

HEALTH AND SAFETY COMMITTEE

The second ordinary meeting of the Health and Safety Committee for the 2019/20 session, held on Monday 17th February in Meeting Room 3, Beit Quad at 11:30am.

**Unconfirmed minutes**

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| Present: |  |  |
|  | Graham Parker (GP) | External Trustee - Chair |
|  | Ashley Brooks (AB) | Deputy President (Education) |
|  | Fifi Henry (FH) | Deputy President (Finance & Services) |
| In Attendance: | Malcolm Martin (MM) | Head of Finance and Resources |
|  | Jonathan Ryan (JR) | Fire Safety Adviser (Imperial College) |
|  | Surrinder Johal (SJ) | Director of Safety (Imperial College) |
|  | Kay Counter (KC) | Operations Manager |
|  | Thomas Newman (TN) | Head of Student Experience |
|  | Martin Benson (MB) | Buildings Manager (Imperial College) |
|  | Thomas Fernandez Debets (TFD) | Deputy President (Clubs & Societies) |
|  | Shervin Sabeghi (SS) | Deputy President (Welfare) – (acting clerk) |
| Apologies: | Julia Mattingley (JM) | Head of Commercial Services |
|  | Graham Atkinson (GA) | Interim Managing Director |

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| **Item 01 – Welcome and Chairs Business** 1. GP welcomed the committee to the second Health and Safety (H&S) meeting of the 19/20 session and took note of apologies from JM and GA. All present provided brief introductions.
2. GP provided a preamble to the meeting noting that there was discussion at the previous meeting about the neglect of H&S at ICU in terms of awareness and action but that matters have improved since.
3. GP thanked staff members at ICU who have helped to improve matters, and expressed appreciation on behalf of ICU to the College for their help in doing so
4. GP expressed a view that the timing of the meeting is not helpful as he would have hoped that the committee is more forward thinking, and it has not reached this point yet. Also expressed a wish to ‘draw a line in the sand’ and questioned the accuracy of the minutes from the last meeting so elected to skip to point 6 in the agenda and not review the minutes.
5. GP opened the question of what the purpose of the committee is and provided own view that it is not operational and that it provides reassurance to Board and College. He also expressed a wish to have proposals to take to the Board meeting on 26th February. GP also said that the membership of the committee will need to be reviewed in line with its purpose, and if the purpose is purely governance the membership should be reduced.
6. GP commented on the lack of a management tool that would allow for tracking of important H&S measures such as staff training. He commented that this tool would provide central focus for the organisation, could be cascaded down to CSPs and could be used by the H&S committee to provide itself reassurance. He acknowledged that this would be a big piece of work.
7. GP invited any further comments from members. MM mentioned that there is a H&S auditing tool used by the College that contained 170 actions for ICU to act on and that, of these, 68 were in progress, 21 are yet to happen and 81 are complete.

