



HEALTH AND SAFETY ANNUAL REPORT 2018/19

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1. EXECUTIVE SUMMARY

This report provides an overview of the University's Health and Safety (H & S) performance during the 2018/19 academic year and a summary of key outputs and initiatives.

The year has seen further improvements and strengthening of our health and safety culture across the University.

We are seeing earlier and more active engagement in the assessment and management of H & S risk as part of decision making and activity planning across the University. We however recognise that early engagement remains inconsistent and this remains a focus for improvement over the coming years as we move towards 'making Health and Safety business as usual'.

Occupational H & S advice continues to grow more accessible to those who need it, when they need it. However, we recognise further work is required to improve the user experience via our shared platforms.

Highlights of our performance include: -

- Our reportable injuries, ie those required to be reported to the Health and Safety Executive (HSE) continue to decrease, falling from 6 in 2017/18 to 4 in 2018/19.
- Whilst we have seen an increase in actual numbers of reported accidents staff and student injury rates (injuries per 1000 staff or students) have remained relatively static over the last 2 years. Injury rates are a more accurate reflection of our performance as they reflect the significant increases in staff and students over the last 4 years.
- We have seen year on year reductions in our 3 most common accident types which are, handling, slips and trips and exposure to harmful substances;
- Near miss reporting remains steady and it is pleasing to note that students have reported 4 times as many near misses during 2018/19 than 2017/18. This is indicative of a positive safety culture
- Our performance is comparable with other universities (we have compared our data to the 2017/18 USHA survey results, the comparison is indicative only because USHA have not yet published results for 2018/19).

Highlights of our improvements include: -

- We achieved a 100% response rate for self - verification assurance assessments of the University with assurance levels comparable to 2017/18
- A new 5 year vision for Health and Safety was developed. 'Making Health and Safety Business as Usual' was endorsed by the HR Committee and Executive Health and Safety Group
- A greater number of Schools and Services are now using the Sharepoint platform to deliver online health and safety information. We have also seen increases in sharing of best practice and use of technologies across schools and services to improve the efficiency and effectiveness of H & S related processes and procedures

- Our Occupational Health Service (OHS) has consistently delivered its Service Level Agreements with HR, the Faculty of Health Sciences and School of Education
- The National Composite Centre and Langford Veterinary Service have provided sufficient evidence to show that they have Health and Safety management systems in place. We will be engaging with the Science Research Foundation and the Stables Equine Practice during 2019/20
- In developing this report we recognise the contribution made by School/Service advisors and safety managers and Trade Union Safety Representatives in helping manage H & S at a local level.

2. MAKING HEALTH AND SAFETY BUSINESS AS USUAL

2.1 2018/19 saw the University adopt a new vision for Health and Safety. Making Health and Safety business as usual will further develop the positive culture that exists across much of the University, drive a step change in the University's engagement with and management of Health and Safety, providing a platform for driving improvements in behaviours and assurance activities.

2.2 The University's previous strategy 'Towards Zero' successfully reduced our reportable accidents and was a catalyst for improvements in Health and Safety performance. However it was 5 years old and a new vision was required.

2.3 To enable the University to deliver its aims and meet the challenges it faces now and in the future, we need all staff and students to consider Health and Safety as a natural and fundamental element of their behaviours, their way of living, working and studying at the University and in their planning and decision making.

The vision has three strategic themes, to **Engage, Empower** and **Enable**. Each theme is supported by a range of strategic aims.

2.4 To engage we will:-

- Better understand what our key stakeholder and communities are trying to achieve, their priorities, the challenges they face, tailoring advice and support to help not hinder;
- Use this understanding to reframe our messaging and communications to what is relevant to them, evidencing how good practices can be a benefit not a burden;
- Work in partnership to encourage and promote engagement with Health and Safety;
- Have an open and honest culture where good practice is shared and accidents, incidents and near misses are used as learning opportunities;
- Better understand how we are performing, providing comprehensive assurance and management information.

2.5 To empower we will: -

- Better define roles and responsibilities of all stakeholders and duty holders, providing better information on induction and as part of ongoing support and guidance;
- Clarify Fire safety responsibilities following the establishment of the Campus Division;
- Use performance information to help managers and leaders at all levels make informed decisions and identify opportunities to improve;

- Enable leaders and managers to identify and address any gaps in the health and safety competencies of their staff.

2.6 To enable we will: -

- Simplify our systems and processes, making them easy to understand and implement;
- Make our information, guidance and learning easily accessible and engaging;
- Use existing and established systems, decision making mechanisms or planning processes as vehicles for considering Health and Safety;
- Ensure risks are managed in a sensible and proportionate way

3. ACCIDENTS/INCIDENTS & NEAR MISSES

This section provides performance indicators relating to accidents/incidents and near misses

Observations and analysis are summarised below: -

3.1 Observations & analysis

- Our reportable injuries (ie those required to be reported to the HSE) have continued to decrease, falling from 6 in 2017/18 to 4 in 2018/19.
- Whilst we have seen an increase in actual numbers of reported accidents staff and student injury rates (injuries per 1000 staff or students) remain relatively static. Injury rates are a more accurate reflection of our performance as they reflect the significant increase in staff and students over the last 4 years.
- We have seen year on year reductions in our 3 most common accident types, handling, slips and trips and exposure to harmful substances;
- Near miss reporting remains steady and it is pleasing to note that our students have reported 4 times as many near misses during 2018/19 than 2017/18. Schools and Divisions have been encouraged over the last 2 years to take a more active lead in promoting accident and near miss reporting across their student communities and creating an open and honest environment where near miss reporting is seen as a learning opportunity rather than a failure.
- The types of near misses reported by students reflect the types of injuries reported. These would normally have been reported by Technical Staff, but are now being reported by the students themselves
- Our performance is comparable with other universities (we have compared our data to the 2017/18 USHA survey results, the comparison is indicative only because USHA have not yet published results for 2018/19).

