



Health and Safety Committee

Health and Safety Annual Report 2022-2023

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Head of Health & Safety

On behalf of the Health & Safety Team

Report Date 1 March 2022 to 28 February 2023

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1. Executive Summary

This report covers the period March 2022 to February 2023 and comprises reports from Health & Safety and Human Resources (Occupational Health, Health & Wellbeing Initiatives and the Employee Assistance Programme). It summarises the University's organisation and arrangements in place to deliver the health and safety policy together with performance data, including statistics, trends and benchmarking in relation to accidents, RIDDORs, occupational health referrals, sickness absence and the employee assistance programme.

It also covers enforcement action and commentary on health and safety during the year including the following:

- Health and Safety Management
- Fire Safety Management
- Statutory Compliance
- Policy and Legislation
- Training and Competence
- Auditing and Inspections
- Covid-19
- Lothian Health Protection Team (NHS) issues
- Travel Risk Assessment
- Business Impact Analysis
- Business Continuity Plan
- Operational Risk Register/Plans for 2022/23
- H&S Priorities for 2022/23 completed
- H&S Priorities for 2023/24
- Health and Wellbeing
- Occupational Health Report

Health and Safety 12 Month Overview

During the last 12 months, the Health & Safety Team have worked through the final stages of the pandemic and with staff and students returning to campus, the team will continue to work with and support the Schools/Services in managing health and safety at a local level. Below is an overview of the last 12 months.

- Management of health and safety in the university during Covid-19 pandemic see Section 3.7.
- Accident/incident form has been updated to enhance the information we collect relating to the accident/incident, in particular root and underlying causes and measures to prevent occurrence.
- Investigations of accidents, incidents, first aid, near misses and dangerous occurrences continue by the Health & Safety Team.
- The Health & Safety Team continued to manage the provision of refresher training for our first aiders, in line with current HSE guidance.
- All regulatory fire risk assessments and statutory scheduled evacuations were carried out to
 ensure fire compliance within the university. Any issues raised for rectification are monitored by
 the Fire Safety Officer through the Fire Risk Assessment Tracker. The report also details
 unscheduled evacuations for all university properties.

- Investigations and inspections were also carried out following fire incidents and ongoing estates work, which unfortunately has resulted in internal Improvement and Prohibition Notices being issued for various H&S breaches. (see Section 3.3.2)
- A rolling review of all H&S Procedures and Policies continues (August 2022 to July 2023). The team
 are progressing well on reviewing all our procedures. We recognise that this is not a quick process,
 we have a number of items to review.
- Continued focus on ensuring the mandatory H&S eLearning modules are completed.
- Health & Safety Team carried out formal auditing of Schools and Services during January/February 2023 on their 2022 H&S Compliance. (see <u>Section 3.6</u>)
- The Health & Safety Team again achieved the ROSPA Order of Distinction Award in 2022.
 Edinburgh Napier University is still the first and only university in the UK to achieve the ROSPA Order of Distinction Award (for 19 years gold medal achievement).
- New chemical stores have been purchased and installed at Merchiston. There has been a major clear out of excess and redundant chemicals. DSEAR training and risk assessment to follow in March and April 2023.



- The H&S Team continue to liaise with external bodies and groups such as Lothian Health Protection Team and other universities.
- The Health & Safety Team have provided support and guidance to the Student Accommodation Team on all aspects of health, safety and fire compliance.
- The Health & Safety Team has also provided ongoing guidance and support to Schools and Services to ensure safe working procedures and guidance is adhered to throughout the year.
- H&S and P&F meet with the Unions every 8 weeks to discuss topical health and safety issues at the University. The first joint Health and Safety walkaround/inspection was carried out at Craiglockhart in November.
- The University participated in the annual sickness absence benchmarking survey facilitated by the Universities & Colleges Employers Association (UCEA) for the academic year and statistical information is provided in the Occupational Health report.
- MCL Medics provide the Employee Assistance Programme providing a free confidential and independent 24/7 resource to support staff on a range of issues either work related or personal.

2. Introduction

- 2.1 Background
- 2.2 Health & Safety Team
- 2.3 Occupational Health
- 2.4 <u>Employee Assistance</u>

2.1. Background

The University Court has the ultimate responsibility for the health and safety of all staff, students and other people affected by the University's actions.

The Court is advised in these matters by the University Health and Safety Committee whose membership consists of a representative of the Court, senior management of the University, students and safety representatives of the staff. The University Court has recognised its obligations and the Health and Safety Committee have taken a proactive role in increasing the awareness of health, safety and fire matters throughout the University.

The Principal & Vice Chancellor has the full authority of the Court for implementing the Health and Safety Policy and is responsible for ensuring that the Policy is implemented effectively throughout the University.

The responsibility for the day-to-day management of health, safety, fire and welfare within their respective areas of control is devolved through the Court/ULT/SLT to individual Deans of School and Directors of Service.

The Principal & Vice Chancellor has designated the Director of Finance & Operations as the Safety Officer with the responsibility to ensure the necessary organisation and arrangements for monitoring, auditing and reviewing the effectiveness of the University Health and Safety management system is established and maintained. Presently, as the Director of Finance & Operations, Andrew McGoff discharges this role.

2.2. Health and Safety Team

The Health and Safety Team comprises:

Bob Rennie BSc CMIOSH MIIRSM, Chartered Safety & Health Practitioner, Head of Health and Safety Sean Hughes BSc PgDip MCIOB CMIOSH, Chartered Safety & Health Practitioner, Health & Safety Manager David Conner Tech IOSH, Health & Safety Manager Kevin Weir GIFIreE, Fire Safety Adviser (part-time 3 days per week)
Ruth Thin BSc (Hons) PgDip, Health & Safety Co-ordinator

The Health and Safety Team reports to the University Safety Officer (Director of Finance & Operations). The Head of Health and Safety meets with the University Safety Officer on a fortnightly basis to discuss Health and Safety issues and an informal monthly report is produced for the University Safety Officer.

The Health & Safety Team is committed to ensuring the health and safety of staff, students, visitors and contractors by taking all reasonable steps to provide and maintain safe working conditions, equipment and systems of work.

Mr Rennie's report is attached in section 3.

2.3. Occupational Health Service

Staff

Occupational health (OH) needs of the University are outsourced and provided by an external provider, MCL Medics. The University transitioned occupational health services to MCL Medics when our previous supplier contract ended following a procurement exercise and selected them to provide our services as they were already in place as the University's Employee Assistance Programme (EAP) provider.

The intention behind aligning OH and EAP to one provider was to maximise our partnership and have a single supplier of services across our two key employee health and wellbeing provisions. Data and trend analysis functionality would be enhanced, and each provision may be able to work in support of the other to help the University meet its strategic objectives.

MCL Medics took over our provision in January 2023 and are now fully operational in their standard OH provision with the final element of the transition project focusing on our Health Surveillance Programme for 2023 and beyond, which is currently in development with input from the People and Health & Safety Teams. Further detail on the proposed Health Surveillance Programme is provided in section 4.2.

The Occupational Health Service carries out a range of duties for staff and their annual report is attached in <u>Section 4</u>.

Students

At present there is no occupational health service cover for the main student body. However, due to the additional occupational health requirements for students in the School of Health & Social Care (Fit for Practice), this work is contracted out to Lothian Health Occupational Health Service.

2.4. Employee Assistance

The Employee Assistance Programme is outsourced and we contracted with a new provider MCL Medics on 1 August 2022. They provide a confidential and independent resource to help balance work, family, and personal lives. This service is available 24 hours a day, 7 days a week, 365 days a year by phone, email or online and provides information, resources, and counselling on any of the challenges that life may bring. The services are paid for by the University so that they are provided free to employees. (Refer Section 6).

The University's Safety Officer would like to take the opportunity to record thanks to all staff and students in the University, particularly the Health and Safety Representatives and members of the Health and Safety Committee, for enabling the University to make substantial progress in improving its health, safety, fire and occupational health procedures during the past year.

Andrew McGoff
Director of Finance & Operations

3. Health and Safety Report

- 3.1 <u>Accidents</u>
- 3.2 Fire Safety
- 3.3 <u>Statutory Compliance</u>
- 3.4 <u>Health & Safety Policy and Legislation</u>
- 3.5 Health & Safety Training and Competence
- 3.6 <u>Health & Safety Auditing and Inspections</u>
- 3.7 <u>Covid-19</u>
- 3.8 <u>Lothian Health Protection Team (NHS) Issues</u>
- 3.9 Travel Risk Assessment for Travel Abroad
- 3.10 Business Impact Analysis (BIP)
- 3.11 Business Continuity Plan (BCP)
- 3.12 Operational Risk Register/Plans for 2022/2023
- 3.13 Health and Safety Priorities for 2022/2023 completed
- 3.14 Health and Safety Priorities for 2023/2024

3.1. Accidents

3.1.1. RIDDOR Accidents / Other Accidents / First Aid Incidents / Dangerous Occurrences / Near Misses, 1 March 2022 to 28 February 2023

| Month | RIDDOR Accidents | Other Accidents | First Aid Incidents | Dangerous Occurrences | Near Misses |
|----------------|---------------------|-----------------|------------------------|--------------------------|-------------|
| March 2022 | 0 | 8 | 14 | 2 | 0 |
| April 2022 | 0 | 1 | 4 | 2 | 1 |
| May 2022 | 0 | 0 | 4 | 2 | 1 |
| June 2022 | 0 | 4 | 1 | 3 | 2 |
| July 2022 | 0 | 0 | 1 | 1 | 3 |
| August 2022 | 0 | 1 | 0 | 1 | 1 |
| Subtotal | 0 | 14 | 24 | 11 | 8 |
| September 2022 | 0 | 7 | 12 | 0 | 2 |
| October 2022 | 0 | 9 | 6 | 1 | 2 |
| November 2022 | 0 | 4 | 9 | 1 | 1 |
| December 2022 | 0 | 3 | 6 | 0 | 0 |
| January 2023 | 0 | 6 | 4 | 5 | 1 |
| February 2023 | 0 | 10 | 10 | 3 | 3 |
| Subtotal | 0 | 39 | 47 | 10 | 9 |
| Total | 0 | 53 | 71 | 21 | 17 |

3.1.2. RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) - Serious Accidents Summary

There were no RIDDOR accidents for the reporting period.

