Annual Report of the Health and Safety Executive Committee 2017

University Statutes and Ordinances require that the Health and Safety Executive Committee submit an Annual Report to the Council and the General Board.

The Health and Safety Executive Committee is a committee jointly of the Council and the General Board and the remit of the committee is to ensure the necessary management actions are taken to give effect to University health and safety policy, review the effectiveness of the University health and safety policy, receive annual reports on health and safety and receive regular summary reports from the Consultative Committee for Safety. The Committee meets termly as set down in Statutes and Ordinances.

The current membership of the committee is as follows:

The Vice-Chancellor’s deputy, Pro-Vice –Chancellor Professor Duncan Maskell, W (Chair); [Council appointments on the recommendation of the General Board] Professor Mark Blamire, HH, Dr R Sandford, CLH, Dr G Christie, PET, Chair of the Consultative Committee for Safety; co-opted members Ms J Gardner, SE. The Registrary, the Academic Secretary, the Director of Health, Safety and Regulated Facilities, the Director of Human Resources, and the Director of Estate Operations attend; Secretary: Mrs Sarah Boggie.

Introduction

This report covers the calendar year 2017. The Division of Health, Safety and Regulated Facilities, consisting of the Occupational Health and Safety Service (OHSS) and University Biomedical Services (UBS) was incorporated into the Unified Administration Service (UAS) following re-organisation in October 2015. Operational Fire Safety management is within the Facilities Management section of Estate Management (EM) while Fire Safety training administration and joint oversight of risk management is within OHSS and with the Director of Health and Safety. This report contains four sections relating to the subject divisions of ‘Health and Safety’, ‘Occupational Health’, ‘Staff Counselling’ and ‘Fire Safety’.

A Health and Safety

1. Operational Changes

The operational structure of OHSS remains unchanged subsequent to the re-organisation described above. The Safety Office and UBS completed geographical relocation to the refurbished Greenwich House accommodation at the beginning of 2016. The Staff Counselling Service relocated to refurbished space in 17 Mill Lane in August 2017.

2. Enforcement Agency Visits

2.1 A Health and Safety (HSE) Inspector, commissioned by DEFRA, made a routine visit to the Department of Plant Sciences on the 24/1/17 in relation to research using plant viruses. No compliance advice received.

2.2 An HSE Inspector visited one Department within the School of the Biological Sciences on the 7/3/17, following up on the RIDDOR of an individual case of musculoskeletal disorder in 2016. All improvements required by the HSE in connection with this case were implemented and the case was closed.
2.3 An HSE Inspector, commissioned by DEFRA, made a routine visit to the Department of Plant Sciences on the 15/3/17 in relation to research into plant metabolism. No compliance advice received.

2.4 A Counter Terrorism Security Adviser (CTSA) made a routine annual visit to the Department of Pathology on the 17/3/17 in relation to Schedule 5. No compliance advice received.

2.5 An Environment Agency (EA) Inspector and CTSA made a routine visit to departments on the University central research site on the 31/3/17 in relation to the Environmental Permitting Regulations (EPR), with one minor ‘non-compliance’ point received.

2.6 An EA Inspector made a routine visit to the Wolfson Brain Imaging Centre on the Addenbrooke’s on the 31/7/17 in relation to the EPR. Minor points were raised during the visit but no ‘non-compliance’ points were received.

2.6 An EA Inspector and CTSA made a routine visit to the Cancer Research UK, Cambridge Institute on the 10/8/17 in relation to the Environmental Permitting Regulations (EPR), with no ‘non-compliance’ point received.

2.7 An EA Inspector made a routine visit to the MRC Toxicology Unit (prior to its incorporation into the University) on the 12/10/17 in relation to the EPR, with no ‘non-compliance’ points were received.

2.8 An EA Inspector and CTSA made a routine visit to University Departments on the Addenbrooke’s site on the 28/11/17 in relation to the EPR; the report for this visit has not yet been received.

2.9 Following an application, the HSE has issued a new Specified Animal Pathogen Order (SAPO) licence. It is valid for 5 years until 1 February 2023 and it covers two SAPO2 agents being used in two University Departments.

