

CONFIRMED MINUTES

Meeting Details

Meeting Title: University Health, Safety and Welfare Strategic Committee (HSWSC). NON-CONFIDENTIAL minutes.

Chair: Brendan Casey

Agenda Reference: Health, Safety, and Welfare Committee Agenda: October 2025

Date and Time: Wednesday 29 October 2025, commencing at 10:15 GMT

Location: CLC 2.01 VCO Board Room, Headington Campus

Attendees

Brendan Casey (BC), Registrar and Chief Operating Officer; Jerry Woods (JW), Director of Estates and Campus Services; Alan Reeve (AR), Savills Reader (UCU); Jill Millar (JM), Senior Lecturer in Business and Management (UCU); Paul Bradley (PB), Director of Occupational Health & Safety; Neil Fernandes (NF, minute-taker), Health & Safety Administrator; Sharon Willett (SW, Secretary), Safety Manager.

Apologies for Absence

Andy King (AK), Partnerships and Placements Manager (UNISON); Sarah Thonemann (ST), Chief People Officer; Abigail Reilly (AbR), Deputy Director Organisational Effectiveness and Development; Sarah Irons (SI), Bioinnovation Hub Manager; Simon Hogg (SH), UNISON.

1. Minutes of the HSWSC meeting held on 10 June 2025

[HSWSC250610/02](#)

- 1.1. The minutes from the meeting held on 10 June 2025 were confirmed as a true and accurate record.

2. Action log review and matters arising

- 2.1. **Occupational Health (OH) Statistics Tracking:** PB confirmed that tracking Occupational Health referral statistics broken down by department was feasible for the next meeting. It was noted that care must be taken to ensure no individual could be identified, especially in smaller departments (fewer than 10 referrals). **Action:** Provide OH referral statistics broken down by department (PB - Next Meeting (17 February 2026)).
- 2.2. **Powered Transporters Procedure:** SW reported that the powered transporters works had been agreed, and that the required site work (the external charging project), is with Neil Ward (Assistant Director Capital Projects - Estates and Campus Services). Works have been delayed but have now been allocated and are scheduled to commence in

- January of next year. **Action:** To report progress on the powered transporters external charging project (SW -17 February 2026).
- 2.3. **Gibbs Site Move Issues:** JM provided an update regarding issues arising from the relocation to the Gibbs Building. Oversight was maintained by Claire Cross (Deputy Director People Operations - PD) and Emma Coles (Head of Operations - AHSS). Richard Grayson (Head of School of Education, Humanities and Languages) was actively working with some staff. PB confirmed that thermometers were now in place. He also explained how thermometers and the Building Management System (BMS) both provide data regarding building temperature. There was some discussion about DSE users' abilities to set up their workstations. PB explained that staff have DSE training and DSE assessment. It was noted that the training completion rates within the School of Education were approximately 95%. We can be confident that staff are competent to set up their workstations in a safe and healthy way.
 - 2.4. Regarding storage, Richard Grayson was liaising with space planning over this issue. The Health and Safety team were not aware of any mobility issues being raised. There was some discussion about the provision of wipes. It was noted that these provisions arose from the Covid pandemic and were no longer a requirement. PB noted that providing wipes in one office would necessitate providing them institution-wide, which would be prohibitive in terms of cost. PB was tasked to report back to the committee the cleaning regime and the procedure for requesting spot cleans. BC noted that this cleaning call-out procedure required broader communication across the University. **Action:** Clarify cleaning call-out procedures via Estates and Campus Services and issue broader communication across the university (PB -17 February 2026).
 - 2.5. BC queried the policy on students charging e-scooters in residences. PB confirmed that e-scooters are banned from university land and buildings and should be confiscated if found in residences. This applied equally to staff.

3. Health and Safety Report [HSWSC250610/04](#)

- 3.1. **Occupational Health and Safety (OHS) Annual Report and Objectives:** PB presented the OHS Annual Report and proposed strategic objectives for the coming year. The four objectives are:
 - 3.1.1. Encouraging line managers to undertake the new, non-mandatory Health and Safety Awareness course.
 - 3.1.2. Delivering fire evacuation awareness training across departments.
 - 3.1.3. Implementing a new electronic permit to work system, initially within ECS and IT Services, to improve contractor management and strengthen compliance (e.g., asbestos awareness).
 - 3.1.4. Identifying and implementing controls for confined spaces across university sites.
- 3.2. Concerns were raised that mental well-being objectives were not explicitly included among the four objectives listed above. PB explained that specific mental well-being targets are overseen by the Stress Management Steering Group, led by AbR, and are incorporated within the People and Culture Strategy. An update on these matters is provided within the main Health and Safety Report.
- 3.3. It was noted that the current Health & Safety awareness training structure should be updated to include the Union Health and Safety Officers as designated points of contact. **Action:** Update Health and Safety awareness training content to include statutory Health and Safety Officers as points of contact. (SW -17 February 2026).

