

## Minutes of Meeting of University Health and Safety Committee on Tuesday 13 September 2022 at 13:15

**Location: Remotely via MS Teams**

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### **Present**

Richard Brooks – **Chair** / Director of Human Resources  
Chris Young – Deputy Director Safety & Wellbeing Services  
Dev Biddlecombe – Director of Campus Infrastructure  
Sophie Hamer – Sports Operations Manager  
Malcolm Holley – Faculty of Science Management Representative  
Andrew Nash – Head of Campus Services Facilities  
Julian Sulley – Faculty of Engineering & Design Management Representative  
Michael Carley – UCU Representative  
Simon Hockenhull – UNITE Representative  
Steve Nicholson – UNISON Representative  
Andrew Hutchinson –Management, Specialist & Administration Representative

### **In attendance**

Sue Stove Schofield – Secretary

### **Apologies**

Mike Porter – Head of Security Services  
Richard Ball – Education & Research Representative  
James Paradise – UNISON Representative  
Sarah Hunter – Technical & Experimental Representative  
Elizabeth Stacey – Students' Union Officer (Sports)

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### **Minutes**

#### **993 Declarations of Interest**

None were declared.

#### **994 Membership and Terms of Reference**

The membership and terms of reference were noted.

It was reported that the University Executive Board had reviewed its management structure and its sub-groups. This included the provision for UEB Standing Groups, which would be advisory to UEB rather than their chairs. A number of such standing groups already existed and it had been proposed that the Health and Safety Committee,

which reported to UEB, also became a Standing Group, to distinguish it from the governance committee structure.

The Committee discussed the proposed change and agreed that the Health and Safety Committee needed to remain distinct from the other Standing Groups to reflect its status as a statutory consultative group.

Also, it was suggested that, once the matter had been agreed with UEB, the Committee's terms of reference be reviewed / revised and submitted to the Committee, then to UEB for approval.

**Action:**

**The Chair** would suggest to UEB that the Health and Safety Committee be exempt from the proposal to re-badge it as a Standing Group.

**The Secretary / Deputy Director Safety & Wellbeing Services Chair** would, in due course, review / revise the Committee's terms of reference and bring them back to the Committee before submission to UEB.

## **995 Minutes of Previous meeting**

The minutes of the Committee meeting held on 7 June 2022 (Paper UHSC 22/23 - 01) were approved as a correct record of the proceedings.

## **996 Matters arising**

### **Minute 970 – SHEW Update – Computer Workstation Assessments**

The Chair confirmed that initially funds for the purchasing equipment for working at home would be the responsibility of the department. If the department was unable to fund the equipment, it should refer to Human Resources for guidance on central funding. Information on the funding of equipment for home working was now included in the hybrid working guidance.

### **Minute 984 – Traffic Management on Campus**

It was anticipated that the floor sockets for the Arrivals Square barriers would be installed the week of 19 September. Installation of the barriers would be completed by the end of October.

Work to upgrade the Convocation Avenue and Woodland Court pedestrian crossings was on track.

The design for changes to the Underdeck was due to be completed by 23 September. The work would include the removal of the sleeping policemen and the installation of barriers.

### **Minute 988 – RIDDOR Reportable Accidents**

See agenda item 5 below.

## Minute 988 – Occupational Health Surveillance

See agenda item 5 below.

### Minute 988 – Occupational Health

At the previous meeting the Director of Estates Operations had raised a matter regarding a referral to Occupational Health for a new member of staff, which seemed to be taking longer than usual to progress. He was going to raise this with the Deputy Director Safety & Wellbeing Services. However, the Director of Estates Operations had not done so and had now left the University.

The Deputy Director Safety & Wellbeing Services reported that the delays being experienced with Occupational Health were generally due to staff sickness and recruitment issues. He would be meeting with the University's Occupational Health provider next week to establish what could be done to speed up the service. He noted that Campus Infrastructure, Campus Services and the STV were the departments most likely to be impacted by the delays.