3. Internal Auditing

3.1 Safety Management Auditing – A new programme of management audits is scheduled for 2018, whilst the subject specific audits continue to monitor compliance. A summary of audit results are submitted to the Health and Safety Executive Committee (HSEC) to enable appropriate executive action to be taken where appropriate. OHSS continues to undertake audits for Colleges on a chargeable basis with a similarly noted improvement in safety management systems in those Colleges receiving repeat audits.
3.2 Subject Specific Auditing – The schedule of these continued as in previous years, and included,

Radiation - unsealed sources – Physiology Development & Neurosciences (3 sections), CIMR, Plant Sciences, WBIC – Radiochemistry, CRUK CI, Psychology, Gurdon Institute and Biochemistry.
Colleges – Gonville & Caius, Pembroke, Magdalene, Fitzwilliam and Selwyn.
Noise: Earth Sciences, Pharmacology, Veterinary Medicine, Physics, the ADC Theatre, genetics and CIMR.
HTA – All HTA (Research) Licenced Departments undertook a desk-based audit; the data collated was provided to the Human Tissue Authority as part of its biennial questionnaire to licence holders.

4. **Health and Safety Training**

The OHSS delivered 274 training sessions/courses in 2017, including bespoke training sessions for 5,552 people in departments (which include events run specifically for Estate Management and fire safety training) and 26 courses for colleges, with a total of 389 attendees. Training for those involved with the use of human tissue in research is now provided twice a year by OHSS.

5. **Hazardous Wastes**

OHSS continued to centrally manage and operate the hazardous chemical waste service via Biffa as contractor. OHSS made 32 Low Level Radioactive Waste collections from Departments to the University radioactive waste storage facility for decay prior to collection by the waste contractor.

6. **Technical Services**

The environmental health and safety monitoring programme continues to be central to the strategy for pro-active prevention and management of both acute and chronic health conditions and to support the statutory requirements relating to occupational health.

6.1 The monitoring programme resulted in 316 reports/advice notes being produced for Departments, Institutions and Colleges in 2017, which included mercury, noise, Hand-Arm-Vibration (HAV) and Whole-Body-Vibration (WBV).

6.2 Approximately 29,000 items of electrical equipment in non-scientific departments were tested by OHSS in 2017.

6.3 In addition, 325 portable radiation monitors were tested and repaired where necessary.

6.4 The dedicated OHSS van was used to make 36 transfers of technical equipment and material for Departments.

6.5 OHSS provided dosimetry services to the Departments, reviewing all recorded doses on a monthly basis and continued to oversee the Classified Work dosimetry and related records in-accordance with legislative requirements.
6.6 OHSS maintains two Portacount machines for performing individual quantitative face fit testing for the use of Respiratory Protective Equipment (RPE), where RPE has been identified as a control measure in a risk assessment. The machines are operated by the OHSS in addition to 18 trained operators in departments across the University.

7. Accidents and Incidents

There were a total of 12 reportable accidents and incidents under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) in 2017 (14 in 2016). The figures for 2017 involved 6 staff (one whom had a reportable Occupational Disease), 1 visitor and 4 students. The one ‘Dangerous Occurrence’ involved a gas leak of sulphur dioxide from a faulty gas cylinder regulator. The figures for RIDDOR-reportable accidents and incidents, when compared to the 2016 figures, represent a decrease of 4 for staff, an increase of 3 for students, while the number involving visitors remained the same. The number of Dangerous Occurrences reported decreased by 1.
B  Occupational Health

1.  Introduction

During the reporting period the Occupational Health Service (OHS) activity continued to develop in several main areas:

- Continued increase in the complexity of cases referred for an occupational health assessment.
- Introduction of Display Screen Equipment (DSE) Assessment training for staff and post graduate students who regularly use DSE. The training provides information on how to prevent and reduce the risk of possible health problems arising from computer use and is also aimed at those responsible within departments for assisting with the DSE risk assessment process.
- Membership of the University Health and Wellbeing Sub-Group and contribution to wellbeing initiatives which has increased the demand for training sessions to be undertaken at departmental levels.

2.  Summary of OHS activity compared to last reporting period.

During the report period the OHS received 1,111 new referrals. This represented an increase of 134 (13.7%) on the previous year.

The number of referrals for psychological ill health problems has increased by 67 (25.5%) and the number of referrals for musculoskeletal ill health problems has increased by 36 (9.8%). Referrals for ‘other reasons’ which continues to include some complex physical health illnesses has increased by 36 (13.7%) (table 1).

