Safety Services Guidance

Annual health & safety monitoring reports

Key word(s):	Annual monitoring reports; health & safety goals and objectives;
Target audience:	Senior managers; those writing or contributing to annual monitoring reports.

Contents

Introduction 2
Health & safety goals (appendix 1) 2
Risk Profile Tables (appendix 2) 3
Appendix 1 SMART health and safety goals 5
Appendix 2 Examples of risks and how to include them in Section A and B tables 10
Document control box 19

Management cycle	Useful paragraphs
Plan	1-3, 4-7
Do	2
Monitor	1-3
Review	8-9, Appendix 2

Introduction

1. The University of Manchester Board of Governors requires scrutiny of annual monitoring reports as one means of satisfying members that senior managers are fulfilling their health & safety responsibilities. The Health & Safety Committee delegates scrutiny to its Occupational Health, Safety & Training Advisory Group (OHSTAG) which, from time to time, approves changes to the templates used by schools, faculties and directorates, and also manages the programme of submission.

2. The monitoring programme has been in place since 2007. There are a set of templates which are adapted by Safety Services, depending upon the timing and nature of the submission. Most schools, directorates and faculties submit a detailed report every other year, with a "lighter" version used to affirm continuation of arrangements with little change for the alternate years. Safety Services staff prepare the templates and send them out. The templates are designed to enable managers to showcase examples of their leadership, good practice and innovative problem-solving, as well as provide a solid base of evidence for compliance and make a useful contribution to audit enquiries.

3. OHSTAG[1] has noted that two questions appear to cause the most difficulty and result in the weakest responses. This guidance is primarily aimed at explaining how to address these questions and to give examples of good returns. The two topics relate to setting health & safety goals, and to filling in the risk profile tables. The two are connected, in that risks appearing in Section B should inform action plans to deal with them.

Health & safety goals (appendix 1)

4. The templates require managers to state whether the health & safety goals set the previous year have been met, and what goals have been set for the next 12 months and in the longer term.

5. The HASMAP audit and management tool requires improvements in health & safety performance to be achieved through setting objectives and actions plans derived from systematic analysis. See, for example, HSG 65, or think about the Deming cycle of continuous improvement of Plan Do Check Act. HASMAP audit reports will provide useful indicators for setting goals and targets for improvement.

[1] The Occupational Health, Safety & Training Advisory Group, a sub-committee of the University's Health, Safety & Environment Committee, see chapter 3.

6. Goals should be “SMART”, that is they should be specific, measurable, attainable (but at a stretch), relevant and time-bound. They should also recognise that “what gets measured gets managed” and so be set with care to avoid distortion of performance or under-reporting in order to achieve them. An example of a goal than can result in an unexpected and unwanted outcome is “Reduce accidents by x % this year”. If staff perceive this as management pressure not to report accidents, the goal can be achieved by under-reporting rather than by a true reduction in accidents.

7. Appendix 1 contains a selection of goals which can be adapted to suit a managed unit. Most units will choose 3-4 goals, depending on the volume of work entailed in each, and should prioritise them. Goals should be chosen to cover risks to staff, students and visitors, and any other particular group relevant to the unit (e.g. contracted or agency staff, staff working off campus, etc.). Once selected, the unit should report on progress (or lack of it) in the next year’s monitoring report, and progressively build on achievements.

8. In addition, actions designed to implement HASMAP audit recommendations should be added to the goals template.

9. Goals should also be linked to issues identified in Table B submissions. For example, if Table B includes the statement “Exposures to hazardous substances not controlled”, a SMART goal should relate to review of the risk assessments and control measures, monitoring and inspections, checks on wearing PPE and its suitability.

Risk Profile Tables (appendix 2)

10. These are specified in the school/directorate templates, and are split into 2 parts. Section A is for risks that are well-characterised, clearly understood and recognised by those working with them, and well controlled. The risk and an outline of how controls are implemented should be listed. This section is an opportunity to demonstrate achievements and should be easy to complete for any unit. Section B is for risks that are new or emerging, less well understood or for which existing controls have failed or been compromised in some way. Not all units will report under this section, but all should critically review their section A risks to determine if there should be any entries in section B. Section B entries should inform goals and action plans, as units will want to address the short-comings in their arrangements. Significant uncontrolled risks should also be referred to in the unit’s risk register.

