Science and Technology Facilities Council

RAL Space

SAFETY

SUBJECT	***SHE Improvement Plan 2025-26 v 1.0***	
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CHANGE RECORD

Issue No.	Date	Description of Changes
Draft 0.1	05 Aug 2025	Draft to Department Safety Committee
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1 Executive Summary

Reported injury incidents continued at the low level seen in 2023/24, and non-injury incident reporting was significantly higher indicating a healthy reporting culture.

All the safety tours planned for the year were conducted and only four actions were overdue at the end of the year, continuing the good performance demonstrated the previous year.

Rates of completion of the eight training courses that are mandatory for all staff were mostly improved on those in the previous year, with the target level of having 90% of staff with current training being met for seven of them and 88% completion for the remaining course – DSE Self-Assessment.

Of the department's seven 2024/25 SHE objectives:

- Three were completed and have been retired: reviewing data an department staff mental health and wellbeing, which should a significant reduction in work-related stress absence; a department-specific safety induction process was established for users/customers; procedures for the safe bulk transport of chemicals for disposal were put in place.
- Two are ongoing: the handover of NSTF buildings and facilities is now expected to complete in 2025/26; remediation of the 25m Chilbolton antenna also continues
- Two were not fully met and are still live issues, so have been carried over: at least 90% of mandatory training completed; reviewing all risk assessments at least every two years.

For 2025/26 there are nine departmental SHE improvement objectives:

1. All RAL Space staff to carry out mandatory training.
2. All Risk Assessments to have been reviewed within 2 years and recorded on EVOTIX Assure.
3. Prepare for the safe handover of NSTF buildings and facilities.
4. Maintain and deliver to plan against the remediation programme for the Chilbolton 25m antenna
5. At least 10% of the department to be trained as Wellbeing Allies.
6. Improving COSHH compliance for breathable hazards, using Local Exhaust Ventilation and Respiratory Protective Equipment.
7. Improving management of contractors through training and appointing more Contract Supervising Officers.
8. Strengthening Risk Assessment through systematic review of risk assessments relevant to moderate/serious incidents and having more line managers trained in risk assessment.
9. Ensuring all visitors and users are recorded as having had relevant safety induction.