The number of referrals for physiotherapy treatment where individuals experiencing musculoskeletal ill health symptoms that directly impacts on their work or work activities has increased by 18 (15.2%) and the number of referrals to the University Staff Counselling Service has increased by 36 (109%) (table 2).

The number of participants on the respiratory health surveillance programme (this incorporates individuals on both animal allergy and respiratory sensitiser health surveillance) has decreased by 193 (10%). The number of individuals on enhanced surveillance, which enables reported symptoms and the effect of the recommended increase in control measures [increased respiratory protective equipment] to be monitored, has increased by 67 (100%). The number of individuals referred to the Occupational Health Physician for advice regarding reported health symptoms and onward referral to a respiratory specialist for diagnostic advice has remained similar to the previous year (table 3).

The statutory health surveillance figures remain similar to the previous year (table 4).

The student health screening figures remain similar to the previous year (table 5).

The number of training sessions provided by the OHS to staff and graduate student groups on subjects ranging from general OH service provision, workplace ergonomics and mental health at work has increased by 14 sessions from the previous report period (table 6).

There has been a reduction in the appointments attended for immunisation and blood tests. This has been due to a global shortage of hepatitis B vaccine which has severely impacted UK supplies. As a result Public Health England issued temporary recommendations for the
use and prioritisation of Hepatitis B vaccines, which resulted in the suspension of all routine vaccinations in order to maintain sufficient vaccines for use for any post exposure incidents and for those workers who from a risk assessment are working with blood in a priority group.

All workers who have had their vaccination course interrupted or not yet commenced are being provided with advice on the importance of following local / departmental procedures with regards the use of universal precautions to prevent hepatitis B infection and other blood borne viruses. All workers have also been advised that in the event that an occupational exposure to human blood and / or body fluid or tissue where there could be risks of transmission is sustained, immediate advice must be sought.

Once the vaccine is available for routine use again, the OHS will arrange a catch up programme for those workers whose course has been interrupted or not yet commenced (table 7).

3. **Summary of statistics**

**Table 1: Reason for referral to the OHS by category**

<table>
<thead>
<tr>
<th>Year</th>
<th>Psychological ill health</th>
<th>Musculoskeletal disorders</th>
<th>Sickness absence</th>
<th>Performance issues</th>
<th>Other reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>251</td>
<td>262</td>
<td>36</td>
<td>10</td>
<td>209</td>
</tr>
<tr>
<td>2016</td>
<td>262</td>
<td>366</td>
<td>72</td>
<td>16</td>
<td>261</td>
</tr>
<tr>
<td>2017</td>
<td>329</td>
<td>402</td>
<td>70</td>
<td>13</td>
<td>297</td>
</tr>
</tbody>
</table>
Table 2: Referral for a specialist assessment: Number of staff referred to a physiotherapist, clinical psychologist, University counsellor or other specialist.

<table>
<thead>
<tr>
<th></th>
<th>Physio</th>
<th>Psychology</th>
<th>Counselling</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>100</td>
<td>29</td>
<td>34</td>
<td>164</td>
</tr>
<tr>
<td>2016</td>
<td>118</td>
<td>37</td>
<td>33</td>
<td>176</td>
</tr>
<tr>
<td>2017</td>
<td>136</td>
<td>45</td>
<td>69</td>
<td>163</td>
</tr>
</tbody>
</table>

Table 3: Respiratory health surveillance: Number of participants in animal allergy / respiratory sensitiser programme and those identified with significant symptoms

<table>
<thead>
<tr>
<th></th>
<th>Initial</th>
<th>Annual</th>
<th>Enhanced</th>
<th>Referral to OHP</th>
<th>Specialist referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>496</td>
<td>1450</td>
<td>98</td>
<td>54</td>
<td>15</td>
</tr>
<tr>
<td>2016</td>
<td>601</td>
<td>1395</td>
<td>67</td>
<td>40</td>
<td>9</td>
</tr>
<tr>
<td>2017</td>
<td>441</td>
<td>1295</td>
<td>134</td>
<td>36</td>
<td>8</td>
</tr>
</tbody>
</table>
Table 4: Other health surveillance: Number of participants in programme.

![Bar chart showing number of participants in different programmes by year: Audio, HAVS, Night worker, Fork Lift Truck driver, Toxic metals, Classified Radiation worker, Latex allergy.]