### Minute 989 – Safe Use of Pressure Systems Standard

As agreed at the last meeting, The Deputy Director Safety & Wellbeing Services had checked the regulations. Hydraulic systems were not within the scope of the regulations as they did not store energy in the system. Also, vacuum systems were not included either. The Code of Practice included numerous exemptions, including refrigerants.

#### **Action:**

**The Deputy Director Safety & Wellbeing Services** would revise the Standard to provide a clear explanation of these exclusions / exemptions and would add links to the relevant information.

### Minute 989 – Driving at Work Safety Policy and Work-Related Driving Safety Standard

The Deputy Director Safety & Wellbeing Services suggested that the need for off-road driver training was highlighted to the relevant staff and that they were provided with links to off-road driver training courses.

In addition, the government had introduced new rules for towing a trailer with a car. Driver training was recommended, but not mandatory. The Standard needed to be revised to reflect this change.

The Faculty of Science Management Representative requested that guidance on minibus training and driving for payment and reward be clarified. The Students' Union routinely offered MiDAS (Minibus Driver Awareness Scheme) training. Many of the University's vehicles were people carriers, rather than minibuses, so training was not required to drive these vehicles.

It was noted that if a driver attended a driver training course, the University's insurers did not need to be informed. The Faculty of Science Management Representative asked that the University's driver application form be updated. The section requiring declaration of offences needed to be revised so that it only requested information that was relevant, i.e., under the Rehabilitation of Offenders Act 1974, there was no need declare spent convictions.

**Action:**

**The Deputy Director Safety & Wellbeing Services** would liaise with the University's Insurance Manager to review and revise the University's driver application form.

**Minute 991 – Coronavirus**

The UCU Representative requested an update on Covid-19.

The Deputy Director Safety & Wellbeing Services explained that the University was largely reflecting the measures in place for society in general, e.g., the wearing of face coverings was optional, but was retaining some of the additional measures it had previously implemented. For example, occupancy levels at the University were the same as those set at the beginning of the previous academic year and two metre exclusion zones in lecture theatres were being maintained. Hand sanitiser would continue to be available and cleaning materials could still be ordered by departments for local use. The University also continued to follow NHS guidance that those people who have Covid symptoms should refrain from attending campus for at least five days after the onset of symptoms (or having tested positive if they had access to a Lateral Flow Test). The focus of risk assessments was on infection control generally, rather than Covid-19 specifically.

The UCU Representative pointed out that there was a risk of Covid-19 levels increasing due to the number of people going to London for the Lying-in-State and funeral of the late Queen Elizabeth II and asked if the University had any contingency measures in place. The Deputy Director Safety & Wellbeing Services advised that the government had withdrawn permission for universities to issue lateral flow tests. However, he expected that if an outbreak was likely, permission would be granted (through BANES Public Health) to universities to provide tests again. He also advised that the University was in regular contact with local public health bodies and this would provide a quick route for local plans to be communicated to the University as necessary.

**997 SHEW Update (Including Incidents and Audit Update)**

**Incidents and Accidents**

**RIDDOR Reportable Accidents**

There has been one RIDDOR reportable accident since the last report.

In June 2022 a member of the Estates staff suffered a broken finger whilst sawing up a metal goal frame prior to the frame being sent for disposal / recycling. As a result, the staff member was absent for more than seven days (making it a RIDDOR reportable accident). The risk assessment has been reviewed.

## Significant Non-RIDDOR Accidents

In August 2022 a member of the Portering and Cleaning staff suffered a needlestick injury whilst handling a bag of waste in the Department of Mechanical Engineering. The investigation found that a significant number of unsheathed needles had been improperly disposed of into a general waste bag (even though sharps bins were available). It appeared one of the needles had punctured the bag and then the cleaner's hand when they picked the bag up. Prompt action was taken by the department to remind staff and postgraduate students of correct procedures. The Director of Engineering & Design Technical Services has met with the affected staff member to explain that no biological agents were used in the area, so there was a very small risk of infection, and to explain the action taken to prevent a repetition of the incident. So far it has not been possible to establish who may have disposed the needlesticks.

