Science and Technology Facilities Council

Hartree Centre

Hartree Centre
SHE Improvement Plan
FY 2024-25

CHANGE LOG

Version	Date	Author	Comments
1	15/08/2024	D Holder	Initial draft
Final	15/08/2024	D Holder	Approved by KR

MANAGEMENT SUMMARY

Hybrid office/home working, staff based at outside its core premises, the use of non-STFC office space and some degree of hot-desking complicate SHE management in the Hartree Centre.

The Hartree Centre building's cohort of first aiders, building wardens and a building fire manager, distributed across all three floors, is more than adequate to take into account hybrid working practices.

There appears to be nothing new to be deduced from the small number of incidents and near misses recorded last FY.

Compliance with mandatory training requirements in FY 2023-24 has mainly improved compared to FY 2022-23, except for DSE assessment (now known as workstation risk assessment). The Hartree Centre has met the rest of STFC's targets for mandatory SHE training; which is a good result, considering the rapid growth in staff numbers.

1. INTRODUCTION

We review and re-issue the Hartree Centre SHE improvement plan annually, never taking for granted our good safety record. Departments like ours which are expanding rapidly need to ensure that our new staff are provided with the information and resources to enable them to know where to access information about working safely and looking after their health. The past year when the vast majority of staff have been working from home for the overwhelming majority of time has raised new challenges for us, relating both to the direct SHE challenge of working from home where it's often impossible to replicate or match IT set ups and working conditions and to the indirect implications of the toll of the pandemic on mental health, positivity and fitness levels, all of which impact wellbeing.

We take this opportunity to reinforce the responsibility of staff to take reasonable care of their own health and safety and for the health and safety of others who may be affected by their activities. We also actively encourage the establishment of an open reporting and learning culture for all health and safety incidents, especially non-injury incidents such as near-misses. One of the fundamental principles is that health and safety is a line management responsibility, for which we, as directors, take ultimate responsibility for the department. We appreciate that Covid-19 and the challenges of working from home or of working in a hybrid manner place additional responsibilities on each one of us to ensure the safety of our home-working environments and the well-being of our colleagues.

Our annual health and safety objectives set out what is important for us to achieve – ensuring these are built into our ADPR objectives is the means by which we will all deliver further improvement in safety performance so please ensure you consider these health and safety objectives when you undertake your ADPR and complete your forward looking job plan, taking particular note of the additional objectives added in consideration of hybrid working.

- Kate Royse

2. SHE ENVIRONMENT IN THE HARTREE CENTRE

The pattern of hybrid office/home working that became established as the norm for most HC staff (following the Covid-19 lockdowns) has developed to include some hot-desking, as staff numbers based at DL exceed the number of desk spaces available. Without careful management this provides additional SHE management challenges.

The Hartree Centre building now has a full complement of first aiders and building wardens (including some from the VEC) in addition to the building fire manager.

Improvements to the accessibility of the HC building have been completed this year, as well improvements to disabled facilities within the building.

