




Health and Safety Annual Report 2021–22

Outcome requested:	Audit and Risk Committee is asked to consider the Health and Safety Annual Report relating to academic year 2021–22.
Executive Summary:	<p>[a] This report reviews the delivery of the University’s Health and Safety Policy and the operational management of health and safety risks during 2021–22, as well as outlining plans for the year ahead. It includes a comprehensive update on the following areas:</p> <ul style="list-style-type: none"> • the governance and management of health and safety; • high hazard health and safety risks; • operational health and safety; • health and safety objectives for 2022–23. <p>[b] The first part of the reporting year saw the Health and Safety Directorate focus much of its time on COVID mitigations, working collegiately to ensure a safe study and working environment. Following the change in government guidance in April 2022, which involved learning to live with the coronavirus, the Directorate pivoted to address wider health and safety activities. This was not without challenges. Whilst in-person inspections and auditing could resume, the retention of departmental staff with health and safety responsibilities was a noticeable issue across faculties. This was addressed by working with area managers to support and drive safety co-ordination and deliver targeted training for staff to build the requisite skills.</p> <p>[c] In the latter part of the reporting period, the Directorate stepped up its drive for wider health and safety compliance, assisting Estates colleagues to improve and evidence their water systems and asbestos management records. Much progress has been made in this area and a HSE inspection visit in June 2022 acknowledged this. This focus remains with a review of contractor management across all campuses and a drive to standardise and improve the safety aspects of contractors accessing and working on our campuses.</p> <p>[d] Another area impacted by technical skills shortages and the inability to access buildings during COVID was our fire risk assessment programme. This has been overcome through use of a third party to complete assessments where needed. We now enter the new reporting period with a clear risk-based programme for the delivery of the fire risk assessment portfolio.</p> <p>[e] The Directorate has set ambitious objectives moving forward, key amongst them being the implementation of new statutory fire safety regulations and work on laser and chemical safety. However, the Directorate is pleased to be getting back to</p>

	managing and advising on all health and safety risks in the vibrant, post-pandemic Queen Mary community environment.
Alignment with QMUL Strategy	Providing a safe study and working environment
Internal/External regulatory/statutory reference points:	Health and Safety at Work Act 1974 Management of Health and Safety at Work Regulations 1999 Associated workplace health and safety legislation
Strategic Risks:	Health and safety compliance
Equality Impact Assessment:	No equality issues are raised in this report
Subject to Prior and Onward Consideration by:	<p>Prior to consideration by Audit and Risk Committee, the report was circulated to the Health and Safety Advisory Group for comment, and considered and approved by the Senior Executive Team. Comments from Health and Safety Advisory Group members focused on:</p> <ul style="list-style-type: none"> • health and safety governance for professional services areas (it was clarified that, for services based in faculties, the reporting line is through the Health and Safety Management Group for the relevant faculty, and for central services, including the Library, the reporting line is through the Estates and Facilities Health and Safety Management Group); • wellbeing and occupational health (it was clarified that this lies outside the scope of the report); • requests for more detailed information on regulatory visits, infrastructure and fire safety (this will be provided and discussed at the next Health and Safety Advisory Group meeting on 15 November). <p>The report will be considered by Council on 17 November.</p>
Confidential paper under FOIA/DPA:	No
Timing:	This is an annual report
Author(s):	Rebecca Jones, Director of Health and Safety
Date:	04 November 2022
SET Sponsor(s):	Professor Colin Bailey, President and Principal Jonathan Morgan, Chief Governance Officer and University Secretary

Health and Safety Annual Report

To offer context to the health & safety assessment of risk and controls detailed in the annual report the relevant section of the strategic risk register is shown below (Sept 2022):-

<p>16. Compliance</p> <p>SET Owner CGO</p> <p>COO</p>	<p>i. Health and Safety</p> <p>Failure to show a duty of care towards students, staff and visitors regarding their health and safety. Caused by an ineffective compliance culture and health and safety controls. Leading to harm to one or more individuals, potentially resulting in litigation, fines and reputational damage.</p>	<p>The University has no appetite for risking the health and safety of students, staff and visitors and will fully obey the Health and Safety at Work Act 1974 and the Management of Health and Safety Regulations 1999. A stronger compliance culture is being established through more effective leadership, training and escalation pathways.</p> <p>Risk Tolerance = 5</p>	<p>Current Controls:</p> <p>i. Linked and aligned hierarchy of governance [A, Q3 2023]</p> <p>ii. Appropriate H&S training in place for staff [A, Q3 2023]</p> <p>iii. Single platform for H&S auditing to evidence compliance [A, Q3 2023]</p> <p>iv. Effective management of radiation, biological, lasers and genetically modified sources [A, Q3 2023]</p> <p>v. Control of chemicals / solvents & compressed gases [A, Q3 2023]</p> <p>vi. Compliant infrastructure across estate buildings in regards to Fire, Asbestos, Legionella, Pressure Systems, Lifting Equipment, Local Exhaust Ventilation and Electricity [A, Q4 2022]</p> <p>vii. Effective Contractor Management [A, Q3 2023]</p> <p>viii. Tracking of staff working overseas / field working [A, Q4 2022]</p> <p>ix. Measures to ensure the safety of lone working staff [A, Q4 2022]</p> <p>x. Embedding and sustaining health and safety culture [A, Q4 2022]</p>	<p>Impact: 5 Likelihood: 4</p> <p>Score: 20</p>	<p>Impact: 4 Likelihood: 1</p> <p>Score: 4</p> <p style="text-align: center;"></p>	<p>Impact: 4 Likelihood: 1</p> <p>Score: 4</p> <p>Target Date: Q3 2021 (met)</p>
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Introduction

This report covers the period 1st August 2021 to 31st July 2022 and gives details of the health & safety management system within Queen Mary. It provides a summary of the Queen Mary University's delivery of its Health & Safety policy and operational management of risks during the period as well as outlining plans for the year ahead. This report also includes an update of the wellbeing strategy and actions through the period.

The first part of the reporting period still focussed a proportion of the Health & Safety Directorate's (HSD) time on COVID mitigations and working with colleagues across the University to ensure a safe working environment and updating the institutional risk assessment and associated procedures. This once again saw HSD responding rapidly to changing government advice as well as supporting the facilitation of the on-site vaccination centre. The Graduation Ceremony at Tobacco Dock in January 2022 was a great example of cross collegial working and proportionate risk management during COVID. The event was a terrific success, despite plans constantly having to change and be dynamically assessed as the national COVID infection rates grew with the emergence of Omicron as the event was entering its final stages.

