



## Health and Safety Annual Report 2023–24

<b>Outcome requested:</b>	Audit and Risk Committee is asked to <b>consider</b> the annual Health and Safety Report for 2023/2024.
<b>Executive Summary:</b>	<p>The attached Report provides a summary of the Queen Mary University’s delivery of its Health &amp; Safety policy and operational management of H&amp;S risks through the academic year 2023 – 24, as well as plans for the year ahead.</p> <p>The report provides a comprehensive update on the following areas:</p> <ol style="list-style-type: none"><li>1. Governance/Management of Health and Safety</li><li>2. High Hazard Health and Safety Risks</li><li>3. Operational Health and Safety</li><li>4. Health &amp; Safety and the 2030 Strategy</li><li>5. Objectives for 2024/25</li></ol> <p>The reporting period has seen the team increase its specialist technical expertise by recruiting to two crucial posts in fire safety and chemical safety. It is challenging to find candidates with the technical expertise and health &amp; safety knowledge required given the high demand for these scarce skills in the jobs market. It was pleasing both candidates cited their main reason for joining was their desire to work within the health &amp; safety team at Queen Mary.</p> <p>Much of this period has been dominated by our response to the HSE investigation, which happened in FMD following a serious needlestick injury to a researcher. We were driven by the need to achieve compliance with the 2 actions set by the HSE (failure to do so would result in restrictive enforcement actions against the University). The directorate worked hard to find solutions as to how we could embed the actions required across all areas of the University. We successfully communicated the need for compliance to internal stakeholders without enforcing any kind of blame culture.</p> <p>This response illustrated the standing of the team as H&amp;S business partners for faculties - who heavily relied on us to give them the tools to achieve compliance with HSE actions. We demonstrated the resilience of the function by providing reasonable , low cost, solutions keeping laboratories open and research work ongoing whilst also gaining the confidence of the HSE that their issues had been addressed. Following an update in September this year the HSE confirmed they were satisfied with the University’s response to the actions and have closed the investigation. This swift action and proactive response undoubtedly avoided any sanction being issued by the regulator.</p> <p>Wellbeing support across the University continues to grow with resources accessed by increasing numbers of staff and students. We are committed to our work towards the University Mental Health Charter and are a sector leader in our Mental Health First Aid training.</p> <p>The Directorate continues to work closely with Estates colleagues both on offering advice on project risks and in ensuring auditable infrastructure compliance. Challenges in this area include maintenance record keeping and effective</p>

	<p>contractor management but this period has seen good progress, particularly around closure of fire risk assessment actions.</p> <p>Over the past year, significant strides have been made in enhancing the fire safety culture within our organisation. Through comprehensive training programmes, regular drills, and increased awareness, employees have become more knowledgeable and proactive in identifying and addressing fire hazards. Additionally, the implementation of new and reviewed procedures has allowed closer working relationships to be fostered with key stakeholders, ensuring an efficient and effective outcome for our workstreams.</p> <p>These collective efforts have reduced potential fire risks and cultivated a sense of responsibility and ownership among individuals, contributing to a safer and more secure working environment.</p> <p>We work hard to reflect the vision, mission and core values of the 2030 Strategy in our work and to understand how to operate health and safety requirements in a sustainable manner. The report includes examples of these values in action, showing health and safety embedded in our vision and playing an important part in opening the doors of opportunity and allowing students and staff to learn and grow in a safety environment.</p> <p>Our ambitious objectives moving into the new academic year include a plan to drive efficiency and consistency in specialised risk assessments and the commencement of a Radon monitoring programme in line with our legislative duties. Following the positive verbal feedback we also eagerly await the report from external risk consultants following their review of our health &amp; safety management system and the benchmarking data for the sector.</p>
<b>QMUL Strategy</b>	Health and safety supports high quality teaching in safe environments for students and staff alike and provides a foundational pillar for conducting cutting edge research.
<b>Internal/External regulatory/statutory reference points:</b>	Health and Safety at Work Act 1974; Management of Health and Safety at Work Regulations 1999; and associated workplace health and safety legislation. Regulatory reform (Fire Safety) Order 2005, Fire Safety Act 2021, Fire Safety England Regulations 2022, Building Safety Act 2022.
<b>Strategic Risks:</b>	This paper considers health and safety, compliance and reputation risks.
<b>Equality Impact Assessment:</b>	The Health & Safety Directorate ensures compliance with the public sector duty in how it operates and delivers policy and compliance. This includes for example membership on the Disability Inclusion Advisory Group.
<b>Subject to prior and onward consideration by:</b>	For consideration by HSAG and Audit and Risk Committee
<b>Confidential paper under FOIA/DPA</b>	No
<b>Timing:</b>	This is an annual report
<b>Author:</b>	Rebecca Jones, Director of Health and Safety
<b>Date:</b>	1 <sup>st</sup> October 2024
<b>Senior Management Sponsor</b>	Jonathan Morgan, Chief Governance Officer

# Health and Safety Annual Report 2023/24

## Introduction

This report covers the period 1<sup>st</sup> August 2023 to 31<sup>st</sup> July 2024 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.

We understand education and research is about investigating new avenues of knowledge, and this carries an unavoidable element of the unknown but are equally mindful that health and safety legislation applies just as much to research as it does to any other area of industry. Despite the inherent elements of uncertainty, it is possible for our researchers to innovate without exposing themselves or others to unnecessary health and safety related risks. We promote sensible management systems, together with suitable practical training as the framework in which people can work safely when carrying out teaching and research activities across Queen Mary.

Key successes this reporting year include:-

1. Swift and proactive response to HSE riddor investigation meaning no enforcement action issued.
2. Increase in specialist staff across HSD has meant improved resilience and technical expertise.
3. Successful collegiate collaboration has seen better control of contractors across our estate.
4. Significant enhancement of fire safety culture across the university has reduced potential risks and cultivated a sense of responsibility and ownership.
5. H&S mandatory training is now all available through the CPD training platform and completion rates can be tracked and reported on at local level.
6. Improved support initiatives have been launched for both student and staff wellbeing.
7. Moving to a new hazardous waste collection service has produced savings of approximately 40%.
8. Incident reporting has improved across all areas due to a large drive on MySafety training across Schools. No significant negative trends were identified from the data and RIDDOR incidents fell 50% compared to last year.