2 Review of 2024/2025 Year SHE Performance

2.1 SHE Incidents

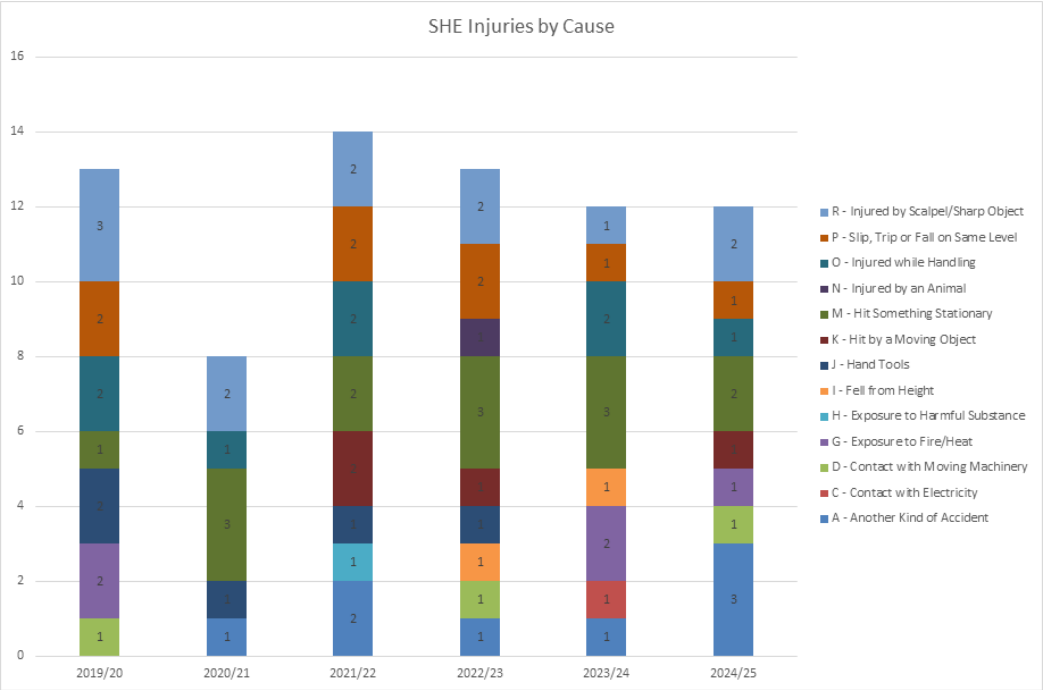

Figure 1: Injury Incidents by cause and year

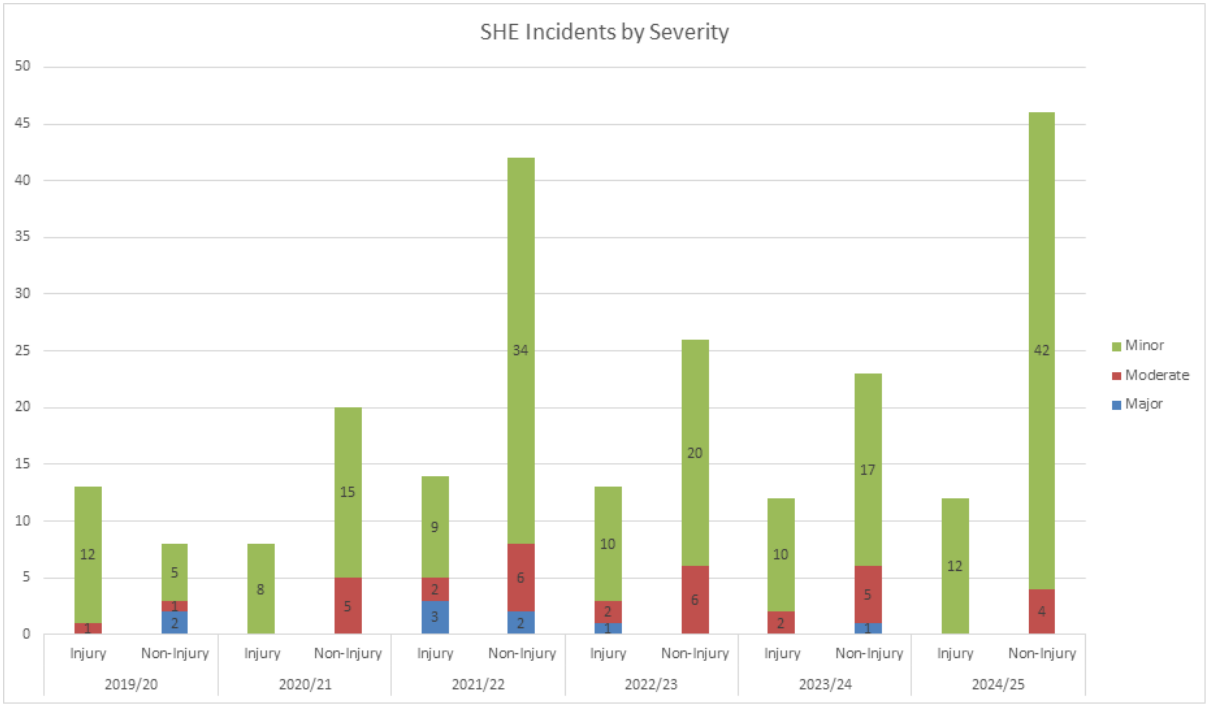

Figure 2 : Injury vs Non-injury (Learning Opportunities) by year

The number of injury incidents was the same as the previous year and similar to those in the last few years, noting that the 2020/21 figures were depressed by the COVID lockdowns. The causes were various with none predominating and with a similar distribution as the previous year. The total number of non-injury incidents (learning opportunities) was substantially higher than in 23/24 with the ratio with injury incidents better than 3.8, indicating a healthy level of reporting.

2.2 Safety Tours

All safety tours planned for 2024/25 were carried out; details are shown in the table below. In 2023/24 a substantial backlog of overdue actions was cleared, with the number reduced from 58 to 5 over the year, and this improved position has been maintained with only 4 actions overdue at the end of the reporting year.

