PPD SHE Mgmt Comm – 13 May 2021

- Actions from last meeting MvdG
- Matters Arising MvdG
- Boulby Status AM/PS
- PPD DSC Report MvdG
- SHE Report –SHE Grp
- AOB
- New Actions

App:

Actions from 2 February 2021

- 1. Garth: look into training in use of FFP2 masks.
- 2. Tony: to e-mail Julie re lung-capacity testing.
- 3. Maurits: to feed back to Bronze on possible swab testing
- 4. Terry: to notify Dave weekly of outstanding staff training
- 5. Manny: will provide copy of Departmental Fire Risk Assessment to Maurits

Matters Arising

Union rep on safety committee

Michael Hirsch (CLF) invited, could be a (temporary) solution

Covid19 / Lock-down / on-site work

See L3 operations below

Alan Davies review (effectiveness of STFC SHE committees)

Any remarks from PPD?

Chemicals list for PPD – needs updating (John?)

Current/future L3 operations

- Onsite PPD occupancy: ~ 15 people per day
- We, PPD, moved from single occupancy to multiple occupancy office use where social distancing can be exercised
- RAL preparing to move away from centralized on-site occupancy management: to be done per building/Dept.
- Some easing expected from the 17th May, bigger changes from 21st June when UK restrictions to be eased further.

Zone	Contact	Deputy
R1 labs	Craig Sawyer	Jens Döpke
R5.2 exp hall	Maurits vd Grinten	Mark Tucker
R1 1st floor PPD offices	Chris Brew	Ian Loader
R1 2 nd floor PPD offices	Maurits vd Grinten	Mark Tucker
R1 PPD meeting rooms	Debbie Loader	
Out-of-hours	Maurits vd Grinten	

On-site operations (contd)

- Multiple office use mainly with fixed desk allocation but some "hotdesking" can also be considered
- CO₂ monitoring will be offered for multiple occupancy spaces (offices/meeting room)
- Safety tours to be resumed
- Lab Risk Assessments to be realigned with current use of Lab space

Alan Davies review

Reco	ommendation	Response
R1.	Consider the option of creating a Corporate H&S consultation committee that would meet annually and more frequently as needed on an ad hoc basis, to consider any issues that require consultation with all employees. The committee would follow the HSE guidance and be chaired by a senior manager with the relevant operation manager and safety/employee representatives. The site and departmental committees should continue to encourage TU safety representatives to attend as now.	Complete, discussed by EB and Terms of Reference (ToR) established, noting equal membership balance and included in STFC H&S policy
R2.	Arrange a meeting of all employee/TU safety reps to discuss the proposal in the above recommendation and agree on the most beneficial means of achieving the HSE expectations for employee consultation. Representatives, from both TU and employees should be encouraged to contribute to the proposal in order to achieve some common ownership.	Complete, see above
R3.	Produce a communication brief for the chairs of both site and departmental safety committees clarifying the role of the employee safety reps in the existing safety committees and also the intention to create a corporate consultation committee specifically for consultation with all employees.	Complete, note sent to chairs of Site and Departmental H&S committees including the H&S consultation committee ToR.
R4.	Consider the option of reducing the overall number of departmental committees by combining those that might be considered to have compatible H&S hazard profiles. These committees might operate on a similar basis to the current joint ISIS/CLF meeting and benefit by sharing good practice in terms of health and safety management.	Rejected, this would result in diluted focus on H&S at a Departmental level and reporting to a specific Departmental Director. Where is makes sense this has already been undertaken: SCD/Hartree and SPC/Finance/Programmes at SO
R5.	A system for encouraging committees to learn from each other should be established and opportunities for sharing best/good practice should be created. This could take the form of one committee member attending,	Accepted, programme for Departmental and Site Committee chairs to attend

Alan Davies review

Implemented at Departmental level

R6.	The departmental committees should have consistency in terms of the level of senior manager chairing the meeting and should be restricted to 2 nd tier officers where Directors don't undertake the role. In the latter case Directors should commit to attend one meeting a year for their area of responsibility to give a positive commitment to the importance of these meetings.	Accepted, will review present chairs of the Departmental H&S Committees.	Graeme Finlan, end Q2 2018/19		
R7.	Where departments are split across geographical areas there should be a combined operational committee, whether or not it is linked to another department as suggested in R4 above. The current situation with CSD for example does not engender consistency.	place to share across site or are combined: BID combined Technology have separate committees but an overarchi	Dept safety available, D and audit re logged cent	ept safety t esponses	
R8	There should be agreement that a common IT system, e.g. SHE Enterprise, or its replacement SHE Assure, is used for accurately recording all the activities of the safety committees and their actions, whether or not the information is also held at a local level.	Accepted, but rather than putting safety committee actions in SHE Assure will develop the current SharePoint SHE Meeting site to add action management alongside the meeting documentation and that this addresses R9			
R9	A review of what constitutes a valid recordable action and protocol for reporting and closing out should be developed. There should be a clear process for escalation To Director level where actions are repeatedly presented meeting after meeting.	See above			