3.1.3. Accident Statistics

| | Post-Cov | id period | Covid-19 period | | | | Pre-Covi | d period |
|--------------------|----------|-----------|-----------------|----------|----------|----------|----------|----------|
| Staff & Students | 39 | 14 | 21 | 9 | 13 | 5 | 31 | 28 |
| Visitor/Contractor | 5 | 2 | 4 | 3 | 1 | 0 | 5 | 4 |
| Technical | 1 | 1 | 0 | 2 | 0 | 0 | 4 | 0 |
| Logistics | 1 | 0 | 2 | 0 | 1 | 0 | 1 | 0 |
| Maintenance | 2 | 1 | 0 | 0 | 2 | 0 | 0 | 1 |
| Security | 2 | 0 | 2 | 0 | 1 | 0 | 1 | 1 |
| Cleaning | 5 | 1 | 0 | 3 | 3 | 3 | 4 | 6 |
| Catering | 1 | 2 | 3 | 0 | 0 | 1 | 4 | 5 |
| Support | 5 | 4 | 3 | 0 | 1 | 1 | 2 | 4 |
| Research | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Associates | 0 | 0 | 0 | | | | | |
| Academics | 3 | 0 | 2 | 0 | 0 | 0 | 1 | 2 |
| Staff | 26 | 11 | 16 | 8 | 9 | 5 | 22 | 23 |
| Students | 13 | 3 | 5 | 1 | 4 | 0 | 9 | 5 |
| | 28.02.23 | 31.08.22 | 28.02.22 | 31.08.21 | 28.02.21 | 31.08.20 | 29.02.20 | 31.08.19 |
| <i>σ</i> , | 01.09.22 | 01.03.22 | 01.09.21 | 01.03.21 | 01.09.20 | 01.03.20 | 01.09.19 | 01.03.19 |
| Category | | | | | | | | |

The incidence rates are generally always lower for the March to August periods due to less staff and students on campus. During March to August 2022 there was a slight increase in accidents, possibly due to Covid restrictions ending at the end of April 2022 and more people returning to campus. September 2022 to February 2023 – the university has effectively returned to business as usual and, as expected, accidents have risen accordingly back to similar pre-Covid figures. Figures do seem high, but this is to be expected as there has also been a bigger push on reporting of accidents and incidents.

3.1.4. Type of accident/person involved 1 March 2022 to 28 February 2023

| Accident type | Person Involved | | | | | | | | | | | | |
|------------------------------------|-----------------|-------|----------|----------|-----------|-------------|-------|-------------|----------|---------|-----------|-------------------------|-------|
| | Academic | Admin | Catering | Cleaning | Logistics | Maintenance | Other | Researchers | Security | Student | Technical | Visitor / Contractor | Total |
| Chemical | | | | | | 1 | | | | | | | 1 |
| Cutting tools / working with tools | | | 1 | | | | | | | 4 | | 2 | 7 |
| Falls from height | | 1 | | | | | | | | 2 | 1 | | 4 |
| Falls on level | 2 | 2 | 1 | | | | | | 1 | 3 | | | 9 |
| Hot/cold contact | | 1 | 1 | | | | | | | | | | 2 |
| Manual handling | | 1 | | 1 | | | | | | 1 | | | 3 |
| Sharp objects | | 1 | | 3 | | | | 1 | | 2 | | 2 | 9 |
| Striking against object | 1 | 2 | | 2 | 1 | 1 | | | | 2 | 1 | 2 | 12 |
| Struck by an object | • | | | | | 1 | 1 | | | 2 | | 1 | 5 |
| Traffic | | | | | | | | | 1 | | | | 1 |
| Total | 3 | 8 | 3 | 6 | 1 | 3 | 1 | 1 | 2 | 16 | 2 | 7 | 53 |

Most of the accidents occurred to students (16) followed by administrative staff (8), visitors/contractors (7) and cleaners (6).

Accidents to:

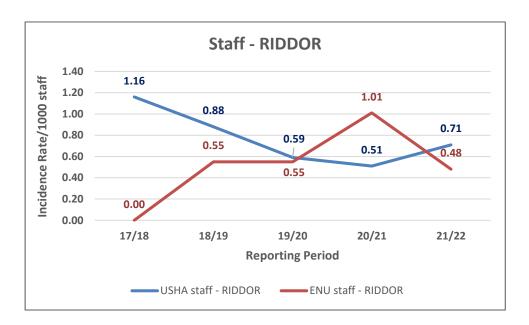
- Students mainly involved cutting objects and falling on level ground, due to lack of attention by the individual cutting objects or whilst walking and awareness of their surroundings more care required by students of their living environment.
- Cleaning staff were due to contact with sharp objects and walking into stationary objects more care needs to be taken whilst carrying out work activities and of their surroundings.
- Administrative staff mainly involved falls on the level and working with equipment.
- Visitors/contractors were due to working with tools, contact with sharp objects and striking against objects – ENU staff need to remind everyone under their control to be vigilant of their work activities and local environment whilst on campus.

Note: All to be more vigilant of their work activities and local surroundings on and off university premises.

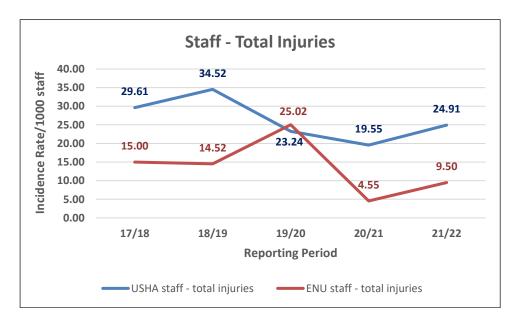
3.1.5. Percentage of staff and student accidents (Sep 2017 to Feb 2023)

| From | То | Staff | Staff Accidents | % Staff Accidents | Student | Student Accidents | % Student Accidents |
|----------|----------|-------|--------------------|-------------------|---------|----------------------|---------------------|
| 01.09.17 | 28.02.18 | 1862 | 15 | 0.81 | 19844 | 12 | 0.06 |
| 01.03.18 | 31.08.18 | 1760 | 14 | 0.80 | 16837 | 6 | 0.04 |
| 01.09.18 | 28.02.19 | 1816 | 7 | 0.39 | 18837 | 9 | 0.05 |
| 01.03.19 | 31.08.19 | 1766 | 23 | 1.30 | 17650 | 5 | 0.03 |
| 01.09.19 | 29.02.20 | 1834 | 22 | 1.20 | 19698 | 9 | 0.05 |
| 01.03.20 | 31.08.20 | 1903 | 5 | 0.26 | 17976 | 0 | 0.00 |
| 01.09.20 | 28.02.21 | 1980 | 9 | 0.45 | 20072 | 4 | 0.02 |
| 01.03.21 | 31.08.21 | 1964 | 8 | 0.41 | 18498 | 1 | 0.01 |
| 01.09.21 | 28.02.22 | 2105 | 16 | 0.76 | 21195 | 5 | 0.02 |
| 01.03.22 | 31.08.22 | 2105 | 11 | 0.52 | 21752 | 3 | 0.01 |
| 01.09.22 | 28.02.23 | 2269 | 26 | 1.15 | 20682 | 13 | 0.06 |

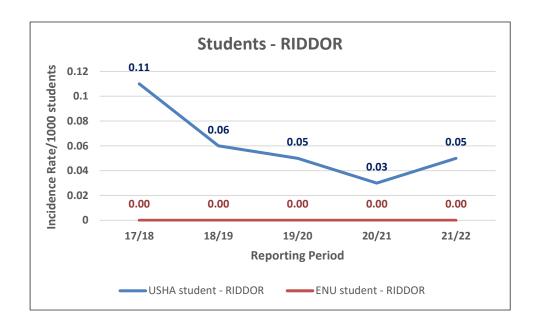
3.1.6. Accident benchmarking with UK average higher education establishments 2017 - 2022

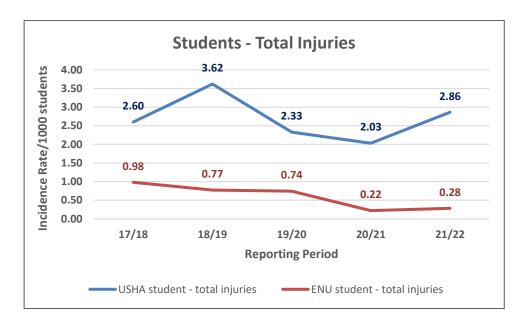


Note: In terms of numbers of RIDDOR accidents, ENU had 2 No in the period 20/21, which is relatively high compared with the numbers of staff involved. USHA figure for 20/21 is lower, due to the low number of RIDDORs against the high number of staff across all universities.



Note: ENU figures over the last 2 years are showing a lower trend compared with USHA.





Note: Both RIDDOR and total injuries rates for ENU are much better than USHA rates for the last 5 years.

3.2. Fire Safety

The University has a legal duty to comply with all fire safety legislation. To ensure compliance, the Health & Safety Team carry out a programme of scheduled fire risk assessments on all university properties, including student accommodation, on an ongoing basis. The team also carry out scheduled evacuations and monitoring of unscheduled evacuations; input into building projects; general fire advice and guidance; and training and information for all staff, students and visitors.

3.2.1. Fire Risk Assessments Completed

13 fire risk assessments were carried out at campus premises

16 fire risk assessments were carried out at student accommodation

Full details of the fire risk assessments are held in the Health & Safety Office.

Any issues raised for rectification are monitored by the Fire Safety Adviser through the Fire Risk Assessment Tracker.