In April 2022 the UK government moved to a strategy which involved learning to live with the virus in everyday life and issued Living safely with respiratory infections, including COVID-19 whereby the University moved away from a single institutional risk assessment for COVID and advised that it be considered and assessed in the same way as other communicable diseases (such as seasonal flu). The University continues to follow the guidance in the government publication to ensure good ventilation in indoor spaces and personal hygiene facilities are in place.

As well as the fuller return to campus and face to face activities the hybrid ways of working for Professional Services staff was also instigated in this reporting period. The opening of Department W saw many of the Professional Services teams relocate to the newly refurbished building. Central to this was ensuring colleagues could safely use the space and have access to emergency arrangements should they be required e.g., first aid, and safe fire evacuation. This was achieved with collaboration across HSD with key stakeholders and operational Estates & Facilities (EAF) teams.

The most significant Capital Project commenced during the reporting period has been the addition of two new floors to the Mile End library and significant refurbishment of the lower floors. HSD faced a significant health and safety challenge to support the project whilst allowing continued safe access to library services. A priority was the management of noise and other disruptive construction activities so as to retain an environment conducive for study.

1. Governance / Management of Health & Safety

In the reporting period a new Health & Safety Science & Engineering Adviser joined the team. This has had a positive impact upon planned inspections and chemical waste disposal process.

In addition, there has been a successful recruitment of a new Senior Fire Safety Adviser who joined the team in August 2022. This post has been vacant for some time despite a number of recruitment drives, the technical specialism required for the role along with the impact of Grenfell has meant a huge demand for these specialist skills across the UK. A Fire Safety Adviser role still remains vacant. This role predominantly carries out fire risk assessments therefore an external provider was procured to ensure the fire risk assessment programme has remained on track during the reporting period. Moving forwards the Director has supported the Fire Safety Manager in prioritising the tasks of the Senior Adviser to ensure there remains no compliance slippage.

The Director has an established governance interface, and escalation point, with the Senior Executive Team (SET) through frequent meetings with the Chief Governance Officer and via direct communication with the Principal should it be necessary to escalate or brief on any health & safety issue. On the departure of the Student Academic Services Director in April of this year the Director of HSD has taken on the role of Queen Mary University point of contact with the UK Health Security Agency (formerly Public Health England).

HSD also provides a number of specialist functions including biological, chemical, laser safety and fire safety advice.

1.1 Health & Safety Advisory Group (HSAG) & Management Sub Groups

The following H&S Management Groups met once a semester during the reporting period with their minutes presented formally at HSAG:

- Science and Engineering Health and Safety Management Group
- School of Medicine and Dentistry Health and Safety Management Group
- Humanities and Social Sciences Health and Safety Management Group
- Estates & Facilities Strategic Health & Safety Management Group
- Fire Safety Management Group
- Biological and Genetic Modification Safety Committee
- Radiation Protection Safety Committee

Committees had attendance from recognised local staff Trade Unions and the Student Union body in line with Safety Representatives & Safety Committees Regulations 1977. HSAG met regularly throughout the reporting period to ensure effective H&S consultation.

1.2 Health & Safety Legislative updates which may impact Queen Mary Fire Safety Act 2021

The Fire Safety Act amends the Regulatory Reform (Fire Safety) Order 2005 (FSO). It clarifies that the responsible person (RP) for multi-occupied residential buildings must manage and reduce the risk of fire for the structure and external walls of the building. A fire risk assessment prioritisation tool has been produced to support the RP to prioritise their buildings for an updated fire risk assessment.

The Fire Safety (England) Regulations 2022

These Regulations have been introduced as an important step towards implementing the recommendations of the Grenfell Tower Inquiry Phase 1 report. The Regulations are being introduced under Article 24 of the Fire Safety Order and will come into force in January 2023. Most of the requirements set out in the Regulations are imposed on the RP, requiring RPs in multi-occupied residential buildings to take specific actions, depending on the height of the building.

The Building Safety Bill

This Bill is currently being considered by Parliament and will provide an even stronger more robust legislative framework which will improve building safety overall and strengthen the FSO.

These changes are being closely monitored by the Fire Safety Strategy Group, which is Chaired by the Associate Director for Engineering & Estates Management. In light of the Fire Safety Act, discussions to ensure fire risk assessments are reviewed to include more detailed information about building structure, external walls and flat entrance doors have started.

Personal Protective Equipment (PPE) Regulations 1992 Amendment

From April 2022 employers' duties to provide PPE was extended to workers with a casual employment relationship (limb (b) workers). Workers will be required to use the PPE properly, following training, and instruction from their employer. The duty otherwise remains the same, i.e.: - PPE is a last resort if the hazard cannot be eliminated or isolated.

Allergen Labelling

Changes to the requirements around allergen labelling of food came into force from 1st October 2021. PPDS food will have to clearly display the name of the food and the full ingredients list, with allergenic ingredients emphasised (for example in bold, italics or a different colour). PPDS is food which is packaged at the same place it is offered or sold to consumers and is in this packaging before it is ordered or selected. It can include food that consumers select themselves (e.g. from a display unit), as well as products kept behind a counter and some food sold at mobile or temporary outlets. Free online allergen training is available for businesses through the Food Standards Agency website to help them meet these requirements. Queen Mary University food outlets producing packaged items have implemented these changes to their labelling.

1.3 Regulatory visits/responsibilities

Sept 2021: - A delay in radioactive waste disposal (thereby breaching permit time limit) due to Radiation Protection Officer sudden illness absence, was notified to the Environmental Agency in Sep 2021, subsequently cover arrangements by HSD and a procedure has been put in place in line with EA guidance.

Sept 2021: - The London Fire Brigade visited Fielden and France House, the visits were prompted by their ongoing programme of monitoring residential buildings with external cladding and programmed inspections. There was no informal or formal action taken, just goodwill advice given. No further visits have taken place following this.