Alan Davies review

R10	It would be more effective for reviewing actions corporately etc. to have a basic template, which each committee would use for agendas, minutes, action recording etc., to ensure essential information is captured and recorded in a consistent format. The template should ensure the record contains clear references – numbers/dates etc. so it is simple and effective to trace; consistent referencing would improve traceability; triggers for further action would help discipline.	•	Chris Dickinson, Q2 2018/19
R11	The SHE reports produced are comprehensive and important elements of the committee meetings; delivery of the information varies from line by line to just key issues. The report format should be reviewed to generate more dynamic reporting with clear priorities for action supported by information for members to note.	Accepted, review consistency of reports provided by SHE Group to site and departmental H&S committees	Colin Brown, Q2 2018/19
R12	ISIS safety managers and SHE managers operate in keeping with STFC health and safety policies and one of the ISIS managers is also the Departmental Safety Contact (DSC). There may be some benefit in occasional meetings involving SHE managers and ISIS Safety Managers to share information, learnings and best practice.	Rejected, no perceived issues Duncan Francis/ Xavier Queralt well engaged with RAL SHE Group	
R13	the Departmental SHE committees work is dominated by H&S with little consideration of environmental management. A clear environmental performance plan with aims and objectives should be developed and managed by the STFC SHE Committee. The RAL Site Environment	Accepted, RAL Environment Committee to be re- established.	Liz Kitchener Q2 2018/19
	Committee should be re-established and departmental SHE committees should report on progress within their areas of responsibility in terms of achieving the utility utilisation and waste management objectives.	Accepted, STFC Environment policy to be reviewed	Gareth Baker, Q3 2018/19

Boulby Status - Tony/Paul



PPD DSC report

- SHE notices & notes
- Incidents reported
- Improvement Plan status
- Audit record
- Safety Tours
- Mandatory Training
- RAL safety committee

SHE notices

SN274 - STFC SHE Audit programme for 2021/22

The purpose of this notice is:

- · to raise management and staff awareness of the audit programme timetable; and
- to ask that you assist the auditors by making time to speak to them, as appropriate providing information for them, and discussing
 openly issues or concerns with code implementation, and sharing ideas for their improvement.

No	SHE Code	Scope	Timing	Auditors
2021/22-1	All codes	Boulby mine	June	STFC
				Team
2021/22-2	31: Waste management	CLF, ISIS, Technology, ROE, RAI	June	STFC
		Space, RCaH, ASTeC, Cl. BID		Team
2021/22-3	32: Fire management	CLF, ISIS, Technology, ROE, RAI	August	STFC
		Space, RCaH, ASTeC, CI, BID	ragast	Team
2021/22-4	34: Electrical safety	CLF, ISIS, Technology, ROE, RAI	June	External
		Space, RCaH, ASTeC, CI, BID	ouno	specialist
2021/22-5	05: Reporting and	CLF, ISIS, Technology, ROE, RAI	August	UKRI
	investigation of SHE incidents	Space, RCaH, ASTeC, CI, BID	ragaot	
2021/22-6	30: Auditing and inspection	CLF, ISIS, Technology, ROE, RAI	August	UKRI
		Space, RCaH, ASTeC, CI, BID	lagaot	
2021/22-7	28: Open sources	CLF, ISIS, Technology, ROE, RAI	August	STFC
		Space, RCaH, ASTeC, CI, BID	lagaot	Team
2021/22-8	12: Manual handling	CLF, ISIS, Technology, ROE, RAI	June	STFC
		Space, RCaH, ASTeC, CI, BID	ouno	Team
2021/22-9	20: Dangerous substances	CLF, ISIS, Technology, ROE, RAI	August	External
	and explosive atmospheres	Space, RCaH, ASTeC, CI, BID	_	specialist
2021/22-10	41: Controlling pollution to air,	CLF, ISIS, Technology, ROE, RAI	August	STFC
	land and water	Space, RCaH, ASTeC, CI, BID	Lugust	Team

0 Ø 0 Ш (1) п

n

SHE notices

Oxygen depletion alarms

Oxygen monitoring systems are used extensively to give advance warning of oxygen depleted atmospheres.

These monitors help ensure the working environment is safe, as they alarm if oxygen levels become low.







What do you need to do?

Oxygen monitors, and indeed all gas safety monitors, must be regularly **maintained** and **calibrated** and records must be kept.

Has your monitor maintenance and calibration programme continued under current COVID-19 restrictions?

Failure to do so may result in the alarm not sounding or triggering incorrectly – which could lead to asphyxia, loss of consciousness and even the death of anyone exposed to an oxygen depleted atmosphere.







Lifting Equipment in date?

The failure or misuse of lifting equipment can cause serious injury.



All new lifting equipment purchased or designed in house must be tested, and registered for inspection before use.

Once registered all lifting equipment and lifting accessories (eye bolts, slings etc.) are regularly inspected and an **inspection expiry date tag attached**.







The expiry date is shown on a sleeve attached to the item with a zip tie. It must not be used after this date.