3.2.2. Scheduled Evacuations Completed

Scheduled evacuations are carried out at all campuses and student accommodation by the Health & Safety Team. A detailed report is compiled, with any actions assigned to the relevant School or Service. Scheduled evacuations were carried out at the campuses in March and October 2022 and at the accommodation in April and September 2022 and February 2023. Full details of the scheduled evacuations are included in the respective Health and Safety Committee papers (October 2022 and April 2023) and are available from the Health & Safety Office.

3.2.3. Unscheduled Evacuations

The number of unscheduled evacuations is monitored and reported to the Health & Safety Committee.

March to August 2022

There were 7 unscheduled evacuations within university campuses.

There were 21 unscheduled evacuations within university accommodation.

September 2022 to February 2023

There were 5 unscheduled evacuations within university campuses.

There were 29 unscheduled evacuations within university accommodation.

Full details and statistics of the number and causes of unscheduled activations are included in the Health and Safety Committee papers and are available from the Health & Safety Office.

3.2.4. Personal Emergency Evacuation Plans

Personal Emergency Evacuation Plans (PEEPs) are carried out for staff and students who may require assistance to evacuate a building in an emergency. As a result of the Covid-19 pandemic, the Health & Safety Team contacted all staff who currently have a PEEP in place to advise that their PEEP would be reviewed prior to their return to campus. During this period, it has been mainly student PEEPs that have

been carried out for both our campuses and student accommodation. Staff PEEPs have also continued for those who are on Campus.

3.2.5. Projects and Events

Some projects and events were cancelled due to the Covid-19 pandemic until the end of April 2022. Now that the pandemic is over, events have started up again and the Health & Safety Team continue to provide the required support and advice on health, safety and fire matters.

3.2.6. Fire Safety Training

Similarly, all face-to-face fire safety training was cancelled up until the end of April 2022. Now that the pandemic is over, fire safety training has started up again. Our Fire Safety Adviser completed the following fire safety training courses.

| Date | Course | Numbers |
|------------|---|---------|
| 29/03/2022 | Fire warden - CSIC | 4 |
| 23/05/2022 | Fire warden – Bright Red Triangle - Bainfield | 1 |
| 16/08/2022 | Fire Wardens, BE-ST | 10 |
| 25/08/2022 | Senior Residents (MH & Fire) | 8 |
| 28/09/2022 | BE-ST - fire extinguisher | 8 |
| 13/12/2022 | Fire Warden Forum | 7 |

3.3. Statutory Compliance

3.3.1. Health & Safety Executive (HSE) Notices

The University had no Fee for Intervention Notices, Prohibition or Improvement Notices issued from the Health and Safety Executive.

3.3.2. Health & Safety Notices Issued by the Health & Safety Team

Health & Safety Notices are served by the University Health & Safety Team during their routine visits to work areas within the University or when a hazardous work practice and/or failure to comply with University Health & Safety Policies is observed or highlighted that requires immediate action. A full investigation and report is carried out by the Health & Safety Team and all University contract administrators are required to report back on the actions taken. Depending on the breach, the Notice can be Verbal, Improvement or Prohibition.

2 No. Prohibition Notices and 4 No. Improvement Notices were issued during the reporting period.

Details are listed below:

| Type of Notice, location and date of breach | Unsatisfactory work practices or situations | Actions taken |
|---|--|--|
| Prohibition Notice HSN-2022-144 7 Hills 28 April 2022 | Emergency lighting and exits - Emergency light fitting tube is missing. Therefore, if building has a power failure, then this would cause issues for people to evacuate the building safely. Emergency fire escape is blocked with lighting and cables. | The main lab has been cleared and tidied. Electrical extensions have been removed. Lighting/emergency lighting has been restored to its original state. |
| Improvement Notice HSN-2022-145 7 Hills 28 April 2022 | Leaking equipment/trip hazard - Oil had been leaking from a piece of equipment. They had tried to use a spill kit; however, this was oversaturated, and the oil was still on the floor around the piece of equipment causing a potential slip hazard. | The equipment was repaired and retested before being put back into use. A new spill kit is now available. |
| Improvement Notice HSN-2022-146 BE-ST, Blantyre 21 June 2022 | Lifting operations - Unsafe handling and moving practices witnessed by BE-ST staff. No safe systems of work or lifting plan in place prior to lift. Risk to others whilst trying to balance the load. Walking in and around a load that was suspended from the crane. Contractor failing to follow instruction from BE-ST. | Contractor's access to the factory was suspended until the appropriate safe systems of work, detailed lifting plans with images and drawings and RAMS (Risk Assessment Method Statements) were prepared, provided, reviewed and updated by BE-ST. Consultations took place with all involved. Practical training was provided to the Contractor's staff on the use of the overhead crane. Work in the factory is to be supervised at all times by a member of the Contractor's management team. A Slinger Banksman training course was organised and completed to improve methods of communication between operators. |
| Improvement Notice HSN-2022-147 BE-ST, Blantyre 21 June 2022 | Incomplete and unsafe/damaged scaffolds in the factory area. | Both mobile scaffold towers were removed from use until rectified. These mobile scaffold towers were reassembled by an appropriately trained (PASMA) and competent member of BE-ST staff, checked and tagged accordingly prior to use. |

| Type of Notice, | Unsatisfactory work practices or | Actions taken | | |
|---|---|---|--|--|
| location and date of | situations | | | |
| | | | | |
| Improvement Notice HSN-2022-148 Temp. Buildings Craiglockhart 7 July 2022 | Poor management of contractors: 1. Contractors not been given any health and safety information or clear instruction on the university contractor management rules and emergency procedures. 2. No clear individual managing both contractors – they were working in isolation. 3. CBSS member of staff not wearing hearing protection whilst using a petrol concrete breaker. 4. Room fire escapes had a large drop outside with the ground works. No signage on the doors to inform people of this. 5. Sub-contractor CBSS did not have welfare facilities, had been using the facilities in the building. This should have been organised and communicated. CBSS were going to ask the other contractor if they could use their facilities, not university facilities. Again, lack of communication from the main contractor. 6. No health and safety signage on the fencing cordoning off the site or clear delineated walkways. Insufficient fencing to cordon off site. 7. Fire doors being held open with | Main contractor has disseminated this information to their sub-contractor on site. All operatives on site have signed off the reinduction. Main Contractor confirmed that communications with their sub-contractors have been fully addressed. CBSS have been advised to always wear hearing protection in line with their RAMS. All rooms have been locked off and any access requirements to be advised in advance. The issue reported was an isolated incident where an IS sub-contractor failed to advise in advance that access was required. Agreement of welfare facilities was addressed before the works commenced. Signage was installed. Additional Heras fencing was installed immediately following the site inspection. The importance of closing of all fire doors has been reiterated to operatives by the Main Contractor. | | |
| Drohibition Notice | fire extinguishers. | Aeron supplied new suitable | | |
| Prohibition Notice HSN-2022-149 Level 1, Block C Sighthill 27 July 2022 | Electrical subcontractor's employees working unsafely off stepladders - Work was stopped when two young electrical contractor (Aeron Electrical) employees were working unsafely from stepladders, whilst working on the refurbishment of the Labs. | Aeron supplied new suitable equipment for the task. RA/MS reviewed and revised. Contractor discussed the unsafe practices with all other employees. Contractor's H&S manager visited site and spoke with site operatives about H&S and WAH specifically. Toolbox talk on stepladder use carried out. | | |

Note: the closing out of some Improvement Notices in a timely manner has proved difficult, in the future where Improvement or Prohibition Notices are issued, the issues raised will be broken down into smaller aspects so that these areas can be closed out in a timely manner.

3.4. Health and Safety Policy and Legislation

The Health & Safety Team have a suite of health, safety and fire policies and guidance which are published on their website. These are updated on a three yearly cycle (or earlier due to legislative changes). New policies are put in place as required and presented to the Health & Safety Committee for approval. Throughout the Covid-19 pandemic, the Health & Safety Team produced numerous guidance documents and policies including staff and student safe return to campus guidance, PPE (Personal Protective Equipment) guidance, cleaning guidance and multiple occupancy office management guidance. Now that the Covid-19 pandemic is over, these documents and policies have been archived in case they should be required in the future.

Review of all H&S Procedures and Policies (August 2022 to July 2023) - some were overdue a review, mainly down to Covid restrictions. The team are progressing well on reviewing all our procedures. we recognise that this is not a quick process, we have a number of items to review:

- HASMAP
- Lab checklists
- P&F procedures
- H&S procedures

Health & Safety Policies reviewed – 1 March 2022 to 28 February 2023

| Policy | Date published |
|---|----------------|
| Personal Protective Equipment (PPE) v3.0 | June 2022 |
| Appointment of Competent Health & Safety Staff v3.0 | August 2022 |
| Legislation Procedure and Listing v1.0 | August 2022 |
| Provision and Use of Work Equipment v3.0 | August 2022 |
| Violence v3.0 | August 2022 |
| Access Out With Normal Hours v3.0 | September 2022 |
| Access to the University by Children v3.1 | September 2022 |
| Display Screen Equipment (DSE) v2.0 | September 2022 |
| Drinking and Eating v3.0 | September 2022 |
| Ladders and Stepladders v1.0 | September 2022 |
| MFDs and Printing Devices v3.0 | September 2022 |
| Portable Appliance Testing (PAT) v1.0 | September 2022 |
| Smoking v1.0 | September 2022 |
| Travel v3.0 (superseded by 3.1) | September 2022 |
| Visitors v3.0 | September 2022 |
| Working Alone for Social Researchers v2.0 | September 2022 |
| Design, Development & Manufacture v4.0 | October 2022 |
| Drones v2.0 | October 2022 |
| Manual Handling v2.0 | October 2022 |
| Noise v3.0 | October 2022 |
| Management of Health & Safety – guidance for Deans/Directors v2.1 | November 2022 |
| Safe Systems of Work v3.0 | November 2022 |
| Control of Substances Hazardous to Health (COSHH) v1.0 | December 2022 |
| Defibrillators v2.2 | December 2022 |
| Housekeeping v3.0 | December 2022 |
| Welding and Cutting v1.0 | December 2022 |
| Abrasive Wheels v1.0 | January 2023 |

| Policy | Date published |
|---|----------------|
| DSEAR v1.0 | January 2023 |
| Travel Guidance v1.0 | January 2023 |
| Working at Height v1.0 | January 2023 |
| Confined Spaces v1.0 | February 2023 |
| COSHH for cleaning operations v1.0 | February 2023 |
| COSHH guidance – bodily fluids v1.0 | February 2023 |
| COSHH guidance – cleaning materials 1.0 | February 2023 |
| COSHH guidance – dusts v1.0 | February 2023 |
| Fire Extinguisher Guide v2.0 | February 2023 |
| Travel v3.1 | February 2023 |

3.5. Health and Safety Training and Competence

The Health and Safety at Work Act and the Management of Health and Safety at Work Regulations place duties on the University and others to provide suitable and sufficient information, instruction, and training to ensure health and safety compliance.