## 1. Governance / Management of Health & Safety

The reporting period has seen a period of consolidation within the directorate. The fire safety team structure is now complete with a second Senior Fire Safety Adviser, Alex Walczak, joining in June 2024, bringing a wealth of knowledge from fire risk assessing in the higher education sector. This team has been busy establishing effective processes for assessing and managing the University's fire risks. Regular fire safety stakeholder engagement sessions have been established with Estates and Facilities colleagues, both at local and strategic levels, allowing for a better delivery of fire safety compliance and a better understanding of future challenges and opportunities. This also assists in the delivery of fire safety issues with a pragmatic and risk-based approach, improving consistency and resilience across our portfolio.

Staffing has also changed in other areas of the directorate with a new health and safety adviser/chemical waste lead joining for Science and Engineering. Dr Diluka Peiris comes with significant experience from the HE and research sector and has made an immediately positive impression, not only helping to deliver a robust inspection schedule but also being key to the transition to a new chemical waste contractor offering approximately 40% savings on the previous provider.

We continue to network widely throughout the sector and have a strong profile. For example, the Biological Safety Adviser is an executive committee member of the Institute of Safety in Technology & Research and recently organised the biosafety group for London & South at the Sanger Centre in Cambridge, attended by Universities, Research Institutes, NHS, biotech and pharma companies.

In May the HSD Director met with Gallagher Bassett HE Risk Control Consultant appointed through our insurers to carry out a Review on Queen Mary's Health & Safety management system. The aim of the Review was to help both the insurer and institution maintain the good claims record we have witnessed across our

accounts in the last few years and provide Queen Mary with a clear and independent baseline of our health and safety risk profile. The auditor is carrying out this exercise across a number of HEI's and, through this process, we will also be provided with anonymous benchmarking data which is sector wide.

The first stage in this process involved an interview to review our key health and safety risk areas and the provision of a large amount of health and safety management documentation. We are currently awaiting a summary report but an initial feedback meeting with the auditor was extremely positive, with him commenting that Queen Mary was excellent in how it managed the strategic areas of health and safety leadership, planning, communication & consultation and monitoring & review. We are due to receive the summary report and benchmark data shortly.

At an away day in August the team explored how we can best support the University and considered our impact and support needs. We discussed the 2024 staff survey results which were extremely positive, building further on last years' good results with a directorate engagement score of 82%. The team valued being part of a diverse yet cohesive group and enjoyed the opportunity to learn more about other Office of The Principal areas, in particular the EDI presentation given.

### **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
- Faculty 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 impact Queen Mary**

#### **Terrorism (Protection of Premises) draft Bill: Martyn's Law**

The Bill sets out the requirements that, under what is referred to as Martyn's Law, venues and other organisations will have to meet to ensure public safety. It will introduce a legal obligation for the owners of publicly accessible locations to take suitable and proportionate measures to protect the public from terrorist attacks and increase public safety. The second reading of the Bill is planned for October 2024 and if it receives Royal Assent, businesses will be given time and support to understand and implement their new obligations and allow for the new regulator to be established. When introduced Queen Mary will need to ensure compliance with the enhanced tier requirements with the workstream led by EAF and Security with HSD support as required.

#### **The Building Safety Act 2022**

Some recent updates under the Building Safety Act include:

- The Building Safety Regulator (BSR) is now in place to oversee the building control profession. Existing occupied higher-risk buildings are legally required to be registered with the Regulator. Queen Mary has 3 residential buildings falling into this category, all were registered by the October 2023 deadline.
- The BSR will be creating a national register of higher-risk buildings, providing a searchable portal of higher-risk buildings in England for the first time.
- Building Assessment Certificates (BAC) are documents that will be issued by the BSR after it has assessed compliance with specific legal duties and is satisfied that those duties have been met at that particular time. In order to do this buildings need to have a Principal Accountable Person nominated and when directed, they will have 28 days to submit their BAC application. The Director of Estates & Capital Projects is the PAP for Queen Mary.

All of the above changes are being closely monitored by the Fire Safety Strategy Group, which is Chaired by the Associate Director for Engineering & Estates Management.

## **Changes to Guidance on regulations for First Aid at Work**

The First Aid at Work guidance document (L74) has been updated to emphasise employers' responsibilities to take account of employees' mental health in their first aid needs assessment. Queen Mary had already incorporated this consideration in 2019 therefore no further changes were required.

## **Ionising Radiation: changes to registration and consent processes**

As noted in the last year's report, the HSE has changed its approach to regulating under the Ionising Radiations Regulations 2017. HSD have submitted the registration content required for general purposes and are currently compiling the safety assessment part applicable for 'consented activities' at Charterhouse Square, due to submit autumn 2024. This work is being led by the Radiation Protection Officer with assistance from Radiation Protection Supervisors and reviewed by the consultant Radiation Protection Advisers. Additionally, as required under this application, the Radiation Protection Officer is to commence a radon monitoring program during autumn 2024 to assess all occupied basement spaces in Queen Mary buildings on our London campuses. This is now a statutory requirement to be done once every 10 years.

**The Control of Explosives Precursors and Poisons Regulations 2023** has been passed into law. It replaces the previous regulations and aims to restrict and monitor the sale of certain toxic substances or those which can be used as precursors for explosives. For Queen Mary purchasers of specified chemicals will need to periodically provide information to the vendor prior to purchasing, including the business details and a scan of a driving licence or other photographic ID. Our suppliers should flag this and have a process with guidance in place. It will certainly apply to most Schools and Institutes who purchase chemicals but should not prove particularly onerous.

## **1.3 Regulatory visits**

**Nov 2023 RIDDOR:** This involved a needlestick incident to a member of staff using genetically modified vaccinia virus during animal inoculations which resulted in a virus lesion forming (an occupational disease). The Health & Safety Executive (HSE) were informed under a RIDDOR Notification on 18/09/2023. The injured person has since recovered fully but the HSE decided to conduct their own on site investigation in Nov 2023. They determined that, although in date risk assessment and procedures were in place, not all staff members involved had received recorded refresher training and had not signed off on the recently updated risk assessment. Actions were issued to Queen Mary to ensure: -

- (1) all staff have received refresher training and that it is recorded in a prescribed system and
- (2) all staff have received updated risk assessments and that it is recorded that they have 'read and understood' in the prescribed system.