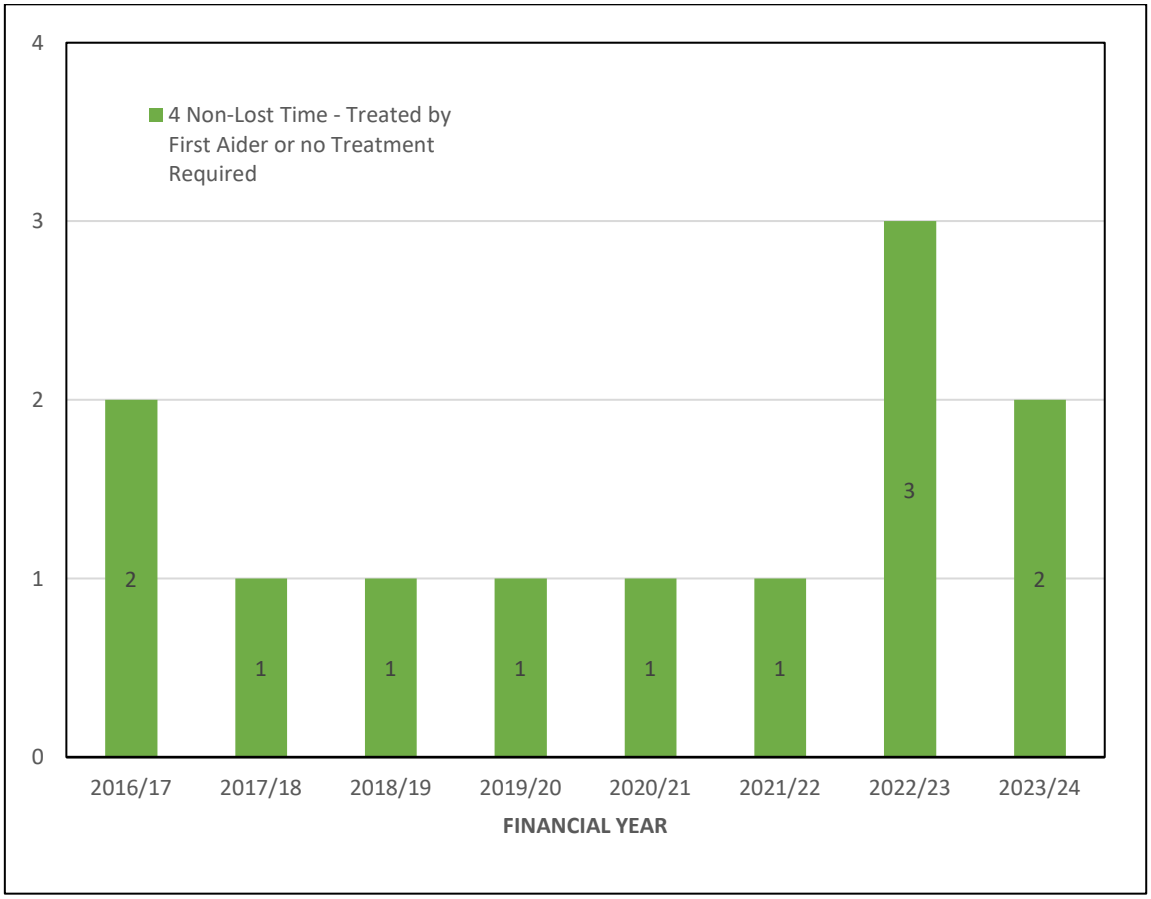
The working environment in the Hartree Centre continues to be challenging; with some offices unpleasantly hot in the summer and others cold in the winter.

The Hartree Centre SHE risk register has not changed this financial year.

3. REVIEW OF PREVIOUS YEAR

A review of both the lagging (output) and leading (input) measures of SHE performance is undertaken to monitor the effectiveness of the safety, health and environment management and to drive improvement.

3.1 LAGGING INDICATORS - INJURIES



The total number of injuries continues to be consistent around an average of two; of those recorded in FY 2023-24 one was categorised as "slips, trips or falls" whilst the other was an electric shock.

3.2 LEADING INDICATORS

3.2.1 MANDATORY TRAINING

One of the leading indicators is compliance with mandatory training. To compare progress with this metric, the comparison below is between the figures from the previous financial year (as of 31st March 2023) with that at the end of FY 2023-24.