The tables in Appendix 2 are quoted or adapted from real submissions by schools and directorates. Tables 3 and 4 (for section B submissions) also quote how controls have been improved once the risk has been recognised. None of the tables is intended to be fully comprehensive and they are not mutually exclusive, but the entries may provide some ideas of what to include.

Appendix 1 SMART health and safety goals

Objective	Measurable target	Timescale	Managerial Lead (e.g. HOS/HOSA)
Improve induction procedures - staff	All new starters to have completed on-line induction course (THS1E) within 1 month of starting	Depends on starting point! Could say year on year increase over next 2 years, to achieve 100%	
	All new starters to have completed the local induction checklist, obtained all relevant signatures and returned details to STDU within 1 month of starting	Depends on starting point! Could say year on year increase over next 2 years, to achieve 100%	
	All staff transferring internally to have completed the local induction checklist, obtained all relevant signatures and returned details to STDU within 1 month of starting.		
	All new and transferring staff complete a display screen assessment within 1 week of starting or changing their workplace.		
Improve induction procedures - students where relevant	Year on year improvement in % UGs & PGTs completing and passing the mandatory h&s induction modules		
	Year on year improvement in % PGRs completing and passing the mandatory h&s induction modules		
Raising fire safety awareness	Increase % staff who have completed the on-line general fire awareness course THS41E, year on year	Could be a phased plan to cover the whole managed unit within 2-3 years.	

Objective	Measurable target	Timescale	Managerial Lead (e.g. HOS/HOSA)
	Increase no of appointed fire evacuation marshals who have completed or refreshed their training within 5 years (THS47E or attended workshop).		
	Carry out additional fire evacuation practices in buildings where University organised practice exceeds 7 minutes.		
Learning from accidents and near misses	(If late reporting is an issue), 100% accidents notified to Safety Services within 2 working days		
	100% accident investigations completed within (x days) of occurrence, with learning outcomes reported to local safety committee.	Timescale would depend on nature of typical accidents.	
	100% incident investigations completed within (x days) of occurrence, with learning outcomes reported to local safety committee.		
	100% recommendations from accident investigations are implemented to agreed timescale (or reasons for deviations reported and agreed at local safety committee).		
	(If analysis shows priority areas eg slips, falls, manual handling injuries, sharps injuries, etc.), run an awareness campaign to reduce priority area accidents by x%		
Implementation of HASMAP (or other	All HASMAP (or other audit) findings considered by local safety committee, and	Will depend on schedule for being audited. Any outstanding	

Objective	Measurable target	Timescale	Managerial Lead (e.g. HOS/HOSA)
audit) recommendations	recommendations fully implemented within x months of receiving report.	reports could be included as an objective.	
	Develop a plan to achieve improvements in HASMAP scores (eg all 2+ scores in last audit to be raised to 3).		
	Aim for HASMAP level 4 in specific theme(s) or indicators(s) of interest, or where performance is already a strength.		
Risk assessments	x % risk assessments critically reviewed each year	Could be rolling programme, depending on the number and complexity of risk assessments	
	In x % of risk assessments, checks made that control measures are in place and being implemented	Could be rolling programme	
	Implement Safety Circular 5/2014 (re wearing eye protection) by reviewing all relevant risk assessments, checking need for eye protection to be worn, and amending all risk assessments with signatures of those at risk of eye injury.		
Inspection programmes	Completion of annual inspection programme, with HOS/Director accompanying inspection group on at least one occasion		
	(For lab-based areas), carry out x checks on fume hood sash positions when not in use, and develop awareness of users about lowering the sash.		

Objective	Measurable target	Timescale	Managerial Lead (e.g. HOS/HOSA)
H&S Training & competency	Local safety advisor(s) attends at least 2 SANE events per annum		
	Lead local safety advisor is actively engaged in using the University's Competency Development Framework		
	x % of PIs (or other group of managers) to attend the University's Risk Assessment training course, THS 15 Principles of Risk Assessment, and the follow-up workshops THS 67 (for lab based staff) or THS 68 for non-lab based staff). Could be part of 2-3 year programme for all such managers to achieve attendance of relevant course(s).		
First aid	Review first aid reports and arrangements, and provide additional names for first aid training to Janet Makin where necessary	End of year	
	Develop case for purchase of local AED (defibrillator)		
	Aim for increased uptake of on-line resuscitation training (THS 999) year on year, starting with 10% the first year		
Wellbeing	Analyse staff patterns in taking full entitlement to annual leave		