Accordingly, an action plan was formulated by HSD. To fully meet the first action of accommodating all H&S training records (mandatory and mandatory where relevant to role) and online new and refresher modules HSD worked to get all such courses onto the new Queen Mary CPD training system. To achieve the second action we worked with departmental Safety Coordinators, ITS and our software system suppliers to improve the risk assessment system (MySafety) so it would accommodate and record all risk assessments and user sign offs. The only exception to this being those assessments involving national security or personal medical information. The actions required by all affected areas was explained by HSD Managers at Faculty Management Group meetings and supported by Senior leadership. The HSD Director kept the HSE updated at all points and they confirmed they were satisfied with the robust action the University was taking. Compliance checking is currently ongoing (Oct 24) by departmental Safety Coordinators and reviewed by the Faculty Management Groups and HSAG.

**Feb 2024:** - An Environment Agency (EA) Inspector conducted a scheduled campus inspection covering ionising radiation work and facilities at Charterhouse Square. One breach of the permit conditions was identified (radiation monitors were found to be out of calibration dates, and the local management system was therefore not fully implemented, due to staff turnover). Three actions and two recommendations were identified in the report. These were all addressed by July 2024 and the responses provided to the EA Inspector were deemed satisfactory.

**Sept 2023, Dec 2023, June 2024 London Fire Brigade fire safety audits:** - Three fire safety audits have been conducted by the enforcing authority, London Fire Brigade (LFB). These were on the three Queen

Mary's residential buildings that we registered as higher risk under the Building Safety Act. All visits achieved an outcome of 'Verbal Action', meaning any advice/areas for improvement were done so in a verbal format at the time of the inspection with no LFB follow up required.

## 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 2022/2023. 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 considering hazards such as radiation, biological release, 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

**Ionising Radiation:** - No exposure incidents involving ionising radiation were reported during this period. The Environmental Agency permits for open 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 submitted in early 2024 by the HSD Radiation Protection Officer.

Decommissioning checks for 2 dis-used radiation rooms in the John Vane Science Centre and drains in the Abernethy building have been commissioned (Aug 2024) with an external radiation expert company.

Local emergency response information documents for radioactive sources were reviewed and updated, and departmental Radiation Protection Supervisors have practiced their contingency procedures with radiation users and support staff this year. Four new Radiation Protection Supervisors received accredited training and a refresher training course was conducted by the consultant Radiation Protection Adviser and Radiation Protection Officer in March 2024. Three Ionising radiation user courses were conducted covering open, sealed sources and x-rays.

**Non-Ionising Radiation:** - In the last year we have worked hard to ensure every School, where relevant, has an appointed School Laser Safety Officer (SLSO). HSD Director has issued an appointment letter to the H&S Sci and Eng Manager to appoint him as the University Laser Safety Officer, in line with industry / HSE best practise guidance.

As reported last year Queen Mary have entered a contract with the United Kingdom Health Security Agency (UKHSA) for them to provide Laser Safety compliance support for a period of three years. The initial phase commenced in this reporting period with a document review followed by a site visit and inspection of some laser laboratories. The review of our laser safety documentation process was positive with only minor recommendations that were shared with SLSOs. In June the site visit by UKHSA was carried out with two laser protection officers visiting a wide range of laboratories at Queen Mary over two days. Again, this was positive with relatively minor improvements suggested. Due to the HSE requirement to ensure specialist risk assessments are hosted on the MySafety platform attention has shifted to complying with this requirement rather than the previously proposed online platform. Work to upload all risk assessments is underway.

During the reporting period there was a near miss involving lasers where safety protocols were disregarded intentionally. This resulted in immediate strong disciplinary action being taken and closure of the laboratory until correct level of supervision and laser safety could be guaranteed. A great deal of work went into improving the laboratory and its processes before it reopened. Whilst regrettable it does demonstrate the seriousness with which laser safety is upheld at Queen Mary.

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

Twenty-three risk assessments for pathogen and GMO work were peer reviewed, classified and approved in the Biological and Genetic Modification Safety Committee meetings held during this year. Of these 17 were of higher risk level and were checked for existing applicable notification covers (including risk assessments for Mycobacterium tuberculosis laboratory work and research activities involving clinical samples from sub-Saharan African health study trials into maternity and child health, and bacterial pathogen work in fruit fly models). These involve significant advice, input, review by the Biological Safety Adviser and subsequent liaison with the regulator.

Along with Blizzard Lab management HSD has continued to support maintenance and statutory compliance testing of safety cabinet and ventilation systems at Containment Level 3 as well as a set of assessment trials to utilise vapour hydrogen peroxide instead of formaldehyde.

Specific protocols and risk assessment templates have been issued for laboratory animal allergen protection for research, support staff, and external contractors intending to work in the BSU facilities, including recommending the face fit testing of tight-fitting respirators. The Occupational Health Service provider, Biological Safety Adviser and HR Deputy Director have worked closely together to enable this.

The Biological Safety Adviser has continued to provide consultancy GMO 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, and is also part of the joint Barts Health NHS Trust / Queen Mary Advanced Therapeutic Medicinal Products (ATMP) Committee set up this year, to ensure compliance for GMO based therapeutics and other new types of therapeutics clinical trials.

**Sustainability and clinical waste:** - A pilot scheme to reclassify some of the laboratory generated clinical waste has been started in the Blizzard Institute. Autoclave waste from the Blizzard CL3 suits had been reclassified as orange bags waste. This means that the waste can now go for alternative treatment as apposed in high temperature incineration. The waste is autoclaved and separated into metal (reused in manufacturing), plastic (used to manufacture sharps bins) and flock (repurposed as insulation). Heat capture from the process is used as energy to power the plant.

Following data analysis of the number of full clinical waste carts collected over a year of the contract, a reduction in the site visits required has been made. Waste collection from five of our sites has been reduced from three days a week to two, allowing for further cost savings.

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

**Chemical Safety Policy:** - As effective chemical management requires consideration of the safe, responsible, sustainable and economical use of substances throughout the chemical lifecycle it was felt a corporate level Chemical Safety policy was required. As such this policy has been written and adopted during this reporting year. It establishes the framework for the effective risk assessment, health & safety risk controls and measures to be adopted and implemented for work with hazardous chemicals by Queen Mary staff, students; and others or the environment who/which may be affected by Queen Mary activities. The objective of the Policy is to control and reduce and where significant, eliminate the risks and to ensure compliance with the legislation governing work with hazardous chemicals. The policy received HSAG approval in June.

**Hazardous waste:** - Legacy waste removal continues as Schools try to minimise their chemical stocks in addition to responding to inspection actions. A new hazardous waste collection service has been trialled throughout the year. They are widely used within the University sector as they can process a much broader range of material than other contractors which prevents accumulation of particularly hazardous or exotic materials. In addition an early comparison of costs for waste removal compared with the previous service indicates the new provider will be approximately 40% cheaper.