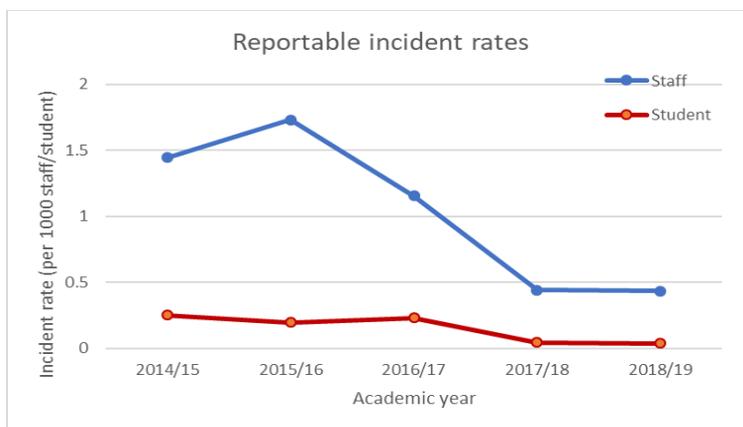
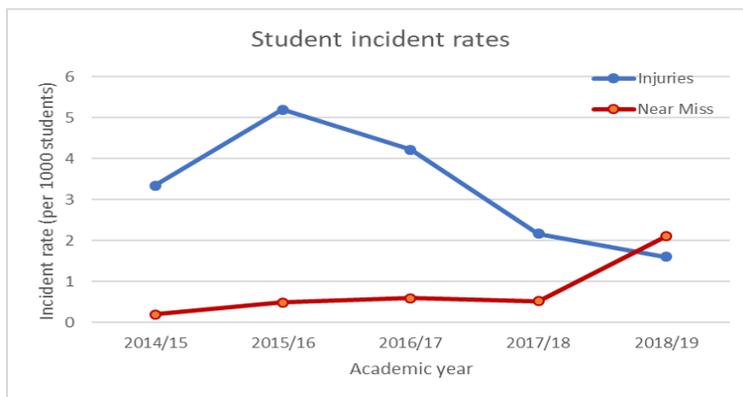
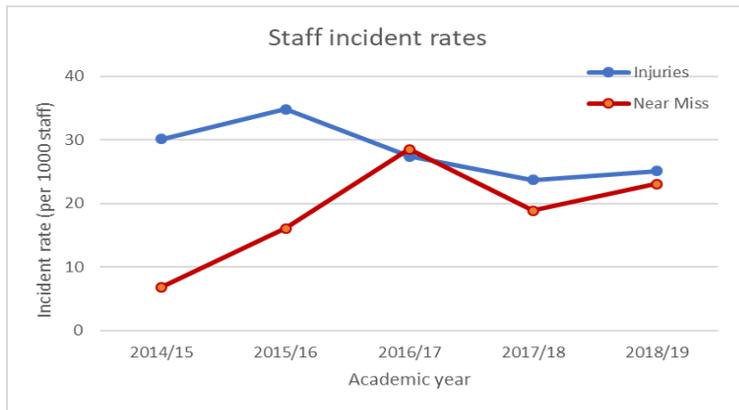
1. Total Incidents reported during 2014/15 to 2018/19

Reporting Year	Accidents	Near Misses	RIDDOR
2014/15	252	68	16
2015/16	332	129	17

2016/17	281	194	14
2017/18	231	152	6
2018/19	255	250	4

2. Incident trends (expressed as rate per 1000 staff/students)

For 2018/19 the staff injury rate was 25.1 compared to 24.2 in 2017/18. The student injury rate was 1.6 in 2018/19 compared to 2.0 in 2017/18. These are relatively minor changes.

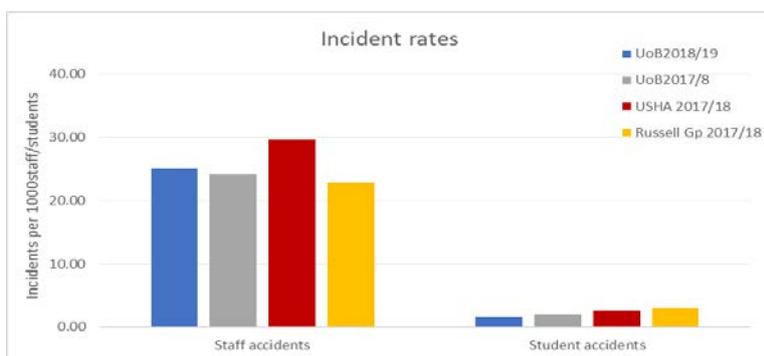
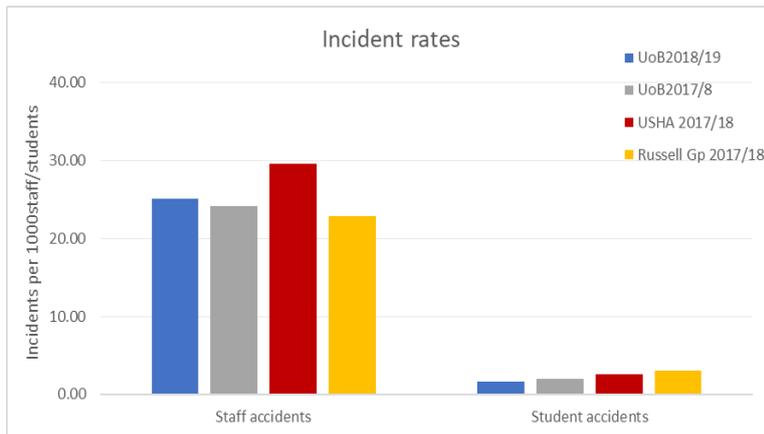


3. Benchmarking Summary.

Please note the 2018/19 USHA data collection has not been completed so we are unable to compare our 2018/19 incident rates with the same year for the University Sector at this time. USHA data for 2017/18 is provided for indicative purposes