If you find out of date lifting equipment, or lifting equipment without a date tag, remove it from the workplace so others can not use it and/or inform the





50 ati Infor Ш エの

S

SHE notices

APR and SHE Training

SHE Training Catalogue

Updated on the SHE
website is the SHE
Training Catalogue.
The catalogue lists courses
by SHE code/hazard,
including duration &
refresher frequency.



2021/22 APR



Use the Catalogue during your APR to review your SHE training needs with your Line Manager.

Please refer to SC 10, Appendix 3 - sample template of a Training Needs Analysis and steps to be taken within the process. This will help provide ideas for SHE improvement objectives.

To book SHE Training, contact:

RAL – June Preston, Ext 8288; DL and ROE – Samantha Morris, Ext 3035; Swindon – Rose Russell, Ext 2061





SN278 - Update to Risk Assessment Code

A summary of the key changes to the code:

- The option of using the OTJ pad for a standalone risk assessment has been removed. The reason for this is that this document, on
 its own, does not meet the legal requirement of a "suitable and sufficient" risk assessment. It can be used for last minute changes
 to an existing documented risk assessment. Wherever possible, documented risk assessments using either SHE Assure or the
 STFC proforma should be used to risk assess occupational activities.
- 2. The R risk scoring matrix has been updated to add R further guidance to 'likelihood' and 'severity'.
- 3. The RA proforma has been altered to include a hazard row exclusively for untrained groups exposed to risks in the area, e.g. visitors, cleaners etc. This is due to a large number of RAs failing to consider any groups of people other than staff.
- 4. The paragraph which previously explained the term 'suitable and sufficient' has been shortened and instead an appendix created which takes the reader through an 'aid memoire' of items to consider to ensure that a 'suitable and sufficient' RA has been created. The items listed are based on advice from the HSE.
- 5. The definition of 'Hazard' has been described more fully to include:
 - o physical safety hazards such as working with electricity or working from ladders;
 - health hazards such as working with hazardous chemicals, biological agents or activities that could lead to work-related mental ill-health such as stress, anxiety or depression; or
 - environmental hazards such as activities leading to harmful emissions to the air or contamination of our wastewater systems.
- A section has been added to provide guidance on 'significant' hazards to assist in determining whether a RA should be documented or not:
 - The risk assessment should address all significant hazards. Significant hazards are those that could potentially cause harm to people or the environment. Activities which incur trivial risks or those associated with life in general do not require a risk assessment, e.g. paper cuts from working in an office or pulling a muscle when climbing a flight of stairs or donning a lab coat, unless the work activity compounds or significantly alters those risks. There is a legal requirement to identify any hazards and reasonably foreseeable risks which may result from the hazard not being controlled. 'Reasonably foreseeable' risks are those that an average person would identify. For example, when working with flammable material and a source of ignition, fire would be a reasonably foreseeable risk.
- 7. The description of when to review a RA has been extended to include when new information emerges on:
 - · technological advances, including:
 - new techniques
 - new control measures
 - · improved design and products
 - safer equipment and materials
- 8. A paragraph has been added relating to when a main assessor leaves employment STFC. As per the leaver's checklist, responsibility for the RA should be passed to an existing member of staff. It is recommended this person familiarises themselves with the RA. Note: this does not include staff named in the 'assessment team' only the 'main assessor'.
- A requirement for RA training has been added for anyone carrying out a RA. This training will be carried out by Laura Davies either
 in person or by webinar. The course is approximately 2 hrs long and includes a live tutorial on the use of SHE Assure for risk
 assessment.

Incidents reported

• 1077869: 28 Apr. 2021. Noise levels in PPD offices, first floor R1. Found to be below first action level of 80 dB though considered to a nuisance. Estates are involved now. (Note, I (MvdG) cannot see this incident in SHEAssure)

Incident Severity: Minor

 Non reported related issue: noise level in PPD lab electronics fans of 88dB. Ear protection worn and new lab is putting mitigations in place, any further advice/support welcome.