**Hazardous Mapping for Fire Brigade:** - Work has continued to provide building 'hazard mapping' on type, location and amounts of hazardous substances to the London fire Brigade. There has been a delay with one School providing the required information and this has been requested from them as a priority.

The gas manifold testing programme has progressed well and improved our compliance in this area.

The University Chemical Weapons Convention return was filed with no issues in the reporting period.

## 2.4 Infrastructure and safety in the built environment

**Asbestos:** - Over the reporting period Estates & Facilities (EAF) have continued to reduce the extent of asbestos containing materials across the Queen Mary estate, either through liaison with Capital Projects or through asbestos initiated works. In the past 12 months an additional 10% of Asbestos within our high and medium risk locations has been removed.

Further developments in the asbestos management programme include: -

- A 3-year asbestos remediation plan is in place and continuously reviewed and updated in line with recommendations received from the periodic re-inspection reports.
- The asbestos budget has been allocated and ring fenced within the long-term maintenance budget.
- New EAF software housing the electronic asbestos register is now operational and available for all staff to use and access specific building asbestos information.
- Training has been completed for those who hold asbestos management responsibilities.

**Legionella:** - EAF have continued with their rolling programme for legionella risk assessments across all buildings. Further developments over the reporting period include: -

- The electronic water logbooks brought in last year allow for greater oversight and trend analysis to assist with management of the hot & cold-water system.
- Legionella Risk Assessment reviews are now undertaken on a risk rating basis to bring the reviews in line with current legislation. This is monitored and reviewed through the electronic logbooks to ensure risk rating remains valid.
- Temperature sensors have been installed in the BSU at Mile End which is a 'difficult to access location' allowing for remote monitoring in this area.
- EAF conduct a quarterly system review to ensure any consistent failure is captured and rectified.
- The system shows an average of 91% compliance across all campuses for the last 12 months (figure provided by Head of Assurance & Risk EAF Sept 24).

**Local Exhaust Ventilation:** - The work to improve the Joseph Priestley LEV system is still underway. A huge amount of work was undertaken to remove the chemicals safely from research labs and so provide a safe environment to hand over to the contractors.

Collaborative work between EAF and HSD has begun to assess compliance with the HSE guidance on LEV, specifically to ensure we have all the information on the performance of systems rather than relying on testing performance of fume cupboards individually.

**Other Statutory Compliance:** - The statutory compliance figures for the reporting period remain good, in excess of 90% (figure provided Head of Assurance & Risk EAF Sept 2024). The EAF compliance group continues to meet every 2 months to review incidents, reports, and issues. The Estates Management Agreements & Procedures documents are undergoing review for suitability with the aim to re-publish these, along with a revised Site Induction Programme, in late 2024.

Following an HSD review, a new fully automated Permit to Work system has been rolled out and is being embedded into the organisation across sites and campuses.

**Risk Management:** - EAF has recently taken on responsibility for and commenced implementation of a new risk management system (RiskMate) to provide greater assurance in relation to the management of risks within EAF. A risk management committee has been established, terms of reference drafted and a strategy documented. The committee will feed into the EAF Board and HSAG.

Training has been provided to both the senior leadership and management teams of EAF outlining Quenn Mary's responsibilities under the Building Safety Act.

**Capital Projects:** - During the reporting period there were no RIDDOR reportable accidents or incidents on capital projects. All capital projects continue to be inspected frequently by the Capital Projects Health & Safety

Manager. All projects are set with a KPI of achieving a score of at least 85% in these inspections, which has been achieved on all projects in this reporting period.

The Queen Mary health and safety rules for contractors were revised in January 2024 and a meeting took place with all contractors to present and discuss these rules, with positive feedback.

The gathering of health and safety information from Principal Contractors on capital projects and working collaboratively with has greatly improved over the reporting period. Principal Contractors on all live capital projects are now required to issue a monthly health and safety report to Queen Mary. This report must include prescribed information such as number and details of their own internal health and safety inspections, accidents or incidents, and safety briefings / toolbox talks completed.

HSD continue to provide health & safety advice and assurance for a number of strategic projects such as Plot C development (Life Sciences Building) and temporary laboratory fitouts for PHURI staff, as well as capital projects such as Blizard/CHSQ NWOW, Francis Bancroft BSU, Blizard Mews, Fogg Building legacy Works and John Vane Science Centre Legacy Works.

Specific examples in the reporting period include: -

- Assisting EAF with obtaining planning permission for the Fogg legacy project. Tower Hamlets council were concerned that the larger size of extraction stacks planned would mean an increase in emissions that could cause harm in a residential area. The stacks were permitted after a letter signed off by the Chemical Safety Manager and HSD Director offered assurance that there would actually be better dispersal of the small scale of emissions the Fogg building generates.
- The Chemical Safety Manager has been a key stakeholder in the SEMS green energy hub laboratory project and related thermoevaporator PRF equipment bid as well as multiple smaller scale projects to ensure that the correct equipment was purchased and that safety protocols would be put in place during handover.

## 2.5 Fire Safety

**Fire Safety Policy:**-This policy received a major update and review this year to include legislative changes and the processes required by Queen Mary University to ensure the safety and well-being of our staff, visitors, and assets from fire-related risks. This included the establishment of clear procedures for fire prevention, control, and management. It was approved at HSAG in June 2024.

**Fire Activations:** -There were 148 fire alarm activations during the reporting period (Appendix 3). The three key influences on fire alarm activations in residential buildings include shower/steam, cooking, and unknown/other\*. The three influences on fire alarm activations in non-residential buildings include contractors, cooking, and unknown/other\*.

*\*when recorded as Unknown/other, this means that at the time, there was no probable cause to the reason why the fire alarm has activated, it could be an over-sensitive detector head or a potential unknown fault with the fire alarm system, with all instances, a full seek and search of the building for any signs of smoke/fire is implemented by Security at the time of the activation.*

### Fire Investigations

There were two fire-related incidents that prompted further investigation during the reporting period, although no injuries were reported in either:

- Fielden House, Mile End – A student was cooking in their kitchen using a pan of oil. Excessive heat built up and transferred onto the extractor fan, causing this to ignite. Emergency procedures were initiated, all students evacuated, and LFB were called to extinguish the fire.
- Maurice Court, Mile End – A student was cooking in their kitchen using a pan of oil. This oil heated excessively and ignited, the student took quick action and used a fire blanket to place over the flames, which extinguished the fire.