Dec 2021: - An Environment Agency Inspector conducted a scheduled remote inspection covering all ionising radiation work and facilities across the three main campuses. Two inspection reports were issued one for open-source work and one for sealed source work. Neither report identified any permit non-compliances; however, 6 actions were identified along with further recommendations to improve monitoring system, records and internal checks. The specific actions were all addressed by July 2022 and the responses provided to the EA Inspector have been deemed satisfactory. The additional recommendations are to be checked by the Inspector on their next scheduled inspection. Work is progressing by the Radiation Protection Officer (RPO) based in HSD and Radiation Protection Supervisors (RPS) based in Schools and Institutes, along with advice from the Radiation Protection Adviser (RPA) external consultant, to complete all recommendations.

June 2022: - The Health & Safety Executive carried out an inspection to review the asbestos management arrangements at the University. The inspection involved the Directors of HSD and EAF alongside the University Asbestos Manager and TU colleagues. The visit resulted in no formal action. The HSE made

some recommendations relating to improvements to access asbestos information for users of University buildings, the need for asbestos awareness training to be provided to any remaining staff undertaking work on the fabric of the building, and the need to update asbestos records following remedial works to improve consistency throughout the estate. Following further email communication in early August with the Asbestos Manager to confirm the progress being made the inspector confirmed the inspection “did not highlight any major shortcomings in asbestos management” and wished the University well with making its further improvements. The status of these improvements is monitored through the EAF strategic H&S Group chaired by the Director of Estates & Facilities.

1.4 Wellbeing

During academic year 2020/2021 the University established a new Wellbeing and Mental Health Steering Group with refreshed terms of reference. This Group is the Senior University Group with strategic oversight of wellbeing and mental health matters. During the current reporting period the Group reviewed the available frameworks for the assessment of mental health and wellbeing and agreed that the University should work towards the University Mental Health Charter.

This Charter takes a whole-university approach to mental health and wellbeing, and its application has the potential to lead to a range of positive outcomes across our University community, enabling all students and staff to thrive. The Wellbeing and Mental Health Steering Group has overseen the completion of an external gap analysis to provide an overview of Queen Mary University’s current position in relation to this Charter. The work involved a desk top review of information undertaken against each level of the Charter Domains, augmented by discussions with key members of staff across a range of staff and student support functions, and representatives from the Students’ Union. The gap analysis identified multiple examples of excellence in provision and an extensive scope of support offered at Queen Mary across both students and staff. It also made recommendations of areas for further development and suggested a prioritised approach to addressing these. Using these findings, work will take place this academic year to produce a strategy and action plan for mental health and wellbeing.

During this academic year we have also delivered workshops for managers to develop their ability to support staff wellbeing together with workshops for all-staff covering mental health awareness and supporting personal wellbeing. In addition, we have maintained and developed our staff wellbeing website and promoted the wellbeing content on LinkedIn learning – to date there have been 100 resources accessed on wellbeing subjects including mental health, resilience and mindfulness.

In the forthcoming academic year (2022/23) we will be establishing a group to review workload and workload allocation in partnership with our Trade Unions, working to identify and progress actions that may support factors including wellbeing at work.

2022/23 will also see an increase in focus on the menopause with work to raise awareness about the menopause, enable conversations within our community, foster a menopause friendly culture and provide information about the support options that are currently available at Queen Mary.

2. High Hazard Health & Safety Risks

This section focuses on the high-hazard health & safety risks facing the University as classified by HSD’s knowledge-based assessment and updates the annual report of 2020/2021. The effective management of these specific risks is important due to the nature of the hazards and the potential harm impact they could have. The likelihood of an incident occurring may be low but the impact if it does occur would have high consequences when we are considering hazards such as radiation, biological release, chemical spill or outbreak of fire.

Working with many of the hazards outlined in this section involves the granting of a permit/licence. Any significant breach of this can result in it being removed temporarily or permanently by the regulator, as well as the risk of fines and prosecution. The knock-on effect of this could be a loss of permission for research and a subsequent loss of funding and grants / publications as well as reputational damage.

2.1 Ionising and non-ionising radiation safety management

The Environmental Agency permits for open source and low hazard sealed source work on the three main campuses were renewed by HSD on behalf of the University. Annual radiation pollution returns to the Environment Agency were also submitted early 2022 by the HSD Radiation Protection Officer (RPO). Activities with radioactive substances have now returned to pre-pandemic levels.

One new radiation risk assessment was reviewed and approved during the reporting period. The Radiation Protection Adviser (RPA) and RPO have provided guidance on new sealed radioactive sources and x-ray generating equipment across Queen Mary in Physics, Engineering, Blizzard, and Dentistry so new resources for both clinical and non-clinical research and teaching are enabled with documented safety and protective measures in place.

Internal radiation area inspections led by the RPA were delayed due to work on the response to Environment Agency actions as noted in 1.3; the inspections have been now scheduled in for the autumn semester this year. Local area Radiation Protection Supervisors (RPS) continue to provide reports to the Radiation Protection Safety Committee to ensure necessary protection measures are continuing.

No exposure incidents or dose investigation notices involving ionising radiation were reported during this reporting period; however, a historical intact open source (tritium, with activity origin year of 1999 but not accounted for in the Queen Mary radiation inventory) was discovered in an archive freezer in the Fogg building. This did not breach the EA permit limits on activity or time and has now been disposed. A search for any remaining stocks was conducted and there was no release of contamination to the vicinity.

The RPA team and RPO provided a refresher RPS Training Course in March 2022 ensuring existing RPSs at Queen Mary remain qualified. Three Ionising radiation user courses were also conducted which covered open, sealed sources and x-rays. Attendees on all courses provided high levels of satisfaction feedback.

The decommissioning process for the radiation lab bay in the Blizzard building was completed. The surrender of the remaining Environment Agency permit for open-source work on the Whitechapel campus is being drafted for submission this year.

The decommissioning process for a mothballed radiation lab in the Fogg building has continued with a final clean of a few residual contaminated items required until background counts are reached. This is anticipated to complete with an RPA report early this autumn. This will release valuable lab space to the department concerned for refurbishment and future use for other research / teaching purposes.

In relation to electromagnetic fields generating equipment (non-ionising radiation), the management of Lasers system established by HSD last year for the registration and risk assessment of lasers continues to be rolled out across the University. Registration of all laser devices at Mile End is now completed with the exception of EECS. Previous information provided around Faculty Medicine & Dentistry (FMD) equipment was incorrectly categorised by the users and the Laser Safety Adviser has now identified a considerable numbers of Class 3B and 4 devices to be reviewed. This work is underway in FMD with the support of HSD, who have acknowledged that there is a low likelihood of an incident occurring meanwhile as these lasers are being managed well with local controls.