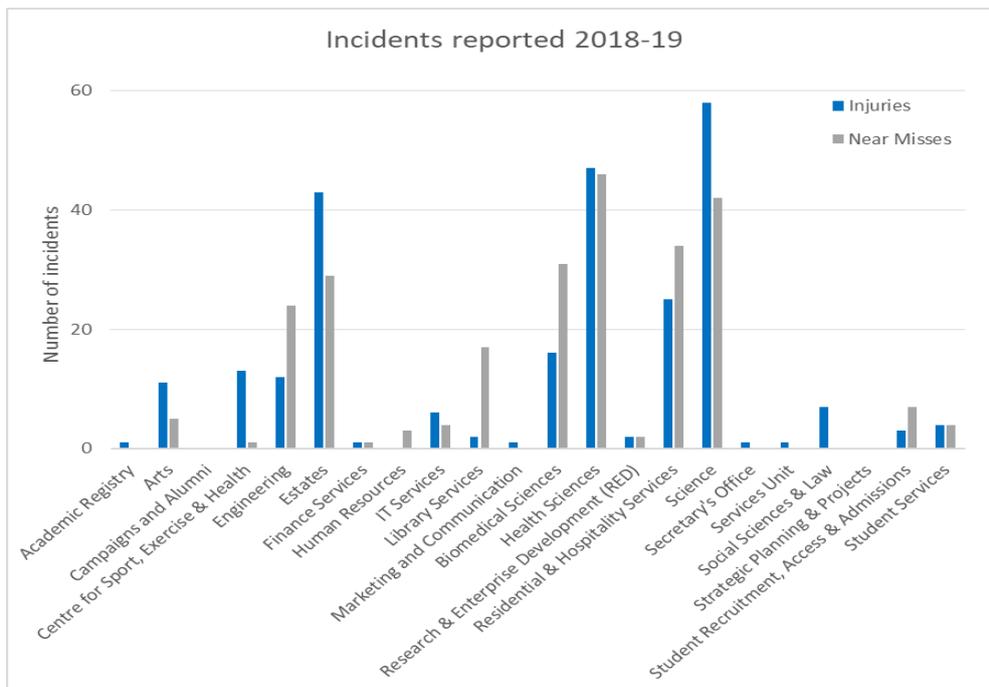
In general, our performance is very positive in comparison, with both our total RIDDOR incident types (those incidents that are required to be reported to the HSE) for staff and students well below the incident rates for both USHA and Russell Group HEIs.

- One area where we were not performing as well as the sector was in near miss reporting by students. It is now worth noting that we have seen a 4 fold increase in near miss reporting by students over the last 12 months. We are now seeing the rewards from Schools and Divisions being encouraged over the last 2 years to take a more active lead in promoting accident and near miss reporting across their student communities.



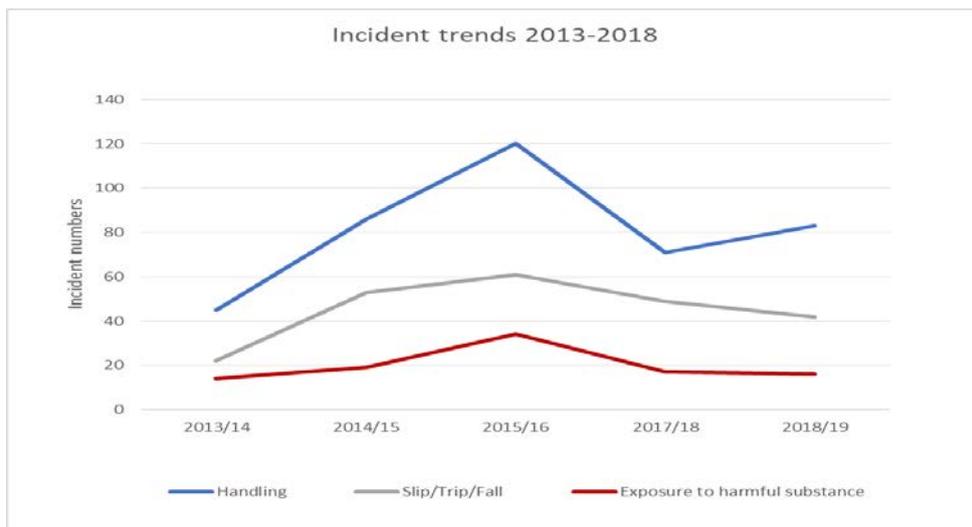
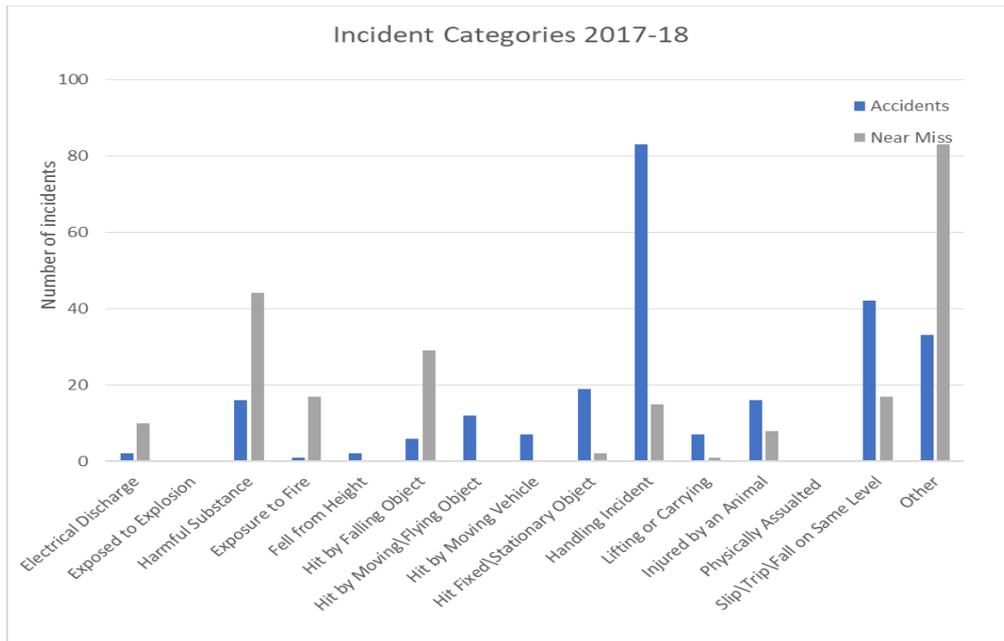
4. Incidents by Faculty/Division

Estates, Residential and Hospitality Services (RHS) , Science and Health Sciences faculties continue to report the majority of injuries. This is not surprising and is consistent with the work and study undertaken in these areas. Most near misses are reported by Science, Health Sciences and Life Sciences.

