



8 May 2018, 1415, The Syndicate Room, The Old Schools

Present: Dr G Christie (Chair), Dr M Vinnell (Secretary),
Dr A Clarke, Ms S Crowe, Ms A Eccles, Mr M Elsdon, Ms S Foreman,
Dr A Gilliland, Dr M Glendenning, Mr J Hulme, Dr K Tibbles, Dr R Turner,
Dr M Wills and Ms L Yates.

In attendance: Mrs S Boggie.

Items for Report

1 Apologies for absence

Apologies received from Mr J Harding and Dr G Martell.

2 Minutes

The minutes of the meeting held on 20 February 2018 had been circulated with the agenda. Two typos were noted, the minutes were agreed and signed.

3 Matters arising from the Minutes

There were no matters arising.

4 Report from the Occupational Health Service

The Committee received the report.

5 Report of the Sub-committee for Ionising and Non-Ionising Radiations

The Committee received the report.

Ms Yates provided further details regarding an incident involving mobile X ray equipment without the necessary safety equipment. The Safety Office have followed up this incident with the department and further guidance and training has been/will be provided to ensure this type of incident does not re-occur.

The Safety Office has also been notified by the HSE that there will be a series of proactive laser inspections and a plan to visit the University later this year; the expectation will be that lasers should be enclosed as far as practicable and that any open beams will require robust justification.

6 Report of the Sub-committee for Chemical Safety

The Committee received the report.

The continuing implementation of the chemical inventory program was noted. However, some departments, whilst acknowledging that they require an inventory, are reporting difficulties in assigning the resource in all areas to enter the data and maintain their inventory records. It was noted that those Departments that have fully embraced the inventory system are finding it straight forward and useful. Further training will be provided by the company who provide this product and departments are reminded that it is for all staff to input and use the system rather than one or two technicians to be tasked with setting it up.

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7 **Report of the Sub-committee for Biological Safety**

The Committee received the report.

Dr Gilliland reported on the UoC project work being undertaken at Stevenage Bioscience Catalyst (SBC); the UoC lease at the SBC came to an end as of 07/05/2018 and has been taken over by the University of Hertfordshire and will form the basis of a type of 'academic hub', where other Universities may occupy space. The University of Cambridge will continue to occupy some of this lab space on this basis. UoC's staff will be expected to work to UoC safe working practices and will continue to use the same GM centre number.

Also presented to this meeting an EM Water Safety Update. Ms Foreman informed the Committee that whilst there remain a significant number of Log Books to issue, EM has secured additional staff to support EM in managing Water Safety, namely, Arthur Norbury (University Water Safety Adviser) who will introduce Log Books to users, provide on-site support to departments and advise on Water Safety issues as required, and; Alison Kemp (Data Co-ordinator) to provide administrative support for the production of Log Books/Written Schemes. As a result, the projected Q1 2019 target for issuing all remaining Log Books was realistic and achievable. Ms Foreman agreed to provide a brief summary to this Committee on the programme for this work being undertaken.

Action: Ms Foreman to provide a brief summary to this Committee on the programme for this work being undertaken.

Post meeting note: There are a significant number of Log Books ready for issue and where possible, these are batched for delivery where multiple buildings fall under a single department. A template has been developed to speed up the creation of the Log Books and where required, external parties will be used to produce these as and when required to keep pace. However, this is dependent upon the prompt delivery of the assessments by the consultants in order that the Log Books can be created.

Dr Turner enquired about the reduced counts in Chemistry.

Action: Ms Foreman to seek clarification on the cause for improvement.

Post meeting note: The reduced counts are as a result of improved water temperatures following de-scaling of the various water heaters which has improved heat transfer.

8 **Report of the Sub-committee for Physical Safety**

The Committee received the report.

Mrs Eccles reported on the cryogenic pipework report undertaken at the Department of Chemistry, Bureau Veritas confirmed that the pipework should have a written scheme of examination. This will cause a problem for Chemistry as a written scheme cannot be issued until a map of all the pipework throughout the building has been produced, and it is known that some pipework runs in 'crawl ways' that contain asbestos and can only be entered by specialist contractors to assess them, therefore producing such a plan could be expensive in this situation. Now we have a definitive answer on the requirement for a written scheme of examination for such pipework, other departments that use such gases will also need to comply if not already doing so. To assess the current situation across the Estate the Safety Office will send a short survey to departments that use cryogenic house gases to confirm the type of pipework that is installed, if a comprehensive up to date schematic plan for such pipework exists and if there is a written scheme of examination.



Due to the number of musculoskeletal referrals it has been agreed to setup a working group to look into producing a standard risk assessment form for musculoskeletal disorders.

PI training this one hour training session provided by the Director of Health and Safety is currently not mandatory; some departments are very good at requesting attendance by their staff, however there are still some departments where attendance is poor.

This Committee is asking HSEC to consider making PI training mandatory.

Action: HSEC to consider mandatory training request.

9 **Report of the Sub-committee for Fire Safety Compliance**

The Committee received the report.