 **Item 06 – Update on Audit / Inspection Reports** 1. **Fire Risk Assessment and Julia Cotton’s report**: MM informed the committee that all A-rated items had been addressed. MM said that many points in Julia Cotton’s report had overlap with other reports and that he has not acted on these yet.
2. MM said he will look over the points in Julia Cotton’s report with other senior managers to assign actions.
3. GP requested a report from MM for the Board meeting on 26th February that gives an indication of work already done and work still to do in order to get a picture of the scalability of the task at hand.
4. JR encouraged MM to update actions on the College’s H&S auditing tool.
5. MM said that he had met Sean Fanning to discuss a new tool, but that there would likely be a lot of overlap with existing work. GP expressed preference for there to be overlap rather than gaps.
6. GP asked College representatives present regarding clarity of work done by ICU. MB responded that there needs to be a service level agreement that outlines where and when the College has financial responsibility for repairs and who is legally responsible for these. GP commented that this would be incorporated into a H&S management tool.
7. GP further asked College representatives to what extent the mistakes previously made around H&S at ICU were due to assumptions made about responsibilities. SJ agreed that this was likely partly the cause of issues.
8. MM commented that there is a broader piece of work to address long-term issues that needs to be done with the College around establishing responsibilities. MM commented that the Preventative Maintenance Plan (PMP) with College has gaps, and the recent ICU flooring works done demonstrate this. MM informed the committee he has a meeting on March 10th with College to have a conversation about these matters.
9. GP referred to discussions at a previous Finance & Risk committee meeting around the costs of remedial H&S work, but also attempting to establish the cost of long term maintenance. MM informed that, so far, £15k has been spent by ICU and £60k by the College.
10. GP reiterated that he is impressed with the College’s response to recent H&S issues at the Union in terms of personnel and financial commitment. However, he also noted that there is a need to future plan (e.g. in terms of equipment replacement, training, capital expenditure) and establish the cost of this. KC commented that currently, as part of the re-budgeting process, she has been going through the commercial asset list to establish costs around replacing assets that are coming to the end of their depreciation periods.
11. FH asked who would be responsible for establishing the service level agreement. MB said that decisions would be made at director/board level.
12. FH informed the committee that her and TFD have begun work on a H&S management tool for CSPs that would assign responsibility and accountability both for business as usual items (e.g. equipment costs) as well as issues that come up unexpectedly.
13. JR informed the committee that, for fire Wardening training on 11th March, there is a new approach where training is given for specific buildings rather than generally for all buildings. Microsoft Teams will be used to improve communications e.g. fire wardens can discuss problems from previous evacuations together. TN commented that 15 ICU staff have signed up to fire warden training.
14. TN mentioned the issue of H&S culture from Julia Cotton’s report and suggested the committee talk about this. GP commented that everyone is responsible for engendering a positive H&S culture. JR offered SALUS reports as an example – everyone is responsible for making reports, and for reporting near misses too. SJ said that infrastructure is required first to allow change in culture to follow.
15. **BCC Site Survey and Maria Grigsby’s report:** KC introduced overview paper on actions taken on both reports in commercial services. She highlighted that bars and catering are safe and compliant, but are waiting for the EHO to return to assess.
16. GP asked KC if there was a feeling that too many different people are auditing and producing reports. KC responded that this was not the case.
17. KC further summarised the report commenting that; current work gives ICU ‘armour’ in respect to being ready for an EHO inspection that will likely be soon where she expects food hygiene rating to be lifted to 4 stars. KC described addressing: structural changes by working on electrical issues; equipment issues by bringing in new equipment to 568 that will have an increased lifetime (assuming PMP); pest control by bringing in Rent to Kill weekly.
18. KC also informed the committee of the creation of a staff training matrix to give reminders of upcoming training needs, and that Rent to Kill will be providing training to staff about dealing with pest control.
19. KC finally provided update that, as they are mostly around compliance, points in Maria Grigsby’s report have been completed except for implementing a fire suppression system. KC also thanked the College for the help that has been given so far.
20. GP asked KC if any suggestions in reports had been unwarranted. KC said there were not, but that there are various opinions about what counts as compliant.
21. GP asked what percentage of implementation of recommendations has happened. KC responded saying around 70% from Maria Grigsby and BCC reports has been done, but it’s difficult to quantify as a lot is a culture piece. She further commented that if people go back to old ways of thinking, compliance will slip therefore herself and Julia Mattingley regularly check paperwork to engender culture of accountability.
22. GP asked KC if a management tool would help this. KC responded saying it would and it would allow for PMP to be effective in ensuring the lifetime of equipment. She also expressed concern over the state of other equipment which haven’t been maintained commenting that this makes her unable to prepare for large repairs.
23. TN commented that the assets aren’t just commercial and many are perceived to be ‘owned’ by CSPs therefore have lack of knowledge about state of these.
24. GP asked about other reports. MM said he had not much to add.

**Item 07 – Health & Safety Monthly Report**1. MM presented summary of SALUS reported incidents for the last 12 months as well as a comparison of the number of reports of each type the in same quarter of 2018/19 and 2019/20. He highlighted the downturn in numbers of reports, but said the specific reasons are unknown.
2. SJ commented that this downturn is not unusual as reporting often quietens down after a big campaign is over and that it is necessary to ‘keep at it’.
3. SJ also commented that College would have liked to have had an app to report on for College staff but this is only in use for contractors. There are plans to move to a new system for reporting and then revisit the app.
4. GP asked if there is alignment between the presented report and what is seen at College. SJ responded that the headings are the same, but admits that the system isn’t ideal for management reports. GP asked if the headings are sufficient to which SJ responded that they usually capture work related injuries and near misses. She further commented that the latter is particularly important to establish how to avoid injuries and there is a need to question if people are reporting near misses.
5. GP commented that it would be useful to look at data over a longer period of time in order to identify trends and work strategically to improve matters. SJ added that root causes are missing from the report and that the report contains ‘lagging indicators’ whereas ‘leading indicators’ such as training are missing.
6. GP asked for any more comments – none were given.

