

**University *of*****Limerick**

**OLLSCOIL LUIMNIGH**

## MINUTES

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Meeting** | : | Safety Representative Committee |
|  | **Venue** | : | MS Teams Meeting |
|  | **Date** | : | 14th October 2021 |
|  | **Time** | : | 14h00 – 15h10 |
|  | **Attendance**  **Recording Secretary** | :  : | J Kennedy, S Murphy, S Clothier, M Toomey, L O’Shea, T Considine,  G Armstrong, A Dormer, C McGettrick, M Hayes (Chair)  L Fitzpatrick |
|  | **Apologies** | : | M Finucane, A Moloney, P Davern |

|  |  |  |
| --- | --- | --- |
| **1.**  1.1  1.2  **2.**  2.1  **3.**  **3.1**  **3.2**  **3.3**  **3.4**  **3.5**  **3.6**  **3.7**  **3.8**  **4.**  **5.**  **5.1**  **5.2**  **5.3**  **5.4**  **5.5**  **5.6**  **5.7**  **6** | **Welcome**  NOTED M Hayes welcomed all present to the Committee meeting. She advised that  John M Kelly is the newly appointed Safety Representative for the Confirm building.  **Apologies**  NOTED M Finucane, A Moloney, P Davern.  **Minutes of previous meeting**  NOTED Minutes of previous meeting –9th September 2021 were approved.  **Matters Arising from Previous Meeting**  **Control of Service Providers (SP): C/F**  UPDATE: M Hayes informed the committee that the lists of Suppliers and Service Providers provided by the Finance department have been circulated to Faculty Mangers to identify their Service Providers from the Suppliers listed. M Hayes updated the committee that one department to date returned their updated list which was the PESS dept. and thanked S Clothier for his contribution.  UPDATE: M Hayes advised the committee that the Service Provider Covid-19 Screening Questionnaire form (SF032) has been revised. The current revision is available in the Supporting Documentation file on the Control of Service Providers SharePoint site and in the Events and Visitors folder on the COVID-19 SharePoint Hub.  **ACTION** M Hayes will follow up with the Faculty Mangers on the list status.  **Shared SPs**  The Ownership of SPs in common to most departments e.g., printer servicing and repairs/  Water provision/shredding was discussed.  **UPDATE** T Considine circulated the revised maintenance schedule for water dispenser servicing to the H&S Unit, which was distributed to the committee. T Considine advised that the B&E team met to address if there was a more streamlined approach to carrying out the servicing of the water dispensers. It was agreed that B&E would not have the capacity to appoint someone from B&E to accompany Crystal Clear to each building to facilitate servicing. B&E have provided Crystal Clear with the list of contacts, names and locations and advised that the Service Provider to contact the areas directly to set up appointments for access to the water dispensers for servicing.  NOTED T Considine advised the committee to review the contact point on the list and any other details and return to him with any updated information. T Considine will then email the newest revision to Crystal Water so they can arrange their servicing appointments with each area.  NOTED M Toomey asked whether the current schedule was set as the dates for servicing the HS & GEMS Building water dispensers were different and it would be better to have them on the same day as before, so servicing would be twice a year rather than 4 times a year.  NOTED T Considine stated that this is the information that is required from the departments so the scheduling can be as streamlined as much as possible. He advised M Toomey to add any changes regarding scheduled dates, contact person etc. to the report and he will ensure this is provided to Crystal Clear.  **ACTION** All to review the maintenance water dispenser report and send updates to  T Considine for the latest draft to be provided to Crystal Clear.  NOTED L O’Shea queried if Dave from B&E could continue to be the library’s contact for the water maintenance schedule.  **ACTION** T Considine advised he would investigate and revert back to the Library Safety Representative.  NOTED S Clothier asked whether the SP paperwork was in place for the provider.  **ACTION** M Hayes will review the SP SharePoint folder to check if Crystal Clear have already submitted SP documentation and advised S Clothier that the COVID-19 Service Provider Screening Questionnaire (SF032) would need to be sent in advance and the General Permit to Work (SF033) would have to be issued on the date of servicing by the local department.  **Emergency Response procedure for hazardous areas**.  