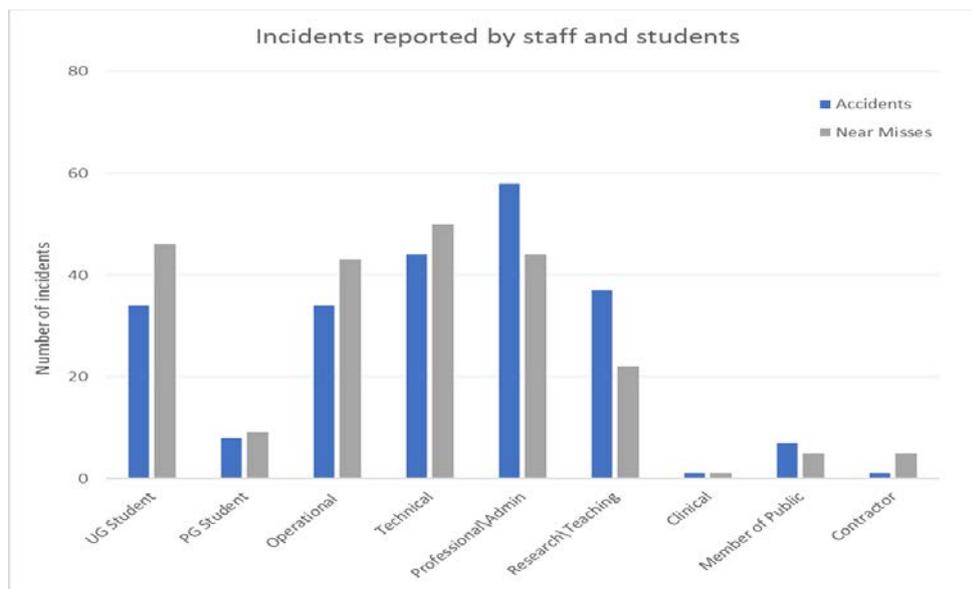


5. Incidents by Cause

As per previous years the main causes of injury are handling (not manual handling) & slips and trips. However injury numbers continue to decrease.



6. Incidents by UoB status



4. 2019/20 AND BEYOND

A Plan of Work and Performance Indicators will continue to drive our activities through 2019/20 and beyond in support of our vision - Making Health and Safety business as usual. Key activities planned include: -

- Submission and analysis of 2018/19 self-verification assessments;
- Identify and implement improvements to the self-verification process;
- Re-design and development of centrally held online information and instruction to enhance user experience and user accessibility;
- Update our Health and Safety governance arrangements to include clearly defined roles and responsibilities;
- Review and gain approval of an updated UoB Group Health and Safety Policy
- Develop and deliver an annual programme for senior leaders to raise awareness and understanding of roles and responsibilities;
- Review and update our Fire Safety Policy to reflect the structural changes to the University and the external regulatory environment;
- Develop an assurance register that provides accurate and timely management information relating to performance and compliance with legislation
- Develop a range of management and assurance related information for key stakeholders;
- Work with key stakeholders and process owners to embed H & S considerations into decision-making and planning processes;
- Collaborate with Residential Life and the student community to improve positive fire safety related behaviours in accommodation.

5. ASSURANCE

5.1 Self- verification assurance assessments

2018/19 saw the continued development and implementation of our self-verification assurance assessment process as a key University assurance mechanism. It also provides a tool for driving

improvements in health and safety management and enabling University leaders to meet their Health and Safety related roles and responsibilities.

The following provides a summary of the results and findings for 2017/18:-

- 100% response rate. All those areas we expected to carry out assessments did so.
- In terms of assurance levels, overall results were comparable with 2016/17 with nearly 60% reporting full assurance, and over 30% reporting substantial.
- Two Professional Services Divisions reported Limited assurance (IT Services and External Relations), Safety and Health Services are providing each Division with support and advice which are seeing improvements over the year;
- Centre of Exercise and Health moved from Limited to Substantial;
- Four common activities were identified by both Schools and Services as areas they intend to focus on over the forthcoming year.
 - Development and implementation of effective H & S action plans and strategies
 - Development of web based platforms for sharing local Health and Safety information (eg Sharepoint)
 - Review and development of local risk assessment processes and identifying options for centrally hosting, managing and sharing risk assessments;
 - Review and implementation of risk assessment instruction and training
- Whilst implementation of the process has been generally successful we recognised that there were areas of weakness and a need for further improvement. An internal audit of H & S governance arrangements was requested and undertaken in the last quarter of 2018/19. The auditor was asked to include the self - verification assurance assessment process within its scope. Findings and actions from this audit are summarised in the Internal Audit section below.

Conclusions

- The process has provided a valuable oversight of how H & S is managed across the University, providing levels of assurance through to Deans and Divisional Heads;
- Analysis indicates that generally schools and services have continued to develop and improve their H & S management systems;
- The majority of schools and services have local rules and policies in place and are promoting H & S within their areas;
- Schools and services have oversight of their significant risks and most report that these have been assessed;
- Areas of concern have been identified and has provided the University with an opportunity to better understand some of the common challenges that schools and services are facing allowing us to better focus our efforts in support, guidance and advice
- A random selection of assessments were tested by Safety and Health Services, focusing on the management of risk section.

- Apart from one assessment, the advisors were generally satisfied that the assessments were an accurate reflection of the information provided. Discussions took place with the School in question to ensure changes were made and the assurance level reported was reviewed;
- The advisors were also satisfied with the progress of identified improvement actions where little of no assurance was given.

5.2 Internal Audits

The following is a summary of those audits completed by the University's internal auditors

Table

SUBJECT	OPINION	CONCLUSIONS	AGREED ACTIONS
Fire Safety	Reasonable	The University's framework for fire safety delivers a sufficient level of training, risk assessment and support for the University's staff and students. However, the overall strategic direction of fire safety risk management and visibility of assurance is less than optimal, with several departments working independently of each other and no overall collation of assurance to provide a complete overview of the University's position.	<p>Fire Safety Policy to be updated</p> <p>Roles and responsibilities of Estates, Residential and Hospitality Services and Residential Life Services to be reassessed in line with organisational changes</p> <p>Review Fire Safety Advisor role and develop succession plan</p> <p>Review mechanisms for the more effective delivery of management information and assurance.</p>
Health and Safety Governance	Reasonable	It was identified that schools/services had taken responsibility for implementing control frameworks, especially in relation to accident/near miss reporting, local rules and training and observing good practice. However governance arrangements need to be updated, there needs to be more executive ownership of H & S going forward and more clearly defined roles and responsibilities. Also the self-verification assessment process is not being consistently used to provide assurance and drive improvements	<p>Delegated responsibilities for H & S to be clearly defined within UEB ToRs</p> <p>Update UoB Roles, Responsibilities and Organisation document to reflect changes in roles and governance arrangements</p> <p>Develop and deliver an agreed annual programme for senior leadership to raise awareness and understanding of roles & responsibilities</p> <p>Improve engagement with School/Service Safety Advisors</p> <p>Engage with Hds of School/ Divisional Heads as part of self-verification testing regime</p>

5.3 Other Auditing Activity

The following provides a summary of other auditing activity undertaken during 2018/19.