Area	Tour date	EVOTIX Ref	Actions Total, Complete (%) Outstanding, Late				Next Booked (Due)
R100 Cleanrooms Suite A and Suite B	06/03/2025	388	8	0(0%)	8	0	2027
R100 Production Group Mezz and Cage Areas	12/09/2024	340	10	10(100%)	0	0	2026
R100 Facility Hall, Vibration, Dev Lab and STC Mezz Areas	16/12/2024	378	14	13(93%)	1	1	2026
R25 TVT Controlled areas. AIV office, control room, stc/tvac services, HDL and customer rooms	10/10/2024	347	15	15 (100%)	0	0	2026
R100 ETD Cleanrooms and SET Cleaning Plant and MLI Cleanroom	18/07/2024	335	22	22 (100%)	0	0	2026
R100 Laser Labs	03/10/2024	344	11	11(100%)	0	0	2026
R100 Imaging Systems Cleanrooms, Workshops, Store	04/04/2024	325	10	9 (90%)	1	1	2026
R25 PDF Workshop, Locus, and THz Labs	15/02/2024	320	10	10 (100%)	0	0	2026
R27 ETD/NSTF Offices	11/05/2023	260	6	6 (100%)	0	0	NA
R100 Offices, Ground, First and Second	25/04/2024	328	33	33 (100%)	0	0	2026
Chilbolton	17/10/2024	350	14	12 (86%)	2	0	2025
R27 CDF and Robotics Area	11/05/2023	260	7	7(100%)	0	0	NA
R25/R68 Ground Floor Labs and Workshops	04/05/2023	259	44	44(100%)	0	0	2025
R25/R68 Ground Floor Offices	15/08/2023	273	11	11(100%)	0	0	2025
R25/R68 Second Floor offices and R68 Roof inc 2.72	13/06/2023	263	22	21 (95%)	1	1	2025
R25/R68 First Floor Offices	25/01/2022	188	17	17 (100%)	0	0	2025
R25/R68 First Floor Offices	21/06/2023	264	34	34 (100%)	0	0	2025
R3 Basement, World Data Stores and Computer Rooms	24/01/2022	186	15	14 (93%)	1	1	2025
R3 Basement, World Data Stores and Computer Rooms	05/07/2023	267	10	10(100%)	0	0	2025
Aberystwyth	13/11/2023	306	11	11 (100%)	0	0	NA
R114 EM Facility	19/06/2024	331	5	5(100%)	0	0	2025
R114 Ground Floor offices and Dynamics suite	21/01/2025	384	5	0(0%)	5	0	2026

2.3 Mandatory Training

The target for all mandatory training in UKRI is that 90% of staff have completed it within the required repeat interval (5 years) at the end of the reporting year; the figures on 1st April 2025 are reported in the table below. The 90% target was achieved for seven of eight courses, the same as last year, with rates for most courses improved. DSE-related training remains the most challenging, with DSE Self-Assessment the only course below target, and the DSE training the only course with a lower completion rate than the previous year

Course/ Assessment	**Completion rate at 1st Apr 2024**	**Change and rate at 1st Apr 2025**
Induction/Refresher	**90%**	↑ **91%**
Manual Handling	**92%**	↑ **94%**
Fire Safety	**90%**	↑ **93%**
Display Screen Equipment (DSE)	**94%**	↓ **90%**
DSE Self-Assessment	**88%**	→ **88%**
H&S Policy Bitesize	**98%**	→ **98%**
Asbestos Bitesize	**97%**	↑ **98%**
Electrical Safety	**97%**	→ **97%**

2.4 Review of Objectives from 2024-25

No.	Action	Target and Due Date	Comment
1.	All RAL Space staff to carry out mandatory training (Induction/Refresher, Fire, Manual Handling, DSE training, DSE self-assessment, and Electrical Safety Essentials).	>90% compliance March 2025	Completion rates achieved the threshold for all courses except DSE Self-Assessment, which fell slightly short at 88%.
2.	All RAL Space Risk Assessments to have been reviewed by suitably trained staff within 2 years, and recorded on SHE Assure	>95% compliance March 2025	At 1st April, 22 of 210 were due an update, so only 90% compliance
3.	Prepare for the safe handover of NSTF buildings and facilities	Commissioning plans drafted with appropriate consideration of safety. Dry-run safety tours held. Dates: as facilities are commissioned	In progress, satisfactory 21 active risk assessments 4 incidents: I12821 (Loose RAM) I12886 (Crane overshoot) I13045 (ACS unsafe work) I13048 (Fire false alarm)

No.	Action	Target and Due Date	Comment
4.	Maintain and deliver to plan against the remediation programme for the Chilbolton 25m antenna	A Remediation Programme is defined with a schedule sufficient to keep the antenna safe. Deliverables in the programme are delivered to plan up to March 2025	Work progressing, although still dependent on gaining more capital funding for 25/26 for some preventive actions.
5.	Review data on department staff mental health and wellbeing, then develop suitable interventions to address any areas of concern	Data reported to DMB by Sep 2024 Interventions defined by Oct 2024, implemented by March 2025	Completed. Work-related stress absences are significantly reduced over the last 12 months. Experiments in modifying how some aspects of work are organised, prompted by the Corporate Rebels case studies, may offer benefits.
6.	Establish standard safety induction process for users/customers working in RAL space facilities	Complete and release induction training course on Totara Sep 2024 Project/Facility managers ensuring users/customers using it once available	Completed. RAL Space tailored course on Totara from August 2024 and in active use.
7.	Establish procedures for the safe transport for disposal of large volumes of chemicals from MMT labs	Use only closed compartment transport for bulk movements. May 2024	Completed. RAL Space van used for collections where feasible if not two people collect with trolley. RAL Space Van is used for delivery of chemicals for disposal to R34

3 Safety Tour schedule

The schedule of Safety Tours for all areas in the department is shown in the table below. Tours not due in 2024-25 are shown in grey type.