University departments are required to identify potentially hazardous areas and department emergency contact personnel who may be contacted for advice in the event of an emergency to the Buildings and Estates department. B&E will then then use the returned information for the installation of the red/green card door holders.  UPDATE: T Considine advised that B&E checked the minor works log and there was no new contacts or list of areas received.  UPDATE S Clothier advised that PESS returned their list of hazardous areas in June. The School of Allied Health provided their return to the H&S Unit in June 2021.  **ACTION** T Considine advised he would double check the B&E log and report back with an update.  NOTED T Considine advised the committee that there are two parts to the emergency response requirements. Firstly, departments require to identify to B&E the labs that are red/green in terms of being hazardous in the event of an emergency. Secondly, departments are required to supply out of hours contacts which may be contacted for advice in the event of an emergency.  NOTED G Armstrong advised that the Bernal are having difficulty to get volunteers within the research laboratories to act as the emergency contact particularly for out of hours contact. Many of the Researchers within the institutes and centres don’t report to the Institute Manager.  NOTED M Hayes advised the importance of the emergency contacts in the event of emergency response personnel requiring advice in relation to the affected located. M Hayes suggested it is important to contact the Researchers’ Managers to highlight this issue.  **ACTION** G Armstrong will forward T Considine the list of hazardous areas for the Bernal and will follow up with the line management of Researchers utilising the laboratories within the Bernal to discuss emergency contact persons.  NOTED J Kennedy queried if it would be possible for H&S to send out an email to all the departments again reiterating the message of departments providing contact persons to contact for advice in the event of an emergency. J Kennedy suggested that this would assist the CTOs to communicate to the departments the need for compliance.  **ACTION:** M Hayes advised that the H&S Unit will send out correspondence again to the department HODs to request a list of their areas which currently or have the potential to present a hazard in their departments. Departments are required to provide contact persons details who may be contacted for advice in the event of an emergency in their hazardous area.  **ACTION** M Hayes will resend spreadsheet to J Kennedy.  **ACTION C/F** All departments to complete the designated form and send to [Buildingsmaintenance@ul.ie](mailto:Buildingsmaintenance@ul.ie) to B&E to identify the hazardous areas to erect the red/green card holders and to have personnel to contact for advice in the event of an emergency in their area.  **Use of needles within laboratories:**  NOTED G Armstrong highlighted that due to an accident within the Bernal Institute involving a student needle stick inoculation, the use of needles during the procedure was reviewed and needles are now replaced with flat tipped needles.  **UPDATE** S Clothier and J Kennedy confirmed that there was no issue with the use of sharp end needles within their departments.  **KBS Building Accessibility Issue**  UPDATE T Considine provided an update regarding the concerns raised by the KBS regarding the accessibility of the KBS building and lighting issues in the carpark etc.  T Considine confirmed that subsequently it was a fault that occurred. Each concern raised has been shared with the B&E Team and subsequent meetings took place and the issues have been remedied.  **Covid-19 Queries**  **UPDATE** M Hayes advised that a notification regarding the points raised concerning the protocol for classroom teaching was sent out to the campus through HR Notices.  **Biological Sciences Laboratories- One way system**  **UPDATE** J Kennedy provided an update regarding the student traffic on the corridors coming to the BS Labs. J Kennedy stated that she met with the facilities manager S Collins and they have moved from a one way system to a keep left/keep right system and she confirmed so far it is working very well for them. J Kennedy highlighted that there is a better traffic flow and it is a much better alternative to the one way system, which wasn’t working for the department.  **Library Staff room occupancy requirements**  **UPDATE** L O’ Shea and B&E discussed the numbers allowable in the library staff room canteen area with the 2metre distancing. The recommendation following the audit was 7 based on ventilation for the space and 2metre distancing in place.  **Accidents & Dangerous Occurrences**- **for the period 10.09.2021-14.10.2021.