It is important to ensure that all staff and students have the required health and safety competencies for their job role within their School/Service.

Part of the remit of the Health & Safety Team is to organise, develop and deliver relevant health and safety training for both staff and students across the entire University. Most of the training is carried out in-house. This substantially lowers costs and uses internal expertise to develop and provide specific training to meet the needs of Edinburgh Napier University. There is also a Health & Safety Competency & Training Policy and job role matrix to assist Schools and Services.

3.5.1. Health and Safety eLearning (Essential Skillz)

Due to the Covid-19 pandemic, no face-to-face health and safety training was able to take place until after 30 April 2022. However, the online Health and Safety eLearning (Essential Skillz) platform allowed us to provide staff with suitable health and safety training which could be undertaken at home. Now that the pandemic is over, face to face health & safety and fire safety training has started up again.

| Essential Skillz – eLearning Module | Completions |
|--|---------------------------|
| | 1 Mar 2022 to 28 Feb 2023 |
| Workstation ^{1, 2, 3} | 1167 |
| Fire Safety ⁴ | 935 |
| Health & Safety Induction ⁵ | 424 |
| DriveWize | 16 |
| Electrical Safety | 28 |
| Hazardous Substances (COSHH) | 33 |
| Home Working | 53 |
| Manual Handling | 32 |
| Risk Assessment | 24 |
| Stress Awareness | 31 |

- ¹ Mandatory completed annually
- ² With all annual renewals on workstation, staff have 6 months to complete
- ³ Certain job roles are excluded e.g. catering and cleaning assistants and external examiners
- ⁴ Mandatory completed every 2 years
- ⁵ Mandatory once-off completion

Workstation assessments undertaken and outstanding concerns raised

| Workstation assessments completed | 1167 |
|--|------|
| Outstanding concerns still to be closed by line managers | 145 |

This was highlighted in the annual School/Service Safety Reports 2022 and an updated version of the line managers guide for resolving concerns was published.

Note: all of the above are raised as standing items at School/Service health and safety committees.

3.5.2. Face to face training

| Date | Course | Numbers |
|--------------|--------------------------------------|---------|
| 17/03/2022 | H&S awareness - catering, Merchiston | 8 |
| 29/03/2022 | Fire warden - CSIC | 4 |
| 29/03/2022 | Ecosystems - CSIC | 3 |
| 29/03/2022 | H&S Training | 2 |
| 23/05/2022 | Fire warden - BRT Bainfield | 1 |
| 06/06/2022 | VLAs, Bainfield | 12 |
| 16/08/2022 | Fire Wardens, BE-ST | 10 |
| 25/08/2022 | Senior Residents (MH & Fire) | 8 |
| 28/09/2022 | BE-ST - fire extinguisher | 8 |
| Nov/Dec 2022 | IOSH Managing Safely | 10 |
| 13/12/2022 | Fire Warden Forum | 7 |
| 15/02/2023 | Invigilator | 20 |

Some photos of the Fire extinguisher training that was carried out in September 2022









3.5.3. Health and Safety Team training and CPD

Bob Rennie and Sean Hughes continue to maintain their Chartered memberships of IOSH and David Conner has been accepted into IOSH at Tech IOSH level.

The following training and CPD seminars have been attended by the team:

- ISO45001 Internal Auditor Training course (2 days) run by SQMC David Conner
- ADHD in Workplace (Posturite online seminar) Sean Hughes
- USHA Strategic Management Course Bob Rennie and Sean Hughes
- Net Zero (HSE) Sean Hughes
- Suicide Prevention (Healthy Happy Places) Sean Hughes
- Driving at Work Accidents (SCORSA) Sean Hughes
- Manual Handling in Construction podcast (HSE) Sean Hughes
- Practicality and Challenges of Electric Vehicles (IOSH) Sean Hughes
- Influencing Change Implementing a Strong Safety Culture (Make UK) Sean Hughes

3.6. Health and Safety Auditing and Inspections

Health and Safety auditing and inspections takes place on various levels.

3.6.1. School/Service Annual Safety Report

Schools/Services are asked to submit a signed Annual Safety Report indicating the current level of compliance of their area of responsibility. These show the robustness of the Edinburgh Napier Health and Safety management plan and give an indication of the degree of compliance with laid down health and safety standards and the identification of Schools/Services where further improvements need to be considered to ensure health and safety compliance.

20 out of 20 Annual Safety Reports were received from all Schools/Services. Below is a summary of the findings and actions/recommendations.

| School/Service | |
|----------------|--|
| Organisation | |

Appointed a Safety Co-ordinator

- 14 have appointed a Safety Co-ordinator
- 2 require to appoint a Safety Co-ordinator
- 4 smaller Services do not require a Safety Co-ordinator

Safety Co-ordinator aware of their responsibilities

- 14 aware of their responsibilities
- 2 new Safety Co-ordinators will be appraised of their responsibilities once nominated

Are responsibilities documented in My Contribution

- 9 have responsibilities documented in My Contribution
- 5 arranging to have responsibilities included in My Contribution
- 2 returned nothing in place

H&S committee or local **H&S** meetings in place

- 8 have set up local safety committee
- 12 making arrangements to put into place a local safety committee or ensure health and safety raised at local meetings

Evidence of H&S Committee meetings

- 5 were able to provide minutes of meeting
- 15 making arrangements to ensure H&S is discussed at local committees or meetings

| Local Safety | Local safety procedures | | |
|--------------------------|---|--|--|
| Documentation | 16 have developed local safety procedures | | |
| | 1 required to develop local safety procedures | | |
| | 3 suggested that local safety procedures are "not applicable" | | |
| | Reviewing of local safety procedures | | |
| | 15 have arrangements in place to review safety procedures | | |
| | 1 required to develop a review process | | |
| | 1 in the process of putting arrangements in place | | |
| | 3 suggested that the review process is "not applicable" | | |
| | Safety information is effectively communicated | | |
| | 16 have effective arrangements to ensure safety information is | | |
| | made known and distributed | | |
| | 1 taking steps to share H&S information more widely | | |
| | 3 returned "not applicable" | | |
| School/Service Safety | Local inspections | | |
| Inspections | 13 have carried out a local inspection in the past 12 months | | |
| | 4 were taking action to put into place an inspection regime | | |
| | 3 returned "not applicable" | | |
| | Evidence of local inspections | | |
| | 9 were able to provide evidence of a local inspection | | |
| | 8 could not provide any evidence | | |
| | 3 returned "not applicable" | | |
| | All actions closed out | | |
| | 8 had completed all the outstanding actions | | |
| | 6 were taking action to close out outstanding actions | | |
| | 6 returned "not applicable" | | |
| Management of Health | Trained risk assessors | | |
| and Safety Regulations – | 13 have risk assessors in place | | |
| Risk Assessments | 2 have nothing in place | | |
| | 2 are taking steps to nominate and appoint a risk assessor | | |
| | 3 returned "not applicable" | | |
| | Risk assessments and control measures | | |
| | 11 have indicated that risk assessments and implementation of | | |
| | control measures have been carried out within their area of | | |
| | responsibility, however only 7 could provide any evidence | | |
| | 1 is putting in measures to address this | | |
| | Reviewing risk assessments | | |
| | 14 stated that they review their risk assessments on a regular | | |
| | basis | | |

| Health and Cafatro | Mandatam al coming/additional outional al coming parliage | | |
|----------------------------------|---|--|--|
| Health and Safety Competency and | Mandatory eLearning/additional optional eLearning packages | | |
| • | 20 have indicated that their staff are aware of the requirement | | |
| Training | to complete the mandatory training and the additional optional | | |
| | eLearning packages that are available | | |
| | Competency and Training Matrix | | |
| | 13 have indicated they have identified and have appropriate | | |
| | health and safety training and competency levels | | |
| | 6 recognised that they did not have a matrix in place, however 4 | | |
| | were taking steps to identify appropriate health and safety | | |
| | training and competency levels | | |
| | 1 did not answer the question | | |
| | Only 4 were able to produce a Competency and Training Matrix | | |
| | for their staff | | |
| | Student H&S inductions, training and instruction | | |
| | 7 indicated that arrangements are in place | | |
| | 13 returned "not applicable" | | |
| Display Screen | DSE workstation assessments | | |
| Equipment Regulations | 11 have indicated that display screen equipment assessments | | |
| | have been carried out | | |
| | 9 could not verify that this training had been carried out, | | |
| | however 6 were taking action to remind their staff to carry out | | |
| | the Essential Skillz Workstation programme | | |
| | Outstanding actions from workstation assessments | | |
| | 15 had completed the actions raised | | |
| | 4 were taking steps with their line managers to remind them to | | |
| | close out any issues raised | | |
| | • 1 did not answer the question | | |
| | Occupational Health workstation assessment through HR | | |
| Fire Cofety | • 14 had used this service | | |
| Fire Safety | Awareness of fire safety procedures | | |
| | 20 have made all their staff aware of fire procedures Provision of fire profession | | |
| | Provision of fire safety information | | |
| | 16 give students/visitors information on fire procedures 3 did not answer the question | | |
| | · | | |
| | 1 not applicable Adamsta number of fire wordens | | |
| | Adequate number of fire wardens 12 have nominated fire wardens | | |
| | | | |
| | 5 require to nominate fire wardens 3 identified that their Service is small in size and fire sefety is | | |
| | 3 identified that their Service is small in size and fire safety is better provided by security. | | |
| | better provided by security Personal Emergancy Evacuation Plans (REEDs) | | |
| | Personal Emergency Evacuation Plans (PEEPs) | | |
| | 16 stated that where PEEPs had been identified they were in | | |
| | place | | |
| | 4 did not answer the question | | |