Area	Safety Tour Date	EVOTIX Ref	Next Due	Comments
R100 Cleanrooms Suite A and Suite B	06/03/2025	388	Mar 2027	
R100 Production Group Mezz and Cage Areas	12/09/2024	340	Sep 2026	
R100 Facility Hall, Vibration, Dev Lab and STC Mezz Areas	16/12/2024	378	Dec 2026	
R25 TVAC Controlled areas. AIV office, control room, stc/tvac services, HDL and customer rooms	10/10/2024	347	Oct 2026	
R100 ETD Cleanrooms and SET Cleaning Plant and MLI Cleanroom	18/07/2024	335	Jul 2026	
R100 Laser Labs	03/10/2024	344	Oct 2026	
R100 Imaging Systems Cleanrooms/Workshops/Store	04/04/2024	325	Apr 2026	
R25 PDF Workshop, Locus, and THz Labs	15/02/2024	320	Feb 2026	
R27 ETD/NSTF Offices	11/05/2023	260		Vacated
R100 Offices, Ground, First and Second	25/04/2024	328	Apr 2026	
R26 Open Plan Office	10/04/2025	389	Apr 2027	
Chilbolton	17/10/2024	350	Oct 2025	Annual tours
R27 CDF and Robotics Area	11/05/2023	260	2025	Scope to be determined
R25/R68 Ground Floor Labs and Workshops	23/05/2025	393	May 2027	
R25/R68 Ground Floor Offices	15/08/2023	273	Jul 2025	
R25/R68 Second Floor offices and R68 Roof inc 2.72	12/06/2025	395	Jun 2027	
R25/R68 First Floor Offices	10/07/2025	389	Jul 2027	
R3 Basement, World Data Stores and Computer Rooms	25/07/2025	TBC	Jul 2027	
Aberystwyth	13/11/2023	306		Vacated
R114 EM Facility	19/06/2024	331	Jun 2026	
R114 ground floor office and Dynamics Facility	21/01/2025	384	Jan 2027	
R114 NSTF Facilities (other)	N/A	TBD	TBD	As they enter service

4 SHE Risk Register

The department's SHE Risk Register was reviewed throughout 2024/25 and will continue to be reviewed quarterly through 25/26. For reference, the summary sheet from the version issued on 5th August 2025 is reproduced below.

Risk Areas	Assessment of gross risk			Assessment of control effectiveness	Assessment of net risk		
	impact	likelihood			impact	Likelihood	
i) Management of the safety of users/visitors to department facilities	3	3	High	Partially Satisfactory	3	2	Med
ii) Water leaks	2	3	Med	Satisfactory	2	2	Med
iii) Oxygen Depletion Monitoring	4	2	High	Satisfactory	3	1	Med
iv) Handover of NSTF buildings and facilities	3	3	High	Partially Satisfactory	2	2	Med
v) Assessment of laser hazards	3	3	High	Satisfactory	3	1	Med
vi) Condition of Chilbolton 25m antenna**Error! Reference source not found.**	4	3	Very High	Partially Satisfactory	3	2	Med

All the risks for which the effectiveness of controls is not Satisfactory or better have an associated objective for 2025/26 in Section 5 of this plan.

5 SHE Management and Improvement Actions for 2025-2026

The following table lists the actions planned for 2025/26. For each amber- or red-rated risk on the department's SHE Risk register an associated action has been identified.