The Health & Safety website has been updated to outline the clear requirements and process for purchase, registration and use of lasers at Queen Mary with templates available detailing the required paperwork. A Laser Safety Awareness Course is being launched in autumn 2022.

A new Laser laboratory is under construction in SEMS (due August 2022) and this will allow equipment to be relocated from multiple areas into one facility. This process will also result in a redesign of experimental setups for researchers.

2.2 Biological (pathogen and other biohazards) and GMO safety management

Twenty-nine new or significant amendment risk assessments for pathogen and GMO work were peer reviewed, classified and approved in four Biological and Genetic Modification Safety Committee meetings held during this year. Of these risk assessments, twenty-three were of higher hazard level and involved new regulatory notifications or updates.

The pathogen risk assessments included those covering monkeypox, measles vaccine strain and dengue. The monkeypox and dengue HSE notifications were completed with assistance from the Biological Safety Adviser, measles virus notification is also currently being drafted.

The Biological Safety Adviser has provided consultancy GM risk assessment review and premises inspection service to The London Clinic who are involved in gene therapy clinical trials with Barts Health Trust and Queen Mary University consortium.

HSD has continued to support maintenance and statutory compliance testing of safety cabinet and ventilation systems at Containment Level 3; six monthly programmed integrated shut down periods have been instigated by the Head of Blizzard Lab Management and Fogg Building Manager to ensure all relevant stakeholders are informed and work is conducted quickly and efficiently to avoid any prolonged down time.

The contract for clinical waste disposal was put out to tender in June 2022. After a robust tender process, the contract was awarded to Stericycle. Stericycle's bid was not only the best in terms of pricing but included many innovative sustainability strategies. One example is the emptying, sterilising and reusing of sharps bins. Rather than incinerating a sharps bin they can now be used up to 70 times before needing to be replaced, cutting down significantly on single use plastics. In addition, the wastebins will be uplifted and replaced each time (rather than waste decanted manually to a van) reducing the likelihood of an accidental release should a waste bag split or a sharps bin seal fail. HSD have developed a robust waste segregation education programme for the labs to be rolled out in line with the new contract commencing November 2022. This new contract should reduce costs, prevent fines and penalties for non-compliance and increase safety and sustainability.

A review of the health surveillance management procedures is ongoing with OH Works with a database system being drafted to improve accuracy of user data and appointment recall system. A new stand-alone health surveillance policy was drafted and issued by HSD along with a number of health surveillance and emergency procedural documents for pathogen deliberate work & communicable disease outbreaks (e.g. blood borne viruses, tuberculosis, and monkeypox).

The Biological Safety Adviser has had significant input into an e-learning training module for the NHS on gene therapy ('gene therapy medicinal products') on an initiative led by Cell and Gene Therapy Catapult under the UK Government's current strategy to increase life sciences quality and output in the UK. The module content is currently being reviewed by the relevant Board and is to be issued to the NHS e-learning platform later this year.

2.3 Hazardous substance safety (chemicals, solvents, compressed gases, cryogenics)

Work is continuing with regard to our chemical holdings and a phased disposal of chemical waste has progressed well through the 2021/22 reporting year. There are still challenges around inventories, the control of purchases and storage facilities but these vary within the Schools/Institutes and Directorates as well as a reluctance and resistance to dispose of old materials.

A review of our Chemical waste contractor was undertaken and discussions held with an alternative provider, it has concluded that at the current time we are obtaining a competitive price and there are no reported issues in management processes or attendance on site. We will retain the alternative supplier as for specialist disposals (e.g. pyrophoric materials) where the incumbent is unable to process these.

HSD are driving changes to the solvent waste process and the introduction of UN approved Fluorinated HDPE containers as standard. Currently procurement issues around this are being addressed and it is hoped that roll out will commence in 2022/2023.

Work has started on identifying all fixed laboratory gas systems and manifolds within Queen Mary, these are often overlooked but require inclusion under statutory inspections for Pressure Systems. Working with EAF colleagues, BOC have undertaken an all-site survey with a view to creating a contract with BOC OnStream for the preparation of Written Schemes of Examinations, annual inspections, drop tests and remedial works to replace failed or time expired components. It is anticipated that this contract will sit alongside the existing arrangements around cylinder delivery, regulator checks and cryogenic products.

2.4 Infrastructure and safety in the built environment

Asbestos

Over the reporting period Estates & Facilities (EAF) have worked to reduce the extent of asbestos containing materials across the Queen Mary estate, either through liaison with Capital Projects or through asbestos initiated works. Further developments in the asbestos management programme in conjunction with the verbal recommendations made at the HSE visit in June include: -

- Remedial works project for Plot C has been successfully awarded and initiated.
- A 3-year asbestos remediation plan has been produced following completion of the updated management surveys, this plan is in the process of being implemented.
- The asbestos budget has been allocated and ring fenced within LTM allowing for better allocation of funds and resources to manage asbestos and action the 3-year asbestos remediation plan.
- New EAF software to house the electronic asbestos register has been approved and a 3-year licence has been purchased. A project has been implemented to populate this software.
- Training has been completed for several EAF staff in asbestos awareness and for relevant staff who hold asbestos management responsibilities.

Legionella

EAF have continued with their 2-year rolling programme for legionella risk assessments across all buildings. HSD have facilitated a joint approach to water risk assessment involving EAF, specialist assessor, site contractor, and three schools. This has provided a more comprehensive review and improved ownership of findings. Further developments over the reporting period include: -

- Approval for new software to house the electronic water logbooks and purchase of a 3-year licence. A project has been implemented to populate this software. It is planned for the first campus to be live by the end of October.
- Training has been completed for relevant EAF staff for awareness and responsible persons.
- Additional works have taken place in the Engineering building to assist in reducing the legionella risk in line with the Authorising Engineer's requirements

Other Statutory Compliance

The Head of Estates Health & Safety has reported that the statutory compliance figures for the reporting period remain good, in excess of 90% (figure provided Sept 2022). In order to monitor compliance EAF have set up a compliance group which meets every 2 months to review incidents, reports, and issues. This group sits in addition to the EAF H&S group.