Objective	Measurable target	Timescale	Managerial Lead (e.g. HOS/HOSA)
	Arrange discussion of Staff Survey stress analysis, and develop action plan to address “red” and “amber” indicators.		
Use of Personal Protective Equipment (PPE)	Sample x risk assessments for PPE-related control measures, and carry out 4 visits over the year to ensure correct PPE is being worn, and worn properly		
	(For lab & workshop based activities, house services and environmental services in particular) Ensure full compliance with the wearing of eye protection in accordance with either the risk assessment or local rules by carrying out X inspections, reporting the results to safety committee and monitoring any remedial actions.		
Governance	Review the effectiveness of the local health & safety committee (with reference to Chapter 14) and implement changes to improve participation and proactive discussion.		

Appendix 2 Examples of risks and how to include them in Section A and B tables

Table 1 : Section A examples for a low risk, largely office based unit.	
Risk	Control strategy and effectiveness
Musculo-skeletal injuries from overuse of DSE	Use of DSE assessment questionnaire and survey tool, xx % response, follow up by appointed and trained DSE assessors, and actions being undertaken.
Injury from fire/smoke	All staff have been inducted or refreshed about their role in a fire evacuation. Fire evacuation marshals have been appointed. Practice evacuation once a year. Time to evacuate satisfactory. Those with disabilities have PEEPs or other arrangements to ensure that they can evacuate safely.
Electric shock or fire from defective electrical equipment	All portable appliances checked by contractor (contract managed by Estates, last date of checks – xx/xx/xxxx).
Injury from slip, trip or fall on the same level	Regular inspection programme of physical conditions in offices, tripping hazards dealt with, defects reported and following up. Reminders and awareness posters used.
Risk of accidental injury and to personal safety when working alone.	Staff do work outside normal office hours, in a planned and unplanned manner. No incidents, but some concern reported re personal safety. Staff consulted and risk assessments reviewed for lone working in offices (and any other workplaces identified during consultation). Staff always have access to phones, are aware of how to contact Security.
Stress	During P&DRs, staff asked if they have taken full leave allocation.
Injury while retrieving goods stored at high level or in storage facilities.	New storage areas should eliminate problem. In the meantime, heavy or awkward objects stored at waist height and 2nd person to assist in lifting. All staff have undertaken Working at Height training.

Table 2 : Section A examples for teaching and research based, or schools / directorates involved in more practical work	
Risk As Table 1, plus :	Control strategy and effectiveness
Sharps injuries from students first using needles/ampoules, etc	Clinical Skills Laboratory simulates environment where students can practise their clinical skills without risk to themselves or patients
Radiation sources	Radiation Protection Supervisors are in place and up-to-date with training. Radiation Protection Advisor accessed via Radiation Safety Services (in-house) / external contractor. Local rules in place and reviewed regularly. Personnel wear dose badges
Chemical risks	COSHH assessment in place, carried out by trained staff. PPE available and used. Warning signs on lab access points, etc.
Insufficient training (competence) leading to inappropriate use of equipment, non-containment of biohazards	All chemical and biological agents subject to risk assessments. Training needs identified by induction, P&DRs, inspection and supervision.
Regulation of GM projects	PI reporting and committee authorisation/auditing in place. BSO advice given at all stages including in planning research proposals.
Safe working environment for research & teaching.	Regular inspections, reporting of projects and activity changes, reporting of adverse incidents and near misses. Comprehensive induction programme for all staff, with separate (more detailed) h&s induction where appropriate. Pro-active H&S Committee involvement in change management.
Exposure to high magnetic fields	Dedicated staff working in areas of high magnetic fields are informed about the risks and provide training to others who may need to access these areas. Physical barriers are in place and signs displayed.
Creation of an oxygen deficient atmosphere	Oxygen depletion monitors are installed where risk assessment shows this is possible. Monitors are regularly maintained by external contractor, and training in what to do is part of the School's safety induction programme.
Faulty electrical equipment giving rise to fire or electric shock	Register of electrical appliances kept up-to-date and equipment tested by member of technical staff. Failed items put beyond use at time of testing until repair/destruction
Use of pressure vessels	Register of pressure vessels kept and inspections by Allianz monitored by SSA