No.	Action	Actionee	Target and Due Date	Comment
1.	All RAL Space staff to carry out mandatory training (Induction/Refresher, Fire, Manual Handling, DSE training, DSE self-assessment, and Electrical Safety Essentials).	DSC to report DMB members to chase All RAL Space staff to complete	>90% compliance March 2026	Achieved in Q3 24/25 but not at year end, where DSE Self-Assessment was just below target at 88% completion
2.	All RAL Space Risk Assessments to have been reviewed by suitably trained staff within 2 years, and recorded on SHE Assure	All staff responsible for RAs	>95% compliance March 2026	Achieved in Q3 24/25 but not at year end
3.	Prepare for the safe handover of NSTF buildings and facilities	NSTF delivery team NSTF operational team Safety team	All facilities commissioned and in use with suitable risk assessments Safety tours being held. By March 2026	Expect to have all facilities commissioned and operated by March 2026
4.	Maintain and deliver to plan against the remediation programme for the Chilbolton 25m antenna	Chilbolton Station Manager Relevant member of DMB	A defined Remediation Programme, sufficient to keep the antenna safe, is delivered to plan through to March 2026	Work progressing, although still dependent on gaining more capital funding for 25/26 for some preventive actions.
5.	Improve Mental Health & Wellbeing. Departments to train minimum of 10% of staff as Wellbeing Allies.	Director/PA	37+ trained Wellbeing Allies March 2026	Currently have 7 staff trained. Require at least 30 more.
6.	Improve COSHH Compliance: • LEV User Training • COSHH Assessments reviewed for Respiratory Personal Equipment (RPE) requirements • RPE users face fit tested as required	Line Managers COSHH Assessors RPE users	March 2026 • 100% users trained • 100% COSHH assessments reviewed • 100% RPE users confirmed trained by LMs	DSC to carry out assessment of the current situation, prompt users to get training, monitor progress and gather statistics to show compliance.

No.	Action	Actionee	Target and Due Date	Comment
7.	Improve Contractor Management: • Review SHE Code 15 and send comments to SHE Group • Training and appointments for those who manage contractors	• Dept Safety Management Committee • DSC, Line Managers and Director	• Review conducted, Sep 2025 • 100% relevant staff trained and appointed, March 2026	DSC to coordinate assessment of who needs training and appointing
8.	Risk Assessments Ensure all risk assessments relevant to Moderate/SoPS incidents are reviewed and this recorded. Completion of face-to-face Risk Assessment Training for all Line Managers	Line Managers DSC	100% relevant incidents assessed 75% of LMs received in-person RA training March 2026	
9.	Relevant Safety Induction Training for all visitors and users of RAL Space Facilities	Project Managers Visitor Contact DSCs	100% of visitors/users between Oct 2025 and March 2026 recorded as having has relevant induction	Details on how to capture all information to be confirmed in due course.

5.1 Mandatory training

The DSC will monitor training statistics regularly and enlist the help of senior management as necessary to ensure that training is carried out to schedule. The department has been close to achieving the goal of getting >90% completion across all mandatory courses for several years; until this is achieved routinely this objective is being retained.

5.2 Risk Assessments Review

The DSC continues to advise Risk Assessment owners in advance of the two-year review deadline. Compliance with the STFC target of 95% compliance was achieved in Q3 of 2024/25 but missed at year end. The importance of maintaining Risk Assessments will continue to be emphasised by department senior management in meetings with staff and, where necessary, on an individual basis, and lists of overdue assessments provided to department management boards at least quarterly.

5.3 NSTF safety preparation

The NSTF is the largest project that RAL Space has managed, and the safe commissioning and operation of the facilities once handed over to will require considerable planning. Completion of commissioning of all facilities has been delayed but is now expected to complete in 2025/26.

5.4 Chilbolton 25m antenna remediation

Condition surveys of the Chilbolton 25m antenna in June 2021 revealed some significant issues with corrosion of metal parts, and there was a serious incident previously when a corroded counterweight that was a known problem in 2017 fell from the antenna. Actions are being carried out, but it is important that the programme of works continues and is executed to schedule to ensure that people working on or near the antenna are not put at risk.

5.5 Promotion of Wellbeing and Mental Health

This is flowing down an STFC H&S Objective. The department had 7 Wellbeing Allies at the start of 25/26, and needs 37 to meet the STFC target of 10% of the department trained.

5.6 Improve COSHH compliance

This is flowing down an STFC H&S Objective, prompted by a monitoring visit from the Health and Safety Executive, to improve the management of breathable hazards. An assessment will be made of how many staff use Local Exhaust Ventilation equipment, and they will then be given appropriate training. COSHH assessments will be reviewed to determine which staff require the additional protection of Respiratory Personal Equipment, and they will receive face fit testing as required to ensure the effectiveness of that equipment.

5.7 Improve Contractor Management

The requirements of SHE Code 15 are not well followed across STFC, so the code will be reviewed and additional Contract Supervising Officers will be trained as required.

5.8 Risk Assessments

Appropriate risk assessment is the foundation of SHE management, so our process and expertise will be strengthened by reviewing relevant risk assessments following any moderate or SOPS incident, and through ensuring more of our Line Managers receive in-person training in how to conduct a risk assessment.

5.9 Safety Induction for visitors and users

Safety induction for visitors and users will be improved through ensuring that we have a record that they have all received the relevant information or training.