| Accident and | Assidant/Incident reporting | | |
|---|---|--|--|
| | Accident/Incident reporting | | |
| Occupational III Health Reporting (including first | 20 ensure that all staff are made aware of accident and | | |
| | occupational ill health reporting procedures Adequate number of first aiders | | |
| aid) | · · | | |
| | 13 have suitable numbers of first aiders in place for their areas | | |
| | 5 identified that their Service is small in size and first aid is better | | |
| | provided by security | | |
| | 2 did not answer the question | | |
| | Awareness of the Occupational Health provision | | |
| | 17 aware of the Occupational Health service that is in place | | |
| | 3 did not answer the question | | |
| Control of Contractors | Control of Contractors Procedures | | |
| | 8 have made all their contractors aware of University procedures | | |
| | and risk assessment process | | |
| | 12 returned "not applicable" | | |
| Control of Substances | COSHH Assessments | | |
| Hazardous to Health | 5 have indicated that COSHH assessments have been carried out; | | |
| | nominated staff to manage COSHH; ensure the database is kept | | |
| | up to date; substances are used, stored and disposed of as per | | |
| | the regulations, and OH surveillance requested from OH | | |
| | provider. | | |
| | • 1 indicated they have not done any COSHH assessments, but had | | |
| | completed the aspects listed above | | |
| | 14 returned "not applicable" | | |
| Dangerous Substances | DSEAR assessments | | |
| | | | |
| and Explosive | 3 have indicated that DSEAR assessments have been carried out | | |
| and Explosive Atmospheres | 3 have indicated that DSEAR assessments have been carried out 17 returned "not applicable" | | |
| | | | |
| Atmospheres | | | |
| Atmospheres Regulations | 17 returned "not applicable" | | |
| Atmospheres Regulations Electricity at Work | 17 returned "not applicable" PAT Testing Policy | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments Only 2 were able to provide evidence of manual handling | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling Regulations Personal Protective | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments Only 2 were able to provide evidence of manual handling assessment PPE assessments | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling Regulations | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments Only 2 were able to provide evidence of manual handling assessment PPE assessments 6 have indicated that PPE assessments have been carried out, | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling Regulations Personal Protective | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments Only 2 were able to provide evidence of manual handling assessment PPE assessments 6 have indicated that PPE assessments have been carried out, instruction and training provided, PPE notices provided and the | | |
| Atmospheres Regulations Electricity at Work Regulations – awareness of procedures Manual Handling Regulations Personal Protective | 17 returned "not applicable" PAT Testing Policy 20 aware that all PAT testing is carried out and coordinated centrally through Property & Facilities 3 have had issues with electricity and the use of PAT testing Waste disposal of electrical equipment 17 were aware of the Policy 3 did not answer the question Manual Handling assessments 8 have indicated that manual handling assessments have been carried out 6 were taking steps to carry out manual handling assessments 6 returned "not applicable" Evidence of MH assessments Only 2 were able to provide evidence of manual handling assessment PPE assessments 6 have indicated that PPE assessments have been carried out, | | |

| Control of Noise at Work | Noise assessments | | |
|--------------------------|--|--|--|
| Regulations | 4 have indicated that noise assessments have been carried out, | | |
| | control measures put in place and hearing PPE provided | | |
| | 16 returned "not applicable" | | |
| Hand Arm Vibration | HAV assessments | | |
| | 3 have identified the requirement for HAV assessments to be | | |
| | carried out | | |
| | 17 returned "not applicable" | | |
| | Health Surveillance | | |
| | 1 identified health surveillance required from OH | | |
| | 1 looking to contact OH for health surveillance | | |
| | 18 returned "not applicable" | | |
| Plant and Equipment | Asset Register | | |
| | 5 have an asset register of plant and equipment for their | | |
| | School/Service | | |
| | 1 did not know if they had one | | |
| | 14 returned "not applicable" | | |
| | Trained/competent personnel to operate plant and equipment | | |
| | 6 confirmed they have trained/competent personnel | | |
| | 14 returned that the use of plant and equipment was "not | | |
| | applicable" to their School/Service | | |

Actions/Recommendations

- Safety Co-ordinators are mainly in place further Safety Co-ordinators to be nominated and appointed and trained for the role.
- H&S Committee Meetings or local H&S meetings all Schools/Services to ensure that either a H&S committee or local H&S meetings are held.
- Local safety procedures/inspections appears to be working well, however further audits and inspections to be carried out by H&S Team to verify compliance.
- Risk assessors are mainly in place but due to the turnover in staff, risk assessors are always required – further risk assessors to be nominated and appointed. Risk assessor training for the role to be organised.
- Risk assessment process most Schools/Services are aware of the process, but not many provided evidence further audits and inspections to be carried out by H&S Team to verify compliance.
- H&S Competency and Training all Schools/Services are aware of the mandatory training to be completed by their staff.
- eLearning training however there is always the on-going problems of staff completing the mandatory training at the recommended intervals, Schools/Services to remind staff to complete the mandatory training modules.
- Competency and Training matrices only 4 Schools/Services were able to provide evidence on this topic, further support and training to be given to Schools/Services in order to complete their H&S Competency matrix.
- DSE eLearning modules staff are not completing the DSE and other mandatory eLearning modules in a timely manner, Schools/Services to remind staff to complete the mandatory training modules.

- DSE assessments workstation assessments are being carried out, however **outstanding** workstation issues to be closed out in a timelier manner by line managers.
- Fire Safety Awareness very good awareness across the University.
- Fire Wardens lack of on campus fire wardens due to more staff working from home there
 needs to be a push by the Schools/Services for more volunteers to ensure their areas are
 adequately covered.
- PEEPs (Personal Emergency Evacuation Plans) where identified they are in place.
- Accident/Incident reporting all Schools/Services fully aware of the procedures however not
 all near misses are being reported to H&S Team, Schools/Services to remind staff to report all
 accidents/incidents, near misses and dangerous occurrences to the H&S Team.
- Control of Contractors appears to be working well, but improvements are being made in conjunction with P&F.
- COSHH assessments working well.
- DSEAR assessments working well, an external audit/assessment to be carried out in May which will verify our compliance.
- Electricity/PAT testing all Schools/Services aware of the Policy.
- Manual Handling Due to lack of positive responses and evidence provided on manual handling, it is evident that staff are carrying out manual handling activities but are not recognising the potential health and safety implications of poor technique and availability of other mechanical means to assist in manual handling activities. The recommendation is that all staff should complete the "Manual handling" eLearning module as a one off module similar to the H&S induction when joining the University. However those carrying out manual handling activities on a daily basis should complete this training on a regular basis.
- PPE (Personal Protective Equipment) working well.
- Noise assessments working well.
- HAV assessments working well.
- Plant and Equipment working well, however further audits and inspections to be carried out by H&S Team on specific items of plant and equipment to verify compliance with our procedures.

The Health & Safety Team have reviewed all the annual safety reports and all Schools/Services not achieving the required level of compliance will be contacted by the Lead Contact in the Health & Safety Team to give further guidance and assistance to ensure actions are taken by the Dean of School/Director of Service to meet the required standard of health and safety compliance with all relevant legislation. This will be conducted throughout the coming year through meetings, emails, audits and inspections and attendance at School/Service H&S committee meetings.

Compliance will be reviewed on an annual basis and will be reviewed again in January/February 2024. Meanwhile the Health & Safety Team have identified which Schools and Services will be audited during 2023 and 2024 as detailed below, dates to be confirmed. In addition, the table details who the lead Health and Safety contact will be for each School/Service.

Audit Schedule / Lead H&S Contact

| School/Service | Audit / Support this year | Audit next year | Lead H&S Contact |
|----------------------|---------------------------|-------------------|-----------------------|
| BE-ST | Audit this year - 2023 | n/a | Bob Rennie / Sean |
| | | | Hughes |
| Information Services | Audit this year - 2023 | n/a | Bob Rennie / Sean |
| | | | Hughes / David Conner |
| SCEBE | Support | Audit next year - | Bob Rennie / Sean |
| | | 2024 | Hughes / David Conner |
| Human Resources | Support | n/a | Bob Rennie |
| Student Futures | Support | n/a | Bob Rennie |
| Student Wellbeing & | Support | n/a | Bob Rennie |
| Inclusion | | | |
| International | Support | n/a | Sean Hughes |
| Operations | | | |
| DLTE | Support | n/a | Sean Hughes |
| Marketing & External | Support | Audit next year - | Sean Hughes |
| Relations | | 2024 | |
| SHSC | Support | n/a | Sean Hughes |
| SACI | Support | Audit next year - | David Conner |
| | | 2024 | |
| SAS | Support | n/a | David Conner |

3.6.2. Formal H&S Audit

Formal Health & Safety audits of Schools and Services have recommenced. Future audits are planned during 2023 and 2024. The H&S Team's first audit was the Finance Department - Compliance was very good. Some minor issues raised around online H&S and induction training, lone working risk assessment, housekeeping and an out of date first aid box, all of which have been addressed and closed out in a timely manner.

3.6.3. H&S Committees

School/Service Health & Safety Committees continued to take place both in person and online, attended by a member of the Health & Safety Team, through which ongoing monitoring, identification and review of health and safety matters locally takes place.