SUBJECT	AUDITOR	Areas audited	COMMENTS
Radiation Protection	Safety and Health Services	Graduate School of Education Chemistry X ray facility ALSPAC (Children of the 90s) Bristol Medical School (Southmead) Physics Centre for Applied Anatomy	Any local issues were rectified within required timescales to achieve full compliance
Fire Safety	Safety and Health Services	Howard House 1-9 Old Park Hill Langford House Manor Hall Fenswood Farm 35 Berkeley Square Highbury Villas Wills Hall (UVW block) 8-10 Berkeley Square	No serious issues identified. Some actions, mainly minor, required but no significant risks.
Food safety	Safety and Health Services	Clifton Hill House Badock Halls Langford Café Chemistry Cafe	All received substantial assurance

5.4 University owned subsidiaries

During 2018/19 it was agreed by the Executive Health and Safety Group that wholly owned subsidiaries (the National Composite Centre, Langford Veterinary Services and the Science Research Foundation) would be required to provide the University with evidence that they had a safety management system in place. Due to their risk profile NCC & LVS were approached first and have provided sufficient evidence. Next steps will be to seek evidence of how effective these management systems are working. Engagement with the Science Research Foundation has just begun and evidence will be requested during 2019/20. We will also be engaging with the Stables Equine Practice during the coming year.

6. OCCUPATIONAL HEALTH

The University's Occupational Health Service (OHS) sits within Safety and Health Services and provides a wide range of services to both staff and some students groups to help those individuals manage and improve their health and wellbeing at work.

Following a very challenging period over the past few years, it is pleasing to report that the University's Occupational Health Service is now in a steady state and is once again effectively delivering services in line with its agreed SLAs with HR for staff and the Faculty of Health Sciences and School of Education for students.

Type of Contact	Number of contacts for 2015/16	Number of contacts for 2016/17	Number of contacts for 2017/18	Number of contacts for 2018/19
Occupational Health Physician Consultations (Referrals/Reviews)	389	595	350	209
Occupational Health Manager/Advisors Consultations (Referrals/Reviews)	316	274	357	277
Immunisations/Blood Tests	3731	3888	3015	4874
Ergonomic/Workplace Assessments	20	26	10	22
Respiratory Health Surveillance	181	188	194	231
Pre- Course Student Contacts	520	352	249	1300

Our new Occupational Health Manager commenced their role in December 2018 with OH services being strengthened further with the recruitment of an OH Technician.

Changes to the OH referral process for staff has led to greater efficiency and effectiveness aimed at assisting managers and employees in supporting them in managing health conditions at work. This has seen average waiting times for 1st appointments for HR referrals drop from an average of 15 working days to 6 working days over the year.

The OH service has worked with the physiotherapy team at the University Sport and Medicine Clinic to agree a referral pathway for individuals who would benefit from physiotherapy. This service is currently in an initial trial period and will be evaluated 6 months into the agreed period (January 2020). The aim of this service is to contribute to reducing Musculo- Skeletal related absence and provide better support to assist staff experiencing such a problem to be able to stay at work.

Table 1 – Contacts overview

- There has been an overall decrease of 31.3% in Occupational Health Physician (OHP) or Manager/Advisor referrals and reviews. This includes a significant decrease in the number of review appointments seen by the Occupational Health Physician (53%) and Occupational

Referral Cause	2017/18 Percentage of Total	2018/19 Percentage of Total
Mental & behavioural disorders*	21%	22%
Work-related stress	14%	8%
Musculoskeletal health conditions	34%	27%
Others*	31%	43%

Health Manager/Advisor (63%) by referring staff and students to other, more appropriate wellbeing services. The outsourced OHP service is now being used more appropriately for one off assessment's where further advice is needed in complex staff and student cases. The review and update of the OH referral form has also helped to

improve these statistics as more specific questions are being asked by managers and HR, leading to more relevant and succinct advice being provided in the OH report.

- The 62% increase in immunisations/blood tests has been significantly influenced by the Hep B vaccine becoming readily available again during the year. This meant at the start of the 2018/19 academic year both first year and second year Faculty of Health Sciences students were seen by the OHS for their Hep B vaccination course. This accounted for approximately 3000 contacts (3 x Hep B vaccinations and blood tests).
- There has been a substantial increase in the number of pre-course student contacts. The OHS is now recording all contact types, including telephone consultations which accounted for 24% of the total Pre-Course student contacts. In addition, 3 new Faculty of Health Sciences programmes were introduced for the 2019/20 academic year resulting in additional pre-course health questionnaires being submitted to the OHS.

Table 2 –total referrals

- Includes cancer, ear, nose and throat issues, nervous system disorders and gastrointestinal problems.

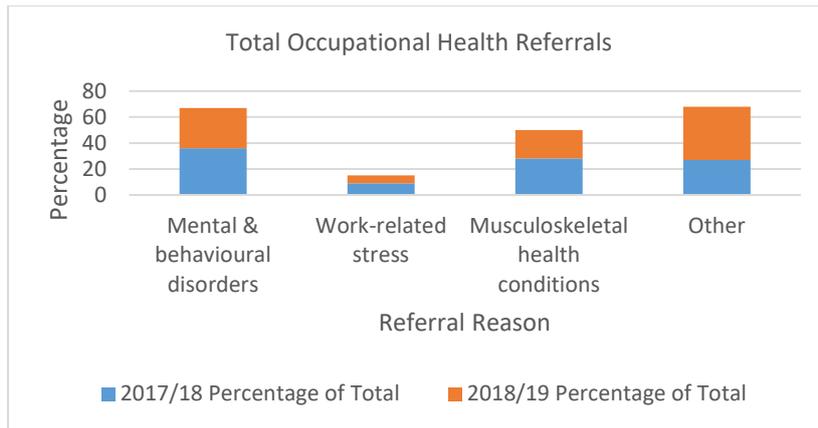


Table 3 – Staff referrals

Referral Cause	2017/18 Percentage of Total	2018/19 Percentage of Total
Mental & behavioural disorders*	36%	31%
Work-related stress	9%	6%
Musculoskeletal health conditions	28%	22%
Others	27%	41%