- The statutory LOLER and PSSR inspections by Zurich Insurance have continued with reports issued through the crimson system, with recommended actions completed by respective contractors.
- BTU have now been in contract with Queen Mary University for over 24 months and have completed service works to all HVAC equipment in line with SFG20 and F-Gas for all HVAC plant across all sites.
- Following an EAF/HSD review of the current Permit to Work system EAF are now looking to automate with an e-permit system and also improve how they manage contractors on site. To achieve this a task and finish group has been established and a new position of Permit Supervisor recruited to. The aim is to create a uniform approach to contractor management across campuses.
- Work is to be undertaken by EAF on investigating the ongoing air handling and local exhaust ventilation in the Joseph Priestley building and establish a remedial plan. The management of LEV is still an area of concern, but work is ongoing to address the gaps in record keeping and testing as required under COSHH Regulations. The inclusion of all these systems in the new insurance provider's statutory programme (live from August 2022) alongside a structured EAF system should address these concerns.

Capital Projects

During the reporting period there were no accidents or incidents reported on Queen Mary University capital project sites. These areas continue to be audited every two weeks by the EAF Project Health & Safety Officer and the results show a safety compliance score in excess of 90% (figure provided by Head of Estates Health & Safety Sept 2022) The main areas of concern related to the use of personal protective equipment by operatives which were quickly resolved. As part of the larger piece of work mentioned above

on contractor management a review of Queen Mary site rules is currently taking place with a view to becoming more stringent with penalties placed upon operatives and companies who fail to adhere to them.

2.5 Fire Safety

Fire Activations

There were 153 fire alarm activations during the reporting period (See Appendix 3). The three key influences on fire alarm activations in residential buildings includes shower/steam, cooking and unknown/other. The three key influences on fire alarm activations in non-residential buildings includes accidental, dust/vapour/experiment and unknown/other.

Fire Investigations

There were 3 fire related incidents which prompted further investigation during the reporting period, no injuries were sustained. The London Fire Brigade did not attend any of the incidents.

- Engineering - Believed to have been caused by an electrical failure on a modified engine assembly. The Fire Safety Manager reviewed this with the students involved in the project to identify the cause and to also strengthen the existing fire safety control measures in place.
- Residencies - Two incidents caused by failures or inappropriate use of toasters which caused the plastic casing to melt. Due to the close proximity of the incidents, it was decided to seek an alternative toaster with additional safety features. All toasters have subsequently been replaced.

Fire Risk Assessments

Fifty-three fire risk assessments have been carried out during this reporting period, these were completed by a combination of the Queen Mary Fire Safety Team and an appointed third-party contractor. It was necessary to appoint a third-party contractor due to the challenges that have been faced in the recruitment of a Senior Fire Safety Advisor. We have also developed a risk based three-year programme for the delivery of the fire risk assessment portfolio.

Fire Safety Training

Fire Safety training is available for delivery in various formats to ensure the training is accessible to everyone. The Fire Awareness training was revised and published in October 2021 and is primarily delivered via QMPlus. The Fire Marshal training is mainly delivered in-person, it was revised and published in November 2021 we have 100 live Fire Marshals who have completed this new training.

The Fire Safety Manager has also been working closely with the Housing and Residential teams to develop fire safety resources which includes a bespoke video on fire safety that all students watch before they are given keys to their accommodation and a Fire Safety Awareness module on QMPlus which specifically looks at fire safety issues in our Residential Accommodation.

Fire Progress Works

1. The PV panels have not yet been removed from the Fogg Building; Capital Projects have scheduled for removal once contractors commence the works.
2. The fire safety team have been involved in advising and working with stakeholders on projects over the reporting period including: -

<u>Mile End</u>	Library Extension, Arts One Cinema, School of Business Management
<u>CHSQ</u>	John Vance Science Centre Legacy Project
<u>Whitechapel</u>	Garrod Building

The team continues to work closely with Estates and specialist contractors for Fire Detection & Alarm systems, Electrical & Emergency Lighting and Passive Fire Protection. The aim is to address fire safety issues with a pragmatic and risk-based approach to ensure that time and resources are allocated with a focus on higher-risk areas in the first instance. This in turn should reduce false alarm activations caused by projects and planned/reactive maintenance works.

3. Operational Health & Safety

3.1 Training Programme

During this reporting period, a total of 2774 delegates were trained by HSD across 19 different health and safety training courses (Appendix 1). The majority of these courses were delivered via in-person face to face teaching.

The University is in the process of procuring a new Learning Management System (LMS) which will be used by all areas of the University and will provide a single platform for staff training. HSD are part of the team who developed the system specification and were engaged in the tender process.

The reporting period has seen HSD offer a great deal of support to EAF to assist them in updating their H&S training matrix. The output allows more accurate reporting of training compliance and improved targeting of H&S training where there is an identified competency need.

The reporting period 2021/22 saw the continuation of the return to face-to-face training, which has been well received with numbers higher than ever. However, the pandemic did lead to many courses being transferred to online learning and virtual training courses, and where these courses have been regarded as providing better learning outcomes, which includes access to the course, these have continued to be developed and enhanced on these new platforms. The development of existing courses for these modes of delivery will continue into 2022/23 where appropriate.

Some areas of training could only be delivered face to face e.g., first aid training, and great strides have been made to ensure existing first aiders get refreshers within the required training periods, as well as supporting training for new first aiders.

New general courses developed include a new risk assessment course, which is a practical course which includes evaluation of risk assessments and an exploration of cases studies where risk assessments have not been successful in preventing accidents and how we can learn from this. This was developed collaboratively within the HSD team and supports the University online risk assessment platform, with an assessed knowledge check. It was very well received in a pilot delivery and is now a scheduled face to face course on the training calendar for 2022/23.

3.2 Audit & Inspection Programme

Audits

The following audits were undertaken during the reporting period:

Contractor Management (Maintenance). An audit was undertaken which considered the health and safety systems in place when engaging with contractors for the purposes of maintenance activities. Interviews were held with a range of employees within the Estates and Facilities Maintenance Team as well as representatives within Schools and Institutes. Key findings included the need to improve general communication in relation to upcoming works, developing more robust systems for accessing lab areas to undertake maintenance works, and reviewing processes around running cables and new services. Following the audit, EAF have confirmed they are taking the decision to review the whole process for managing contractors. This will include employing a Permit to Work Supervisor and developing new systems and procedures (as mentioned in 2.4 of this report).