As part of both investigations the students were re-educated as to the danger and causes of cooking fires and the fire safety residencies handbook and mandatory training video was reviewed.

**Fire Risk Assessments (FRA):**-The increase in resources within HSD has allowed 36 fire risk assessments to be carried out by the Queen Mary Fire Safety Team during this reporting period (double last year). Over the past year, a review of the FRA process has been carried out, establishing a streamlined approach to increase efficiency. This includes our new Building Safety Checklist form, which allows us to document our inspections and areas highlighted for improvement in-between FRAs being conducted. Our structure is now

such that we can risk assess and quality assure using different technically qualified members of HSD fire safety team. The collaborative working with Hard FM Estates staff to clear FRA actions is also working well with the HSD Fire Compliance Manager giving good input on priorities based on pragmatic risk assessing.

### 3. Operational Health & Safety

#### 3.1 Training Programme

During this reporting period, a total of 8004 delegates carried out some form of health & safety training across 26 different HSD training courses. This figure allows for the fact that some delegates have attended multiple courses (see appendix 1 for breakdown data). Our courses are constructed with a clear focus on the need of our learners. We look to continually improve our training based on feedback, using the principles of active learning, with ongoing knowledge checks, to ensure learning goals are met. Over the year our courses have been rated good or very good by 96% of delegates. We continue to have a large demand for many of our courses which regularly include delegates from other HEIs and the private sector.

We aim to provide and develop multiple trainers for courses. This not only gives the resilience required but also provides good CPD for the team. During the year the University physical first aid trainer has supported another team member with first aid experience to become a registered first aid trainer without the time and expense of needing to attend an offsite conversion course.

Whilst we continue to offer an extensive catalogue of online and face to face courses there are groups whose training needs are not met by these courses. In these cases, we offer one of three solutions: -

1. We can identify external specialists who can provide training e.g. Tower Scaffold courses
2. We offer out of hours training. Our cleaning operatives do not work when we offer most training courses, therefore we deliver their sessions out of normal work hours.
3. We formulate bespoke sessions e.g. our recent first aid specialist sessions on anaphylaxis (bee lab) and seizure recognition for a Sci & Eng research group using brain mapping equipment.

HSD have changed the training material provider for our Mental Health First Aid training. The new training material is flexible allowing us to include information relevant to Queen Mary as well as giving us a £370 saving per course delivered.

**Learning Management System (CPD training platform):**-During the year the University successfully launched a new CPD training platform which was actively supported by HSD through all its stages, who, as the second biggest provider of training were a key stakeholder. The entire HSD team has taken an active role in moving courses and assessments from the QM Plus system to the CPD training platform and we can now use the platform to record and provide reporting data on the courses we run. The HSD Director is part of the CPD Training Decision Group to consider any further requirements for the system and the HSD Administrator is part of the CPD Action Group.

**Training Policy and Training Matrix:** -The University health and safety training policy was updated in 2024 and was supported by the introduction of new training matrices and a mandatory training standard operating procedure. Whilst many courses are standard for large groups; there are many areas with specialist requirements and these matrices allow these groups to build their bespoke competency needs. We have also worked closely with OPD to ensure that mandatory training such as Health and Safety Essentials, Fire Safety Awareness and DSE Workstation Tutorial / Assessments are included in learning pathways for all staff.

**Fire Safety Training:**- Fire Safety training is available for delivery in various formats to ensure the training is accessible to everyone. The Fire Marshal training is delivered in person and has been improved across this reporting period, introducing desktop exercises and building tours to embed the learning material.

Newly developed in-house this year, our live fire extinguisher training package is currently being rolled out to security staff, porters, cleaners and fire marshals. This will also be targeted towards staff in specific risk areas, such as laboratories and commercial kitchens. The training uses a live fire rig and full-size fire extinguishers to maximise the learning experience. It is hoped this interactive training will encourage more staff to fill the extra fire marshal roles created through hybrid working patterns.

Bespoke fire safety training has been delivered to Residential Assistance and Security staff, to provide them with the knowledge to identifying fire hazards, raise alarms, and reduce risk in our buildings. In addition a number of evacuation chair training sessions have been delivered by HSD to staff across all campuses to ensure those requiring evacuation assistance have the necessary help close by.

**Commentary on Health & Safety Training Statistics** (Appendix 1): - The statistics are a record of training activity with the broad headings showing the range of subjects HSD offer in support of the major University activities.

The Laboratory Hazards safety courses are a big section of the training provided as no general courses can provide the detailed information required on our policies and specific regulations. Additionally, as a research intensive University, we have many researchers coming through every year making this a large training cohort. The actual numbers will vary primarily around the research activity and recruitment figures.

Some areas of activity reflect increased awareness of a hazard, sometimes linked to incidents. One example being an increase in manual handling training, linked to an increased awareness of this hazard by user groups.

There are courses which are led by departments and their needs. For example, the bespoke sessions we delivered on seizure recognition for a Science & Engineering research group using brain mapping equipment.

The overall large spike in training numbers this year in comparison to last year is attributed to the introduction of the LMS system (CPD training platform) which has increased visibility of training compliance for these mandatory courses, and improved access to them. We anticipate these numbers will continue to increase into the new academic year.

### 3.2 Audit & Inspection Programme

**Audits:-** The School of Physical and Chemical Sciences H&S Management System Audit was carried out in this reporting period. The auditors felt there were many positive findings, however, key findings for improvements included a need to complete a thorough risk assessment for Hydrogen Fluoride, implement a regime to test emergency procedures, and review the process of contractors entering lab spaces.

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 585 actions have been identified which can be broken down into 100 high, 311 medium and 174 low priority actions. As of July 2024, there were 38 outstanding actions which can be broken down into 2 high, 22 medium and 14 low priority items.