- 3.4. The OHS Annual Report and proposed objectives were broadly approved for submission to SLT and the People Committee. **Action: PB**
- 3.5. **Performance and Incident Reporting:** SW reported on performance against H&S objectives. Completion rates for mandatory training, including DSE and Health and Safety Essentials, now exceed 95%.
- 3.6. The New Headington Hill Building (NHHB) evacuation was noted as largely positive, with Gather & Gather performing well.

Health and Safety Procedures (for approval)

- 3.7. **Event Health and Safety Procedure:** A new draft procedure for events was presented, mandating a three-phased process (planning, delivery, and closure) for all events, on or off-campus. The procedure requires Pro-Vice Chancellors and Directors to ensure that competent organisers are appointed. **Decision:** The Event Health and Safety Procedure is approved subject to JW being satisfied with the level of consultation. **Action:** Finalise internal workflows with faculties and directorates for the new Event Health and Safety Procedure (SW - TBC).
- 3.8. **Control of Substances Hazardous to Health (COSHH) Procedure:** An updated COSHH procedure was presented. It introduces a clearer structure with defined roles (assessor, reviewer, authoriser), formalised training expectations, and strengthened controls around procurement, waste, and biological agents. SW confirmed she would address comments received from SI separately. **Decision:** The COSHH Procedure was approved. **Action:** Follow up with SI regarding her comments on the COSHH procedure (SW - Outside Meeting).

Workplace Wellbeing

- 3.9. **Stress Risk Assessment and Absence Data** A query was raised regarding the trigger points for instigating individual or institutional work-related stress risk assessments. PB clarified that the institutional risk assessment is a 'live' document that is continuously reviewed by the Stress Management Steering Group, supported by pulse surveys and absence data, rather than being repeated on a fixed cycle. Individual risk assessments are typically initiated when staff are struggling, often following a recommendation from Occupational Health.
- 3.10. PB noted that absence data linking absence specifically to work-related stress was less than 0.5%, although it was acknowledged that this is likely an under-representation due to potential under-reporting or the masking of stress by other causes (e.g., headaches). A review of the Sickness Absence procedures and policy is currently being undertaken with the People Directorate.

Occupational Health

- 3.11. **Evaluation Report and Reasonable Adjustments:** A review of Occupational Health services conducted over the summer indicated that while many staff felt supported, there is a significant need to improve line managers' understanding of their responsibilities regarding reasonable adjustments. There was evidence that some managers believed they lacked the necessary authority to implement adjustments, despite being authorised

to do so. This gap was previously identified by the EDI team and the Stress Management Steering Group.

- 3.12. PB is collaborating with the EDI team, AbR, and the People Managers to develop a concrete structural plan to convey the necessary information and support to managers. AR raised concerns about managers being uncertain of their level of authority, especially regarding adjustments that might involve workload reduction. It was reiterated that the principle is the same as safety: if a control measure (or adjustment) cannot be implemented, the decision must be escalated up the management chain. **Action: PB** Develop a structural plan, in collaboration with the EDI team, AbR, and the People Managers, to improve manager training and support regarding reasonable adjustments and the Occupational Health referral process
- 3.13. **Employee Assistance Programme (EAP):** PB reported that the EAP scheme utilisation rate was in line with other comparable organisations. Post-counselling assessments indicated that between 85% and 92% of users experienced significant improvement. It was noted that there is a need to constantly make sure staff are aware of this service and PD always reference this in communications to staff where appropriate.

4. Any other business

- 4.1. **The Annual GM Committee Meeting - delayed.** BC inquired whether the delay of the current meeting posed any risk. PB clarified that regulatory changes several years prior softened requirements, meaning formal meetings were not always mandatory, and the delay did not pose a risk.
- 4.2. The Annual General Management Committee Meeting, originally scheduled for September, was delayed until 13 November, with the report scheduled to be presented at the February HSWSC meeting. **Action: SI.**

5. Dates of the next meeting

- 5.1. The next meetings were confirmed as
Tuesday, 17 February 2026
Tuesday, 16 June 2026.

Meeting ended at 11:00 am.