Audit record May 2021

Report Issued Feb-16 Feb-18 Feb-18 Jul-18 Mar-19 Mar-19 Mar-19 Sep-19 Mar-20 Apr-20 May-20 May-20 Aug-20 Aug-20 Feb-21 Feb-21 Apr CLF 1/1 0/0 0/0 1/2 0/0 1/1 0/0 0/0 7/7 1/1 2/2 2/2 3/3 0/0 0/0 ISIS 2/2 2/2 0/0 5/5 2/2 1/1 1/1 0/1 7/13 2/5 1/1 1/1 0/1 0/1 0/0 Digital Infrastructure																				
CLF 1/1 0/0 0/0 1/2 0/0 1/1 0/0 0/0 7/7 1/1 2/2 2/2 3/3 0/0 S/5 2/2 1/1 1/1 0/1 7/13 2/5 1/1 1/1 0/1 0/1 0/1 0/1 0/1 0/2 1/1 0/1 0/2 0/2 0/3 0/1 1/2 0/4 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5	Department	Flammable gases and dusts	Work at height	Safe use of vehicles	EMF	Confined spaces	Noise	Hazardous substances	Risk Management	H&S management system	PPD All Codes		LELA	Travel on council business	Management of contractors	Buildings and premises	ннѕоо	Health surveillance	First aid	Lone working
Sis 2/2 2/2 0/0 5/5 2/2 1/1 1/1 0/1 7/13 2/5 1/1 1/1 0/1 0/1 0/2 0/4 0/8	Report Issued	Feb-16	Feb-18	Feb-18	Jul-18	Mar-19	Mar-19	Mar-19	Sep-19	Mar-20	Apr-20	May-20	May-20	Jul-20	Aug-20	Aug-20	Feb-21	Feb-21	Feb-21	Apr-21
Digital Infrastructure	CLF	1/1	0/0	0/0	1/2	0/0	1/1	0/0	0/0			7/7	1/1		2/2	2/2	3/3			0/7
Estates	ISIS	2/2	2/2	0/0	5/5	2/2	1/1	1/1	0/1			7/13	2/5		1/1	1/1	0/1			0/7
HR	Digital Infrastructure						1/2		0/4						0/8					0/7
SHE GROUP 5/6 4/4 2/2 18/18 1/4 1/1 4/6 2/2 15/46 1/2 0/2 0/3 0/1 4/7 0/2 0/4 0/5 0/5 0/5 0/5 1/1 3/3 0/0 13/13 2/2 0/0 2/2 1/1 1/1 6/7 1/1 3/5 0/0 3/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0/5 0	Estates		4/6	2/4		1/10	5/5	2/6	2/3				1/2		18/18	6/20				0/13
TECHNOLOGY 1/1 3/3 0/0 13/13 2/2 0/0 2/2 1/1 1/1 6/7 1/1 3/5 0/0 RAL SPACE 10/10 0/0 11/11 0/2 1/1 0/0 4/4 0/0 ASTEC 2/2 1/1 0/0 4/4 0/0 3/3 0/0 1/1 6/8 1/1 2/3 1/2 0/0 UKATC 2/2 0/0 0/1 2/2 0/0 0/0 0/0 0/0 0/3 1/1 0/2 Strat Plan & Comms	HR																	0/2		
RAL SPACE 10/10 0/0 11/11 0/2 1/1 0/0 4/4 0/0 1/1 0/0 1/1 0/0 2/2 0/0 ASTEC 2/2 1/1 0/0 4/4 0/0 3/3 0/0 1/1 6/8 1/1 2/3 1/2 0/0 UKATC 2/2 0/0 0/1 2/2 0/0 0/0 0/0 0/0 0/0 0/3 1/1 0/2 0/ SO - Programmes Strat Plan & Comms	SHE GROUP	5/6	4/4	2/2	18/18	1/4	1/1	4/6	2/2	15/46	1/2	0/2	0/3	0/1	4/7	0/2	0/4	0/5	0/5	0/11
ASTEC 2/2 1/1 0/0 4/4 0/0 3/3 0/0 1/1 6/8 1/1 2/3 1/2 0/0 UKATC 2/2 0/0 0/1 2/2 0/0 0/0 0/0 0/0 0/3 1/1 0/2 0/ SO - Programmes Strat Plan & Comms	TECHNOLOGY	1/1	3/3	0/0	13/13	2/2	0/0	2/2	1/1			1/1	6/7		1/1		3/5			0/6
UKATC 2/2 0/0 0/1 2/2 0/0 0/0 0/0 0/0 0/0 0/3 1/1 0/2 0/ SO - Programmes Strat Plan & Comms	RAL SPACE		10/10	0/0	11/11	0/2	1/1	0/0	4/4				0/0		1/1	0/0	2/2			0/7
SO - Programmes Strat Plan & Comms	ASTEC	2/2	1/1	0/0	4/4	0/0	3/3	0/0	1/1			6/8	1/1		2/3		1/2			0/8
Strat Plan & Comms	UKATC		2/2	0/0		0/1	2/2	0/0	0/0				0/0		0/3	1/1	0/2			0/5
	SO - Programmes																			
	Strat Plan & Comms																			
	PPD										5/5									0/6
SCIENTING COMP. 0,	SCIENTIFIC COMP.																			0/7
FINANCE	FINANCE																			
RCaH 3/3 1/1 0/0 0/0 0/0 1/1 0/0 1/1 2/2 0/	RCaH	3/3	1/1	0/0		0/0	0/0	1/1	0/0				1/1		2/2					0/10
Cockcroft 0/0 0/0 0/0 0/0 0/0 0/0 0/0 0/0	Cockcroft		0/0	0/0		0/0	0/0	0/0					0/0		0/0					
BID 1/1 0/0 0/0 0/0 0/0 0/0 0/0 0/0 0/0 0/0	BID	1/1	0/0	0/0		0/0	0/0	0/0	0/0				0/0		0/2		0/0			0/7
ING	ING																			
Hartree Hartree	Hartree																			
TOTALS 15/16 27/29 4/6 52/53 7/21 15/16 10/16 10/16 15/46 6/7 21/31 12/20 0/1 31/48 10/26 9/19 0/7 0/5 0/1	TOTALS	15/16	27/29	4/6	52/53	7/21	15/16	10/16	10/16	15/46	6/7	21/31	12/20	0/1	31/48	10/26	9/19	0/7	0/5	0/101

Lone working audit

7.8.2 Of the risk assessments reviewed for individual lab / clean room locations and activities, many had generic statements or limited reference to lone working and various risk levels were noted.