High priority audit actions are kept under closer review to ensure that they are progressed and closed off. Although actions may be recorded as outstanding in the data summary, it does not mean that an action has not been addressed in some way. To provide some context, a summary of the outstanding / ongoing high priority actions identified in the H&S Management System audits is provided below:-

School / Institute / Directorate	Recommendation
School of Biological and Behavioural Sciences (Audit undertaken in 2018)	<p>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.</p> <p>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.</p> <p><b>Update provided 28/8/24 from EAF Senior Project Manager – the Fogg Legacy project tendering process was put on hold awaiting the outcome of the Estates Strategy feasibility report. This report is due to go to Estates Strategy Group workshops in September with a formal presentation to SET in October. If the strategy is approved it would start with the Fogg Legacy project which will provide an external gas bottle store to house the large volume Liquid Nitrogen Dewar from the 4th floor.</b></p>
School Physical and Chemical Sciences	The auditors were informed that there are plans for Hydrogen Fluoride to be used which, it was noted, is an extremely hazardous product. If possible, this should be avoided and other

School / Institute / Directorate	Recommendation
(Audit undertaken in 2024)	chemicals be identified, however, if it must be used, the school will need to ensure that it is thoroughly risk assessed and findings strictly implemented and monitored. The assessment and processes should be kept under regular review to ensure they are sufficient and effective. Measures should also be taken to ensure that it is only accessed by authorised and trained persons.

**Inspections:-** The health & safety inspection programme continued across all Schools and Institutes during the year. Progress has been good e.g. a wide range of 30 laboratories have been completed. Academics and support staff have consistently engaged well with the process. Engagement is ongoing and the hope is that technical staff will be able to self-inspect in future.

**Safety Coordinator Forums:-** We have run a number of these over the year to allow those covering health & safety duties in their areas to come together and learn about the latest HSD initiatives and to network.

**Eco Campus** HSD supported the Sustainability team with input into the annual Eco Campus audits Spring 2024 to maintain the Platinum and ISO 14001:2015 EMS certificate status awarded to Queen Mary in 2022.

**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.

**Student selection panels:-** H&S Adviser (FMD) participated and inputted into the School of Dentistry undergraduate student selection panels.

**Queen Mary Animal Welfare & Ethical Review Body:-** The HSD Director became a Lay member of the AWERB which carries out ethical review of animal research project licence applications.

### 3.3 Wellbeing

**Student Wellbeing:-** Queen Mary has committed to work towards the University Mental Health Charter and is now seeking to appoint a Wellbeing Manager to advance our work across both staff and student services. The University has an established Wellbeing and Mental Health Steering Group, chaired by Director of Student Experience, which includes representation from across the institution.

Queen Mary offers comprehensive wellbeing support to students. In 2023/24 this included:

- Counselling (accessed by 2,308 students)
- Mental Health Advice (accessed by 1,479 students)
- Disability Advice (2,787 students registered with the Disability and Dyslexia Service)
- Advice to students experiencing sexual assault / harassment (accessed by 84 students)
- Wellbeing support through an online platform, Togetherall (accessed by 199 students)

Further enhancements and improved support initiatives developed during 2023/24 include:

- Development of a suicide prevention strategy.
- Partnered with private student accommodation provider Scape to provide a new scholarship for care experienced and estranged students
- Created an international student advice podcast
- Introducing the Good Course Harassment and Sexual Misconduct online course which has been completed by 2,339 students.
- Increasing provision of diagnostic assessment for students with a Specific Learning Difficulty by 27% (over 500 assessments).
- Delivered new supermarket voucher scheme for those in immediate hardship.

Our trauma-informed care and support services for student survivors of sexual violence and abuse was nominated for a THE Award 2024.

**Staff Wellbeing:-** Mental Health First Aider and Mental Health Awareness training continues to be delivered by HSD and OPD respectively and remains popular. A bespoke course was also delivered to staff with

responsibility for taking students on field trips which centred on how to help students in crisis. Several specialist wellbeing sessions have also been delivered over the year including at the Institute of Technology symposium.

HSD continue to run a forum offering support and further development for all our Mental Health First Aiders and the courses delivered continue to get very positive feedback; - *' I have learnt so many practical skills, theory and day to day procedures that will help me help others in distress.* (Staff member IT services).

Health surveillance: - HSD have issued protocols and a specific risk assessment template for respiratory (e.g. laboratory animal allergens) and biological agent / hazard protection to support the Health Surveillance Policy issued last year. The supporting job hazard form is now embedded into Queen Mary's e-recruitment system enabling line managers to obtain health surveillance and other protective measures identified at the start of new staff's employment period, and also for changes in staff / PGR activities.

### 3.4 Accidents & Incidents

During the reporting period there were 426 reported accidents/incidents including 5 RIDDOR incidents and 66 near miss incidents (Appendix 2).

The reported incidents figure is up slightly on the year before, the main increases were 'Injury by animal / insect' and 'Step on or against an object'. The vast majority in the first category were as a result of bee stings due to increased research and led to us delivering specialist first aid sessions on anaphylaxis. The second category increase was due to sporting activities in the Student Union. It was pleasing to see a drop in 'Exposure to harmful substance' following the robust laboratory training and inspection that HSD has led over the last year.

General reporting has improved across all areas in the period, which was welcome as the relative lack of reporting had been identified in previous years and a large drive on MySafety training across Schools has taken place to try and remedy this. No significant negative trends were identified from the data and the number of RIDDOR incidents reported to the HSE fell 50 % compared to last year.

## 4. Embedding Health & Safety within 2030 Strategy

Evidence of the part health and safety plays in enhancing the success of our 2030 strategy can be seen in the demonstration of the University's core values in the work we do.

**Inclusive and Ethical:** - We have membership on the Disability Inclusion Advisory Group, Queen Mary Ethics of Research Committee and the Animal Welfare & Ethical Review Body. This helps to ensure that the directorate has input in and is aware of the wider processes in place for research and inclusion.

**Proud:-** Using the national Mental Health awareness campaign calendar HSD have promoted various wellbeing initiatives across the University, including:- World Suicide Prevention Day, Support for those impacted by the Race Riots and Violence and My Whole Self day, a campaign for workplace culture change dedicated to celebrating diverse identities.

**Ambitious:** - We continue to lead the HE sector on our Health & Safety training provision, offering a comprehensive suite of training which reflects our passion and expertise. In addition we have worked hard to promote good practices identified in H&S audits across other areas in Queen Mary, such as the lone working process in the School of Physics & Chemistry and Out of Hours project in the School of Maths.

**Collegial:** - We are a well-established advisory directorate who are considered as a valued stakeholder offering pragmatic advice on a wide range of issues. These include strategic support through Command groups and operational support to the events team on the planning, execution and debrief of major events in sometimes challenging circumstances over the reporting period.