The Faculty of Science Management Representative pointed out that he had previously raised the idea of no-fault reporting to encourage people to come forward. The Deputy Director Safety & Wellbeing Services agreed that this approach could be helpful but that in this case, the injured party was anxious to know what was on the needle, so he was more concerned about identifying what she had been exposed to than identifying the individual responsible.

The UCU Representative commented that no-fault reporting worked when there had been a genuine mistake, but failure of responsibility was a different matter. He believed this was a cultural issue that was not likely to be fixed by no-fault reporting.

The Faculty of Science Management Representative reported that the situation in the Faculty had improved. Staff had been told to contact laboratory staff if they came across any sharps.

The Faculty of Engineering & Design Management Representative was confident that everything possible had been done to raise awareness and minimise the risk in future. He explained that two of the laboratories where the waste may have come from were interconnecting and this had made identifying the specific source difficult. He had spoken to staff and the injured party, who was more reassured when they were informed that it was pure water that had been used on the sharps. Also, although sharps were not generally used in the other laboratories in the corridor, there were now sharps bins in each of the laboratories.

The UNISON Representative (SN) asked to be kept up to date on this matter.

### **Action:**

**The Deputy Director Safety & Wellbeing Services** to monitor and provide any further update at the next meeting of this Committee.

## Update on Lift Incident (Fresh Shop)

Further investigations were undertaken by the University's Authorised Engineer. No mechanical explanation could be identified for the lift doors having closed as described. It was very difficult to understand how the incident could have happened. A latch had been installed to hold the doors open whilst the lift was in use. The injured party has been

provided with the findings of this investigation and seemed satisfied with the review and the installation of the latch system. The key lesson to be learnt was the injured party could have been involved in the investigation process in the first place.

### **Lift in 9 West**

The Deputy Director Safety & Wellbeing Services had received reports of the lift car safety interlocks on the lift in 9 West having been interfered with. It appeared that the interlocks had been cut / hacked off on every lift floor of 9 West. Investigations were underway as to how and why this had occurred, or what would have been gained by doing so. It was unlikely that it would be possible to identify the person(s) responsible. If the lift doors were put out alignment, the lift would continue to operate, but if the interlocks were in place it should not do so.

#### **Action:**

**The Deputy Director Safety & Wellbeing Services** to provide any further update at the next meeting of this Committee.

### **Notable Fires**

There was a kitchen fire in Polden Block D on 8 June 2022. It appeared that a student, who was resident in the block, had cooked food in the microwave, then put the meal in the bin. Something in the bin ignited which resulted in a larger fire that left the kitchen entirely burnt out (including the ceiling and light fittings).

Security Services responded immediately and evacuated the occupants on the affected floor. Avon Fire and Rescue Service (AFRS) responded with 7 tenders, including a turntable ladder, as Polden was classified as a “tall residential building”. AFRS experienced difficulty in locating the keys for the dry riser within the building and so smashed the door of the riser to gain access to it. They also had difficulty reading the plans provided. Consequently, the location of the keys has been checked to make sure they are correct and available. The plans have been updated to a format agreed with AFRS. Otherwise, AFRS were satisfied.

Post Grenfell there have been numerous changes proposed to fire regulations dealing with tall residential buildings. These were currently in the process of being implemented. As a result of these changes, the way in which fire services responded to and enforced fire safety standards in future was likely to change. AFRS have indicated that they would like to undertake more audits of the University's buildings and to carry out more exercises on campus. In doing so, they were likely to identify more areas which will require improvement by the University.

### **Computer Workstation Assessments**

The Deputy Director Safety & Wellbeing Services reported that the service continued to receive significant numbers of DSE assessments and that he anticipated that the amount of assessments was likely to remain high as hybrid working becomes fully embedded.

It was noted that people leaving the University may have a lot of equipment at home and there had been reports of some leavers finding it difficult to return to them to campus. A decision needed to be made around what to do with the equipment (particularly desks and chairs) and what arrangements could be established for returning such items.

The Head of Campus Services Facilities advised that this fell within the remit of his new role. The Campus Services Asset & Carbon Reduction Manager was looking at establishing an inventory for equipment, including environmental / green issues, storage and options for reuse (e.g., re-upholstery). Home working equipment would be considered as part of this process.