<table>
<thead>
<tr>
<th>Year</th>
<th>Audio</th>
<th>HAVS</th>
<th>Night worker</th>
<th>Fork Lift Truck driver</th>
<th>Toxic metals</th>
<th>Classified Radiation worker</th>
<th>Latex allergy</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>228</td>
<td>75</td>
<td>65</td>
<td>43</td>
<td>15</td>
<td>39</td>
<td>3</td>
</tr>
<tr>
<td>2016</td>
<td>221</td>
<td>77</td>
<td>81</td>
<td>47</td>
<td>15</td>
<td>40</td>
<td>3</td>
</tr>
<tr>
<td>2017</td>
<td>214</td>
<td>79</td>
<td>75</td>
<td>50</td>
<td>16</td>
<td>39</td>
<td>5</td>
</tr>
</tbody>
</table>

Table 5: Health screening: Number of participants per each programme

![Bar chart showing number of participants in different programmes by year: Medical students, Vet students, PGCE students, Research passports, On offer referrals.]

<table>
<thead>
<tr>
<th>Year</th>
<th>Medical students</th>
<th>Vet students</th>
<th>PGCE students</th>
<th>Research passports</th>
<th>On offer referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>361</td>
<td>65</td>
<td>326</td>
<td>212</td>
<td>19</td>
</tr>
<tr>
<td>2016</td>
<td>362</td>
<td>61</td>
<td>308</td>
<td>189</td>
<td>20</td>
</tr>
<tr>
<td>2017</td>
<td>412</td>
<td>86</td>
<td>303</td>
<td>208</td>
<td>18</td>
</tr>
</tbody>
</table>
Table 6:  Other occupational health activities

<table>
<thead>
<tr>
<th></th>
<th>Travel</th>
<th>Elective travel</th>
<th>Accident / Incidents</th>
<th>Ergonomic assessments</th>
<th>Training sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>49</td>
<td>142</td>
<td>26</td>
<td>113</td>
<td>12</td>
</tr>
<tr>
<td>2016</td>
<td>58</td>
<td>140</td>
<td>41</td>
<td>121</td>
<td>10</td>
</tr>
<tr>
<td>2017</td>
<td>47</td>
<td>140</td>
<td>22</td>
<td>100</td>
<td>24</td>
</tr>
</tbody>
</table>

Table 7: Immunisation and blood tests administered

<table>
<thead>
<tr>
<th>Year</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>5000</td>
</tr>
<tr>
<td>2016</td>
<td>5000</td>
</tr>
<tr>
<td>2017</td>
<td>3500</td>
</tr>
</tbody>
</table>
C Staff Counselling

Overview

The primary task of the Staff Counselling Service is to support the mental wellbeing of University staff by offering time-limited, quality Counselling and Cognitive Behavioural Therapy (CBT). We aim to provide support to staff to enable them to stay at work or, if absent, to return to work. We also offer Reflective Practice Groups, and Wellbeing groups as well as outreach training and workshops, which are designed to help improve the general wellbeing and resilience of the University’s workforce.

This autumn, we launched our brand new College staff counselling initiative, which has been well received. At the time of writing this report seventeen of the thirty one colleges have signed up in order to access our service. This is an exciting new service that is funded by the colleges and therefore income generating for the Service.

There has been an increase in demand for the services we provide, as a consequence of our raised profile, the increasing diminution of external services, the new counselling hubs, and potentially raised awareness from the Mental Health Lite training.

Our client evaluation clearly demonstrates the efficacy of the Service, including its impact on clients’ ability to work, and therefore its positive contribution to the University.

This year, for the first time, we hosted the British Association of Counselling and Psychotherapy (BACP) Special Interest Group Networking event. This was an opportunity for face-to-face meetings with other university Staff Counselling Services to meet and share best practice. The theme of the day was, “Working with Groups”.

During the past year, the Staff Counselling Service faced a number of challenges. These include:

- An increase of 33% in referrals, and a consequent increase in waiting times for clients from ten to 12 weeks. During 2017, the Staff Counselling Service received 626 new referrals, an increase from 477\(^1\) on the previous year
- Consequent increased pressure on administration and the counselling staff
- An increase in requests for outreach work and training delivery
- A shortage of counselling rooms
- Planning and implementing the re-location to new premises in order to accommodate all counsellors and to allow for an expansion of the Service
- Separation of the Staff Counselling Service from the Student Counselling Service and forming a completely independent service with appropriate supporting policies and procedures
- Producing a feasibility study on developing an income generating service to College staff, putting a case forward to recruit two half time counsellors and recruiting to the posts

Creative solutions implemented to overcome the challenges outlined above.