3.6.4. Health & Safety Inspections

General H&S inspections have taken place during the last year at:

- BE-ST, Blantyre
- Merchiston Avenue
- 7 Hills
- Craiglockhart rooms
- C2, C3 Labs, Merchiston
- C20, C21 Labs, Merchiston
- SACI Photography, Merchiston

- Refurbished Labs, Sighthill
- 2.C.27 Lab, Sighthill

In addition, there have been further inspections or reports carried out relating to specific issues, accidents, near misses and dangerous occurrences.

3.6.5. Fire Safety Inspections

Kevin Weir continues to complete fire safety inspections and walkarounds of all campuses and student accommodations.

3.6.6. Union joint meetings/inspections

Bob Rennie and Alastair Bonthron (Head of Asset Management, Property & Facilities) meet with the Unions every 8 weeks to discuss topical health and safety issues at the University. The first joint Health and Safety walkaround/inspection was carried out at Craiglockhart in November.

3.7. Covid-19

The past few years have been challenging for staff and students, increasing the importance of the management of health and safety within the university. The Health & Safety Team were required to continually review the Scottish Government guidance and implement and communicate changes as appropriate. Weekly Covid-19 stats required to be submitted to the Scottish Government.

The Health & Safety Team were involved in regular meetings with NHS Lothian Public Health, other colleges/universities and accommodation providers in the local area.

The information below details some of the challenges that the Health & Safety Team had to meet during the final stages of the Covid-19 pandemic up to 30 April 2022 and post-pandemic from 1 May 2022.

3.7.1. Throughout the pandemic (up to 30 April 2022)

- a) **Scottish Government guidance** the University followed the Public Health and Scottish Government rules and steps for Higher Education and continually reviewed and updated the relevant guidance in line with the Scottish Government route map.
- b) **Health and Safety Workstream** the H&S Workstream meetings continued on a fortnightly basis. This was a forum to update and discuss key issues, Campus developments, Covid issues, Scottish Government Guidance updates, changes and updates with the unions, senior management, Health & Safety and Property & Facilities and health and safety issues in general.
- c) Covid-19 measures and guidance we continued to review the University overarching Covid-19 risk assessment and supporting documentation to ensure that all the Covid-19 risks were being fully assessed and that all required additional control measures were in place as we moved through the Scottish Government route map and phases. The current versions were available on the Health & Safety website home page. The overarching University risk assessment and health and safety

documentation was reviewed on a regular basis with our trade union colleagues and was updated as required.

- d) **Schools/Services** the Health & Safety Team worked with the various Schools and Services to ensure that the necessary controls were put in place for return to campus in a safe manner. Risk assessments were continually being updated as the Covid-19 requirements changed, which students completed, and staff signed off on.
- e) **Environmental issues** the workplace environment to ensure building safety, social distancing, ventilation, prevention of touch/droplet spread and travel, access and egress, cleaning and hygiene practices still requires controls to be maintained.
- f) **University buildings** a large amount of work has been done to maintain Covid-19 security. The need to check and report any issues requires to continue.
- g) Homeworking staff since the start of the restrictions most staff have worked from home. Covid-19 health and safety training continued for those working from home and included the Essential Skillz online training (Home Working module) and Workstation risk assessment. Working from Home Guidance was posted on the University H&S Covid-19 page during this time. As restrictions were lifted at end of April 2022, increased staff have returned to campus to a more hybrid way of working.
- h) **Security** during this pandemic Security remained, in most cases, the first point of contact and are front facing in any given emergency situation.

i) Covid-19 case numbers

- Staff case numbers from 1 March 2022 to 31 August 2022, we had 215 cases. The peak of staff cases occurred in the first few weeks of March as social mixing in society increased as restrictions were gradually lifted.
- Students case numbers from 1 March 2022 to 31 August 2022, we had 44 students (37 in student residences and 7 in private/home accommodation). The peak of student cases were in February 2022.
- Overall, for 2021/2022 we had a total of 627 cases to 31 August 2022, compared with 198 cases for 2020/2021.
- An analysis of our Covid-19 cases showed that transmission was through social mixing outside
 of the University. None of our cases during March to August could be directly attributable to
 the way in which the University managed Covid-19 on campus.
- j) Student accommodation whilst our peak of student cases occurred in February 2022, our student accommodation team still had a few cases every week through to end of June to manage. Our student accommodation team worked hard to support the student isolations by providing support mechanisms.
- k) Face covering provision the Scottish Government guidance on face coverings has changed a few times over the period, and our guidance was updated accordingly.
- Fire safety measures (fire precautions and procedures) amendments were made to fire precautions and procedures throughout the various Covid-19 phases. The procedure for evacuation in event of fire is unchanged. The fire alarm systems continue to be tested weekly, with the fire alarm panels being visually checked daily by security and maintenance staff to ensure that no faults are evident. We have continued to carry out the test evacuations at the accommodation. Reports from staff and

security have provided us with information on how things went. Fire drills re-commenced on all the campuses during this period.

- m) **Cleaning** this has been maintained throughout the restrictions and where required additional cleaning has been carried out to manage the risk.
- n) Maintenance and statutory testing all required statutory testing continues to be carried out in accordance with legal requirements e.g. legionella testing.
- o) **University Covid-19 communication** the Health & Safety Office continued to answer questions on Covid-19. Our Health & Safety guidance for Covid-19 was continually being assessed and updated as the situation changed in line with current Public Health and government reviews. Our guidance was posted on the homepage of our website.
- p) **RIDDOR reporting of Covid-19** the University has had no Covid-19 cases to report through RIDDOR. HSE enforcement no visits or enforcement action have taken place.
- q) NHS Lothian Health Board Protection Team the Head of Health and Safety and the Health & Safety Manager attended the fortnightly meetings with Lothian Health Protection and other colleges and universities in the Lothian area. These meetings discussed cases, current outbreaks, and best practice. The last meeting on Covid-19 related issues was on 2 June 2022. In the future, NHS will be setting up a working group to focus on local health protection issues. The meetings will be held on a 6 monthly basis.

3.7.2. Post pandemic (from 1 May 2022)

With Covid-19 guidelines being lifted in Scotland (April 2022), we have updated our support information to reflect the changes, as we saw more colleagues returning to campus. We continue to follow Scottish Government and Public Health Scotland guidance to ensure a safe campus for our staff, students and visitors. We will continue to review the guidance and respond to any changes accordingly.

- a) Health and Safety we have put in place health and safety measures to ensure that the workplace is safe and to minimise any risk to staff, students, and visitors to the University. Two documents have been produced.
- b) Working on Campus (Staff) and Studying on Campus (Students) post COVID new Staff and Student H&S Guidance was produced at the end of July to reflect the current rules within the University post Covid-19. This document lays out the expected behaviours and practices of everyone in relation to the rules around social distancing, behaviours, good practices and our approach to the key elements of health and safety on campus. The topics include: before coming to campus, access/egress, social distancing, face coverings, hygiene, student health and wellbeing, safety and security, first aid, fire evacuation, cleaning, catering, teaching rooms, libraries, iPoints, laboratories, sports facilities, ventilation, signage, corridors, lifts and stairs, doors, toilets and water fountains.
- c) Return to Campus from March to May 2022, increased staff returned to campus as restrictions were lifted by Scottish Government. During this time the University has been looking at future ways of working and introduced a 'hybrid working' trial which ran from May to December 2022. From May to August the University introduced the 1st stage of the hybrid trial at our Sighthill Campus to encourage our staff back to campus whilst ensuring our campuses were Covid-19 safe.

- d) Scottish Government Covid-19 Leads meetings the last Scottish Government Covid-19 Leads meeting took place on 29 September 2022. Their view is that there are no immediate issues to discuss on Covid-19 and it is business as usual for everyone.
- e) Health Protection Team (NHS) and Higher Education meeting, March 2023 the Lothian NHS Health Protection Team advised that Covid-19 is still around. To clarify, the only groups who should still be testing are those with 'long term health conditions' and those working in 'Health and Social Care settings', these groups are fully aware of what they are required to do. NHS are discouraging testing; they are advocating a stay-at-home policy for anyone who has Covid for 5 days, until they do not have a temperature/fever.

3.7.3. External communications

- a) Lothian Health Protection Team reporting, testing, communications
 - Weekly meetings moved to fortnightly then to monthly with all other universities and colleges in the Lothian area
 - Police communications advice given at LHPT meetings
- Scottish Universities Scottish Universities Safety Association Group (SUSAG) these were critical in providing solutions to the various issues and consistent approach in dealing with the pandemic across Scotland

3.8. Lothian Health Protection Team (NHS) Issues

- a) Monkeypox June 2022 due to the increase in cases worldwide and media coverage in the UK, we received a letter and guidance from Public Health Scotland on how to manage an outbreak of monkeypox. This was cascaded to staff using the H&S intranet and students through the usual comms routes.
- b) Scabies October 2022 the University was contacted by Polwarth Pharmacy that we had a major outbreak of scabies in our student accommodation whilst we had a few cases none were linked and was not regarded by NHS as an outbreak. NHS provided updated guidance which was distributed to our students through the usual student accommodation team channels.
- c) Scabies February 2023 the University was contacted again by NHS Lothian HPT that we had another potential outbreak (2 or more cases) of scabies in our student accommodation, this turned out to be a duplication of the NHS's records. It was also highlighted that NHS would not disclose which accommodation blocks the students were in, making it difficult for us to isolate such cases. NHS have promised to investigate, going forward any students will be advised by the NHS that they should also inform our student accommodation team accordingly.

3.9. Online Travel Risk Assessment for Travel Abroad

The new online travel risk assessment for travelling abroad went 'live' at the end of August 2022. The background is that any member of staff or student planning to travel overseas on official University business must always complete a travel risk assessment form prior to any travel and/or accommodation being booked. The travel risk assessment and app are essential parts of our duty of care to all staff and

students who are planning on travelling overseas on university business and needs to be assured that travellers have fully considered any risks and have put appropriate precautions in place.