Table 2 : Section A examples for teaching and research based, or schools / directorates involved in more practical work	
Risk As Table 1, plus :	Control strategy and effectiveness
Use of lifting equipment	Register of lifting equipment kept and inspections by Allianz monitored by SSA.
Use of gas cylinders	SSA maintains a database of all gas cylinders and gas regulators, recording type, location, owner, last inspection date.
Use of ladders	SSA maintains a database of school-owned ladders, recording their location, type and owner and inspection date.
Use of liquid nitrogen	School ensures only approved and trained users are authorised to dispense liquid nitrogen from its two bulk storage tanks.

Table 3 Section B examples for low risk, largely office-based schools / directorates		
Risk	Example incidents/losses	School/Directorate's response/programme of work
Injury from slip, trip or fall on same level	Use local accident stats – this type of accident is the single largest cause of injury.	Continue to increase awareness amongst all staff, to "Don't just see it, sort it". Participate in University's forthcoming campaign on slips and trips. Consider use of the HSE on-line slips and trips awareness tool (seek guidance from your USC)
Fire safety	Observation after practice evacuation – confusion about when to return to building, etc	Seek advice from Evacuation Co-ordinator about action to be taken immediately after an evacuation, and roles of evac marshals, security and others. Participate in Building User Group to liaise with fellow occupiers.
Non-evacuation during alarm	Person(s) observed not responding to fire alarm Report of person(s) continuing to teach during fire alarm.	Implement standard letter of reprimand, to be placed on personal file. Refresher fire safety training given. All staff email from Senior Manager emphasising importance of evacuating promptly, and failure to do so will be a disciplinary matter.
Fire alarm fatigue	Numerous false alarms (due to contractors/installation of new system, etc)	Cause of multiple unwanted alarms discussed with Fire Safety Officer. Root cause now dealt with and alarm activations being monitored. If problem recurs, to discuss actions with FSO/Fire Evacuation Co-ordinator.
Musculo-skeletal injuries from accessing/using or storing : • Documents	Complaints or referrals from Occ Health to put staff on light duties	Consult University Safety Co-ordinator on improving manual handling risk assessments, and targeted training programme for staff

Table 3 Section B examples for low risk, largely office-based schools / directorates		
Risk	Example incidents/losses	School/Directorate's response/programme of work
• Publications • Archive boxes • Conference stands or equipment etc.		involved regularly in moving such items.
Injuries from road traffic accidents whilst driving for work (including so-called "grey fleet" drivers using their own vehicles)	Review how many staff use their own vehicles or hire vehicles for work (eg to travel to conferences, off-site meetings).	Carry out gap analysis between Chapter 21 and existing practices.
Various risks to staff attending conferences off site	Staff expressed concerns about travelling overseas after news items on (civil unrest, heightened risk of terrorism, tsunami or other natural disaster, etc.)	Check existing arrangements against Chapter 24 Collect basic information about numbers and frequency of staff going off-site. Discuss implications of document at h&s committee or team meetings, and with your USC. Assess training needs of staff.
Student Placements (low risk)	Staff raised concerns about ensuring adequate protection of students on placement with UK companies.	Placements to UK employers subject to UK h&s legislation. All placements subject to risk assessments and 3 way agreement on responsibilities shared between University/student and placement provider. Compare existing arrangements with Chapter 16 and identify any gaps and training needs.
Reporting of near misses	Procedures in place but suspect under-reporting of near misses with potential to cause injury. After one serious trip incident, others	Improve awareness of importance of reporting, and encourage openness about learning from these opportunities.

Table 3 Section B examples for low risk, largely office-based schools / directorates		
Risk	Example incidents/losses	School/Directorate's response/programme of work
	came forward to say they'd stumbled in the same place.	
Lack of safety awareness due to failure to induct agency staff	Staff recruited from agencies could by-pass the University's formal induction process.	Apply same induction processes to agency staff as to permanent staff.

