

*HEALTH  
AND SAFETY  
ANNUAL  
REPORT 2021*



# Health and Safety annual report 2021

## 1. Introduction

This report provides an overview of the work carried out by and on behalf of the UCEA Health and Safety Committee in 2021. UCEA adopted an [interim action plan](#) in 2021, while developing the [HE Sector Health Safety and Wellbeing Strategic Framework for 2022-25](#). This report focuses on the performance of UCEA, its partner organisations and the sector against the annual action plan adopted in 2021. It provides summary accident and injury statistics for the past five years, based on data collected by the Universities Safety and Health Association (USHA), as well as summary findings from UCEA's annual absence survey.

## 2. UCEA Health and Safety Committee

### UCEA Health and Safety Committee Membership

During 2021 the Committee was chaired by Professor Stuart Palmer, Chair of Council, Cardiff University. The membership of the Committee during 2021 is presented below:

Role	Name
Chair (Head of an HE Institution)	<b>Professor Stuart Palmer</b> Chair of Council Cardiff University
UCEA Chief Executive	<b>Raj Jethwa</b> Chief Executive
UCEA Deputy Chief Executive	<b>Roshan Israni</b> Deputy Chief Executive
Advance HE representative	<b>Tracey Connor</b> Head of People
University Secretary <b>AHUA</b> representative	<b>Michaela Boryslawskij</b> University Secretary University of Huddersfield
<b>AMOSSHE</b> representative	<b>Lesley O'Keeffe</b> Deputy Director Academic and Student Services Brunel University London
Head of Estates <b>AUDE</b> representative	<b>Jonathan Face</b> Assistant Director of Estates Manchester Metropolitan University
	<b>John Field</b> Head of Fire Safety Imperial College London
	<b>Becky Bradshaw</b> Director of Estates and Campus Services University of Northampton
Radiation Safety Professional <b>AURPO</b> representative	<b>Tim Coldwell</b> AURPRO honorary secretary University of Hull
Head of Finance <b>BUFDG</b> representative	<b>Vacancy</b>
<b>CUBO</b> representative	<b>Jo Hardman</b> Director of Estates, Facilities and Commercial Services University of Lancaster

Role	Name
<b>GuildHE</b> representative	<b>Malcolm Willis</b> Director of Human Resources University of Winchester
Medical Schools Council ( <b>MSC</b> ) representative	<b>Nicole Watson</b> Policy Officer NB: member by correspondence only
Higher Education Occupational Practitioners ( <b>HEOPS</b> ) Representative	<b>Helen McNeely</b> Head of Student and Academic Affairs University of Belfast
<b>UHR</b> representative	<b>Eilidh Fraser (UHR Treasurer)</b> Director of HR and OD Abertay University
<b>UHR</b> representative	<b>Sarah Setchell</b> Director of HR University of Derby
<b>PVC</b> representative	<b>Mark Sterling</b> Deputy Pro Vice Chancellor University of Birmingham
<b>UUK</b> representative	<b>John de Pury</b> Assistant Director of Policy
H&S Professional <b>USHA</b> representative	<b>Vincent King</b> Head of Occupational Health and Safety City, University of London
H&S Professional <b>USHA</b> representative	<b>Neil Budworth</b> Health, Safety and Risk Manager Loughborough University
H&S Professional <b>USHA</b> representative	<b>Joe Brannigan</b> Estates Health and Safety Manager University of Edinburgh
<b>UCEA</b> representatives	
Head of HR Advice and Secretary to the Committee	Nicola Carter
Senior Employment Policy Adviser	Alison McGrand
Senior Employment Policy Adviser	Emma Suzuki

A list of the full names of each of the sector organisations is included as an appendix to this report.

### Terms of Reference

The Committee acts as a central point for discussion and resolution of health and safety matters within the HE sector.

In particular, the Committee is tasked with the following:

- To advise the UCEA Board and UCEA members on matters of health, safety and wellbeing.
- To represent HE institutions (HEIs) on matters of health and safety and be a mechanism for explaining the particular needs of the sector.
- To identify, generate and publish guidance for HEIs where appropriate.
- To provide a network for collective discussion and action on health and safety matters across the various associations within HE.