---

\(^1\) Note: we have changed from an academic year to a calendar year. The previous year’s referrals in academic year terms was 451 as stated in Annual Report 2015/16
Strategy and income generation

• A Deputy Head of Staff Counselling has been appointed. This has enabled the Head of Service to concentrate on strategy and planning, including the implementation of an income-generating service to College Staff
• The recruitment of two half-time counsellors to deliver a fee paying service to the Colleges
• Marketing of the Service to the Colleges
• Plans to expand fee-paying services to include training and group work
• A part-time Department Administrator/PA to the Head of Service has also been recruited as have two part-time receptionists
• In addition to the Head and Deputy Head of service, there are now seven half-time counsellors

Effectiveness

• Implementing an Initial Consultation for all new referrals so that clients are seen within three weeks. This helps to better prioritise clients since they are seen face-to-face more quickly
• Developing a Wellbeing Course for staff on the waiting list. Offering a psycho-educational and experiential programme, this aims to develop better stress management skills. This scheme is on a four week rolling programme and is popular
• Developing and changing our own training resources for PPD to target more people, thereby increasing our training sessions offered from three to nine for the same resources
• Initiating and developing hubs at both Addenbrooke’s and Greenwich House, thus making the Service accessible to new cohorts

Outreach

• Contributing a significant number of Relaxation and Mindfulness trainings to the University’s Wellbeing event
• Delivering sessions on Mindfulness and another on Alcohol Awareness to the Clinical School during their Mental Health Awareness Week
• Contributing to the Disability at Work working group, including a submission statement to be added to the Green Paper on Disability in the Workplace
• Planning and organising the relocation of the premises and closing the service for only one day, thus minimising the impact of the move on clients
• Contributing to the University Initiative ‘Breaking the Silence’, which is a campaign to raise awareness of sexual harassment and the support on offer from the Support Services
• Representing the University on the Cambridge Community Partnership

Independence

• Developing policies and procedures to support separation from the student service
• Development of our own website and promotional materials and training our staff appropriately for a stand-alone service

Plans for 2018 include:

1. Continuing to work closely with Office of Post-Doctoral Affairs (OPDA) and the Post-Doc Society to develop tailored support to staff that do not wish to come for counselling but would like to improve their wellbeing and resilience. This will probably take a similar form to the Wellbeing group initially, on a four week rolling programme, and take place in the evening
2. Continuing to work closely with Occupational Health in providing support for managers
including the delivery of half day trainings 'Stress, A Manager’s Responsibility’

3. Expanding the service offered to staff on the waiting list by offering a 4 week rolling programme on Stress and Anxiety Management Tools (based on CBT principals)

4. Collaborating with Dr Tom Mole, Psychiatrist and Academic Clinical Fellow at the Department of Psychiatry, Addenbrookes, who has developed a Mindfulness APP and is planning to run a four session Mindfulness Group for clients on the waiting list

Statistical Data

The Staff Counselling Service collects data to monitor the effects of our input to the staff group. A summary analysis of findings of the data collected is set out below.

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A great deal</td>
<td>12.20%</td>
</tr>
<tr>
<td>A bit</td>
<td>21.95%</td>
</tr>
<tr>
<td>Quite a lot</td>
<td>30.08%</td>
</tr>
<tr>
<td>Some</td>
<td>28.46%</td>
</tr>
<tr>
<td>Not at all</td>
<td>7.32%</td>
</tr>
</tbody>
</table>
Were you better able to work with the help of counselling?

- A great deal, 21.14%
- A bit, 16.26%
- Some, 22.76%
- Quite a lot, 36.59%
- Not at all, 3.25%

Source – Survey Monkey – 22% responded (127 out of 572)
Data collected from academic year 2016/17

Counselling helped me......

- Stay at work: 78.87%
- Work more effectively: 73.68%
- Resolve your difficulties: 71.43%
- Deal better with life as a whole: 91.14%

Source – Survey Monkey – 22% responded (127 out of 572)
Data collected from academic year 2016/17
D Fire Safety

1. Operational Changes

2017 presented many challenges and saw several operational changes with regards to fire safety provision.