**Action:**

**The Head of Campus Services Facilities** would liaise with the Deputy Director Safety & Wellbeing Services.

## Fire Safety

### **Fire Risk Assessment Programme**

The fire risk assessment programme was on schedule.

### **Fire Evacuation Drills**

The fire drill programme was on schedule.

Further drills were due to take place early this academic year. There were still some concerns about fire warden coverage onsite. The Deputy Director Safety & Wellbeing Services had a tool which enabled him to identify the wi-fi connections of first aiders and fire wardens, but it did not identify where they were on campus. He was continuing to explore coverage for professional services departments where there may be fewer fire wardens. However, overall, the evacuation process did seem to work well.

### **Fire Safety Training**

AFRS undertook an exercise at STV in August. Whilst preparing for the exercise, smoke was prematurely released resulting in the fire alarm being activated. Security Services were not aware of the planned exercise and found occupants of the STV were not evacuating as expected. The STV and Security Services have subsequently discussed this to ensure correct procedures were understood and followed. In addition, it was found that some the STV building information may be out of date, so the STV will follow this up with Campus Infrastructure.

### **Fire Safety Audits**

As mentioned above, AFRS were likely to undertake more checks and exercises on campus.

The Deputy Director Safety & Wellbeing Services requested that members of this Committee ensured that fire doors were not wedged open and to challenge this practice if they came across doors that had been wedged open.

### **Occupational Health Surveillance 2022**

The annual Occupational Health Surveillance programmes have been launched. SHEW was collecting in responses and arrangements will be made with Occupational Health for physical checks of qualifying staff in the next couple of months.

In addition, as night workers, all members of Security Services had been offered assessments. This was not a statutory requirement, but was recommended by the HSE and so was offered on a voluntary basis. So far, no staff have elected to take up this screening.

### **Occupational Health**

There has been a significant increase in the number of pre-employment questionnaires requiring triage / Occupational Health screening. The outcomes of these checks were not necessarily resulting in significant changes to work or working practices. However, the increase in screening volumes has had an impact on the speed at which the recruitment process could be completed. The University had a large number of vacancies in operational areas and it was likely that this situation will continue to have an impact on recruitment in these areas.

Overall, the number of management referrals had reduced compared to the previous academic year. There were several referrals for staff who had been diagnosed with Long Covid, had been unwell for a significant length of time and for whom the prognosis remained unclear. It was difficult to distinguish between the symptoms of Long Covid and chronic fatigue syndrome, which made it difficult to establish what support was required.

### **Employee Assistance Use**

The overall number of users of EAP increased sharply in May 2022. The cause was not clear, but it may have been linked to workloads at that time of year.

Many of those using EAP were presenting with very complex issues. There was a not insignificant number with severe mental health conditions and the number of people-pandemic service use. The Deputy Director Safety & Wellbeing Services anticipated this trend was likely to continue especially given the current financial and socio-political context.

The EAP were recommending that a sizable minority of users had an extended number of sessions. Waiting times for access to the service was increasing as demand for the service rose. It was possible that more people were using EAP either instead of, or in advance of, NHS provided services, as the waiting time for accessing GP services was currently reported as being three to four months.

The Committee noted the report.

## 998 Policy Reviews

### Policies and Standards Reviews

The paper provided an overview of policies which had been reviewed by SHEW and where no need for substantive changes were identified or where any changes identified were minor.

### **Construction and Maintenance Activities in High-Risk Areas Safety Standard**

There were no substantive changes required to the Construction and Maintenance Activities in High-Risk Areas Safety Standard. However, construction and maintenance works were often the responsibility of more than one department, not just Campus Infrastructure. Therefore, the Deputy Director Safety & Wellbeing Services emphasised the need for communication and agreement between the relevant parties e.g., the laboratory custodian and the contractor.

The Faculty of Science Management Representative pointed out that there were often external contractors in laboratories. He suggested that perhaps due to the changes in staff within Campus Infrastructure, memory and continuity of the correct processes for contractors going into departments had been lost. Reviewing and refreshing the process would therefore be useful. The Faculty of Engineering & Design Management Representative agreed and added that it would be helpful to have a phone call or email from Campus Infrastructure about arrangements for contractors visiting departments. The Director of Campus Infrastructure would follow this up and report back to the Committee.

