Annual Report of the Health and Safety Executive Committee 2018

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 and Professor David Cardwell, F (Chair); [Council appointments on the recommendation of the General Board] Professor Mark Blamire, HH, Dr R Sandford, CLH, Dr R M Henderson, EM; 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 and Dee Vincent.

Introduction

This report covers the calendar year 2018. This report contains four sections relating to the subject divisions of ‘Health and Safety’, ‘Occupational Health’, ‘Staff Counselling’ and ‘Fire Safety’. 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.

A Health and Safety

1. Operational Changes

   The operational structure of OHSS remains unchanged. There has been a re-organisation of the Safety Office with the retirement of two long-serving senior members of staff. The re-organisation has provided opportunity for promotion of current staff and recruitment opportunities in support of the auditing and biological compliance sections.

2. Enforcement Agency Visits

   2.1 There were 14 pro-active visits to University departments in 2018 from the Health and Safety Executive (HSE), Environment Agency (EA), Animal and Plant Health Agency (APHA) and Counter Terrorist Security Advisers (CTSA). Only minor issues were raised in each case.

3. Internal Auditing

   3.1 Safety Management Auditing – A new programme of management audits is scheduled for 2019, whilst the subject specific audits (3.2 below) continue to monitor compliance throughout the year. 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:

- **X-ray** – Hutchison MRC, Physics and Veterinary Medicine.
- **Laser safety** – Applied Mathematics & Theoretical Physics, Chemical Engineering & Biotechnology, Chemistry, Engineering and Material Sciences & Metallurgy.
- **Hazardous Chemical Waste**: Physics, Chemistry, Chemical Engineering & Biotechnology and Materials Science & Metallurgy.
- **Noise**: Earth Sciences, Pharmacology, Veterinary Medicine, Physics, the ADC Theatre, genetics and CIMR.
- **Human Tissue Act** – 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.
- **Colleges** – Gonville & Caius, Pembroke, Magdalene, Fitzwilliam and Selwyn.

4. Health and Safety Training

The OHSS delivered 305 training sessions/courses in 2018, including bespoke training sessions for 6,167 people in departments (which include events run specifically for Estate Management and Fire Safety training) and 30 courses for colleges, with a total of 408 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 220 reports/advice notes being produced for departments, Institutions and Colleges in 2018, 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 2018.

6.3 In addition, 329 portable radiation monitors were tested and repaired where necessary.

6.4 OHSS provided radioactive 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 2018 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.

The Safety Office is in the process of procuring an online accident and incident reporting system to enable a simplified and improved collection and analysis of data, saving staff time in the collation and reporting of this information to the Consultative Committee for Safety and Health and Safety Executive Committee, together with enhanced processes for following up on these incidents and proactively responding to ‘near-misses’.

8. Review of Buildings and Estate Safety Compliance

The University estate consists of approximately 360 buildings, ranging in age, size and complexity. The maintenance of building infrastructure, including oversight of statutory compliance is by the Division of Estate Management, with some aspects of monitoring and testing devolved to Departmental level. An independent consultant led review of building safety compliance was commissioned by Estate Management in 2017/18, looking at ten buildings as a representation of the estate. This revealed that although significant time and resource is expended in ensuring buildings remain safe to use and occupy, centralised systems of oversight, accountability and subsequent planning and prioritising were in certain cases insufficient and/or inadequate. Due to the size and complexity of the University estate and the nature of the regulatory frameworks associated with building safety, HSEC agreed to the creation of an Extraordinary HSEC to focus solely on this area of compliance. The Extraordinary HSEC, which has met on a frequent basis to receive updates and assurances on the progress of an enhanced programme of building safety testing, monitoring, maintenance and recording. This work continues, with ongoing development of centralised processes and procedures
designed to provide all necessary assurances to HSEC that the University estate and buildings remain safe and compliant. It is emphasised that at no point during this work has there been any question that buildings currently in use on the University Estate are unsafe to occupy.

B Occupational Health

1. Overview

The Occupational Health Service (OHS) team comprises of specialist medical and clinical staff as well as administrative support. The team provide a service to University staff, including post graduate / research staff and some undergraduate student groups, i.e. medical, veterinary and PGCE (teaching) students. The OHS supports the University in meeting its statutory requirements under health, safety and employment law and focuses on the prevention of ill health and the promotion of health and wellbeing at work.

