORTED (by Senior Health and Safety Advisor):

- (a) That two of the incidents in the paper were agenda items 9 (paper UHSC.04/15-16 refers) and 10 (paper UHSC.05/15-16 refers) and would be discussed separately.
- (b) That there were 199 work related incidents in the 4 month period, of which four needed reporting to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

- (c) That of the four RIDDOR reports: one was a dangerous occurrence; one involved a member of the public being taken to hospital following a trip on a curb; and a further two required reporting due to over 8 days of absence from work for a member of staff.
- (d) That the highest incident category was 'slips, trips and falls' with 47 incidents reported and the second highest, with 32 incidents reported was 'contact with a moving item'. 'Contact with something fixed' and 'contact with something sharp' had 16 and 14 incidents reported respectively.

09/15-16 Chemical safety

RECEIVED:

A paper from the Senior Health and Safety Advisor on the actions arising from a chemical safety incident within the Department of Chemistry (paper UHSC.04/15-16).

REPORTED: (by the Senior Health and Safety Advisor)

- (a) That there had been an incident involving fuming nitric acid in the Department of Chemistry on 27 August 2015 that resulted in a full emergency response and mobilisation of the Major Incident Team.
- (b) That the incident was attributable to a decomposing bottle of fuming nitric acid that had been stored for over 10 years coming into contact with incompatible materials in the same storage cabinet. Its decomposition and chemical interaction was believed to have resulted in a toxic gas release comprising of oxides of nitrogen being formed.
- (c) That the incident resulted in an investigation by the Health and Safety Executive (HSE) and the issuing of a Notification of Contravention for breaches of: Regulation 5 of the Management of Health and Safety at Work Regulations; and Regulation 5 of the Dangerous Substances and Explosive Atmospheres Regulations (DSEAR).
- (d) That the Department of Chemistry had responded well to the emergency and to the actions arising from the incident.
- (e) That a Task and Finish Action Group had been established to close out on immediate issues connected with the incident.
- (f) That an institutional effort would be required to manage the way in which chemicals were stored across the University.

(by Dr Andrew Marsh)

- (g) That the Department of Chemistry had put together an inventory of all 25,500 chemicals stored in the department using Quartz and that relevant appertaining to the risk associated with chemical type and volumes stored in each space would be uploaded into the Quemis Hazard Management System. This should provide greater information to others to enable an improved response in future emergency situations.
- (h) That the Department of Chemistry had identified key areas for additional training and a specialist external consultant would be used to add to existing training provision.

(by Ms Anna Grundy)

- (i) That as well as the Faculty of Science, the use of an inventory system and Hazard Management System database could benefit the whole of the University. Consideration should be made to extending these systems to other Departments.

(by the Chair)

- (j) That members of the UHSC should consider, for the areas they represent, the following chemical safety implications:
 - i. Identify all of the chemicals that they have in storage;
 - ii. Safely dispose of any 'old' chemicals
 - iii. Segregate/secondary contain incompatible materials;
 - iv. Check suitability of existing storage cabinets (incl. vented if needed);
 - v. Undertake a risk assessment in relation to DSEAR;
 - vi. Manage the chemical risk when chemicals are in use;
 - vii. Monitor continued compliance.

RESOLVED:

- (i) That further guidance would be generated by the Health and Safety Department to support the changes recommended.
- (ii) That the improvements required in relation to the management of chemicals in storage was noted.

10/15-16 Provision and Use of Work Equipment

RECEIVED:

A paper from the Senior Health and Safety Advisor on the actions arising from a work related equipment incident within Warwick Manufacturing Group (WMG) (paper UHSC.05/15-16).