The Deputy Director Safety & Wellbeing Services anticipated that there would be a need to undertake a mini audit of this issue and this will be factored into the SHEW audit programme.

#### **Action:**

**Director of Campus Infrastructure** to liaise with his team to establish what the process was for contacting other departments to inform them that a contractor would be visiting their department. The Director of Campus Infrastructure would report back to the next meeting of this Committee.

### **Risk assessment Safety Standard**

Minor changes had been made to the wording of the Standard to reflect the changes recently made by the HSE to its guidance.

The Committee noted the report.

### **Safe Use of Local Exhaust Ventilation (LEV) Safety Standard**

The Deputy Director Safety & Wellbeing Services proposed that the existing Fume Cupboard Safety Standard be replaced by a standard covering all Local Exhaust Ventilation (LEV) systems. It was hoped that this would ensure that all such systems were treated in a consistent way.

The Deputy Director Safety & Wellbeing Services reported that the HSE has been actively investigating the management of LEV systems in universities and would be seeking to bring university practise in line with industry standards. The new Standard still included fume cupboards, but the scope has been expanded to covered other similar systems such as microbiological safety cabinets and fume and dust extract systems in workshops and similar settings.

The Faculty of Science Management Representative advised that there were over 100 fume cupboards within the Faculty. These and the safety cabinets were tightly controlled, but he noted that other LEV equipment, such as fume capture hoods (e.g., for soldering), was more difficult to manage as it generally did not have flowmeters or similar devices so checking their efficiency, particularly when the fumes were invisible, was difficult. Equipment did comply with annual checks, but better signposting to the requirement for extracts for other LEVs would be helpful.

The Deputy Director Safety & Wellbeing Services would pull together guidance for other types of cabinets. The HSE have been keen to know how organisations proved that what they were using was being done so appropriately. He was concerned that we may not have all the appropriate user checks in place and documented. For equipment tests undertaken by external contractors, there was a need to check what the contractors were actually doing and assure ourselves that it was appropriate. The Deputy Director Safety & Wellbeing Services would feedback to the relevant departments.

The Deputy Director Safety & Wellbeing Services proposed to undertake an audit of LEVs, then feedback to this Committee and develop further guidance. It was not clear to him why some LEV systems were maintained by Campus Infrastructure and others were maintained by departments. The Faculty of Science Management Representative explained that some systems were built into the buildings and over the years, everything above the ceilings had become the responsibility of Campus Infrastructure and everything below the ceilings had become the responsibility of the department. These were all are key bits of infrastructure that allowed staff to do their work and so were fundamental. Microbiological safety cabinets were an exception as they functioned differently and often maintenance contracts were bought by departments when the cabinets were purchased. However, in his view all other LEVs should be the responsibility of Campus Infrastructure. It was noted that there were also some systems, such as in ACE, which although part of the building infrastructure, were installed and were maintained by the department.

**Action:**

**The Deputy Director Safety & Wellbeing Services** would pull together guidance on cabinets and liaise with the relevant departments.

**The Director of Campus Infrastructure** would discuss the LEVs with the Deputy Director Safety & Wellbeing Services to establish who was responsible for what.

**The Deputy Director Safety & Wellbeing Services** would liaise with the Director of Campus Infrastructure about the scope of the proposed audit of Local Exhaust Ventilation systems.

The Committee noted and approved the Standard.

## **General Health and Safety Inspections Standard**

Previously the Standard was aligned to HASMAP. Following an internal audit of health and safety governance arrangements, the decision has been made to revise the University's Safety Management System to align it with ISO 45001: 2018 Occupational Health and Safety management Systems. Consequently, the General Inspections Safety Standard has been rewritten. Paper UHSC 22/23 – 06 was the draft proposed new standard.

The Committee noted and approved the Standard.

## **999 Any Other Business**

There was none.

## **Close**

The meeting concluded at 14.20.