The Centre of Commercial Law Studies H&S Management System Audit. Key recommendations included developing a staff handbook where they can locate all relevant H&S information, developing a process to ensure placement hosts have adequate controls in place to protect students, and to invite an EAF representative to attend their H&S Committee meetings.

The School of Business and Management H&S Management System Audit. The audit report is in the process of being finalised and fed back to the school.

Outstanding actions for the H&S Management System audits continue to be proactively monitored by the H&S Audit Lead as well as through the Faculty H&S Group Committees.

Since the H&S audit programme began in December 2017, a total of 502 actions have been identified which can be broken down into 90 high, 264 medium and 148 low priority actions. As of September 2022, there were 64 outstanding actions which could be broken down into 2 high, 30 medium and 32 low priority

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items. These figures are linked specifically to the H&S Management System audits undertaken and do not include the topic-based ones, such as Contractor Management.

A summary of the outstanding high priority actions identified in the H&S Management System audits is provided below: -

School / Institute / Directorate	Recommendation
School of Physical and Chemical Sciences	Priority should be given to the relocation of the large volume Liquid Nitrogen Dewar on the 4th floor of the Fogg Building. In the meantime, ensure the oxygen detector is checked daily for faults, continue to test it weekly and service it every 6 months. <i>**This is due to be resolved as part of the legacy project for the Fogg Building and local arrangements are in place to manage this until the works are complete**</i>
School of Politics and International Relations	It is recommended that the School reviews its fire marshal provision to ensure there is sufficient cover when other fire marshals are on leave or not in the building. <i>**Two staff members identified as additional cover, due to attend fire marshal courses autumn 2022**</i>

Eco Campus HSD supported the Sustainability team with input into the applications and audit process for the Eco Campus Platinum and ISO 14001:2015 EMS certificate awarded to Queen Mary this April.

QM Bio Consultancy HSD Manager (FMD) and Fire Safety Manager continue to provide consultancy H&S and fire safety tailored advice, safety governance assistance and safety assurance checks to QMBio Ltd according to an agreed contract. Of note, advice was given on the development and project completion of the Queen Mary Enterprise Zone in the QMI building, an incoming tenant hazard assessment for fire safety and laboratory safety for human challenge clinical trials.

Inspections

The inspection programme continued across all Schools/Institutes and Directorates. Snagging inspections were also conducted after Capital Project refurbishments at Charterhouse Square. HSD also carried out detailed reviews of the compliance records in EAF for asbestos management, legionnaire control and control of contractors to provide feedback to improve overall effectiveness of their systems.

3.3 Accidents & Incidents

During the reporting period there were 404 reported accidents/incidents including 11 RIDDOR incidents (Appendix 2).

3.4 Improving Safety Culture

From the links HSD has made with the Joint Research Management Office and by publicising the fieldwork and offsite working policy, there has been a noticeable increase in the number of students and staff contacting HSD for advice and support around their H&S research risk assessments. This indicates positive steps are being taken and that Schools and Institutes are developing more robust systems to manage those working offsite.

Following the introduction of the Student Placement Health and Safety Policy in the reporting period HSD have received positive engagement from Schools and Departments offering external placements to students. The policy and guidance document includes three key tools: a risk assessment, a risk profiling table and a placement agreement form. HSD worked closely with Schools to adapt the tools within the policy document to suit their needs. Following feedback from these areas and an increase in the number of queries regarding student placements, a crib sheet for Placement Officers has also been developed to support these staff members with setting up regular contact methods with students and when briefing them prior to their placement. HSD will continue to support Schools, Institutes and Directorates in the implementation of health and safety arrangements for student placements to continue to build on this positive level of engagement.

Over the year the Faculty of Medicine & Dentistry Institutes have shown a large improvement to risk assessment coverage and quality and H&S training uptake (as shown by recent inspection data). The Institutes have improved compressed gas delivery systems by re-locating more cylinders outside buildings, enclosing within fire-resistant cabinets or finding safer alternatives such as gas generators.

A new Technical Facilities Manager has been appointed In the School of Physical and Chemical Sciences and work is underway to develop a team of knowledgeable professional staff to lead the way forward in managing labs and providing advice and guidance to those who use them. A change in culture has been witnessed within the School driven by the Heads of Chemistry and Physics who have ensured all staff are aware of their health & safety roles and responsibilities.

A Faculty working group led by Sci & Eng Technical Resource Manager and the Sci & Eng HSD Manager was established to look at standardising the approach to out of hours and lone working on instruction from the Vice Principal (Sci & Eng). This involved School managers and safety coordinators from each area and led to the development of an agreed policy which has been approved by S&E Faculty Executive and has now progressed to the implementation phase, further discussions are planned at local level to design internal systems to manage the process and the project execution.

4. Objectives for 2022/2023

The objectives set below will allow us to continue to proactively manage health and safety risks, develop safety culture and training and respond to legislative updates to ensure robust compliance.

Health & Safety compliance

- Work with Schools and Institutes to improve the segregating of hazardous waste.
- Continue to support improvements on chemical storage and handling. This is being addressed where possible through minor works and projects but there are still gaps as highlighted in recent fire risk assessments. Further work is needed with the Schools on minimising holdings and ensuring appropriate storage and signage is in place.
- Work with OH and BSUs to improve the compliance system for laboratory animal allergen health surveillance.
- Support the contractor management and permit to work process development in EAF.
- Continue to work with colleagues within EAF to improve the maintenance and statutory testing of required items e.g. LEV, Pressure systems and lifting equipment.
- Promote the need (at University level) for an effective system for the purchase of hazardous chemicals and equipment. On inspections it is often noted that equipment and chemicals are purchased from outside of the UK/EU without due diligence and with missing certification and unmarked. Chemicals can arrive without safety data sheets and the appropriate hazard classification; this lack of information then results in poor risk assessment and a potential exposure to hazardous materials.
- Further support is required to address laser management within FMD and the appointment of Laser Safety officer(s) within the Faculty.

Training and competence

- The University will be introducing a new learning management system, HSD will need to integrate its training programmes into this new system, building on our input during 2021/22.
- One of the new courses to be launched will enable users to implement a recognised safety management system into their areas of work and responsibility. This will build on the current IOSH Managing Safely course and will also form the basis for shorter courses on specific areas of safety management e.g., accident and incident investigation.

Health & Safety Auditing

- Undertake H&S Management Systems Audits for Wolfson Institute of Population Health, IT Services, School of English and Drama and School of History.