Hartree Centre data on **31st March 2023:**

SHE Induction/ Refresher	Fire Safety	DSE		Manual Handling	STFC H&S Management Arrangements	Asbestos Essentials	Electrical Safety
		Training	Assessment				
78%	88%	86%	92%	93%	96%	97%	96%

In date on **31st March 2024:**

SHE Induction/ Refresher	Fire Safety	Safe Manual Handling	DSE		Asbestos Essentials	STFC H&S Management Arrangements	Electrical Safety Essentials
			Training	Assessment			
90%	94%	93%	95%	73%	98%	97%	96%

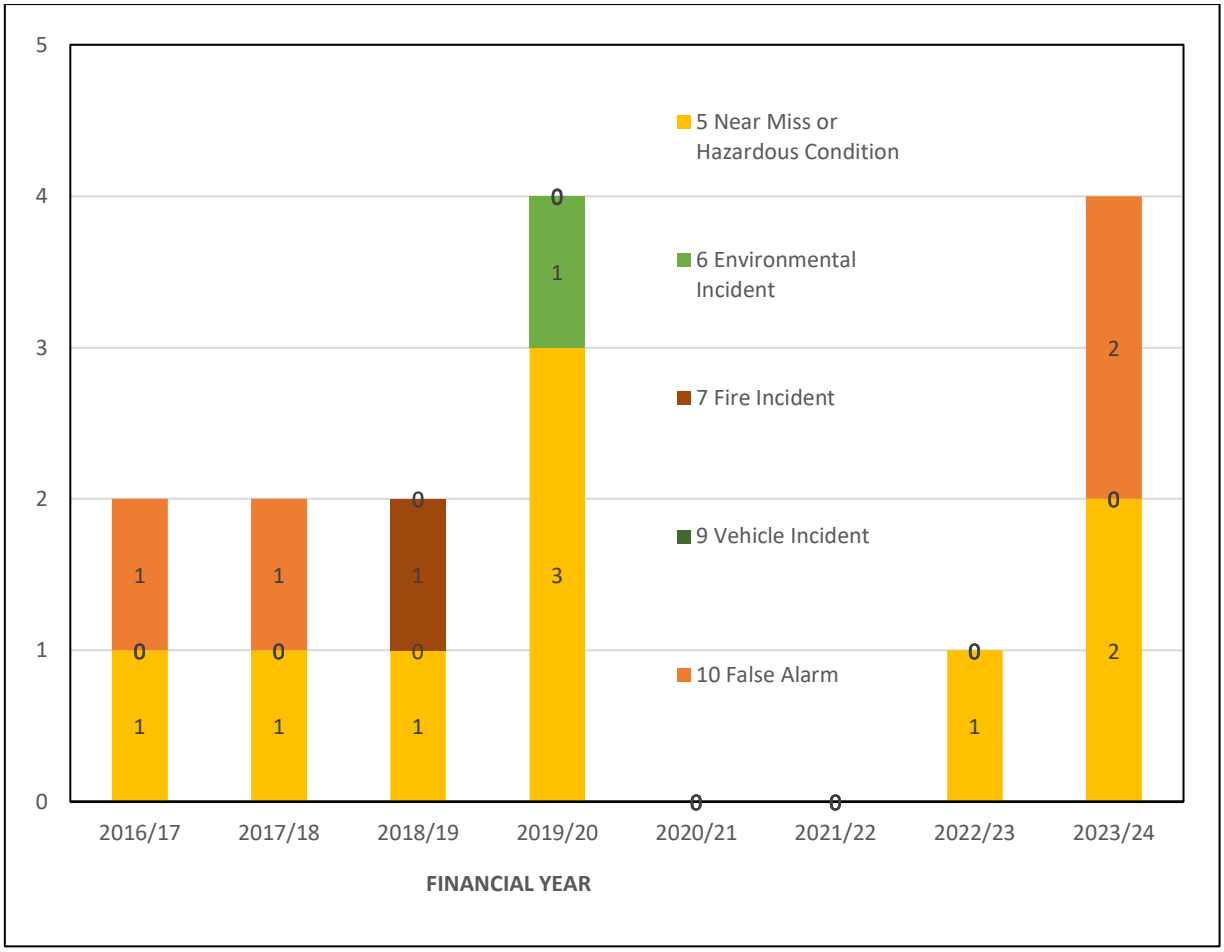
(The colour coding is green if ≥90% compliance, amber if in the range 80-89%, and red if below 80%.)