During the reporting period the OHS has:

- Increased the Occupational Health Physician time from three to four days a week to support the ongoing rise in the complexity of cases (including ill health retirements) referred to occupational health for assessment and advice.
- Successfully recruited an OH Adviser to an existing vacant position which has enabled the service to increase the amount of available clinic appointments. The OHS currently provide 30 clinics per week for all appointments including referrals, student screening, health surveillance, occupational vaccination programmes and work related travel health advice.
- From Michaelmas 2018, the number of clinical students has increased from circa 180 to 280/year group, and on the graduate course from 2019 from 21 to 41. Consequently there is an increase in numbers of clinical students accessing the OHS. Subsequently, there has been a review of internal processes to accommodate these changes which impact on both clinical and administrative resources.
- Introduced a physiotherapy survey via qualtrix to review the impact this support provision has on staff who are reporting musculo-skeletal health symptoms associated with their work.
- Continued membership of University committees that have a direct impact on the health, safety and wellbeing of University staff and students.

As a result of an increase in general work demands, requests for training have been prioritised during the report period. This enabled the OHS to start to provide additional ‘Introduction to Display Screen Equipment (DSE) Assessment training’ sessions currently run though the OHSS training provision.

Proposals for 2019

As part of a drive to work proactively to address the workplace health risks that result in referral to the OHS we plan to develop in the following areas:

- Continue to prioritise training requests to accommodate the increase in demand for DSE training to be provided within departments as they seek to address the
health risks associated with computer work and demonstrate compliance in accordance with the University DSE policy.

- Introduction of an electronic system for completing the DSE self-assessment risk assessment form online.
- Set up and lead on an Ergonomic working group with colleagues from the Safety Office and safety representatives/laboratory staff from across the University to review and update the University guidance and processes with respect to musculoskeletal health symptoms in relation to hazards within the workplace.
- Review and update the OHS website and expand the information with regards to musculo-skeletal health issues.
- Review and update the available information on the management of stress and mental health to promote and encourage completion of the individual stress identification tool for all staff referred to the OHS for advice regarding work related stress. This will provide staff an opportunity to discuss the problems they are experiencing with their manager from the beginning and consider measures to address these as soon as possible.
- Introduction of a survey to review the impact the Clinical Psychology support provision has on staff who are referred to this service.

Continue to work collaboratively with the Safety Office and Staff Counselling Service to provide advice and support to managers and staff with regards to health related workplace issues.

2. **Summary of OHS activity for the report period**

During the report period the OHS received an average of 17 new referrals per week. The cases being referred and seen within the service are increasing in complexity which involves considerable additional work activity outside of the clinic schedules e.g., case reviews with senior OH staff and physicians, onward referral to multidisciplinary therapeutic practitioners, liaising with departments/HR and other medical providers. This additional work activity is not reflected in the statistics reported below.

During the report period 9,785 clinic appointments were booked. Of these booked appointments 1,018 failed to attend or cancelled too late (DNA) for the appointment to be re-used which impacts on appointment availability. To try and address this issue, one week before the appointment all staff with email are routinely sent an appointment reminder. In addition to this, administrative processes for DNA’s have been reviewed and an appointment cancellation list is operated, providing an opportunity to bring appointments forward when cancellations are received.

Psychological ill health and musculoskeletal health issues continue to be the main reason for referrals to OH for advice (table 1).

The referrals for a specialist assessment remains similar to the previous year. The referral to ‘other specialist’ comprises mainly of an onward referral to the University Assistive Technology Service and Disability Resource Centre ‘Loan Pool’ for support and trial of ergonomic equipment following assessment of a musculo-skeletal health issue where workplace modifications and/or adaptations to equipment is recommended (table 2).
Staff who experience musculo-skeletal health symptoms where there is a work component to an injury or ill health problem can be referred for a physiotherapy assessment and where indicated short-term treatment. The physiotherapy survey undertaken during the report period achieved a 69% response rate. On average staff attend four to five treatment appointments. From the responses received:

- 82% reported they considered their health symptoms were work related
- 74% reported the physiotherapy helped them to stay at work
- 52% reported returning to work earlier
- 83% reported working more effectively

The number of participants on the respiratory health surveillance programme (this incorporates individuals on both animal allergy and respiratory sensitiser health surveillance) remains similar to the previous year (table 3). Face fit mask testing is undertaken by the OHS for staff and students with known allergies to the hazard working with and those reporting allergy symptoms in relation to their work exposure. For all other staff who work with this hazard, face fit testing is undertaken locally by departments.

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

The medical student health screening undertaken has increased by 55% which is due to the changes within the training programme reported above. The remaining health screening programme figures remain similar to the previous year (table 5).

