

UNIVERSITY OF ABERDEEN

UNIVERSITY HEALTH AND SAFETY COMMITTEE

MINUTES OF MEETING HELD ON 02 NOVEMBER 2015

Present: Mrs C Inglis (Convener), Mr A Donaldson, Mr A Anagboso, Dr R Ebel, Dr C Harrington, Dr S Lawrie, Professor P McCaffery, Dr C Sands, Mr R Philp, Ms J Tuckwell, Mrs S Blaney, Mr E Stephen Mr N Qamar, Mr D Malcolm and Dr A Petrie (Clerk)

1 SAFETY STRATEGY / PLAN

1.1 Mr Qamar introduced himself and proceeded to present the new Safety Strategy / Plan. This outlines the intentions of the Central Safety Team for the University regarding training, audits, policies, wellbeing promotion, *etc.* The Committee raised some queries regarding the training matrix with regards to the optional nature of managers and the IOSH Managing Safely course. The Committee questioned the status of the E-learning package in relation to the last meeting and Mr Qamar clarified the current situation regarding progress with the E-learning package. The provider of the E-learning had been selected and progress was ongoing to finalise purchase of the software appropriate to the University.

1.2 The Committee questioned what exactly will be the expectations from Safety Tours. Mr Qamar clarified what those expectations were, namely showing commitment of management, engagement with staff and raising the profile of health, safety & wellbeing across the University. The Committee questioned whether there would be the development of an Overseas Travel Policy. Mr Qamar stated that although there was good guidance and information available in some Schools, a more consistent approach was required. The Committee discussed the information provided from Aberdeen Sports Village with regards to the changing of their promotions / offers.

2 MINUTES OF THE PREVIOUS MEETING

2.1 The minutes of the meeting held on 07 May 2015 were received and approved. Dr S Lawrie raised a concern regarding the late submission of the agenda and papers and as he subsequently did not have an opportunity to review the papers. It was agreed that the agenda and papers were late but would be issued in keeping with the usual schedule for the circulation of papers *i.e.* 7 days in advance of the meeting.

3 MATTERS ARISING FROM THE MINUTES

3.1 The Committee noted the actions taken in respect of matters referred for action at the last meeting and not considered elsewhere on the agenda for this meeting. The status of matters arising are recorded in the Health & Safety Committee Action Tracker which is held within the Central Health and Safety Office.

4 SAFETY CULTURE FOLLOW UP

4.1 IMS

4.1.1 The Committee received an update on progress of the IMS Action Plan by Dr C Harrington, which was developed by IMS following their Focus Group Meetings (*HSC15:2 copy filed with the principal copy of the minutes*).

4.1.2 Dr C Harrington stated that the action plan is progressing, with some areas completed and some still ongoing. The IMS Safety Committee had reservations over some comments raised by the HSL, but accepted them. IMS have tried to improve safety messages within the IMS, they have developed 7 Golden Rules and developed newsletters to highlight specific topics. Feedback from staff on the Golden Rules & newsletter has been good. IMS has emphasised throughout the IMS that investigations and inspections are for people's benefit and not to find fault or to blame. Dr C Harrington stated that the IMS believes that

accidents are well reported, but near misses are not. The Committee discussed that there is a need to define and clarify the role of the Local Safety Advisor as within the IMS there is some confusion as to their role / remit. It was agreed that the role would be clearly defined.

Action: Mr N Qamar

4.1.3 Dr C Harrington further stated that the IMS is trying to target events and communications to specific environments as they are aware that different environments (labs, offices, etc) exist within IMS. It was further stated that they have postdoctoral representation on the IMS H&S Committee.

4.1.4 The Committee were impressed with the response by the IMS to the HSL findings. There was particular praise from the Committee for the newsletter. The Committee did question how possible it would be to measure any result of the good work that the IMS was conducting. The merits of developing the newsletter and the Golden Rules for other Schools / Departments were discussed and the Committee felt that this would be beneficial. Dr C Harrington did highlight that there was a concern that the IMS could lose the Local Safety Advisor (LSA) if there was significant additional training delivered to the LSA. The Committee considered that there may be a tiered approach to training for both roles and risk profile of Schools / Departments.

4.1.5 The Committee discussed if there would be a central budget for the production of safety material and for safety training. It was discussed that there would need to be an agreed approach on the funding of safety messages / training.

Action: Mr N Qamar

4.2 ESTATES

4.2.1 The Committee received an update of progress of their Action Plan by Mr A Donaldson and Mr D Malcolm, which was developed following their Focus Group Meetings and external audit (*HSC15:3 copy filed with the principal copy of the minutes*).

4.2.2 Mr A Donaldson highlighted that the action plan was a major piece of work and it had resulted in a step change to how Estates approach Health and Safety. There was now a major focus on engagement within the Department, both top down and bottom up. A number of different forums and committees had been developed within Estates to raise the profile of Health and Safety. Mr D Malcolm added that there was an improvement in information via noticeboards, newsletters, risk assessments and procedures.