## 5. Objectives for 2024/25

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**

- Our programme to review and update all policies and procedures has made great progress this year and should see completion by mid-2025. This includes document retention procedures as well as review of existing documents and the creation of new policies where gaps are identified (in collaboration with key stakeholders). This will include a guide document for health and safety elements of laboratory design and construction.
- Our segregation of clinical waste education campaign is well underway and will continue in 2024/25 to further reduce the volume of waste that requires high temperature incineration.
- A Radon monitoring program across occupied basements of campus buildings will commence.
- Support EAF and security colleagues with Martyn's Law workstream if required.

### **Training and competence**

- Empower technical staff within Schools to self-inspect and record on MySafety system.
- Continue HSD learning and development to build resilience within the team.

### **H&S Auditing**

- Undertake H&S Management Systems Audit for SBBS.
- Undertake audit of MySafety to establish success of department led inspections and record keeping.
- Following findings identified during informal walkarounds in several areas of the University, we will be undertaking an exercise to look at improving the efficiency and consistency of risk assessments across Queen Mary.

### **Fire Safety**

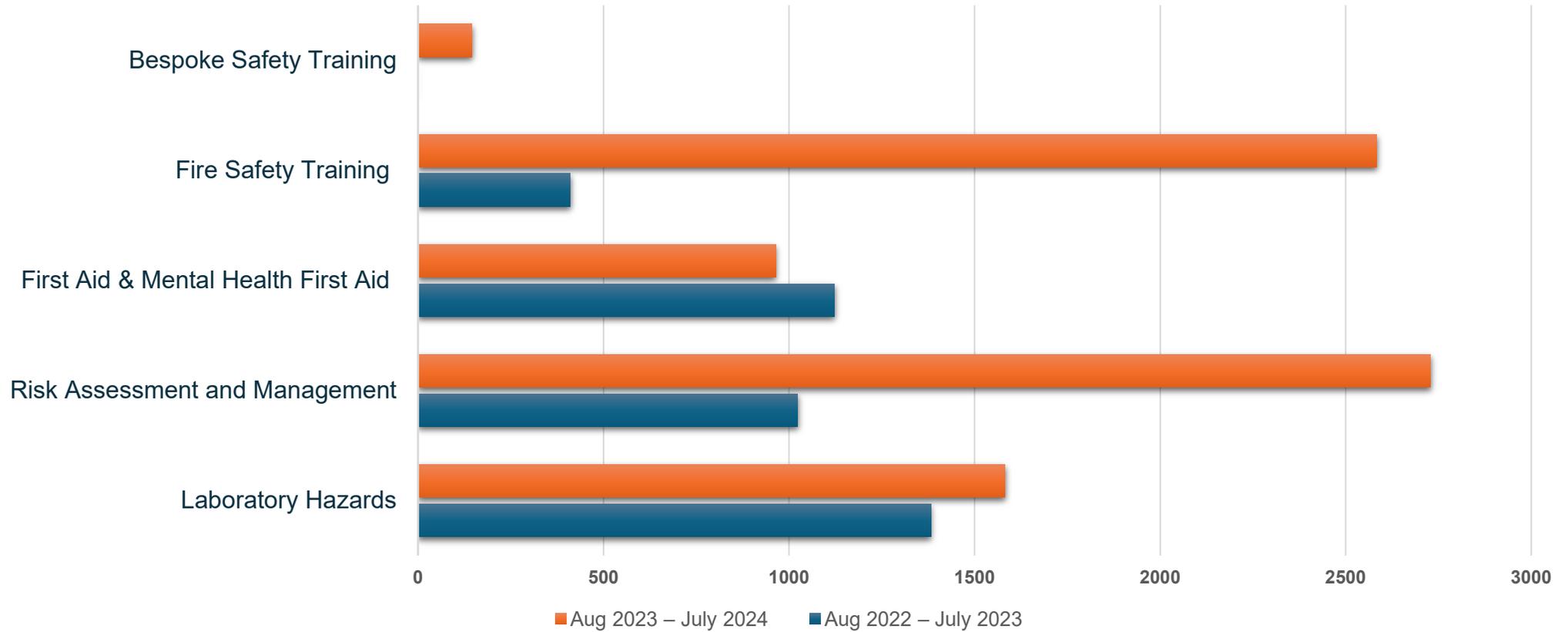
- We will continue to respond to fire safety legislative changes, ensuring new compliance requirements are embedded into everyday practices.
- Enhance the fire safety training program further, targeting risk areas to ensure if incidences were to occur, Queen Mary is well equipped to deal with them.