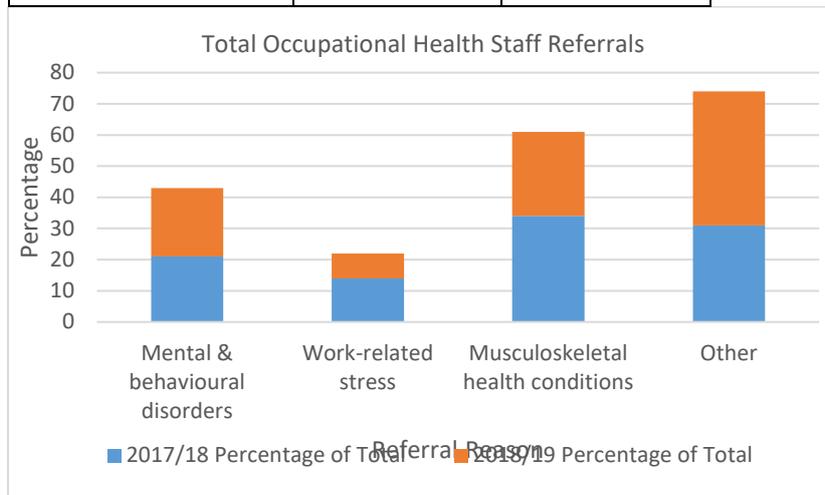
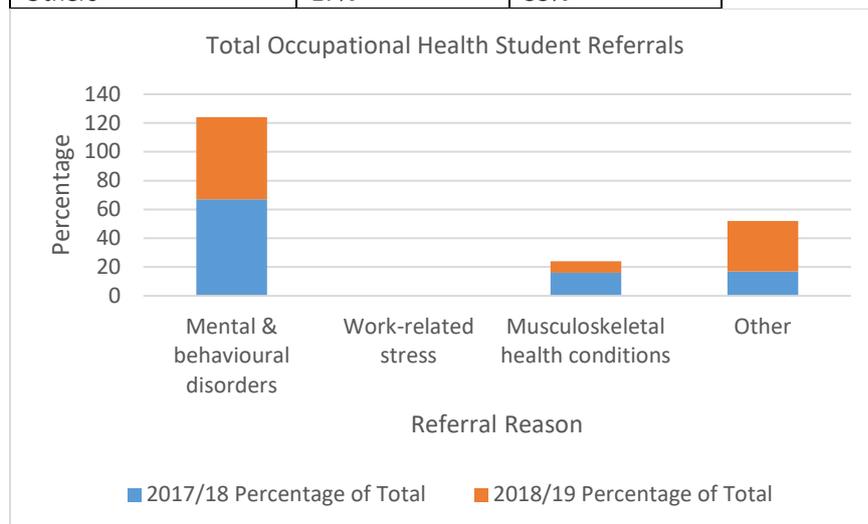


Table 4 – Student referrals

Referral Cause	2017/18 Percentage of Total	2018/19 Percentage of Total
Mental & behavioural disorders*	67%	57%
Work-related stress	0	0
Musculoskeletal health conditions	16%	8%
Others	17%	35%



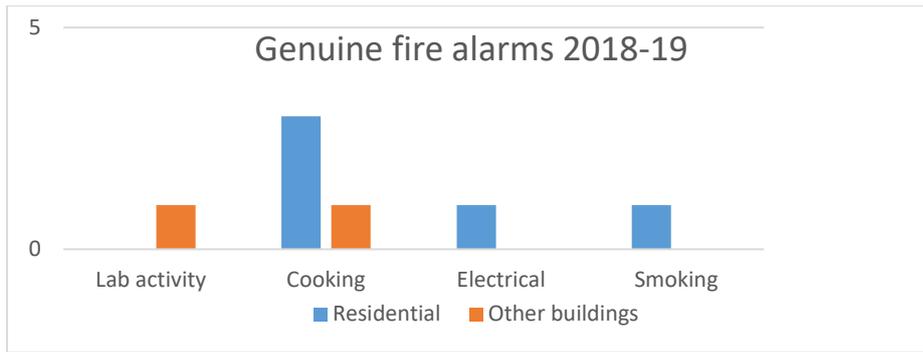
Health Surveillance Activity

Health Surveillance Referral Forms received	234
Lung Function Test (initial/follow up)	231
HAVS (initial/annual questionnaire)	33
Audiometry (initial/follow up)	32
Asbestos (initial/follow up)	9
Health Questionnaire (initial/follow up)	285
TB Health Questionnaire	11
Total Health Surveillance Activity	835

7. FIRE SAFETY

During 2018/19 there were 7 'genuine' alarm activations caused by actual fires or smoke (see table 1 below). This compares to 4 in 2017/18. These included a small bin fire in the School of Chemistry building (put out by a member of staff using a fire extinguisher), another occurred in a student bedroom with a smouldering blanket (evidence of an ashtray and cigarette butts on bed). Blanket was thrown out of window and water poured on flames by Security staff.

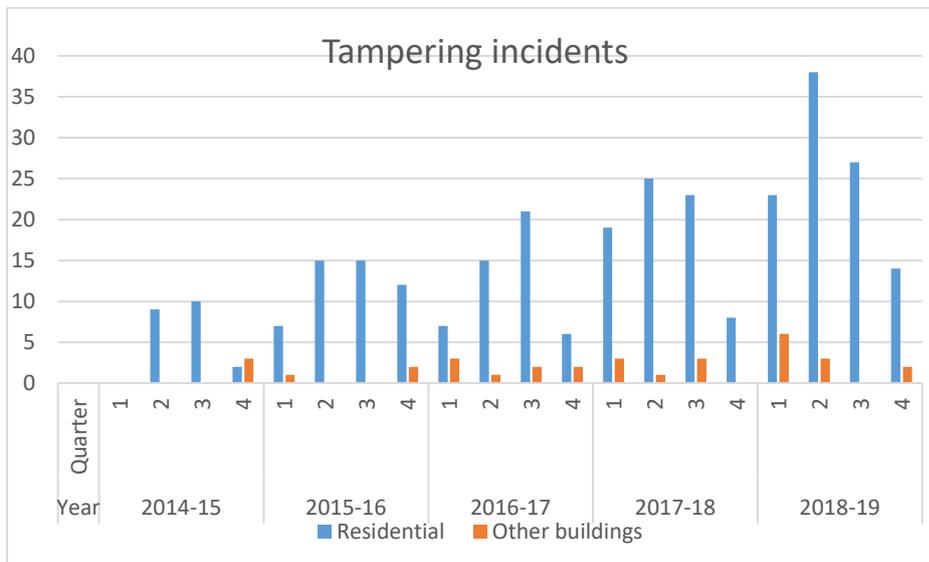
The other incidents occurred in student accommodation (one operated by a third party) and involved smoke but no fire. All but one was cooking related except for a vacuum cleaner that started to smoke during use.