Fire Safety

- Fire alarm activation reduction
- Implementation of Fire Safety (England) Regulations 2022
- Implementation of Building Safety Act 2022

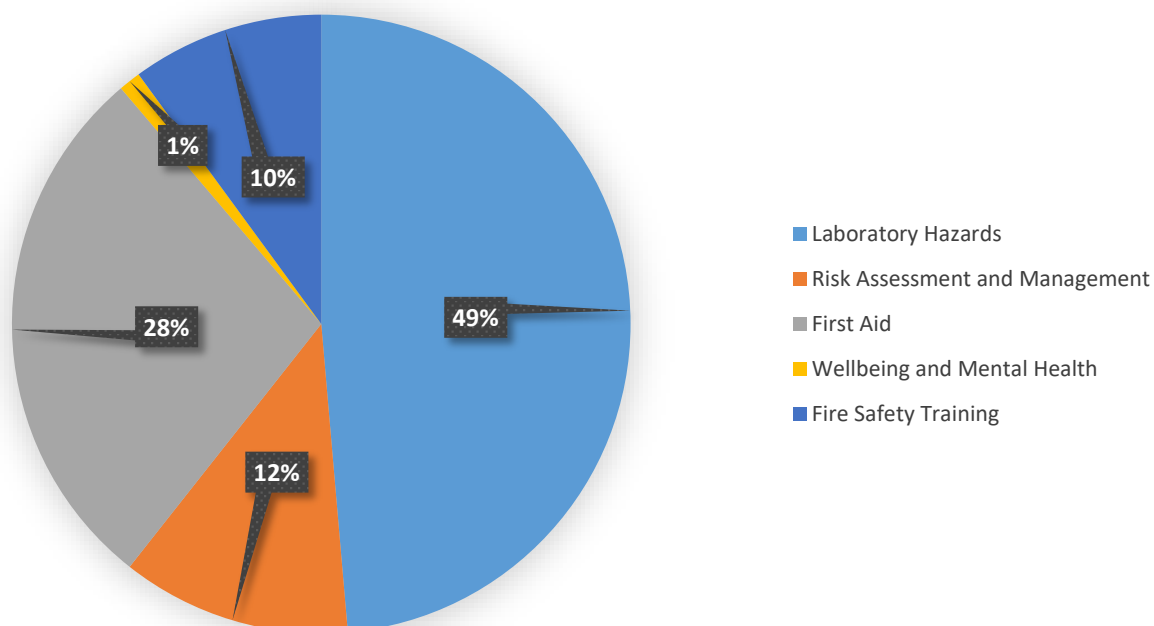
Rebecca Jones

Director of Health & Safety

10th October 2022

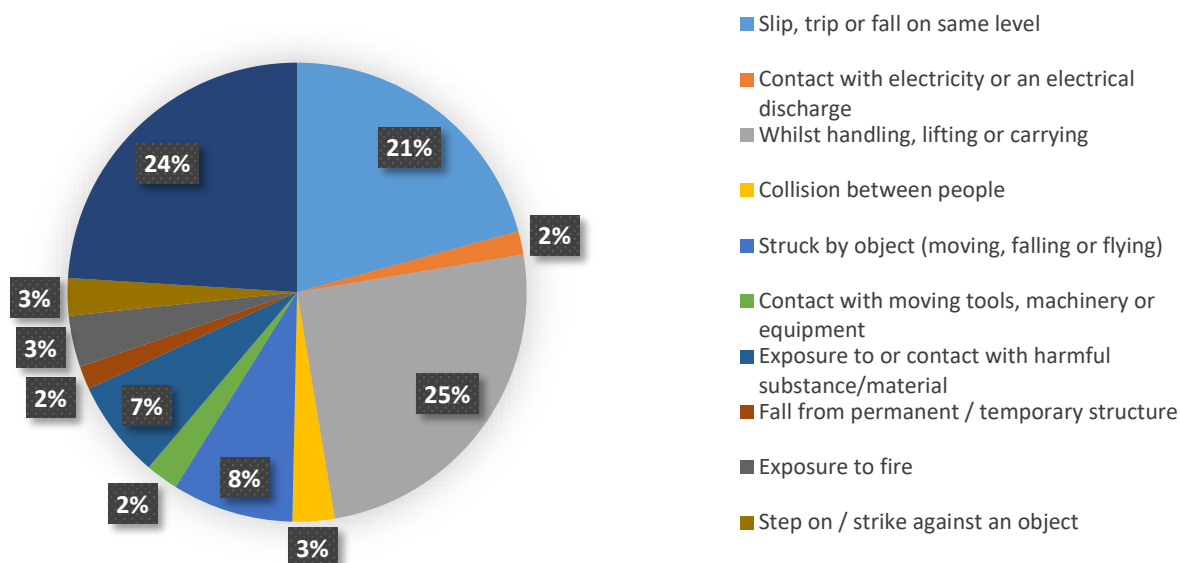
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Appendix 1 - Health and Safety Training August 2021 - July 2022



Topic Category of Training	H&S Training Course	Total Attendance
Laboratory Hazards	Containment Level 3 Principles and Practices	43
	Hazardous Substance Risk Assessment (COSHH)	318
	GM Risk Assessment and Notification	52
	Safe Management of Lab Hazardous Waste	541
	Radiation Protection Supervisor	8
	Working Safely with Biological Hazards	369
	Working Safely with Ionising Radiation	18
Risk Assessment and Management	QMUL Health and Safety Induction	165
	IOSH Managing Safely	24
	IOSH Working Safely	17
	Risk Assessment	127
First Aid	First Aid for Laboratory Workers	598
	First Aid at Work	38
	First Aid at Work Requalification	3
	First Aid (bespoke)	44
	First Aid Awareness	98
Wellbeing and Mental Health	Mental Health First Aid	32
Fire Safety Training	Fire Marshal	27
	Fire Safety Awareness	252
Total		2774

Appendix 2 - Accidents / Incidents August 2021 - July 2022



Please note that percentages are rounded up/down

Accident / Incident Type	Number of Accidents / Incidents
Slip, trip or fall on same level	63
Contact with electricity or an electrical discharge	5
Whilst handling, lifting or carrying	76
Collision between people	9
Struck by object (moving, falling or flying)	26
Contact with moving tools, machinery or equipment	7
Exposure to or contact with harmful substance/material	21
Fall from permanent / temporary structure	5
Exposure to fire	11
Step on / strike against an object	8
Other Cause (including ill health)	73
Total	304

The total number of reported accident/incidents is down from the previous year (319) and on a par with figures from the 2 pre-COVID reporting periods which saw figures between 282 and 300.