It was noted that some risk assessments were saved on non-standard formats (Ref SHE Code 06 – Risk Management) and one referenced some superseded RAL Safety Codes. (4.2.1) At the next risk assessment review, ensure that Appendices 1 and 2 of SHE Code 01 are applied to each risk assessment and that risk levels are appropriate for the tasks carried out. Also, check the risk assessments for references to current documentation and usage of the correct forms."

7.8.3 Little activity is currently carried out alone within silent hours. Security are usually used as a buddy, but it is not clear how effective this is regarding regular check-ins and responses.

No risk assessments were noted for activities carried out in collaboration with other institutions (although this was discussed), but it was felt the controls in other institutions were appropriate.

(4.2.2)

Ensure the 'On the Job' form is used to record the results of any dynamic risk assessment made during out of hours working, and that this is fed back into the main risk assessments for the task (where they exist)."

Lone working audit

7.8.4 No assurance is carried out to demonstrate that lone working controls are implemented by staff, tenants, contractors, facility users or visitors working for/within PPD. (4.2.4) Develop a strategy to ensure that assurance is obtained that lone working controls are applied, are adequate and are effective.

7.8.5 The RAMS of contractors working for PPD are not routinely assessed for lone working. However, it was stated that where lone working does take place, periodic supervision is provided. (4.3.1, 4.3.2) Develop a method of ensuring that any lone working of contractors within PPD is assessed and confirmed prior to the work being carried out, and that appropriate supervision arrangements are in place.

"7.8.7 Compliance with the local procedures and controls for lone working defined within risk assessments or systems of work is often focussed on an individual's competence and on the use of a buddy system or lone worker alarms (stated as the preferred method of lone working control within risk assessment). Indications are that some people implement a 30-minute buddy check-in, as the lone working alarms are not widely used (note, they are provided locally to encourage ease of use).

It was noted that PPD intend to create a series of guidelines of what is and isn't allowed regarding lone working following the Covid-19 pandemic. (4.4.2) Ensure standards are applied to the use of lone working alarms and buddy systems where used within PPD, and that if variation is to be made from SHE Code 01 that this is recorded and the reason documented.

It was noted that the lone working co-ordinator and the DSC intend to carry out a review of lone working standards and processes following the end of the Covid-19 pandemic. It was recognised that office-based work could have lengthy duration and this is to be included.

2021/22 STFC H&S objectives

2020/21 Health and Safety objectives

- 1 COVID-19 Manage safe return of staff, tenants, term contractors, facility users etc. to agreed levels of on-site working.
- 2 Mental health Ensure that all staff are actively supported by their managers and have access to the resources, including training, they need to support mental health and wellbeing.

SHE Risk Registers:

- 3.1 Build actions to mitigate the highest risks determined by Departmental SHE risk registers into Departmental SHE Improvement plans for 2021/22.
 - 3.2 Consolidate Departmental risk registers at site and STFC levels for review by Site and STFC SHE Management Committees.
- Fire Risk Assessments (FRAs) Building Fire Managers complete a review of all outstanding building Fire Risk Assessments agreeing actions to address outstanding issues.

Our follow up:

- 1. Top priority of DSC
- 2. We have the PA-PPD charged with this
- 3.
- 1. Will do
- 2. Idem
- 4. To be done

2020/21 PPD H&S objectives

Status of 2020-21 Objectives and Plans

ID	Action	Who is responsible	date
1201	Report quarterly to PPD staff on who has outstanding SHE training in the department. Ensure line management know who needs training and that this is important.	PPD SHE Committee	done
1703	Ensure safety procedures for <u>Boulby</u> Laboratory are reviewed during the annual site shutdown	Director Boulby Lab	September 2020
2001	Ensure a safe phased return to work for PPD staff following the Covid-19 lock-down	PPD Director, PPD DSC	Throughout 2020-21
2002	Highlight electronics bitesize training to PPD staff and ensure this and other mandatory training is completed and maintained	PPD DSC and line managers	ongoing
2003	Ensure safety training needs identified in APR process are logged with SHE group through the associated training code.	PA-PPD and line managers	Done, no automatic logging with SHE system tough

2021/22 PPD H&S objectives

2021-22 Objectives and Plans

ID	Action	Who is responsible	Target date
1201	Report quarterly to PPD staff on who has outstanding SHE training in the department. Ensure line management know who needs training and that this is important.	PPD SHE Committee	ongoing
1703	Ensure safety procedures for <u>Boulby</u> Laboratory are reviewed during the annual site shutdown	Director Boulby Lab	September 2021
2101	Ensure a safe return to work for all PPD staff and a continued CV19 safe working environment	PPD Director, PPD DSC	Throughout 2021-22
2102	Put mitigations in place to manage risks identified in the PPD SHE <u>risk</u> register	PPD DSC and Director	October 2021
2103	Ensure PPD lab spaces in R1 are thoroughly risk assessed following change in use/occupants	DSC and lab owners	Staggered following opening up
			of labs