**  **The following accidents were reported in respect of STUDENTS:**  Student sustained a cut to their upper lip when they clashed heads with another student during an evasion drill as part of a basketball practical session. First aid was administered followed up with a visit to A&E.  While cleaning a cryostat machine in the SOM Research Lab, a student cut the front of their thumb on the edge of the blade. Blade guard was in place at the time. First aid was administered followed by a visit to their doctor.  **There were no accidents reported in respect of Staff, Visitors or Service Providers and no dangerous occurrences reported during the reporting period.**  **A.O.B**  **Worker Representative Presence for after hours**  **UPDATE:** M Hayes advised the committee that she contacted the Health and Safety Authority’s Workplace Contact Unit regarding the requirement for the worker representative to be physically present onsite and the response that was received was *“. “There is no requirement for the Lead Worker Representative to be physically present at all times”.* This was highlighted at the Space Management Committee meeting on 14th October 2021 and it was agreed that where UL staff are booking rooms it is important that the documentation on the Management of a Suspected Covi-19 case and the isolation room list is made available to personnel present and managing activities in the location(s) booked.  NOTED M Hayes highlighted that there is no update so far as to what the provisions of the Work Safely Protocol will be after the 22nd of October announcement. M Hayes highlighted that any information surrounding this will be shared with the campus.  **Control of Service Providers**  UPDATE M Hayes advised that the meeting with Finance took place. The Control of SP is still in progress. The Control of SP SharePoint site is currently accessible by the Department SP Co-ordinators which were nominated by HODs but there is a plan to make this SharePoint site public once the SOP is approved.  NOTED L O’ Shea queried if many HOD’s have nominated a SP Coordinator.  NOTED M Hayes advised that only those from the previous roll out of Control of SP notices. The launch of the SOP hasn’t been relisted as of yet and once this is decided then the HODs will be notified.  **Documentation Update**  NOTED M Hayes advised the committee that the COVID-19 Service Provider Screening Questionnaire, Chemical Agent Risk Assessment template and CARA guideline document have all been revised. She highlighted that the amended documents have been updated on the HR A to Z and health and safety webpage. The Driving to Work procedure is located on the HR A-Z.  **Vaccination Clinic**  M Hayes also announced that the Covid-19 vaccination clinic is taking place on Wednesday 20th of October from 10am-7pm for staff or students who wish to get the second vaccine. If a recipient is getting their first vaccine on the day they will have to go to Limerick Racecourse to get the second one administered  **Deliveries to Medical School**  NOTED M Toomey queried whether delivery personnel required the COVID-19 Visitor Management paperwork to be completed.  NOTED M Hayes advised that if it is a delivery drop off then they don’t require visitor paperwork. But if it is a salesperson who requires access to the buildings then the COVID-19 Visitor Management process available on the COVID-19 SharePoint Hub should be followed. M Hayes highlighted that UL as an employer under the Work Safely Protocol must ensure the safety of both staff and students and that non-essential visits are not encouraged.  **Road Surface Hazard near MSSI/PESS**  NOTED S Clothier brought a query on behalf of the PESS department regarding the road surface area between PESS and the MSSI.  **ACTION:** T Considine advised to put a case in the request to Buildings Maintenance and they will log it.  **PESS Roof Leaks**  NOTED S Clothier advised that the PESS roof is continually leaking and when there are 4-5 leaks within the sports hall and no access to the cleaning rooms this results in the classes being cancelled.  **ACTION** T Considine advised S Clothier to send an email to him requesting the spill kits/pads and copy G Hallinan and B&E will arrange for a supply of stock to be provided to avoid cancelling classes. T Considine advised that the funding for roof maintenance is very low and that in 2022 B&E are applying for a grant for funding to be used on the roofs.  **Next Meeting**  Next meeting will be held on 11th of November, 2021 @ 14h00. | **MH**  **All &TC**  **TC**  **MH**  **TC**  **GA**  **MH**  **MH**  **ALL**  **SC**  **TC & SC** |
|  |