Garda World provides the Crisis 24 service which notifies travellers of any incidents or issues before and during their travel and the app provides this in real time. They also provide rescue and recovery services to ensure travellers are safely evacuated from a country if required. Garda World registration also enables the traveller to contact the Crisis 24 team if they encounter any issue which puts their health and/or safety at risk.

Since its introduction, there have been 186 travellers using the system since 1 September 2022 and 28 February 2023. During this time there have been two serious incidents abroad when our travellers were in the vicinity. The system was able to track people when emergency situations arise like this. These two incidents had different successes.

- All travellers responded to Crisis 24 team and were not near/at risk from incident.
- All travellers in the area of incident did not respond and therefore required university contacts to be emailed, then phone calls to try and track the students down. This was eventually done. Eventually we received confirmation that students were safe and well and emergency action resolved.

Other issues which have arisen:

- Tracking/getting app for users major issues with change in Information Services security system, staff and students with no access to university device have been unable to access system. Information Services looking for a workaround. No timescale available for solution.
- System issues number of requests to change approver, not possible due to system set up and Dean/Director responsible for this. Only one approver allowed.
- Risk assessment process working, a couple of small changes to improve the service provision e.g. senior management in School/Service change of approver if they were to travel.

3.10. Business Impact Analysis (BIP)

BIP for the Health and Safety Team's critical activities in the event of a disruption were reviewed and updated with a key focus on those activities regarded as a Single Point of Failure (SPOF) and reviewing the Recovery Time Objectives (RTO) that indicate the priority/timescales to restore an activity to minimum level and taking into account the Maximum Tolerable Period of Disruption (MTPD) to the University and the continuity of the Health and Safety Office.

3.11. Business Continuity Plan (BCP)

BCP for the Health and Safety Team's critical activities in the event of a disruption were reviewed and updated. The information contained within this plan is based primarily on the results of the Business Impact Analysis (BIA) which has been carried out within the Health and Safety Team. The items that were updated in both documents included:

- List of critical activities by priority
- Staff requirements
- Critical business periods
- Vital equipment
- Vital records

- Critical IT requirements
- Key contacts
- SPOFs
- RTOs
- MTPDs

3.12. Operational Risk Register/Plans for 2022/2023

There are 3 Health and Safety risks embedded in the Finance and Operations Risk Register, the register is updated with progress every month.

- Item 9 Compliance with Health, Safety and Fire Legislation
- Item 10 Missing fire stopping measures Bainfield
- Item 11 New Scottish Fire Rescue Service 'call-out/challenge' procedures

3.13. Health and Safety Priorities for 2022/2023 - Completed

| Objective priority | Key action | Key performance indicator | Date Completed |
|---|---|---|--|
| 1. Lead and support the Health & Safety activities necessary to ensure a safe return to campus and effective transition from home working to campus, as the Covid-19 pandemic develops. | a) Timings dependent on Scottish Government advice and reduction in the restrictions. b) University senior management, HR, Trade Unions and School and Service consultations and interactions. c) Overarching risk assessment to determine control measures for implementation of return. d) Production of required communications and materials to assist in this transition. | a) Act on Scottish Government guidance. b) Consult with the necessary Schools/Services/Trade Unions and student representatives. c) Update and communicate the overarching risk assessment for return. d) Produce the necessary guidance and communicate it effectively. | COVID officially ended 30 April 2022. 'Hybrid working' trial ran from May to December 2022. From May to August the University introduced the 1st stage of the hybrid trial at our Sighthill Campus to encourage our staff back to campus whilst ensuring our campuses were Covid-19 safe. |
| 2. Manage transition of Health & Safety training from face-to-face training to online reflecting ongoing pandemic restrictions and anticipated move towards greater flexible working. | a) Risk assessment of the training requirements for university staff. b) Renewal of Essential Skillz eLearning contract. c) Consult with Trade Unions/ENSA. d) Scope and develop appropriate online training, electronic learning and use of Microsoft Teams with instructor lead training sessions. | a) Undertake a full assessment of the training needs and requirements. b) Renewal of the contract. c) Consult with Trade Unions on training requirements. d) Undertake the necessary online training. | All face-to-face health and safety training was cancelled up until the end of April 2022, meanwhile online training through the Essential Skillz platform continued. Now that the pandemic is over, face to face H&S and fire safety training has started up again from 1 May 2022. |
| Overseas travel risk assessment, safeguarding and | a) Promote awareness and understanding of processes to staff and students. | a) Fully operational system, policy and communications. b) Continual monitoring of the system and addressing issues. | Travel Risk Assessment process went 'Live', August 2022. |

| Objective priority | Key action | Key performance indicator Date Completed | |
|---|--|---|---|
| incident management processes. | b) Monitor operation and identify and resolve any issues which need to be addressed. | | |
| 4. Additional H&S resource for the H&S Team | Candidates to be sourced for an additional H&S Manager to support the H&S Team and specific Schools. | a) The addition of another H&S Manager to the Team will enable the central H&S Team to support the wider University and Schools. | Completed, David Conner, a technician from SAS (Applied Sciences) joined the H&S Team on 1 June 2022. |
| | | b) Initially the new team member will be supporting a specific School, before being utilised by the H&S Team to support other Schools and the H&S Team. | |

3.14. Health and Safety Priorities for 2023/2024

| Objective pri | ority | Key action | Key pe | erformance indicator |
|----------------------|--|--|----------|---|
| | g defective works at including fire stopping | Prioritise the remediation of these works to ensure the building integrity. | da im | e are currently in the process of agreeing final ates to commence the works to reduce the apact and minimise disruption on our perations. |
| Material (above b | iminium Composite Cladding at Merchiston ke store and Music Centre) ige, Sighthill | In the context of the Grenfell Tower fire, it was confirmed that a review of cladding used on buildings within the University's estate was completed in July 2017 to confirm that it met | a) b) | University to monitor Scottish Government advice and the Building Regulations. Decide at the appropriate time to remove the |
| and Engl | ,5c, 3.5.1tm | appropriate standards of fire resistance. | | remaining ACM panels. |

| Objective priority | Key action | Key performance indicator |
|---------------------------|--|---|
| | All accommodation and campus blocks over 18m that had ACM panels were removed. | |
| | All our accommodation blocks are compliant. | |
| | However not all ACM cladding was removed as some buildings are under 11m height. A small quantity of ACM panels remains in non-sleeping buildings. | |
| | Whilst the law does not require us to remove the cladding, it would be prudent at the appropriate time or following advice from Scottish Government to remove it. | |
| | There is a potential that other HPL cladding may have to be removed in the future, this applies to one small area in one block at Orwell Terrace. | |
| 3. Fire Safety in general | There is a risk that if the University fails to manage and comply with health, safety and fire legislation it could experience gross loss due to fire or dangerous occurrence, reputational risk, prosecution, civil claims, fines based on turnover and custodial sentence for senior officers. | a) Established Health & Safety management framework and fire safety management framework supported by regular schedule of auditing, monitoring, review and reporting, through university level and local H&S committees. b) Established programme of Health & Safety and Fire Safety training for staff, students including identified enhanced requirements for particular roles. c) Ongoing incident reporting, investigation, recommendations and follow up to address and mitigate H&S and fire issues. |

4. Occupational Health Report

- 4.1 Number of Referrals
- 4.2 Health Surveillance for At Risk Workers
- 4.3 Employee Absence Data and Trends

4.1. Number of Referrals

As MCL Medics accountability for OH service did not commence until January 2023, the following data is provided by the previous OH supplier and covers the reporting period March 2022 until January 2023. The first MI report from MCL was not available at the time of submitting data to the annual report however will form part of our regular reporting to the H&S Committee.

Number of Referrals (March 2022 - Jan 2023)

| Referral Type | No. of Referrals in Reporting Period |
|----------------------------------|--------------------------------------|
| Occupational Health Advice | 136 |
| Workstation Assessments | 23 |
| General Pre-Employment Screening | 464 |
| Occupational Therapy | 3 |

The Occupational Health Advice numbers relate to specific referrals made by the People Team or Managers for colleagues to speak with an Occupational Health Nurse/Physician as part of a management referral specific to their health needs.

We are supported by OH to ensure work desk station assessment and support is available to those who require any adaptations. The higher volume of General Pre-Employment Screening referrals is indicative of the type of roles which may be health pre-screened including those operating as part of the University's Flexible Workforce.

The People Team continue to work closely with the new MCL Account Manager to ensure the service is successfully embedded across the University and we maximise the service offered by our OH provider. Data and trend analysis showing reasons for referrals and time to conclude interventions will be provided for in future reporting.

4.2. Health Surveillance for At Risk Workers

The University's approach in recent years, notwithstanding the impact of the Covid Pandemic, is to undertake an annual programme of health surveillance for at risk workers (those who work with substances/chemicals, machinery, technicians in labs etc.). Accountability for identifying impacted colleagues sits with the Schools and the respective Deans/line managers and the Policy is owned by Health & Safety. HR Services team has played a key administrative role in helping collate employee data on who is within scope and what testing is required before liaising with the OH provider to get this established.

Changing our OH provider gives us the opportunity to review our approach to our Health Surveillance programme of testing and colleagues from the People and Health & Safety Teams have been collaborating

on how best to proceed with the programme of testing with MCL and where we may be able to make some improvements and increase knowledge and awareness to help:

- Understand and respond to matters more promptly.
- Ensure that a cycle of renewals is fit for purpose and reflects current duties and requirements.
- Determine when and how best to re-test.
- What happens with new roles or new work environments?
- How information is shared between Deans/line managers, Health & Safety and HR Services.
- Define roles and responsibilities.
- What enhancements our new provider MCL Medics might be able to offer.

Overview of areas currently under Health Surveillance:

- BE-ST
- Robin Mackenzie Partnership
- International Operations and Student Recruitment
- Property & Facilities
- School of Applied Sciences
- School of Arts & Creative Industries
- SCEBE
- School of Health & Social Care

Circa 150 staff have been identified as being in scope based on previous year's data. An audit of colleague lists by managers will be undertaken to determine the correct people are enlisted and the appropriate testing suggested. Advice and guidance have also been sought by MCL Medics on how best to collate and submit this data to them for implementing an action plan for testing.