Training landscape 12 April 2021

- Needs updating with online data
- A few individuals taking up a good fraction of missed %'s

•			District Control	DOE Western		H&S		
Last Name	SHE Induction / Refresher (SHE Code 10)	Fire Safety (SHE Code 32)	Display Screen Equipment [on- line] (SHE Code 25)	DSE Workstation Self Assessment (office PC) (SHE Code 25)	Safe Manual Handling (SHE Code 12)	Management Arrangements BiteSize (SHE Code 10)	Asbestos Essentials (Objective)	Electrical Safety Essentials (Objective)
Adye	01/06/2016	23/01/2019	17/04/2019		10/10/2019	07/07/2017	02/07/2019	16/10/2020
Andreopoulos	09/07/2014	26/03/2019	04/01/2016	04/01/2016	22/11/2019	16/07/2018	22/11/2019	10/02/2021
Baines	30/10/2018	12/10/2017	18/04/2019		10/02/2021	23/07/2018	09/07/2019	27/10/2020
Balashov Banks	10/02/2021 12/02/2021	10/02/2021 12/02/2021	14/05/2020 29/08/2019		15/02/2019 19/08/2020	15/10/2018 31/05/2019	14/08/2019 22/10/2020	02/10/2020 05/10/2020
Beadle	11/02/2021	11/02/2021	18/04/2019		19/08/2020	26/03/2019	13/08/2019	22/09/2020
Brew	06/02/2020	23/06/2017	16/10/2019	23/10/2019	22/11/2019	25/04/2018	13/08/2019	02/10/2020
Buttinger	11/02/2021	11/02/2021	05/06/2020		02/10/2020	10/07/2020	02/10/2020	02/10/2020
Cornford	10/02/2021	10/02/2021	20/02/2020	20/02/2020	19/02/2020	08/01/2020	08/01/2020	01/10/2020
Cornwall	19/05/2016	23/01/2019	13/01/2020		10/10/2019	23/07/2018	13/08/2019	02/10/2020
Dixon	09/01/2017	24/02/2017	12/01/2017	19/02/2020	07/07/2017	19/03/2019	20/01/2020	14/12/2020
Djaoui	10/02/2021	29/06/2016	20/12/2018	09/03/2016	06/06/2019	11/02/2019	16/08/2019	09/10/2020
Dopke	24/01/2019 05/06/2019	01/05/2019 08/05/2019	20/01/2020 10/07/2019		22/05/2019 08/10/2019	26/09/2018 02/03/2021	25/07/2019 10/02/2020	08/10/2020 14/10/2020
Dunford Ellis	10/09/2018	01/11/2018	21/09/2018	21/09/2018	03/10/2019	11/02/2019	13/08/2019	02/10/2020
Emeliyanov	12/06/2019	30/01/2019	10/07/2019	10/07/2019	10/10/2019	16/07/2018	03/09/2019	02/10/2020
Gallop	10/02/2021	11/07/2019	06/05/2016	06/05/2016	02/10/2020	03/08/2018	13/08/2019	24/09/2020
Harder	15/02/2021	02/11/2016	11/12/2018		24/05/2019	04/10/2018	22/11/2019	02/10/2020
Harris	10/02/2021	10/02/2021	05/10/2020	22/10/2020	08/02/2021	20/10/2020	05/10/2020	05/10/2020
Holin	4010015333		11/01/2021	0010015333	11/01/2021	05/01/2021	05/01/2021	05/01/2021
Hristova	16/03/2020	11/02/02/0	23/03/2020		02/10/2020	07/04/2020	23/03/2020	05/10/2020
Kaboth Kelly	23/11/2015 15/02/2021	11/02/2016 12/11/2019	11/09/2019	15/03/2018 11/05/2020	11/02/2016 12/11/2019	11/10/2018 09/09/2019	29/10/2019	03/10/2020
Kelsey	30/05/2019	03/07/2019	21/12/2020		22/11/2019	14/09/2018	05/09/2019	19/10/2020
Kenney	00/00/2010	00/07/2010	13/10/2020		22/11/2010	06/10/2020	13/10/2020	13/10/2020
Khazov	11/02/2021	11/02/2021	24/04/2019	09/07/2019	05/03/2019	31/10/2018	02/09/2019	10/02/2021
Kirk	03/07/2019	11/07/2019	18/11/2019		26/06/2020	13/11/2018	29/07/2019	02/10/2020
Loader	01/06/2016	24/05/2019	15/08/2017	09/10/2018	19/06/2019	27/07/2017	26/06/2019	19/10/2020
Loader	11/05/2017	07/05/2019	24/09/2020	02/10/2020	24/09/2020	20/07/2018	13/08/2019	24/09/2020
MacDonald	45/02/2046	15/02/2021	15/02/2021 14/12/2020	14/12/2020	11/06/2015	16/12/2020 08/10/2018	04/02/2020	14/12/2020