Table 4 Section B examples for teaching and research based, or schools / directorates involved in more practical work		
Risk As Table 3 plus	Example incidents/losses	School/Directorate's response/programme of work
New or emerging technologies or materials	Unknown health & safety implications for applications or for users and waste streams	Monitor toxicological and other research outputs, and legislative proposals
Freezer failure	CO2 freezer failed and door had to be forced open, risking contents and locking mechanism.	SOP modified to reduce likelihood of recurrence. Staff reminded on how to use back up system.
Review of student placements	Stabbing incident during placement of student nurse.	University procedures not followed. Investigation by placement provider carried out and their arrangements subject to recommendations. University procedures reaffirmed
Supervision of students in shared facilities	Local issues re supervision of FLS students working in M&HS labs.	Arrangements reviewed by HOS and HOSA
Movement of hazardous materials	Existing systems reviewed. OK but need to adapt to development and changes in the estate.	Review regularly at unit h&s committee meetings.

Table 4 Section B examples for teaching and research based, or schools/directorates involved in more practical work		
Risk As Table 3 plus	Example incidents/losses	School/Directorate's response/programme of work
Exposures to hazardous substances not controlled.	Observations during inspections that PPE not worn.	Action plan during next year to raise awareness, increase focus of inspections on PPE, check PPE provided against suitability, comfort and wearability, identify barriers to PPE being worn, target those barriers.
Risk of breaches due to inadequate document management	Staff not trained on records retention systems – for COSHH, Bio and Human Tissue Authority assessments	Investigate if this is a faculty-wide issue or others reporting same. Liaise with Safety Services staff
Risk from unidentified or "unowned" substances left in vacated labs	Need for clearer decontamination and hand-over processes	Develop "Leaver's document pack", and seek support across faculty for its use. Action to monitor effectiveness. Follow Vacating Premises Guidance
Splash risk from CMR during gel loading	Very small volume but possible risk to eyes and face.	RIDDOR incident when student taken to hospital as a precaution. Review risk assessment and provision/use of eye protection
Injury and damage from fire or explosion.	Storage and use of highly flammable materials. Temperature critical reactions which may cause fire or explosion. Scaling up experimental procedures using such materials. Incident at Liverpool University resulted in Improvement Notice on their Chemistry Dept	Safety inspections: check quantities stored are minimised and kept in fire resistant cupboards. New mandatory induction module prepared for PGs and Post Docs. Chemical risk assessments for such reaction reviewed by SSA prior to work commencing
Ineffective communication of h&s information due to language / cultural barriers	Researchers from different cultures and familiarity with the English language observed to have different understandings of induction material	Instigation of a lab buddy system so that such individuals do not work alone and are paired with someone who can look out for them and communicate with them.

Table 4 Section B examples for teaching and research based, or schools/directorates involved in more practical work		
Risk As Table 3 plus	Example incidents/losses	School/Directorate's response/programme of work
Poor housekeeping leading to increased risk of spills, fire loading, slips/trips	Regular inspection of labs picks up on same labs each year with poor housekeeping standards.	Annual safety update for PIs includes "name and shame" slides for discussion. Slides also used for induction training. Trial appointment of Safety Champions – observed that where these are in place, housekeeping is better. To roll this out across entire school.
Environmental risks – eg of flooding / too hot/too cold	Observation of burst pipes/complaints that working conditions are too cold to safely handle chemicals or equipment/ appearance of multiple plug-in local heaters or air moving fans, etc.	Issue raised with Faculty Estates teams and/or placed on Estates & Facilities Helpdesk to discuss resolution or improvement at source rather than proliferation of untested electrical equipment or improvised arrangements. School staff kept informed of on-going discussions. One person appointed to collate all complaints and observations, and liaise with Estates.
Failure of safety-critical welds	Effective controls and testing of welds not yet in place.	On-going discussions with School and USC, and Allianz about obtaining competent advice on designing and testing welds
Injury arising from offence given during social science research	Use of inappropriate language, body language or procedures during survey or interview work with vulnerable subjects could trigger a violent attack	Full risk assessment completed before undertaking such work. PPE (including stab vest) considered. Liaison with Police as appropriate. Staff advised to undertake training in use of questionnaire and interview-based qualitative research methods. Ethical consents required as well. Research proposals involving

Table 4 Section B examples for teaching and research based, or schools/directorates involved in more practical work		
Risk As Table 3 plus	Example incidents/losses	School/Directorate's response/programme of work
		confidential or sensitive issues, or with dependent/vulnerable people could be refused

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