The number of appointments attended by medical students for advice regarding their overseas travel for their elective placement as part of their studies has increased by 21%. During these assessments advice regarding vaccine and non-vaccine related health risks in line with Public Health England guidance is discussed and where indicated from the risk assessment travel vaccines administered. The number of ergonomic assessments undertaken by the OHS has decreased by 36%. This is likely to be the result of more assessments being undertaken by departments before referrals to the OHS are made, following the introduction of the Display Screen Equipment training in 2017 (table 6).

The global shortage of hepatitis B vaccine continued until July 2018, which is reflected in the reduction of appointments attended for immunisation and blood tests. A catch up programme has commenced for those workers whose course was interrupted or not commenced as a result of the shortage (table 7).
3. Summary of statistics

Table 1: Reason for referral to the OHS by category

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<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
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<tbody>
<tr>
<td>Psychological ill health</td>
<td>262</td>
<td>329</td>
<td>303</td>
</tr>
<tr>
<td>Musculoskeletal disorders</td>
<td>366</td>
<td>402</td>
<td>348</td>
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<tr>
<td>Sickness absence</td>
<td>72</td>
<td>70</td>
<td>25</td>
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<tr>
<td>Performance issues</td>
<td>16</td>
<td>13</td>
<td>6</td>
</tr>
<tr>
<td>Other reasons</td>
<td>261</td>
<td>297</td>
<td>187</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 3: Respiratory health surveillance: Number of participants in animal allergy / respiratory sensitisrer programme and those identified with significant symptoms
Table 4: Other health surveillance: Number of participants in programme.

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
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</thead>
<tbody>
<tr>
<td>Audio</td>
<td>221</td>
<td>214</td>
<td>218</td>
</tr>
<tr>
<td>HAVS</td>
<td>77</td>
<td>79</td>
<td>81</td>
</tr>
<tr>
<td>Night worker</td>
<td>81</td>
<td>75</td>
<td>89</td>
</tr>
<tr>
<td>Fork Lift Truck driver</td>
<td>47</td>
<td>50</td>
<td>55</td>
</tr>
<tr>
<td>Toxic metals</td>
<td>15</td>
<td>16</td>
<td>10</td>
</tr>
<tr>
<td>Classified Radiation worker</td>
<td>40</td>
<td>39</td>
<td>41</td>
</tr>
<tr>
<td>Latex allergy</td>
<td>3</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Cat 3 Screen</td>
<td>7</td>
<td>8</td>
<td>7</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
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<tbody>
<tr>
<td>Medical students</td>
<td>362</td>
<td>412</td>
<td>641</td>
</tr>
<tr>
<td>Vet students</td>
<td>61</td>
<td>86</td>
<td>74</td>
</tr>
<tr>
<td>PGCE students</td>
<td>308</td>
<td>303</td>
<td>309</td>
</tr>
<tr>
<td>Research passports</td>
<td>189</td>
<td>208</td>
<td>217</td>
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<tr>
<td>OHF29 - Job Hazard forms</td>
<td>497</td>
<td>552</td>
<td>499</td>
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</table>
Table 6: Other occupational health activities

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>58</td>
<td>47</td>
<td>44</td>
</tr>
<tr>
<td>Elective travel</td>
<td>140</td>
<td>140</td>
<td>170</td>
</tr>
<tr>
<td>Accident / Incidents</td>
<td>41</td>
<td>22</td>
<td>27</td>
</tr>
<tr>
<td>Ergonomic assessments</td>
<td>121</td>
<td>100</td>
<td>64</td>
</tr>
<tr>
<td>Training sessions</td>
<td>10</td>
<td>24</td>
<td>25</td>
</tr>
</tbody>
</table>

Table 7: Immunisation and blood tests administered

[Bar chart showing immunisation and blood tests administered from 2016 to 2018]
C Staff Counselling Service

Introduction

The Staff Counselling Service (SCS) plays a significant role in supporting the mental health of the University’s workforce, made possible by the University’s investment in the psychological wellbeing of its staff.

The SCS core function is to help clients either remain in work, or if absent through sickness, to return to work. Improvements in mental health have a positive impact on the effectiveness of employees. Evidence of this is provided by the feedback received via Survey Monkey (charts below). The continuing increase in referrals to SCS resulted in two additional staff counselling posts being appointed at the end of the year.

In August 2017, SCS relocated to 17 Mill Lane. The move enabled the development of a separate identity from the Student Counselling Service (still currently referred to as the University Counselling Service), with the work of the two services differing in their focus and application as it pertains to the needs of staff and students, which has in turn raised awareness of the psychological wellbeing provision dedicated specifically to staff.