Majewski Manolopoulos	15/03/2016 26/02/2021	29/04/2015 10/02/2021	20/06/2016		10/02/2016	30/07/2018	28/10/2019	09/02/2021
Martin-Haugh	24/01/2019	11/10/2018	15/07/2019		06/02/2020	23/07/2018	14/08/2019	23/09/2020
Matheson	11/02/2021	30/01/2020	02/10/2020		02/10/2020	18/07/2018	22/11/2019	02/10/2020
McMahon	22/05/2019	20/07/2016	18/11/2019		30/05/2019	08/01/2019	21/08/2019	20/10/2020
Meehan	11/02/2021	11/02/2021	09/11/2020		19/08/2020	17/07/2018	29/08/2019	22/09/2020
Middleton	11/07/2019	13/06/2017	08/10/2020		22/11/2019	06/02/2018	02/07/2019	30/06/2020
Murphy	11/02/2021	12/02/2021 12/02/2021	28/09/2020		28/07/2020	28/07/2020	28/07/2020	27/07/2020
Nandakumar Newbold	12/02/2021 07/01/2019	23/10/2018	11/03/2020 12/02/2019		06/10/2020 20/11/2018	16/07/2018 03/04/2019	03/07/2019 13/08/2019	06/10/2020 02/10/2020
Nova	10/08/2015	30/09/2015	24/09/2020		15/06/2020	16/07/2018	02/07/2019	24/09/2020
Olaiya	11/06/2015	17/06/2015	29/04/2019		26/02/2019	12/02/2019	23/08/2019	05/10/2020
Paling	13/02/2021	13/02/2021	17/11/2020	18/11/2020	19/08/2020	17/07/2018	03/07/2019	17/11/2020
Papanestis	11/07/2017	11/07/2017	20/10/2020		02/11/2017	12/07/2017	13/08/2019	02/10/2020
Phillips	10/05/2016	10/02/2021	15/08/2017	02/10/2020	10/02/2021	03/01/2019	02/07/2019	02/10/2020
Pilcher	03/03/2014	12/02/2020	09/07/2019		13/03/2020	24/05/2019	15/08/2019	06/10/2020
Reed Ricciardi	10/02/2021	12/02/2021 14/07/2016	13/10/2020 22/07/2019		13/10/2020 21/02/2019	13/10/2020 06/02/2018	15/10/2020 03/07/2019	15/10/2020 05/10/2020
Sankey	10/02/2021	23/01/2019	11/12/2018		08/11/2019	05/06/2018	27/06/2019	05/10/2020
Sawyer	11/02/2021	20/02/2020	10/03/2020		10/03/2020	16/07/2018	21/11/2019	27/10/2020
Schuh			29/08/2020		29/08/2020	29/08/2020	29/08/2020	29/08/2020
Scovell	10/02/2021	10/02/2021	21/09/2020	21/09/2020	19/08/2020	05/10/2017	02/07/2019	21/09/2020
Shepherd-Themistocleous	22/01/2010	16/02/2017	08/10/2020		25/07/2003		13/08/2019	
Smart	15/10/2018	11/02/2021	25/10/2018		27/10/2020	06/03/2019	14/08/2019	27/10/2020
Tomalin	17/10/2019	02/05/2019	30/04/2019		21/05/2015	26/10/2018	13/08/2019	09/02/2021
Toth Townsley	10/02/2021 10/02/2021	10/02/2021 10/02/2021	30/09/2020 21/09/2020		19/08/2020	17/07/2018 21/09/2020	13/08/2019 21/09/2020	30/09/2020 21/09/2020
Tucker	24/09/2019	30/01/2019	17/03/2020	13/03/2020	27/02/2019	08/10/2018	13/08/2019	19/06/2020
Van der Grinten	01/11/2018	08/02/2019	18/03/2020		15/02/2019	05/06/2017	19/07/2019	19/08/2020
Villani	30/10/2019	10/02/2021	13/08/2019		10/02/2021	08/10/2018	14/08/2019	20/10/2020
Walder	17/02/2020	10/02/2021	20/04/2020	10/02/2021	15/06/2020	09/03/2020	06/03/2020	23/09/2020
Waltari	30/09/2019	14/11/2019	29/10/2019		14/11/2019	09/10/2019	20/08/2019	17/02/2021
Weber	11/02/2021	11/02/2021	01/10/2020		30/09/2020	16/07/2018	13/08/2019	30/09/2020
Wielers	14/02/2017	03/05/2017	25/02/2020		04/05/2017	05/12/2018	13/08/2019	14/10/2020
Williams	24/10/2019	10/10/2019	27/11/2019		03/10/2020	05/07/2017	13/08/2019	03/10/2020
Wilson Yeoman	10/02/2021 15/02/2021	10/02/2021 15/02/2021	23/09/2020 13/11/2020		23/09/2020 19/08/2020	08/02/2019 18/07/2018	04/07/2019	23/09/2020 30/09/2020
Zhang	02/05/2019	10/02/2021	10/02/2021	05/01/2016	10/02/2021	27/09/2018	13/08/2019	02/10/2020
	7	4		3	5	0	0	