Rebecca Jones

Director of Health & Safety

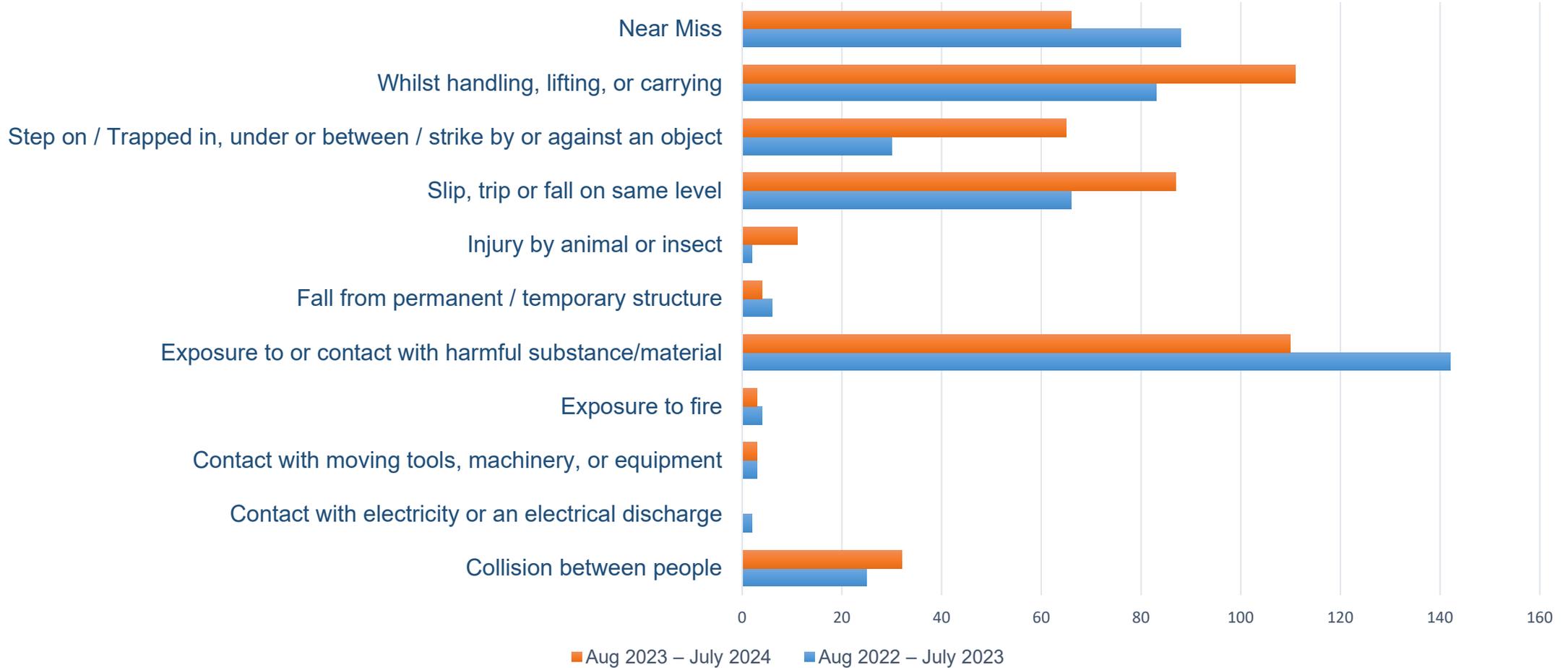
1<sup>st</sup> October 2024

## Appendix 1 - Health and Safety Training Comparison 2022/23 - 2023/24



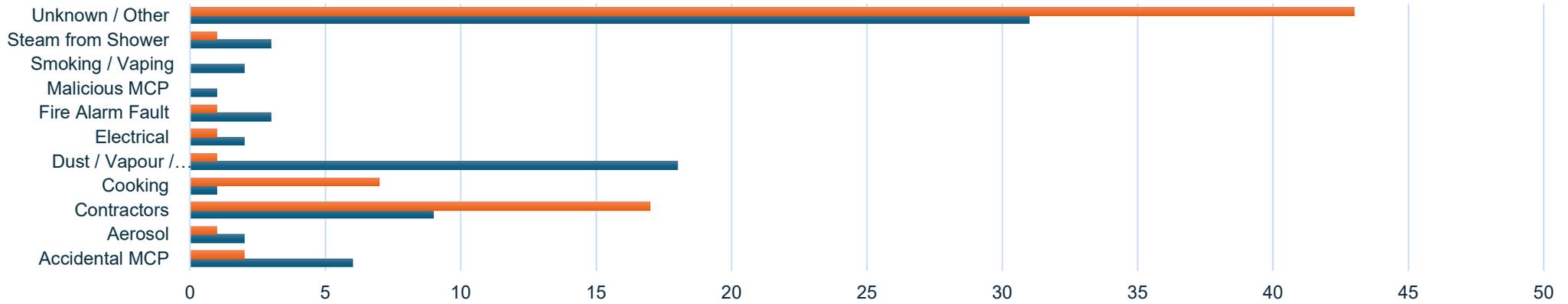
	Laboratory Hazards	Risk Assessment and Management	First Aid & Mental Health First Aid	Fire Safety Training	Bespoke Safety Training	Total
■ Aug 2023 – July 2024	1582	2729	964	2584	145	8004
■ Aug 2022 – July 2023	1382	1023	1122	410	0	3937

## Appendix 2 - Accidents / Incidents Comparison 2022/23 - 2023/24



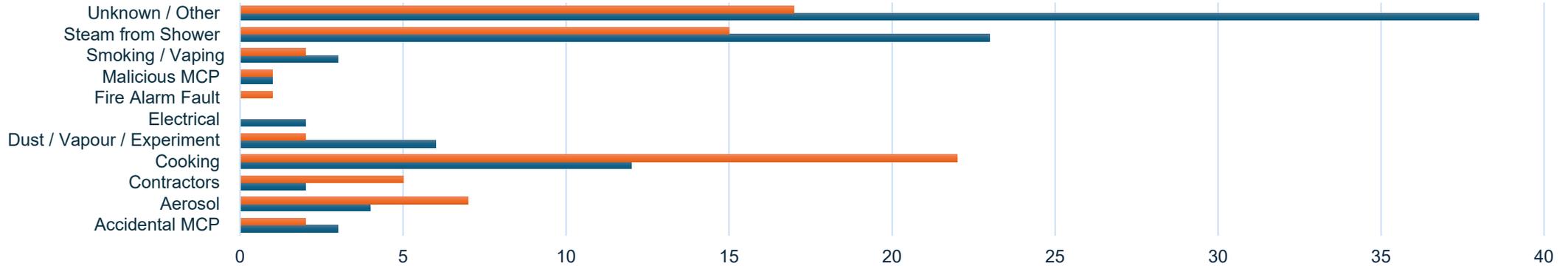
	Collision between people	Contact with electricity or an electrical discharge	Contact with moving tools, machinery, or equipment	Exposure to fire	Exposure to or contact with harmful substance/material	Fall from permanent / temporary structure	Injury by animal or insect	Slip, trip or fall on same level	Step on / Trapped in, under or between / strike by or against an object	Whilst handling, lifting, or carrying	Total Accidents / Incidents	Near Miss
■ Aug 2023 – July 2024	32	0	3	3	110	4	11	87	65	111	426	66
■ Aug 2022 – July 2023	25	2	3	4	142	6	2	66	30	83	363	88

## Appendix 3 - Non Residential Buildings - Fire Incidents Comparison 2022/23 - 2023/24



	Accidental MCP	Aerosol	Contractors	Cooking	Dust / Vapour / Experiment	Electrical	Fire Alarm Fault	Malicious MCP	Smoking / Vaping	Steam from Shower	Unknown / Other	Total
■ Aug 2023 – July 2024	2	1	17	7	1	1	1	0	0	1	43	74
■ Aug 2022 – July 2023	6	2	9	1	18	2	3	1	2	3	31	78

## Appendix 3 - Residential Buildings - Fire Incidents Comparison 2022/23 - 2023/24



	Accidental MCP	Aerosol	Contractors	Cooking	Dust / Vapour / Experiment	Electrical	Fire Alarm Fault	Malicious MCP	Smoking / Vaping	Steam from Shower	Unknown / Other	Total
■ Aug 2023 – July 2024	2	7	5	22	2	0	1	1	2	15	17	74
■ Aug 2022 – July 2023	3	4	2	12	6	2	0	1	3	23	38	94