In addition to core work, SCS staff are undertaking two innovative projects; the first involves a collaboration with the Rand Corporation (Europe), to research the prevalence of mental ill health amongst the Postdoctoral community – an often difficult to access cohort. As part of this joint venture, the SCS are planning to offer an on-line wellbeing provision, with the aim that this will be of benefit both within the Service and to the wider University in the longer term.

Secondly, a National conference on Autism is planned for 2019. SCS has secured a prominent guest speaker for this event.

Referrals

Since 2016 there has been an increase in referrals of 49%, from 451 per year to 673 per year. In total 5,578 appointments were attended during 2018.

Most clients, 64.9%, self-referred, while Occupational Health and Human Resources together referred 18%. Self-referrals reflect both the trust that staff have in the service, and their acknowledgement of their mental health difficulties. In addition, local GP’s signpost staff both because of our positive reputation and the diminution of NHS provision and associated longer waiting times.

The majority of referrals are from Assistant Staff who make up 37% of the total, followed by Postdocs Researchers and Academic Related staff at 34%.

The gender split is 66% female and 33% male, and 1% identifying as either transgender or ‘other’.

Waiting Times and Complexity of Cases

SCS have continued to triage clients by offering an initial consultation with the average waiting time for a first appointment approximately 2 weeks. Triaging enables SCS to both prioritise and manage risk more effectively. The average waiting time for ongoing counselling is currently 11 weeks. SCS has now interviewed and appointed two new
counselling posts effective January 2019; with the expectation that waiting times will reduce accordingly.

Following their initial consultation, clients have access to two group therapies; ‘Wellbeing, Psycho-Educational Group’ and one focusing on managing anxiety. These are run weekly for four sessions. These groups help staff manage during their waiting time and also provide valuable skills and understanding. Feedback is excellent. During 2018, 24% of referrals, 166 clients, attended a group.

‘It was great! I went to all the sessions offered. The meditation practice broke up my day and helped me cope at work’

SCS have seen an increasing number of serious and complex cases designated as “clients of concern”. Eighty-seven (13%) of clients this year were considered to be in this category. This would include, for example, disclosure of suicidal ideation or self-harm, domestic abuse/sexual violence, PTSD, or relate to child protection issues. Such presentations require counselling staff to make careful judgements about the best way forward therapeutically, and to liaise with external agencies such as GP’s or Social Care. This requires a greater investment of time for all staff.

Information sharing is a delicate process. SCS must work in compliance with the Data Protection Act (2018) and the Ethical Framework of the British Association of Counselling and Psychotherapy (BACP), to which the service adheres.

Although the effects of the uncertainty surrounding Brexit is anecdotal, it is the experience of counselling staff that it has had, and will continue to have a significant effect on the mental health of staff of all nationalities, creating greater anxiety about the uncertainty of the future.

Colleges

During 2017, SCS began to offer a fee-paying provision to Colleges, who hitherto had no access to our facilities. In 2018, SCS appointed two 50% FTE counsellors to develop and deliver this service. To date, 25 colleges have signed up their staff to access both counselling and mental health workshops. The service is proving popular, with 35 referrals and the delivery of 5 workshops during this first year.

‘The counselling service has been invaluable to our College and I want to take this opportunity of thanking you all for the support and guidance to our staff members’.

Training and Outreach

There are an increasing number of requests for the Service to provide training sessions for departments, which have been highly valued and effective, but the need for counselling limits staff capacity to meet the demand. However, SCS offer a number of lunch time sessions on relaxation and managing stress and contributes to the Festival of Wellbeing programme. These form part of the WellCAM initiative.

The Head of the Staff Counselling Service, Michelle Reynolds, in collaboration with the Head of the Occupational Health Service, provide two half day training sessions a year on Stress, a Manager’s Responsibility. In addition SCS offers Reflective Practice Groups to Departmental Advisors, Human Resources Assistants, The Mediation Service and Dignity at Work staff.
During this time of increased demand on the SCS, workload is at times relentless and stressful in itself. It is essential that the training and support needs of SCS staff is considered. In response, SCS is providing various Continuing Professional Development opportunities during the year, including new initiatives to further develop the skills of staff in Cognitive Behavioural Therapy (CBT). This has proved both popular and cost effective, and it is proposed to extend this to all staff during 2019.

**Accountability**

SCS is an organisational member of the BACP and adheres to its Code of Ethics. In 2018, an external audit of SCS was undertaken to ensure compliance with this Code of Ethics with a positive outcome, with all necessary follow up action now completed. SCS also plans to achieve BACP accreditation for its codes of practice for operational processes of the BACP.