Dr Margaret Glendenning was appointed Interim University Fire Manager after the departure of Mr Harry Percival. Both the Embedded Fire Safety Consultancy contract and the contract for Fire Safety Training provision expired on 31 July 2017. An interim 18 month contract commencing 1 August 2017 for Fire Safety Advice and Consultancy Services was procured whilst a full OJEU compliant tender is formulated. Fire Safety Training provision has been incorporated into the Fire Safety Systems Maintenance and Servicing contract with BBC Fire Protection Ltd with the exception of Departmental Fire Safety Manager training which is now carried out by the University Fire Manager and Fire Safety Adviser.

During the reporting period there was an increase in requests from across the University for fire-safety advice and information, particularly in the latter half of the year. There was greater collaboration with Estate Management Projects Section as part of the Project Engagement Process for New Builds and Refurbishments and input into the revised Design and Standards Brief.

2. Fire Safety of Clad Buildings

Following the fire on 14 June 2017 at Grenfell Tower, the Estates Facilities Section instigated an assessment of buildings upon the estate in order to give reassurance to all relevant stakeholders as to the fire safety of buildings at the University. This assessment was in line with the emergency fire safety review guidance published by the Department for Communities and Local Government and also formed part of the HEFCE information gathering exercise regarding the fire safety of buildings across higher education estates which was submitted to HEFCE on 5 July 2017.

In terms of fire safety, it was determined that the overall risk profile of the University estate remains low, for the following reasons:

1. An external BAFE accredited consultancy is employed to carry out an ongoing program of Fire Risk Assessment of buildings across the estate with findings actioned by both departments and Estate Management.
2. There are no buildings on the estate falling within a high risk category in terms of fire safety as determined by the ongoing Fire Risk Assessment program.
3. All buildings on the estate satisfy the Statutory requirements for means of escape purposes.
4. All Operational buildings operate under a simultaneous evacuation strategy. The University does not employ a ‘Stay Put’ policy.
5. All fire alarm systems within the Operational Estate are monitored 24/7 by the University Security Control Centre or an external accredited provider.
6. Life safety is ensured by way of active and passive fire safety systems where we provide an enhanced level of automatic fire detection to ensure early warning and the safe evacuation of all occupants.
3. Operational Emergencies

During the period of this report there have been six minor fire incidents which were attended by Cambridgeshire Fire and Rescue Service (CFRS).

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Department / Location</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>26/05/17</td>
<td>10:15</td>
<td>Department of Astronomy, Hoyle Building, Madingley Rise</td>
<td>Contractors carrying out hot-works on the upper roof of the lecture theatre. A small amount of smoke was observed coming from the opening for the ducts. The Contractor checked inside the lecture theatre and noted further smoke at which point Cambridgeshire Fire &amp; Rescue Service were called and the Institute informed. The Fire Service undertook a visual inspection of the area, scraped the void/riser, inspected with an IR camera and poured a small amount of water into the void. They were in attendance for approximately 1 hour after which they were satisfied that there was no fire risk.</td>
</tr>
<tr>
<td>03/07/17</td>
<td>21:03</td>
<td>University Library</td>
<td>Fire Service attended site following the failure of a capacitor unit in a switch room. Electrical supply was isolated and the area made safe. The unit concerned was a minor power-saving device.</td>
</tr>
<tr>
<td>23/07/17</td>
<td>11:35</td>
<td>Sainsbury Laboratory, Bateman Street</td>
<td>Fire Service attended site following activation of the fire alarm due to an overheating light bulb. Electrical supply was isolated and area made safe.</td>
</tr>
<tr>
<td>29/09/17</td>
<td>12:43</td>
<td>Department of Earth Sciences, Flavaill Building, Madingley Rise</td>
<td>Fire Service attended site due to a small boiler fire. Electrical and gas supply isolated and area made safe. The cause of the fire was due to the incorrect reassembly of the boiler following its service.</td>
</tr>
<tr>
<td>20/10/17</td>
<td>05:10</td>
<td>University Library</td>
<td>Fire Service attended site following activation of the fire alarm when an electrical distribution panel overheated and melted. Electrical supply was isolated and the area made safe.</td>
</tr>
<tr>
<td>23/11/17</td>
<td>09:36</td>
<td>Department of Chemistry, Lensfield Road</td>
<td>Small fire involving pyrophoric substance in a fume cupboard was extinguished with sand. Fire Service attended site and confirmed there was no residual heat.</td>
</tr>
</tbody>
</table>
A further two incidents at the Department of Chemistry on 22 January 2017 did not require direct intervention by CFRS but one of which did result in injuries to a Post-doctoral Researcher. The first incident happened at 12:15 when the individual was drying a round-bottom flask containing acetone with a butane torch. The acetone ignited and the individual sustained burns to the right side of face, ear, eye, nostril and lips. The injured person was initially treated by First Aiders from the Department before being taken to A&E by Ambulance.