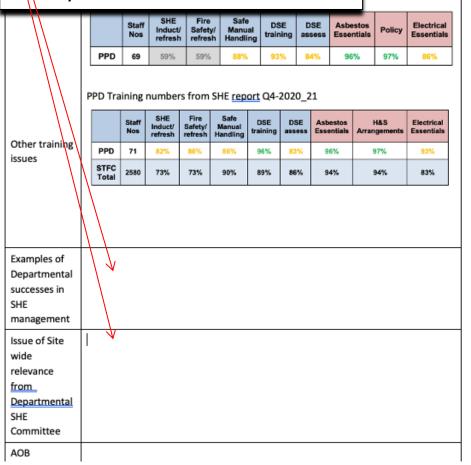
Training 30 Apr 2021

Department	Staff Nos	SHE Induction/ Refresher	Fire Safety	Safe Manual Handling	DSE training	DSE assessment	Asbestos Essentials	STFC H&S Management Arrangements	Electrical Safety Essentials
ASTeC	93	100%	100%	97%	99%	97%	99%	100%	100%
Business and Innovation	87	98%	98%	98%	99%	99%	99%	99%	99%
CEO Office	19	32%	84%	100%	100%	89%	89%	95%	89%
CLF	172	84%	87%	97%	94%	94%	99%	99%	98%
Digital Infrastructure	75	84%	84%	92%	95%	88%	97%	95%	84%
Estates	177	85%	82%	90%	88%	79%	92%	95%	89%
Finance	55	71%	78%	82%	85%	78%	91%	87%	84%
Hartree	96	93%	95%	98%	96%	97%	99%	99%	97%
HR	68	87%	85%	81%	84%	79%	87%	87%	84%
ISIS	618	67%	70%	84%	83%	73%	92%	94%	79%
PPD	69	84%	87%	90%	96%	86%	97%	97%	94%
Programmes	63	44%	84%	90%	94%	94%	89%	90%	89%
RAL Space	338	84%	88%	91%	91%	93%	96%	97%	91%
Scientific Computing	229	92%	94%	96%	95%	94%	97%	97%	93%
SHE Group	18	94%	94%	100%	94%	94%	100%	100%	100%
SPC	56	77%	79%	95%	89%	86%	89%	91%	89%
Technology	280	95%	94%	96%	94%	93%	98%	98%	96%
UKATC	108	97%	99%	99%	96%	99%	99%	99%	98%
UKRI Legal	10	50%	60%	50%	70%	80%	60%	70%	50%
STFC Total 30/4/2021	2653	82%	85%	91%	91%	87%	95%	96%	90%
						•			

PPD report to RAL SHE meeting

RAL Safety Management Committee

- 21 May 2021
- Successes?
- \ Any feedback from us?



Department	PPD Period (Q/FY) Q4 2020/21								
Learning from Departmental SHE incidents for others	• 10778 be be	reported in PP 69: 28 Apr. 20 low first action es are involved	21. Noise level n level of 80 dE	though con	sidered to				
Significant	Safety tours v	vill resume in J	une						
findings from Department	Tour Ref.	Date	Area	Actions					
safety tours				Complete	In progre	ss Overdue			
Progress in	36	05/12/2018	PPD labs	100%					
completion of actions arising	09.782	26/06/2018	PPD offices	100%					
	09.692	01/09/2017	PPD labs	100%					

Progress with	Ref.	Objectives	Progress	Commentary		
Department SHE Improvement Plans	2001	Ensure a safe phased return to work for PPD staff following the Covid-19 lock- down	In place in line with RAL wide progress	Operating Labs with Covid measures in place. Under current (start 2021) restrictions further return to on-site work put on hold		
	2002	Highlight electronics bitesize training to PPD staff and ensure this and other mandatory training is completed and maintained	ongoing			
	2003	Ensure safety training needs identified in APR process are logged with SHE group through the associated training code.	In progress	Safety training needs identified in APR, no automatic logging with SHE system though		

PPD Q4 report from RAL-SHE



Author: Garth Harris RAL SHE Group

Date: May 2021

Document Reference: PPD SHE report Q4

2020-21

PPD Health and Safety Management Committee

Safety, Health and Environment Report for Q4 2020 / 2021 (Jan- Mar 2020)

Action for the Committee:

- PPD Fire Building Managers must be reminded of their obligation to review building
 fire risk assessments as required, ensuring that issues of concern, or changes in
 the building use, are recorded in an action plan and that the plan is implemented.
 The Senior Management Team should be made aware and the completion of these
 reviews closely monitored and escalated where necessary.
- Overdue risk assessment reviews should also be undertaken promptly where the activity is ongoing. Where activities have been suspended, the risk assessment should be archived, and in the event of the work resuming the assessment must be reviewed in advance to ensure that control measures remain effective.
- Departments must ensure that any areas of weakness in their SHE management arrangements identified in their SHE risk Registers are reflected in their annual improvement plans.
- PPD should review progress against the 2020/21 Health and Safety objectives before the launch of the new objectives for 2021/22.
- PPD should give consideration to the key members of staff who will require access to the BES Portal for their WSEs and statutory inspection reports, noting that SHE Group will routinely only send out reports of defects or observations which need action or remediation.

AOB