Tampering

Incidents of tampering with fire safety related equipment has increased from 91 in 2017/18 to 113 in 2018/19. Covered detectors in student bedrooms are the largest cause (~90% in 2017/18 compared to ~70% in 2018/19) followed by wedged fire doors, then obstructed escape routes. There has been an increase in wedged fire doors (13% in 2017/18 compared to 23% in 2018/19).

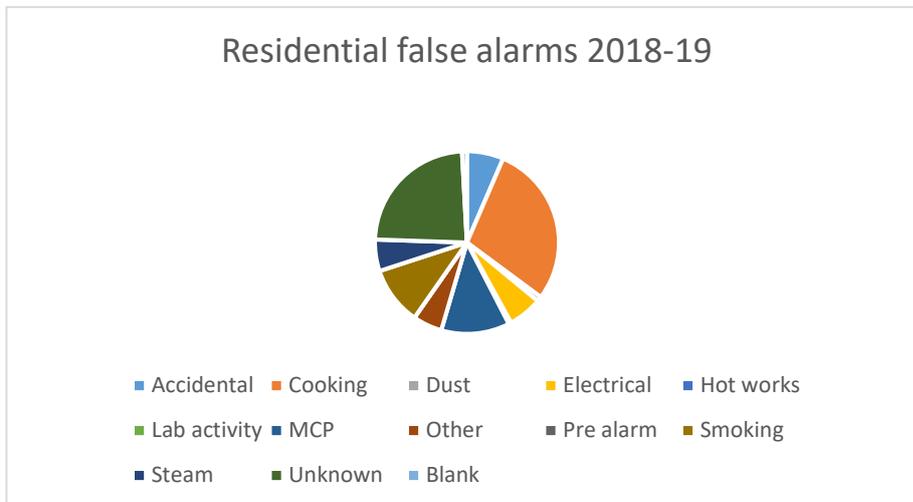
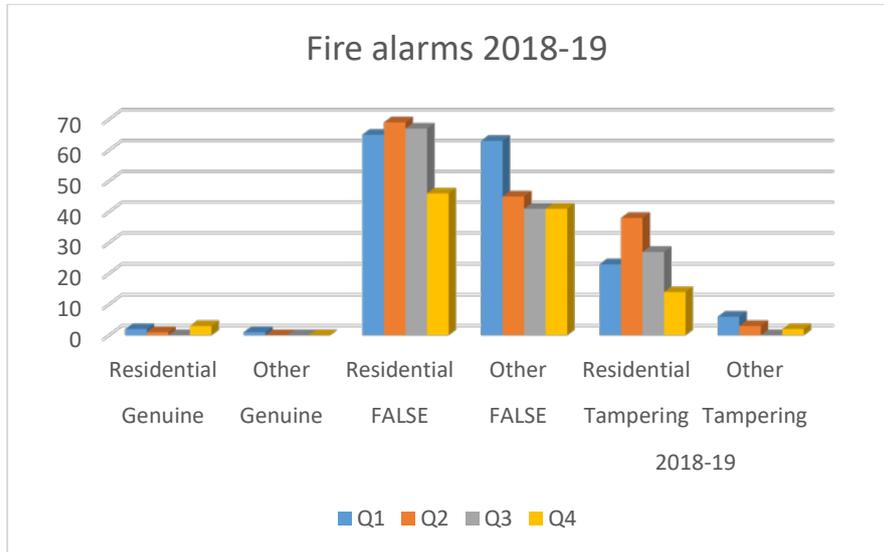
Incidents of tampering are mostly identified by Security officers on foot patrol. The issue was discussed by the Executive Health and Safety Group and a review of the disciplinary process and penalties has been instigated together with updating the Fire Safety Policy to include the right to enter a student’s room for health and safety reasons.

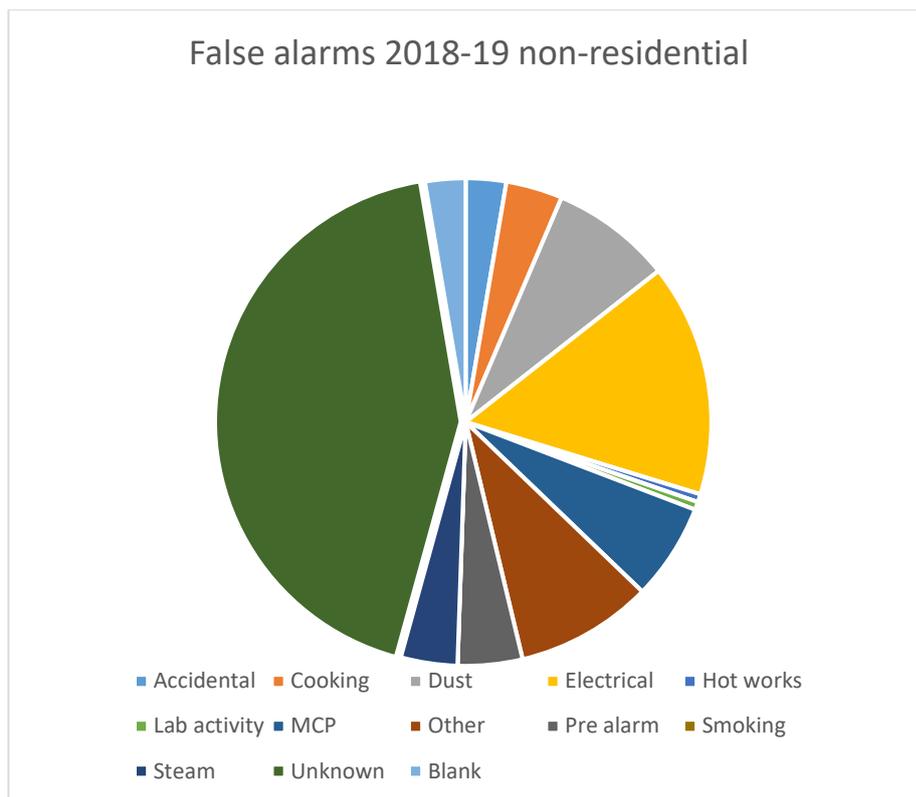


Fire alarm activations

The total number of false fire alarm activations for 2018/19 was 455 compared to 438 in 2017/18. (This number excludes statutory testing, weekly alarm tests and planned fire drills). It is disappointing to see an increase overall and more specifically with cooking related activations (54 – 91) especially as RHS have undertaken significant work to increase awareness among students of cooking fire safety in accommodation.