Further to the report, Dr Glendenning provided additional details surrounding the review of Fire Risk Assessments (FRAs). Upon awarding the contract to CS Todd & Associates, it was agreed that in the first instance, all fire risk assessments would have a 3 year review date set unless there was anything identified during the risk assessment which would require an earlier review date. Dr Glendenning reiterated that the FRAs are live documents and as such are required to be regularly reviewed in order to ensure their validity is maintained. On the front of these documents there is a suggested date of review by the University, primarily annually by the department which corresponds with completion of the DOFRA, and a suggested date for specialist review by CS Todd & Associates or equivalent. Dr Glendenning stressed that under the Regulatory Reform (Fire Safety) Order 2005, the FRA does not expire unless there is reason to suspect that it is no longer valid due to change of use or where significant structural changes are made to the building, whereby it would then be deemed necessary to conduct a new FRA. The Regulatory Reform (Fire Safety) Order 2005 requires FRAs to be kept under review.

The FRAs have associated action plans containing items requiring remediation. Each item is assigned a priority and suggested timescale for completion. Dr Glendenning discussed examples of items which could not be completed until time of refurbishment and reiterated the fact that not all items are able to be finalised.

Dr Christie noted the term 'tolerable' with regards to risk of life from fire. Dr Glendenning explained that this terminology, whilst not necessarily comforting, is the terminology contained within PAS 79:2012 which details the approved guidance and recommended methodology for undertaking fire risk assessments. It was agreed that some form of explanation of the terminology used would be helpful and Dr Glendenning agreed to add this to the Fire Safety webpages.

Action: Dr Glendenning to add common terminology page to the fire Safety webpage.

Dr Glendenning highlighted that a position statement is still required with regard to the condition of the fire safety systems and landlord responsibilities for the embedded accommodation at Addenbrooke's. Due to the lack of progress the Director of Estate Strategy will be contacted for confirmation of this issue.

Action: Dr Matthews to provide update re SLA discussions with Addenbrooke's.



Dr Glendenning updated the committee on the provision of fire safety training. BBC Fire Protection Ltd have now commenced the delivery of Fire Warden, Fire Safety Awareness and Use of Fire Extinguisher training packages. Dates for the remainder of the 2017/18 academic year and also the 2018/19 academic year have been agreed. Dr Glendenning and Mr Marsh will continue to deliver departmental Fire Manager training and bespoke Fire Warden, Fire Safety Awareness and Evacuation Chair training packages. The intention is that more training is delivered to departments within their own premises to improve uptake and relevance.

Dr Glendenning also discussed the development of fire escape plans across the estate. These plans are to assist departments in managing their own escape routes and evacuation plans. Dr Glendenning will contact C S Todd & Associates to ask if this can be included in the current contract or if this is to be a separate project.

10 Report of the Sub-committee on Accessibility

The Committee received the report.

From the first meeting of this new Sub-committee the items from the meeting were noted with more details to be provided at the next meeting. Dr Glendenning (as a member of the Sub-committee) noted that she found the meeting useful and has contacts for progressing PEEPs.

11 Health and Safety Executive Committee

The Committee received the minutes of the meeting held on 7 March 2018.

The Secretary noted that HSEC continues to meet 3 times a year; there are a number of extraordinary HSEC meetings that are currently looking at issues identified by a Deloitte's audit which will not be reported at standing HSEC and CCFS meetings.

12 The Health and Safety Executive and other Enforcement Agencies

The Secretary noted 6 visits:

one visit from the Health & Safety Executive following a RIDDOR reported Occupational Disease regarding DSE – documentation and discussion with staff (including Union members) confirmed standards being met and good practices in place;

two visits from the Counter Terrorism Security Advisers – routine inspections relating to Environmental Permitting Regulations; and

three visits from the Animal & Plant Health Agency (APHA) two of which were annual routine inspections of existing plant pathogen work; and one was regarding new work to be undertaken.

Post-meeting note: missed off the list, and therefore noted here – in April there was a routine annual visit by the APHA.

13 Codes of Practice/Guidance and Other information

The new and updated publications were noted.

14 Joint Union Safety Committee

Mr Smith had submitted concerns regarding work-related stress. It has been noted that there has been a lot of work regarding wellbeing however it was suggested that there are still a large number of staff suffering work-related stress. The Secretary reported that the University sickness absence records indicated that we are equal or less than other



academic institutions. Those suffering work-related stress are asked to complete a stress assessment tool which is normally successful in measuring what triggers individuals stress. As this tool is currently used only as a reactive tool the Secretary will contact HR Division to promote this as a proactive tool.

Action: the Secretary to contact HR Division.

Ms Crowe asked if some information on musculoskeletal disorders could be reported in the OH report provided to this Committee.

Action: OH to include musculoskeletal information in report.

Items for Discussion

15 Accidents and Incidents.

The Committee noted the accidents for the period February 2018 – April 2018. No further information had been requested.

16 Any Other Business

1. Draft Health & Safety Policy attached, provide comments by 11 May.
The Secretary noted the delay in this new Policy being signed as the V-C wished to sign the document as a whole rather than signing the Policy and then having the second part updated. The one change to the Policy is that it now includes wellbeing. The committee discussed if further clarification of post-docs was required but it was agreed that they are members of staff and are therefore included within the text. Any further comments can be sent to the Secretary by 11 May.
2. Minor changes to CCFS Statutes & Ordinances, approved on 27 April.
The changes to the regulations in Statutes & Ordinance notes that CCFS 'shall establish such standing Sub-committees as it deems necessary'; as previously each of the Sub-committees was individually listed.

17 Date of the next meeting

The date of the next meeting will be Tuesday 20 November 2018 at 1415 in the Syndicate Room, The Old Schools.

Future meetings: 19 February and 14 May 2019, 1415 in the Syndicate Room, The Old Schools.