4.2.3 The Committee discussed the progress with the action plan and a query was raised with the percentage completion in respect of some of the action points e.g. 43% completion with 'Legal Compliance'. It was discussed that this referred to 43% compliance with the items on the action plan and not that the University is only 43% legally compliant. The Committee did query the length of time that the action plan was scheduled to take, but it was emphasised that cultural change was a long term goal and that Estates had made good progress on the action plan. It was discussed that there was close collaboration between the Estates Health and Safety Manager and the Central Safety Team to expedite the Estates action plan. Progress of the action plan will be kept under review.

Action: Mr A Donaldson

5 PROGRESS WITH AUDIT RECOMMENDATIONS

5.1 The Committee reviewed the update with the audit recommendations (*HSC15:4 copy filed with principal copy of minutes*). It was noted that there had not been much progress with the recommendations, but it was highlighted that further information on the status of the recommendations had been received on the morning of the Committee meeting. It was agreed that a further update on the audit recommendations would be forwarded to the Committee members.

Action: Dr A Petrie

5.2 It was discussed that the format of the audit reports was not as expected and made it difficult to report back on recommendations raised by the auditor.

6 FIRE SAFETY

- 6.1 The Committee received an update on fire safety (*HSC15:5 copy filed with principal copy of minutes*). Mr N Qamar outlined the plan and indicated that the plan was progressing well. It was discussed that the addition of lessons learned and what can be done to prevent recurrence was beneficial.
- 6.2 Dr R Ebel made reference to the investigation and findings from the fire which occurred within the Meston building. It was identified by the School that the lessons learned were not appropriate for the incident due to the fact that the equipment in question is designed to run unattended and therefore the recommendations cannot be accepted. The Committee discussed that some items of experimental equipment run powered up and unattended and is it possible to determine some clarity on what types of equipment can be left running unattended. Further discussion highlighted that there was frustration that the exact cause of the fire was not determined. It was agreed that the lessons learned would be re-written to reflect the concerns of the School. **Action: Mr S Napier / Mr N Qamar**
- 6.3 The Committee discussed the fire incident involving the glass vacuum line and the actions taken by the individuals involved. The actions by the individuals were discussed and it was identified that they did not take the appropriate action. The School has implemented measures to prevent a recurrence.
- 6.4 The two malicious ignition incidents were discussed by the Committee and it was identified that publicising these events internally may be beneficial in preventing recurrence.

7 SICKNESS ABSENCE DATA

- 7.1 The Committee reviewed sickness absence data provided by Mr T Anagboso (*HSC15:6 copy filed with principal copy of minutes*). The Committee discussed that the data was presented for the calendar year and contained a comparison with the previous 2 years. The analysis of the data by calendar year makes the analysis across sectors difficult. It was discussed that stress & mental health, recovery from operation, musculo-skeletal problems & RSI and other / undisclosed were the top 4 causes of absence in the last 3 years.
- 7.2 The Committee discussed the difficulties in benchmarking across sectors, but it should be possible to compare with other Universities. It was discussed as to whether it was possible to break down the data by job types. It was discussed that it was concerning that stress accounts for 25% of all absences, but it was identified that this is a broad category. It was discussed that it was possible to compare long term absence data and it was agreed that this would be sent out to the Committee. **Action: Mr T Anagboso**

8 SIR DUNCAN RICE LIBRARY WIND CONCERNS

- 8.1 The Committee received a paper from Estates outlining the current situation with the progress of wind mitigation measures for the area surrounding the Sir Duncan Rice Library. A paper is to be presented to the Project Board for consideration and funding has still to be identified.
- 8.2 The Committee discussed that as permission was granted from the City Council for the building to be built, the City Council must have been satisfied with the design. There was a concern over the length of time taken for any mitigation measures to be implemented and a discussion ensued as to the impact the building has had on perceived wind strength along Bedford Road.

9 AOCB

- 9.1 The Committee noted a concern raised that there has been a change from an appraisal system to a review system with regards to staff performance and the UCU has not approved this change. The UCU has concerns that this change may allow individuals to be identified on 'capability'. This has the potential to raise stress in staff who are performing well. The Committee was asked if there had been a risk assessment undertaken for this change in system and the UCU would like to ensure that this has been completed. They have

requested this, but to date have not received confirmation that a risk assessment has been conducted. The Committee agreed to confirm the status of the risk assessment.

Action: Mr T Anagboso

9.2 Due to the presentation of the Safety Strategy / Plan, Items 10 & 11 were not discussed and it was agreed that these would be carried over to the next meeting in January 2016.

10 DATES OF FURTHER MEETINGS

10.1 The Committee noted that further meetings were scheduled for:

Thursday 28 January 2016

Thursday 5 May 2016