The outcomes of Health Surveillance testing for 2023 will be made available in a future Health & Safety Committee Report and an annual update provided on progress for next year's Annual Report.

4.3. Employee Absence Data and Trends – Sectoral Comparison UCEA Sickness Absence in Higher Education Reporting

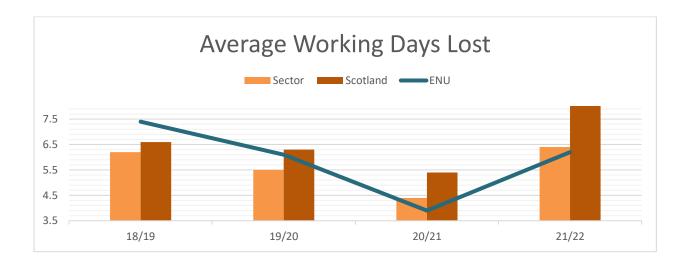
Using the results of the most recent UCEA survey, from data over the period 2021-2022, sickness absence has increased since the previous survey across the sector and our data evidence a similar increase within the University. On average, 2.9% of working days were lost to sickness absence in the 2021-22 academic year (2% in 2020-21).

Whilst at ENU we ranked 44/100 (HE Sector) and 18/47 (comparator HEI's) for recorded average working days lost, we do have concerns that not all absence is being recorded. We increase awareness with Line Managers and colleagues of the importance of ensuring absences are recorded and monitored to support the health and wellbeing of colleagues.

HEI's reported an increase in the overall % of working days lost to sickness since last year. The average period of short-term absence increased from 1.7 days to 3 days whilst long term absence (2 weeks or more) decreased from 62.1% to 53.4%.

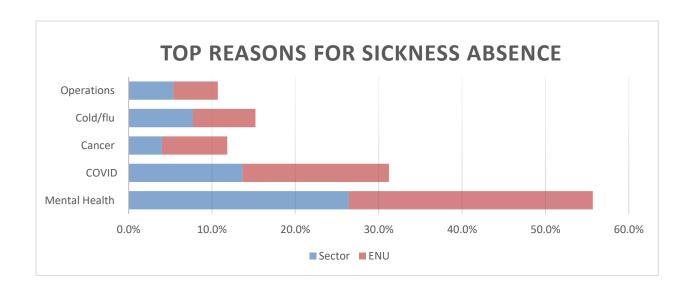
There has been a significant increase in the average working days lost at ENU from 3.9 days (2020-21) to 6.2 days in 2021-22. This figure is more aligned to the previous year 2019-20 when this was 6.1 days. As

noted in the previous report we believe the decrease in 20-21 was linked to Covid-19 measures that were in place including several colleagues being on furlough.



In ENU, the average period of absence (total sickness absence/number of occurrences) decreased from 9.9 days to 7.9 days. This remains higher than the average period of absences of 6.7 days for the HE sectors.

- The proportion of sickness absence that is long term (classed as 2 weeks or more) is similar for the sector (ENU 54.1% and other HEI's 53%). This has reduced from last year which was 63.5%.
- The average number of short-term working days lost in the sector was 3 days which compares with 2.8 days and ENU (1.4 days in 2020-21).
- Consistent with previous years, the main cause of sickness absence in terms of days lost was mental health, accounting for 29.3% of days lost at ENU (26.4% in the sector).



Across the sector the most used method to manage both long and short-term sickness continued to be line manager involvement. For long term absence, occupational health referrals and phased returns also proved effective.

5. Health and Wellbeing Initiatives 2022-2023

Work and personal life after the pandemic has returned to normal for most people in the workplace, however, we are mindful that for some there continues to be a short/medium/long term effect on their mental health and wellbeing. Other day to day life events can also affect colleagues in many ways.

Raising awareness of mental health and speaking about this more publicly and honestly across the university is essential to transforming behaviours and attitudes to mental health illness; alongside giving managers and colleagues the knowledge and support to recognise and talk about problems when they arise, and understanding where they can find support is essential, thus promoting an early intervention approach. Our support to colleagues on mental health education aligns with the sector wide University Mental Health Charter and what we have committed to as a university within our Health Strategy (2021-2024). This has included the delivery of a Mental Health Awareness training calendar for colleagues and managers.

We partner with Mental Health UK (MHUK) to deliver mental health awareness training for colleagues and for managers. For those who wish to become Mental Health Champions or their role requires more comprehensive training, we offer Applied Suicide Intervention Skills Training (ASIST) and Scottish Mental Health First Aid (SMHFA) courses both delivered by Public Health Scotland trained and evaluated trainers. To highlight, all Security and Student Accommodation colleagues are trained in both SMHFA and ASIST.

Training completed within reporting period:

| Training | Date(s) | Total Employees Trained |
|-------------------------------|-------------------------------------|-------------------------|
| MHUK "Mental Health | March 2022, September 2022, January | 40 |
| Awareness" All Colleagues | 2023 | |
| MHUK "Mental Health in the | March 2022, May 2022 | 71 |
| Workplace for Managers" | June 2022, October 2022 | |
| | February 2023 | |
| SLT session "Mental Health in | June 2022 | 16 |
| the Workplace" | | |
| SMHFA | September 2022, December 2022 | 29 |
| ASIST | October 2022, February 2023 | 45 |
| Eskillz | Various | 47 |
| (online 1 hour self-directed) | | |
| TOTAL | | 248 |

All the training courses have proved popular with positive evaluation of the training. The MHUK Managers training in May 2023 is fully booked and the SMHFA in April and June 2023 also both fully booked. This would therefore bring the total number of colleagues trained by June 2023 to 300 colleagues (will increase with ESkillz number).

The Mental Health Champion Network continues to grow with more colleagues undertaking accredited training, bringing the number of Mental Health Champions to 59. This group of colleagues are a named point of contact across all campuses for an employee who is experiencing a mental health issue or is in emotional distress. Champions are trained to listen, ask the right questions, and signpost colleagues to relevant support resources. The Mental Health Champions meet once per trimester to have briefings from external speakers, offer each other peer support and receive refresher training from MHUK.

The University has several externally provided support services available to colleagues experiencing mental health problems:

- The Employee Assistance Programme (EAP), delivered by MCL Medics, provides emotional, practical and wellbeing support to employees and their immediate family members (over the age of 18).
- TogetherAll is a confidential online platform providing access to a 24/7 online community and is supported by trained mental health practitioners. TogetherAll proves popular with the student community with 178 students regularly accessing the service and 19 colleagues. 48% of users are aged between 16-24 with 33% aged 25-34. 63% identify as female and 31% identify as male.
- SilverCloud is an online self-directed platform offering five discreet self-directed learning programmes, covering Making Time for Covid 19, Making Time for Resilience, Making Time for Sleep, Making Time for Money Worries and Making Time for Mindfulness. These can be accessed anytime from multiple devices including mobile phones. Figures for this period are currently unknown. This platform provision is being reviewed and may not continue after the contract end date of June 2023.

To give the university community a better understanding of mental health concerns, the university has welcomed various guest speakers to deliver sessions/talks. This has included highlighting National Sleep Month, Stress Awareness Month, Men's Health Week, Time to Talk and Colleague Wellbeing Briefing Sessions were hosted on each campus to promote the various resources.

In February 2023, the university welcomed a well-known guest speaker in suicide prevention and intervention to deliver a public talk. During 'Time to Talk' theme in February we hosted 'Colleague Wellbeing Briefing Sessions' across each campus to promote the various resources and we welcomed our EAP provider MCL Medics to meet colleagues face to face to promote their service.

Flu Vaccine Clinics were held in early October 2022 with 240 colleagues taking up the offer to receive free flu vaccines delivered across three clinics by our EAP Provider MCL Medics.

The established **Menopause Hub** continues to meet informally online offering a safe space for colleagues to discuss challenges and issues which are affecting them relating to both the perimenopause and the menopause. A guest speaker is arranged for March.

The University made the decision not to continue with the Healthy Working Lives accreditation scheme. Public Health Scotland, who administer the award, were reviewing the scheme and although the university has held the Gold Award for many years, it was considered that the scheme no longer fitted with the university's health and wellbeing agenda. It was considered that the HWL scheme tends to support organisations who are at the start of their health and wellbeing support journey and offered little support benefit to the university who have a robust plan in place.

Colleague Survey (Your Voice) was promoted and completed in November 2022 (the first full survey since 2018) with the results communicated to colleagues. The University Leadership Team is committed to respond to actions from the survey. We are developing an approach to continuous colleague listening for the University and will repeat the colleague survey in 2024 to track shifts in colleague engagement.

6. Employee Assistance Programme

The Employee Assistance Programme is outsourced. We contracted with a new provider MCL Medics on 1 August 2022. They provide a confidential and independent resource to help balance work, family, and personal lives. This service is available 24 hours a day, 7 days a week, 365 days a year by phone, e-mail or online and provides information, resources, and counselling on any of the challenges that life may bring. The services are paid for by the University so that they are provided free to employees.

Utilisation of the service 1 August 2022 – 28 February 2023

The information below is based on the reporting period from 1 August 2022 until 28 February 2023 with MCL Medics (7 months). A full set of data on service usage and benefits will be provided for in future Health and Safety reporting, however we can share:

- 629 colleagues have downloaded the app onto their mobile device. The app offers preventative
 resources (mind articles, fitness videos, nutrition advice etc.) with the content relating to the
 mind (mental health support) continuing to be the most popular, with fitness and nutrition also
 of great interest.
- 84 individuals contacted the triage team at MCL with 59 then going on to have 1:1 counselling service equalling 262 appointments in total (69.86% of colleagues identify as female and 30.14% identify as male who have used the counselling service), with anxiety remaining the main reason for using the service, followed by work related stress and family problems.

Other Benefits

Colleagues can access a wide range of resources and benefits through a designated MCL portal. This site contains documents and guidance on all types of challenges an employee may face, both inside and out of the workplace.