Compliance with mandatory training requirements in FY 2023-24 has mainly improved compared to FY 2022-23, except for DSE assessment.

The Hartree Centre's tenants (the VEC and IBM) have started to use the single "STFC Tenant Safety" training module (rather than four separate courses).

Nobody from the Hartree Centre failed to turn up to SHE training they are booked on without an acceptable reason.

3.2.2 SHE NON-INJURY INCIDENTS



Identifying and investigating near-misses is a key element to finding and controlling risks before workers are injured. The information gathered through near-miss reporting is evaluated to determine root causes and inform hazard mitigation strategies. It is strongly encouraged that all staff should report near-miss experiences on Evotix Assure.

There were two false fire alarms caused by the contractors refurbishing the disabled toilets in the HC building. The other two non-injury incidents were a slip, trip or fall; and a window broken by a subcontractor.

3.3 PROGRESS WITH LAST YEAR'S SHE IMPROVEMENT OBJECTIVES

Objective	Status
2023.1 Improve Health and Wellbeing: Directors to review their Department's mental health and wellbeing developing suitable intervention(s) to address them, with a particular focus on middle management capability to manage, and recognise their own, mental health and wellbeing.	The HC has an active wellbeing programme for its staff, including a number of events held during the year to improve mental health and staff cohesiveness
2023.2 Improve Contractor Management: Directors to review their Department's implementation of SHE Code 15: 'Control of Contractors', ensuring that they have sufficient trained Contract Supervising Officers to appropriately supervise contracted works.	The HC had few or no opportunities to take action on this objective.
2023.3 Improve Fire Safety: Across all STFC sites and buildings establish a prioritised programme to develop fire strategies and review fire risk assessments and addressing fire safety issues raised. Thereafter identify and prioritise scientific infrastructure/assets and establish fire safety controls to protect them from fire damage.	Action on SHE Group
2023.4 Improve Chemical Safety: Establish STFC Chemical safety management committee to lead on COSHH code development, improving COSHH risk assessment quality, use of Respiratory Protection Equipment and it's fit testing, and the link between COSHH and OH monitoring.	N/A
HC.1 Disabled Access: Improve disabled access to the Hartree Centre building.	Done; ramp to building from road built; stairwell doors widened from the Atrium
HC.2 Fire Exits: Improve the Hartree Centre building fire exit provision.	Done; new fire exit doors installed
HC.3 International Business Travel: Promote the use of "International SOS" to staff travelling abroad on business.	Done via presentation at monthly HC staff update and HC SHE Teams channel.

3.4.1 OUTSTANDING SHE ACTIONS RECORDED IN EVOTIX ASSURE AT THE END OF FY 2023-24

Fire Risk Assessment	Free-standing	Incident	Risk Assessment	Safety Tour	SHE Audit
0	0	0	0	0	0

3.4.2 HARTREE CENTRE SHE AUDIT RESPONSES AT THE END OF FY 2023-24

There were no outstanding SHE audit responses from the Hartree Centre.

3.4.3 REVIEW OF RISK ASSESSMENTS AT THE END OF FY 2023-24

Number of live RAs	Number overdue for review	Number due for review in next quarter
4	**0**	**0**

3.5 CONCLUSIONS

The number of injury/non-injury incidents to so low that it is impossible to identify any pattern from them that could lead to action.

Apart from workstation risk assessment (previously known as DSE assessment) the HC has met the STFC targets for mandatory SHE training; which is a good result, considering the rapid growth in staff numbers.

4. FIRE SAFETY

Two of the Hartree Centre building's five building wardens have changed, with Andrew Taylor and Thomas Kendall (VEC) stepping down and being replaced by Paul Edwards and Ed Dishman (VEC).

Weekly fire alarm system testing has been carried out. No problems were reported.

No fire evacuation practices were carried out in FY2023-24.

5. SAFETY TOURS

No safety tours of any part of the Hartree Centre building were undertaken in FY2023-24.