The second small fire incident occurred within the same laboratory at 18:00 when a tissue was removed from a glovebox and placed in a waste bin. The tissue was contaminated with a trace amount of pyrophoric material. The fire was extinguished and the area made safe.

The Department have undertaken a full review of procedures in light of the above incidents.

4. Cambridge Fire and Rescue Service (CFRS)

During the reporting period, CFRS commenced a series of audit and compliance visits. The departments visited were deemed to be either partially or broadly compliant and all remedial actions noted were rectified. There has been no enforcement action.

5. Fire Alarm Activations

The monitoring and reporting of fire alarm activations continues to remain the responsibility of the University Security Office who liaise with Fire Safety personnel and other stakeholders as required.

<table>
<thead>
<tr>
<th></th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sept</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>18</td>
<td>18</td>
<td>17</td>
<td>15</td>
<td>21</td>
<td>31</td>
<td>50</td>
<td>44</td>
<td>39</td>
<td>35</td>
<td>34</td>
<td>19</td>
<td>341</td>
</tr>
<tr>
<td>2017</td>
<td>10</td>
<td>10</td>
<td>20</td>
<td>10</td>
<td>13</td>
<td>18</td>
<td>28</td>
<td>15</td>
<td>19</td>
<td>17</td>
<td>18</td>
<td>11</td>
<td>189</td>
</tr>
</tbody>
</table>

There has been a significant reduction in the number of fire alarm activations compared to 2016 which can be directly attributed to a greater awareness surrounding the management of contractor activities, although this still remains a challenge on major construction projects.

6. Training

The review of fire safety training provision continued in 2017. Following the initial desktop assessment carried out in the last quarter of 2016, work is ongoing on the development of a tiered system of training and information for all members of the University to ensure everyone has a basic understanding of their responsibilities and the responsibilities of others entrusted with managing fire.

As previously stated, Fire Safety Training provision has been incorporated into the Fire Safety Systems Maintenance and Servicing contract with BBC Fire Protection Ltd with the exception of Departmental Fire Safety Manager training which is now carried out by the University Fire Manager and Fire Safety Adviser. The use of E-learning to cover more than basic Fire Safety Awareness is also being explored.

During 2017 Addenbrooke’s NHS Trust continued to provide Fire Safety Awareness training for all embedded third party staff.
7. **Fire Risk Assessments**

CS Todd & Associates have continued to make excellent progress across the Estate and further to the events of June 2017, have incorporated an assessment of external fire spread across the surface of the building on clad buildings into the fire risk assessment. The significant findings of the fire risk assessments continue to relate primarily to damaged fire precautions (fire doors) and general management issues (housekeeping, testing of fire safety systems, co-ordination of fire safety management within multi-occupied departments).

The frequency of fire risk assessments is currently being evaluated according to a risk profiling matrix. Moving forward this will ensure that the fire risk assessment process is reflective of the fire safety risks presented by not only the activities undertaken within a building but also the level of fire safety management.

During the reporting period, the fire risk assessment review process has been augmented by the completion of a Departmental Operational Fire Risk Audit as part of the review.

8. **Fire Safety Systems Maintenance**

The contract with BBC Fire Protection Ltd to carry out scheduled and reactive maintenance to all fire safety systems upon the operational estate is now in its second year. The contract is performing well with all contract KPI's being met. The contract has allowed Estate Management to improve co-ordination of planned and reactive works on various systems to ensure the University remains legally compliant.

9. **Legislation**

There is no new Fire Safety Legislation to report.

The University continues to meet its legal obligation under the current Regulatory Reform (Fire Safety) Order.