**Item 08 – Retail Operations H&S report**1. MK presented and summarised the report: said it contains measures taken over the last 12 months, work that is ongoing and work that still needs to be done. He commented that risk assessments have been implemented across the shops for manual tasks and that equipment monitoring has been established. Three near misses were reported, and measures are in place to address these. He further informed the committee that the previous retail manager had begun work on a training matrix that is shared with Marvin Clarke in order to get a second opinion.
2. GP recommended alignment with work done by KC and FH which MK agreed with.
3. AB asked what numbers in red for ongoing measures mean. MK responded that the meaning of the numbers are clarified in a separate tab in the spreadsheet. He commented that everything in red is ‘bad’. SJ asked if there is more information about items in red elsewhere which MK confirmed.
4. MK continued by explaining that the stock room is the predominant area for improvement as it currently has the highest chance of injury. He highlighted the need to create culture of flagging potential hazards and that the next task now is to share work done with Commercial Services admin team.
5. GP thanked MK for the report.

**Item 09 – H&S Approach to CSPs** 1. TN summarised the paper stating that it flags there is a lot work to do to implement controls and that there hasn’t been good infrastructure in place. He described three broad areas: current risk and approach, remedial actions needed, and what ‘good’ looks like. He informed the committee that work will begin that week with Karl Bott to support with work around risk management. TN also highlighted high-risk activities, referring specifically to the recent caving incident, and that work to fix matters will take a long time therefore interim action such as pausing caving activity has happened. TN further explained that core activities is one part of work Karl Bott will do, but another is around minibuses to ensure they are safe and functional.
2. GP thanked TN for the paper and commented that it will be valuable for the committee to pick up on where issues within CSPs are representative of more general organisation-wide issues that need to be fixed in order to cascade down to CSPs.
3. JR asked about business continuity and TN confirmed that this is a concern being considered. He gave the example of the Union not being in the escalation chain during the caving incident. TN also highlighted the lack of a crisis management plan in ICU and that one needs to be created in alignment with the College.
4. GP asked for any more comments – none were given.

**Item 10 – H&S approach to the Summer Ball**1. FH apologised for the late submission of her report. She commented that having a safe Summer Ball is a priority, that DramSoc have been producing risk assessments which will be reviewed, that she will be in talks with College security to ensure safe crowd control, and that she will be undertaking specific training to ensure the Ball is delivered safely.
2. JR asked if FH is aware of works that will be going on in the College that might interrupt the Ball (e.g. on the Queen’s Lawn and in Blackett). FH responded that she is in contact with the College events team and is aware of Queen’s Lawn work, but not Blackett. JR commented that there may be works that make Prince Consort Road the main College entrance. FH said she will catch up with JR offline to discuss.
3. GP requested, for the Board meeting on the 26th, a tabulation of H&S considerations with costs and measures taken for them.

KC left the meeting**Item 11 – Building / Facilities Update**1. MM updated on toilet renovations ongoing in the East Wing, and that he is working with MB on a PMP. He commented on the effect of maintaining spaces on activities and that creating an ongoing maintenance schedule with SPIE is an ongoing process.
2. MB added that the College applies a standardised approach to maintenance across all buildings and that if there is need for a more flexible approach (e.g. to meet commercial needs) then there would be charges associated with this.

**Item 12 – Any other business**1. GP asked the committee for AOB. FH said she has questions about the minutes. GP chose to come back to this at the end and asked for other AOB first.
2. AB asked about progress on the H&S policy. MM responded informing that after the draft policy was presented at the last H&S meeting, it was paused. GP confirmed this to be the case, but expressed his discomfort and not having a policy. He commented that the current priority is actioning results of the audits.
3. SJ suggested that it is possible to have just a one page policy statement before having a more detailed document which would still be needed and go hand-in-hand with management tool.
4. GP asked if this would be a summarised version of the final policy with detail elsewhere. SJ responded that it can just be a statement of intent with details elsewhere and that it can be a personal document from the trustees and/or management.
5. TFD commented that a statement of intent would help bring everything together as much of the work so far has been done in silos.
6. GP reiterated decision to not revisit the minutes of the previous meeting in detail but welcomed questions from FH about them.
7. FH asked about the use of ICU spaces and making sure they are fit for purpose – commented that there have been various discussions but requested a timeline from MM about when this work would happen.
8. GP thanked the board for participation in discussions that are forward thinking and commented that there will be another meeting in due course.

MEETING CLOSED | **Actions** **MM to produce timeline for work on Union spaces and ensuring they are fit for purpose.** |

Date of next Meeting: Wednesday 11th March 2020 (TBA)