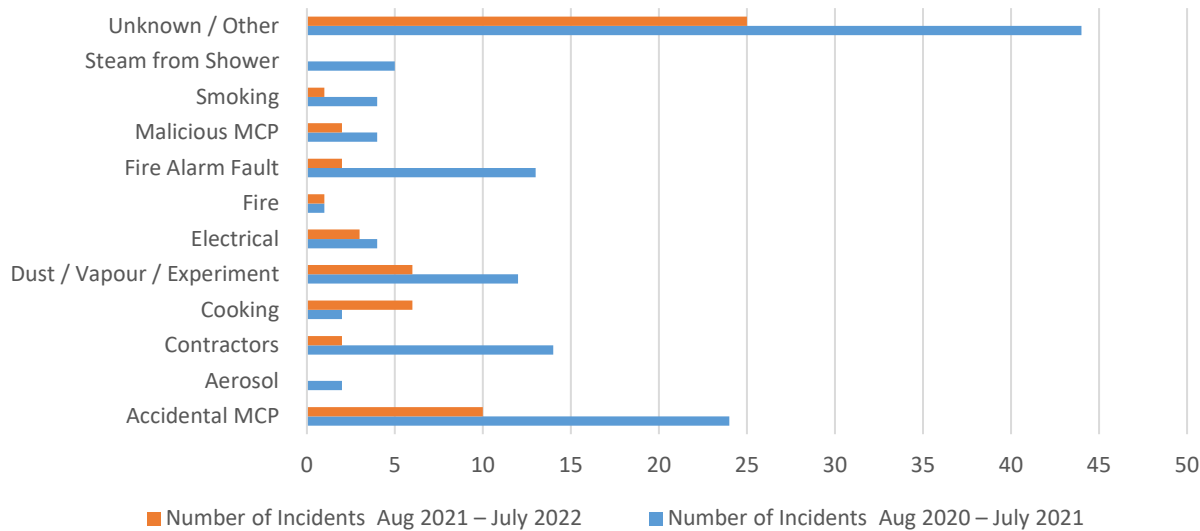
There were 143 near miss incidents in this reporting period.

Accidents reported to HSE - RIDDOR	
Accident / Incident Type	Number of Accidents / Incidents
Slip, trip or fall on same level	7
Whilst handling, lifting or carrying	2
Struck by object (moving, falling or flying)	1
Exposure to or contact with harmful substance/material	1
Total	11

The RIDDOR reportable incidents were up considerably on last year's figure (2) however when compared to pre-COVID reporting periods where the RIDDOR figures was 7 the increase is not as substantial.

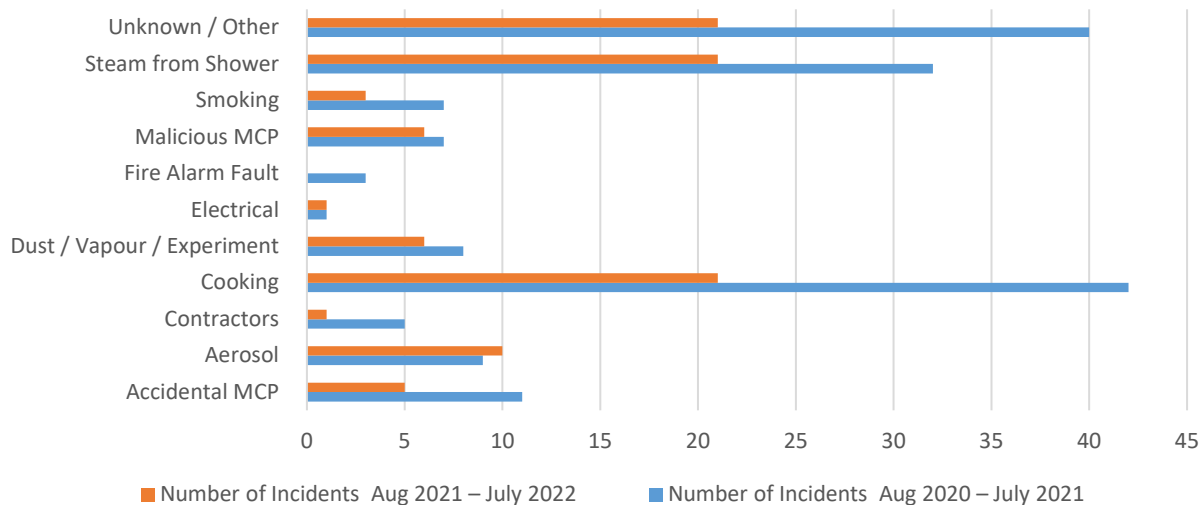
The increased figure in this period is due to the high number of slips, trips and falls reported from cleaning services staff. If staff are absent from work as a result of a work-related accident for more than 7 days then it must reported under Regulation 4 of RIDDOR. HSD have worked with EAF to look at the current controls in place and analysis specific tasks to try and reduce the risk of any reoccurrences. Further toolbox talk training has also been carried out with the cleaning teams.

Non Residential Buildings - Fire Incidents



Type of Fire Incident (Non Residential Buildings)	Number of Incidents	
	Aug 2020 - July 2021	Aug 2021 - July 2022
Accidental MCP	24	10
Aerosol	2	0
Contractors	14	2
Cooking	2	6
Dust / Vapour / Experiment	12	6
Electrical	4	3
Fire	1	1
Fire Alarm Fault	13	2
Malicious MCP	4	2
Smoking	4	1
Steam from Shower	5	0
Unknown / Other	44	25
Total	129	58

Residential Buildings - Fire Incidents



Type of Fire Incident (Residential Buildings)	Number of Incidents	
	Aug 2020 - July 2021	Aug 2021 - July 2022
Accidental MCP	11	5
Aerosol	9	10
Contractors	5	1
Cooking	42	21
Dust / Vapour / Experiment	8	6
Electrical	1	1
Fire Alarm Fault	3	0
Malicious MCP	7	6
Smoking	7	3
Steam from Shower	32	21
Unknown / Other	40	21
Total	165	95