6. HARTREE CENTRE SHE IMPROVEMENT OBJECTIVES FY 2024-25

HC.1 Improve the percentage of HC staff completing their workstation risk assessment; ideally to >90%.
HC.2 Review existing (or produce new) RAs for activities undertaken by staff away from their home location (such as conference attendance).
HC.3 Review required and prohibited actions in the event of a fire alarm and promote this knowledge to staff.

APPENDIX A Staff with Specific Departmental Roles

DI, SCD and the Hartree Centre run a joint safety panel to oversee the departments' efforts in meeting their SHE objectives and creating a SHE-aware culture. The following table outlines some specific responsibilities for Daresbury-based staff:

What	Who
Departmental Safety Contacts (DSC)	John Purton (SCD - DL) David Holder (Hartree Centre, staff and tenants) Stephen Johnston (DI – DL)
Hartree Centre Building Fire Manager	Andrew Sunderland (Hartree Centre building)
Hartree Centre Building Wardens	Dave Laff, Andrew Sunderland, Paul Edwards, Dave Gibson (VEC), Ed Dishman (VEC – awaiting training)
Hartree Centre First Aiders	Gemma Curtis, Kelly Hanifin, Kate Royse, Clare Bruder (VEC)
Lead on risk assessments – review SHE Enterprise entries for relevance, coverage, updates, liaising with owners.	DSCs

SHE mandatory training – checking stats against targets, updating DI-HC-SCD SHE committee & directorate.	DSCs
Lead on safety tours (DL) – rota, teams, sharing/liaising with other departments and chasing actions	DSCs
Attend quarterly DL H&S committees; bi-monthly DSC meeting; DSC Network meeting (twice yearly); respond to SHE Group requests.	DSCs
Maintain SHE noticeboards around the department (multiple locations)	DSCs
Prepare annual HC SHE Improvement Plan	David Holder
Update the HC Departmental SHE Risk Register	David Holder
Trade Union H&S Representative	David Holder

Appendix B STFC SHE Objectives FY 2024-25

Theme	Objective	Responsibility	Measures
1. **Improve Mental Health and Wellbeing**	Directors to review their Department's mental health and wellbeing developing suitable intervention(s) to address them, with a particular focus on middle management capability to manage, and recognise their own, mental health and wellbeing.		
2. **Improve Contractor Management**	Undertake a review and audit of the implementation of SHE Code 15: 'Control of Contractors'. Ensure Departments have sufficiently trained Contract Supervising Officers to supervise contracted works.		
3. **Fire Risk Management System**	Develop a Fire Risk Management System including policy, guidance and processes. Though specialist contractor support complete and refresh building fire strategies and fire risk assessments and a system to manage, prioritise and track emerging actions to improve life and asset/property fire risk management.		
4. **Improve Chemical Safety**	STFC Chemical Safety committee to continue to develop COSHH code to improve quality of COSHH risk assessments. Identifying where Respiratory Protection Equipment (RPE) is required and completing associated face fit testing and link to OH monitoring. Pilot the use of Sypol software as part of a solution to manage STFC's COSHH risk assessments.		

Appendix C Hartree Centre Departmental SHE Risk Register FY 2024-25

Risk Areas		Assessment of gross risk			Assessment of control effectiveness	Assessment of net risk		
		impact	likelihood			impact	likelihood	
1.	Mental health and emotional wellbeing	Ma	L	V HIGH	Weak	H	L	HIGH
2.	MSD due to DSE use.	H	L	HIGH	Partially satisfactory	Mo	U	MED
3.	Diseases linked to sedentary work.	H	L	HIGH	Partially satisfactory	H	U	MED
4.	Travel on council business.	H	L	HIGH	Partially satisfactory	H	U	MED
5.	Contractor management	Mo	L	MED	Partially satisfactory	Mo	U	MED
6.	Crossing Keckwick Lane	Mo	U	HIGH	Satisfactory	Mo	VU	LOW