

## University Health & Safety Arrangements : Chapter 14



### Local health & safety committees (or equivalent)

Key word(s):	Health & Safety Committees, trade union and staff representation; membership and agendas.
Target audience:	Senior managers; chairs of health & safety committees; TU safety representatives, staff representatives; health & safety committee members.

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#### Note.

**“Senior Managers”** are responsible for health and safety within their organisational unit, specified areas or as a consequence of their activities, and for any additional activities as agreed and delegated to them (eg where they accept responsibility for day-to-day safety arrangements for staff who have other line managers, for reasons of geographical or other convenience). They may be Deans, Heads of School, Directors of Institutes, Directors and Heads of Service in non-academic areas, the University Librarian, the Directors of the Manchester Museum and the Whitworth Art Gallery, and their equivalents.

## Introduction

1. The University's organisation in place to implement the health & safety policy requires that senior managers establish and attend a local Health & Safety Committee (or equivalent), or another means of receiving regular monitoring and progress reports from managed units. The term "local" in this document encompasses school, institute, directorate and in some cases, building health & safety committees. Further to a review in Governance arrangements, the scope of local health and safety committees was asked to include Wellbeing issues. These Wellbeing issues are outwith the scope of this Chapter which deals with health and safety issues only.
2. The terms of reference, membership and frequency of meetings of these committees should be commensurate with the risk profile and complexity of the school or unit to which it refers, and should be clearly documented.
3. Fundamentally, a local health and safety committee is a means by which senior managers will receive assurance from managed areas that they are identifying and managing the risks associated with their work. This will enable the necessary assurance to be provided to the University leadership, which ~~will be asked for~~ is required.

## Chair and membership

4. Chairing a local health and safety committee is a way of demonstrating commitment and leadership in health and safety, indicating that issues are dealt with when they arise, and staff concerns are heard. It is also an opportunity to drive improvement and encourage shared ownership of health and safety. Some senior managers may prefer to attend as active members and contribute in this way, rather than by chairing the meeting.
5. A typical local health and safety committee will meet 2-4 times a year, unless circumstances require more frequent meeting.
6. Membership of the committee will include representation from all sections or divisions within the school, institute or directorate, and represent all areas of technical expertise. In some cases, staff working in lower risk areas may be happy for others to pass on any concerns they have, but relatively low risk areas, such as offices, should not be overlooked.
7. In some instances, committee chairs will need to invite attendance or receive reports from other interested stakeholders (eg Landlords, representatives of permanently based contracted service providers etc.) There may be common interests with Estates-led Building User Groups (BUGs) focus groups or Building Management Groups (BMGs) and specialist safety committees (e.g. Genetic

Modification and biosafety, radiation committees) that should also be reported on and discussed.

8. Membership must always include trade union safety representatives, in accordance with the Safety Representatives and Safety Committee Regulations 1977. If there are no recognised trade union members or representatives, sections should be asked to appoint someone to attend and report back to others ("staff representatives").
9. University Safety Co-ordinators from Safety Services should be invited to attend, and are able to advise the chair and the wider committee, but they are not members.

### **Committee business**

10. The committee should endeavour to focus on matters of policy and practice, not specific complaints. The latter should be dealt with as a matter of routine, and only be reported to the committee if there are fundamental faults with the internal complaints procedures, or patterns of repeated or persistent complaints about the same issue.
11. A typical agenda might include:
  - a) Matters arising (eg matters raised by members and safety representatives)
  - b) Risk profile (eg update on any new hazards or any changes in key risks; reports and recommendations arising from fire risk assessments)
  - c) Accidents and incidents (eg summary of accident or incident statistics, and outcomes of their investigations)
  - d) Audits and inspections (eg reports from internal inspection programme, risk assessment checks and associated recommendations/action plans; reports and recommendations from HASMAP; reports from any visits from other agencies eg HSE, EA, insurers, etc.)
  - e) Equipment (eg proposed installation of any new equipment/introduction of new hazard or change that might have implications for health & safety; reports of statutory examinations of pressure systems, lifting equipment, local exhaust ventilation; use of personal protective equipment; portable appliance testing; DSE user assessments etc.)
  - f) Emergency arrangements (eg monitor the arrangements to deal with all potential emergencies to ensure they are adequate, current, cover key risks and that all people have received appropriate training)
  - g) Compliance issues (eg changes in legislation or University Arrangements; any changes to local working practices required; completion of summer and winter compliance returns)
  - h) Effectiveness of information instruction and training (e.g. safety training needs; training undertaken and it's effectiveness; and progress towards competency of key personnel)

- i) Correspondence and communication (eg information received from, and information requested by, others with a stake in the work of the committee; communication from Safety Services; reports from BUGs, BMGs or other relevant committees; any awareness campaign or targeted information about specific topics of interest).
  - j) Progress against health and safety objectives (annual monitoring reports – progress with objectives; setting new objectives; items to be covered in future reports, drafts for comment, consideration of feedback from USCs and Advisory Groups (See 14).
  - k) Reports from specialist advisors & representatives (reports from the school or local safety advisor; reports from specialist advisors, e.g., radiation protection supervisors, school laser safety advisors, biological safety advisors, etc)
  - l) Annual review of Policy & Arrangements (reviews of local policy statement; reviews of key arrangements documents; new arrangements)
  - m) Annual review of terms of reference
- Etc....

12. The majority of matters will be dealt with satisfactorily within the Committee.

13. However, if the Committee agrees that a particular issue is of relevance to others (e.g. schools within the faculty; other PS directorates), that issue should be escalated to a senior leader (e.g. to the Dean or Vice President), by the senior manager.

14. If the committee agrees that a particular issue is of relevance across the whole University, that issue should be referred to the appropriate advisory group - eg Occupational Health, Safety and Training Advisory Group (OHSTAG), Fire Safety Advisory Group (FSAG), GMBiosafety Advisory Group (GMBioAG) or Radiation Safety Advisory Group (RSAG), through the University Safety co-ordinator, the Chairs of the Advisory Groups, or from the Head of School to the Head of Safety Services.

15. Further advice, support and guidance is available from University Safety Co-ordinators.

<b>Document control box</b>	
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