The BACP has a division dedicated to counselling services in universities and colleges, which produces its own journal. The Service has successfully submitted three articles to this journal, one of which has been published, with two currently awaiting publication.

**Future Programme**

- SCS has now outgrown its allocated space at 17 Mill Lane, which is currently limiting service provision. Following the Student Counselling Service move from Lensfield Road at the end of Lent term 2019, it is proposed to return to that building after essential repairs are completed. This will alleviate the current shortage of rooms and enable further development of the service, expanding the team by recruiting Associate Counsellors - qualified counsellors who require additional clinical hours to apply for accredited status. The experience SCS can offer Associates will make a positive contribution to the quality of training of the next generation of counsellors and thus to the profession in general.

- The joint research project with the Rand Corporation is subject to approval by the Ethics committee and a successful funding application. It is planned to commence during 2019.

- The SCS inaugural conference *Autism in the Therapy Room* is scheduled for the end of Easter term, with expectations of an interesting and informative day with a prominent keynote speaker, Professor Francesca Happé, who was recently ranked in the top 10 most productive and highly cited authors on Autism research worldwide. Her research is on female presentation of Autism. It is anticipated that the conference will be cost neutral and provide additional training to SCS counselling staff.

- It is proposed to develop and expand the chargeable work with Colleges, which has proven to be highly valued by staff and management.
To what extent did any of the issues which you brought to counselling interfere with your capacity to work?

Were you better able to work with the help of counselling?

Counselling helped me…

Source – Survey Monkey – 29.8 % responded (200 out of 673)
D  Fire Safety

1. Operational Update

The interim 18 month contract for Fire Safety Advice and Consultancy Services with City Fire Safety has been extended for a further 18 months, and will now run until August 2020. This extension will ensure the University has a competent embedded fire safety resource, while a contract is procured for the longer term.

2. Fire Safety of Clad Buildings

Following the work to provide reassurance to the University after the Grenfell Tower Fire in June 2017, it was established that the risk across the University was low. As an extra precaution an assessment of external fire spread across the surface of the building on clad buildings has been incorporated into standard University fire risk assessment, carried out by C.S. Todd & Associates.

We continue to monitor the work of the public inquiry into the Grenfell Fire. The second phase of the inquiry, which will deal with causes of the fire, is not scheduled to begin hearing evidence until early 2020. It is therefore not anticipated that there will be any outcomes from the inquiry for some time.

3. Operational Emergencies

During the period of this report there have been three 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>27/05/18</td>
<td>1423</td>
<td>David Attenborough Building, New Museums Site</td>
<td>A pot containing cooking oil left unattended by in the Whale Café Kitchen, by the chef and ignited. The chef extinguished the fire using a tea towel. The Fire Service attended and confirmed the area was safe.</td>
</tr>
<tr>
<td>13/07/18</td>
<td>1256</td>
<td>Electrical Engineering Building, West Cambridge Site</td>
<td>The Fire Service attended site following activation of the fire alarm and confirmation from staff on site of an actual fire. The fire started in a chemical scrubber and was extinguished by the Fire Service and the area was made safe.</td>
</tr>
<tr>
<td>29/10/18</td>
<td>1113</td>
<td>University Library</td>
<td>The Fire Service attended site following activation of the fire alarm when the motor in a ventilation air handling unit seized and generated smoke. The electrical supply was isolated and the area made safe.</td>
</tr>
</tbody>
</table>
4. **Cambridge Fire and Rescue Service (CFRS)**

During the reporting period, CFRS carried out two audit and compliance visits under the Regulatory Reform (Fire Safety) Order 2005. The buildings visited were The Judge Business School and Keynes House and both were found to be satisfactory. There has been no enforcement action during 2018.

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>
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<th>Jun</th>
<th>Jul</th>
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<td>19</td>
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<td>194</td>
</tr>
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</table>

The number of fire alarm activations remained similar to those in 2017, shows the efforts to raise awareness to control unwanted activations as a result of contractor activities have continued to be effective.

6. **Training**

BBC Fire Protection Ltd continue to provide fire safety training under their Fire Safety Systems Maintenance and Servicing contract with the University.

In 2018 they carried out

- 26 Fire Warden Courses
- 32 Fire Safety Awareness Courses
- 16 Use of Fire Extinguisher Courses

Departmental Fire Safety Manager training is now carried out by Fire Safety Adviser, with one course being run every month.

Online fire safety training is available to University staff and students to supplement classroom teaching.

During 2018 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. 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 third 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.