REPORTED (by the Senior Health and Safety Advisor):

- (a) That there had been an incident involving a member of staff receiving a back strain injury connected with the movement of the lid of a calorimeter carried out by the individual over a period of time.
- (b) That the incident was reported late as it was not known that the individual had been off work for over 8 days. As soon as the Health and Safety Department established this, a formal report was made to the Health and Safety Executive (HSE) as required by Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995.
- (c) That the research group had completed a risk assessment but this was found not to be 'suitable and sufficient' in that it had failed to consider the need for the equipment to conform to European standards for machinery safety (with the appropriate certificates of conformity and associated CE marking) and the group had failed to sufficiently considered the manual handling risk. The latter was attributable to the supplier not having provided any indication on the weight of the lid within their supporting documentation.
- (d) That the HSE Inspector recommended a need for group involvement in the production of risk assessments; such that important elements were not overlooked and to ensure that the 'what if...' scenarios had been sufficiently considered. Those involved in the risk assessment were considered to be far too close to the research to have conducted this sufficiently.
- (e) That the priority for the research group appeared to be to complete their validation of their research technique (commissioning), as opposed to consider the risks associated with the activities involved in working with the equipment. In fact the staff had recently received manual handling training but had opted to continue to carry out their work.
- (f) That when the HSE initiated an investigation in response to the RIDDOR report, WMG had already sent the lid away for modification and a mechanical lifting aid had been obtained. Thus the risk was found to have been removed.
- (g) That members of the UHSC should consider, for the areas they represent, the following implications for the provision and use of work equipment:
 - i. Identify high risk work equipment that they own and during this process safely dispose of/quarantine any work equipment no longer needed;
 - ii. Ensure all high risk work equipment are subject to an appropriate risk assessment;
 - iii. Ensure any new high risk work equipment to be purchased or brought in to the University has been subject to pre-procurement checks as part of the risk assessment process and that a risk assessment is completed prior to putting it into use;
 - iv. Ensure any significant risks identified associated with the lifting, handling or moving of any equipment have been subject to a separate manual handling risk assessment;
 - v. Ensure that staff that work with high risk work equipment, or that have to lift, handle, move etc. equipment (or materials) have received sufficient training. A Manual Handling Train the Trainer course was

recommended to enable staff in departments to train others in the types of activities likely to be required in their own areas;

- vi. That regular monitoring to ensure that controls have been implemented and that persons follow any training provided and that risk assessments are in place would be required;
- vii. That the Health and Safety Department be informed if an accident reported subsequently results in staff being off work as a consequence as there is a legal duty on the University to notify the HSE for any incident that results in over 8 days absence (within 15 days).

RESOLVED

- (i) That members refer to the manual handling guidance on the Health, Safety and Wellbeing webpages as this had been updated to support those responsible for assessing the risks associated with lifting, moving and handling.
- (ii) That the requirements relating to the need for risk assessment of high risk work equipment both before purchase and prior to use were noted.

11/15-16 Activities around the University

REPORTED (by Members):

- (a) That a fire evacuation during an event run by the Sports Centre had identified that the fire alarm panel had been inaccurately labelled. An audit of the fire panels was recommended. Post meeting it was determined that the panel had been misread at the time of the incident.
- (b) That an incident in the toilet facilities of the Library had identified the need for assessing situations where specialised contractors should be used; the coordination of supplies across campus in emergencies; and situations suitable for cleaning staff to be trained in dealing with contaminants.
- (c) That there had been a suspected case of meningitis in a hall of residence which had been dealt with efficiently.
- (d) That Estates were working with Corporate Communications to develop a video storyboard of the University Contractor's Code of Conduct which will be shown to all contractors appointed by Estates prior to enabling them to work on site. This video would be made available on the Estates website for others to use (who appoint their own contractors directly). All contractors engaged by the University must sign up to work to the Code of Conduct. Departments engaging their own contractors would be advised to utilize the video once it has been made available.

RESOLVED

- (i) That the Code of Conduct for Contractors would be made available via the Health, Safety and Wellbeing webpages upon completion.

- (ii) That enquiries would be made to determine the sufficiency of training for cleaning staff.

12/15-16 Dates of future meetings

11 February 2016	14:30 to 16:30 in CMR.1.0
12 May 2016	12:30 to 14:30 in CMR.1.0