The most common causes of false activations were unknown (144), cooking (91), electrical issues, faulty detectors etc (44) and smashed call points (42). Most occurred in student accommodation. We have however seen a reduction in electrical related activations (58-44) for the year.





8. BIOLOGICAL SAFETY

8.1 University Biosafety Committee (BGMSC), Policy and statutory duties

- Reviewed new or revised activities with genetically modified organisms (GMO) and/or infectious material;
- Notified two class 2 (medium infection hazard) GM pathogen activities to the regulator under the Genetic Modified Organisms (Contained Use) Regulations.

8.2 Inspections and audits

- The University's work with higher hazard pathogens (hazard group 3) was audited by a specialist inspector from the Health and Safety Executive Chemicals, Explosives and Microbiological Hazards Division (CEMHD) in November 2018. These audits take place every three years. The inspector remained satisfied with the health and safety management and risk control of this type of work.
- An environmental containment audit of work with genetically modified organisms in the University was undertaken in November 2018. Institutions to be audited are randomly selected by Defra each year and are undertaken by a specialist inspector from the Health and Safety Executive (CEMHD) under a regulatory Memorandum of Understanding. This audit focused on GM plant containment facilities in the Life Sciences Building. There were no compliance issues found and the inspector also noted two areas of innovation and best practice that HSE will be disseminating to other institutions.
- A biosecurity audit of the arrangements for storage and work with high consequence pathogens and biotoxins by the University was undertaken by a counter-terrorism security advisor from the National Counter Terrorism Security Office unit at Avon and Somerset

Constabulary. These audits take place every 1-2 years; this latest audit was in November 2018. The advisor was satisfied with the physical and personnel security measures in place in the relevant schools and buildings.

8.3 Miscellaneous

- The University's new digital tools have been used to assist in the work of the University's biosafety committee (BGMSC):
 - A new Office 365 committee group has been used to bring together all committee business in one location by incorporating routine committee business and an online process for review and discussion of risk assessments between meetings. Previously, this had used several different systems and websites
 - Microsoft forms and workflows have been used to enable the responsible person to generate their risk assessment for selecting a suitable type of microbiological safety cabinet for use in their research work. This is intended to link into a University supplier contract being developed by Sustainability and Procurement.
- Other resources to assist compliance with the Biorisk management policy have been developed during the year including web-based tools allowing supervisors to monitor the online biorisk training undertaken by supervisees and for reviewing their risk assessments in a timely manner
- In collaboration with a key group of academics in the Biomedical Sciences Building a method of connecting programmes of work with GMOs requiring notification to the regulator was being developed at the time of last year's report. This programme was approved by the UK regulator in October 2018 and to date it has been used to connect the work of four different research groups under this new notification with a consequent time and cost saving while maintaining appropriate oversight by the University biosafety committee (BGMSC).

9. CHEMICAL SAFETY

9.1 Work is ongoing in collaboration with the Science faculty to develop a scope for implementation of an electronic Chemical risk assessment system. A working group with cross – faculty input is reviewing existing commercial systems with the intention these will also provide tools for managing general risk assessment processes and safety document management systems.

9.2 Regulatory matters

- Chemical Weapons Convention annual return submitted in January 2019.
- Home Office Drug precursor annual returns collated in March 2019.
- School of Chemistry Drug Precursor licence was updated and renewed in September 2018.
- The Life Sciences Faculty have been awarded a Schedule 1 Controlled Drugs licence for the Biomedical Sciences Building.
- The Translational Biomedical Research Centre at Langford has been awarded a Schedule 1 Controlled Drugs licence.

9.3 Inspections/Audits

Home Office Drug Compliance officers inspected the Biomedical Sciences building and Translational Biomedical Research Centre as part of the controlled drugs approval process.

10. IONISING RADIATION

10.1 Regulatory matters

· The Environment Agency (EA) Radioactive Substances Regulatory Inspector visited Main Precinct (Biomedical Sciences and Physics) on 17/10/2018. A number of actions were highlighted including increasing the frequency of recorded physical checks on all radioactive material held on site from fortnightly to weekly.

· The Environment Agency (EA) Radioactive Substances Regulatory Inspector visited the Langford site (Langford Vets) on 14/06/2019. The report concluded 'There is a strong system in place for the management and use of radioactive material. The facility appears in good order and detailed training records are maintained for relevant staff. No compliance issues were identified'.

10.2 UoB matters

The following radiation protection safety audits were carried out during 2018/19:

- Graduate School of Education
- Chemistry X-ray Facility
- ALSPAC (Children of the 90's)
- Bristol Medical School (Southmead)
- Physics
- Centre for Applied Anatomy

Any deficiencies noted at the time of audit were rectified within an agreed time interval (between one and four months), ensuring continued full compliance;

Statutory compliance was addressed by Schools completing annual stock takes of both sealed and unsealed radioactive sources to confirm that all radioactive material held on University premises was accounted for. Statutory leak testing of sealed sources (required every 2 years) was also performed by the relevant Schools to ensure continued source integrity and safety.

11. DISPLAY SCREEN EQUIPMENT/WORKSTATIONS

As society's use and reliance on technology increases so the potential for work related Musculoskeletal Disorders (MDSs) and Upper Limb Disorders (ULDs) across our staff and students increases. Sitting down for long periods of time can also add to the risk of ill health.

During 2017/18 a number of activities related to the management of such risks were undertaken, including: -

- Provided input on the rollout of NWoW working with Procurement, Capital Projects and Change Management in the design and development of workstations and furniture;
- Delivered DSE drop in sessions at 31 Great George Street, Augustine's Court and 1 Cathedral Square

- Developed new efficient processes for DSE assessments in NWoW locations
- Delivered 6 well attended DSE assessor's courses

12. CONCLUSIONS

The year has seen further improvements in and strengthening of our health and safety culture across the University.

We are seeing earlier and more active engagement in the assessment and management of H & S risk as part of decision making and activity planning across the University. We however recognise that early engagement remains inconsistent and this remains a focus for improvement over the coming years as we move towards 'making Health and Safety business as usual'.

Occupational H & S advice continues to grow more accessible to those who need it, when they need it. However we recognise further work is needed to improve the user experience via our shared platforms.