- To report to the Health and Safety Executive (HSE) and other Government Departments on sector progress on health and safety.
- To nominate representatives of HE employers to participate in forums, such as the Higher Education Safety and Health Forum (HESH) and to provide the brief and mandate for such fora.
- To identify a programme for UCEA Health and safety seminar activity.
- To produce responses on behalf of the sector to appropriate consultations on legislation and guidance.

The Committee meets twice a year in May and November to consider the full range of health and safety matters arising in HE. However, during the ongoing coronavirus (Covid-19) pandemic the Committee has been meeting more frequently and was meeting monthly during 2021 to focus on Covid-19 specific matters arising. The Committee reports to the UCEA Board.

### 3. Higher Education Safety and Health (HESH) FORUM

The HESH Forum comprises representatives of UCEA, the HSE, USHA and the trade unions (currently UCU, UNISON and Unite) and met monthly during the 2021 calendar year, due to the Covid-19 pandemic, in addition to the usual May and November meetings where wider health and safety matters of mutual interest are discussed. The monthly Covid-19 meetings were also attended by Universities UK and National trade union Officers. The purpose of HESH is to act as a forum for the HE sector to develop a partnership approach between employer and employee representatives and to provide strategic oversight and direction on matters of occupational health and safety. The Forum met nine times in 2021. The issues discussed by the Forum in 2021 included those listed below.

- Covid-19 matters arising such as:
  - i. Interpretation and application of government sector specific Covid-19 guidance.
  - ii. Staying safe on campus, risk assessments, control measures and outbreak planning.
  - iii. Published a joint statement between UCEA and the trade unions on staff vaccinations.
  - iv. Published a joint statement between UCEA and the trade unions on Covid-19 testing for staff.
  - v. Published practical case studies exploring good practice approaches to [working with trade unions in relation to Covid-19 risk](#).
  - vi. Shared a publically accessible version of UCEA's [Return to Campus guidance](#) which contains chapters on health and safety and psychological transition.
  - vii. Health, safety and wellbeing in a hybrid working context.
  - viii. USHA worked with the trade unions to produce an [escalation template](#) for staff raising concerns about health and safety- which have been more forthcoming during the pandemic.
- Updated dedicated [mental health resources webpages on UCEA website](#).
- Published [17 case studies](#) demonstrating good practice approaches across the HE sector in relation to staff mental health and wellbeing.
- Fire Safety.

#### HESH Forum membership:

The 2021 membership of the Forum is set out below:

Role	Name
<b>Chair of the Forum</b>	Professor Stuart Palmer
HSE representative	Andrew Kingscott/Nicholas James
UCU representative	Alex Lancaster
USHA Chair	Neil Budworth/Vincent King
HSE representative	Nicholas James

Unison representative	Mike Moore/Linda Holden
Unite representative	Christopher Kennedy
UCEA representative	Roshan Israni
UCEA representative	Nicola Carter
UCEA representative	Alison McGrand
UCEA representative	Emma Suzuki

#### 4. HE Sector level Health, Safety and Wellbeing – Interim action plan 2021

The Covid-19 pandemic was the key priority for health, safety and wellbeing actions in 2021 during the interim period between the expiry of the HE Sector-level Health Safety and Wellbeing [Strategy for 2016-2020](#) and the adoption of our new [strategic framework for 2022-2025](#).

##### Actions taken in 2021

Notable activities undertaken by UCEA and other Committee members under the 2021 action plan include:

- UCEA developed an interim strategy for 2021 and focused on Covid-19 related actions as appropriate.
- Continuation of more regular H&S (Plus) Committee meetings to focus specifically on health and safety matters arising from the ongoing Covid-19 pandemic.
- In consultation with UUK and USHA, UCEA published joint statements with the trade unions on Covid-19 staff vaccinations and staff testing for Covid-19.
- UCEA published guidance on [Managing the Return to Campus](#) which included chapters on health and safety and the psychological transition staff would need to make.
- As part of a whole university approach to securing mental health in HE, UCEA and UUK have actively attended the [Mental Health in Higher Education Advisory Group](#) to feed back to the Committee on key themes and areas for consideration.
- Following a sector wide consultation, the Committee worked together to publish the [HE Sector Health Safety and Wellbeing Strategic Framework 2022-25](#) (the strategy). The strategy builds on shared learning from the pandemic and identifies five themes that will underpin key areas of focus for the years ahead.

#### 5. Statistics on reportable accidents and injuries

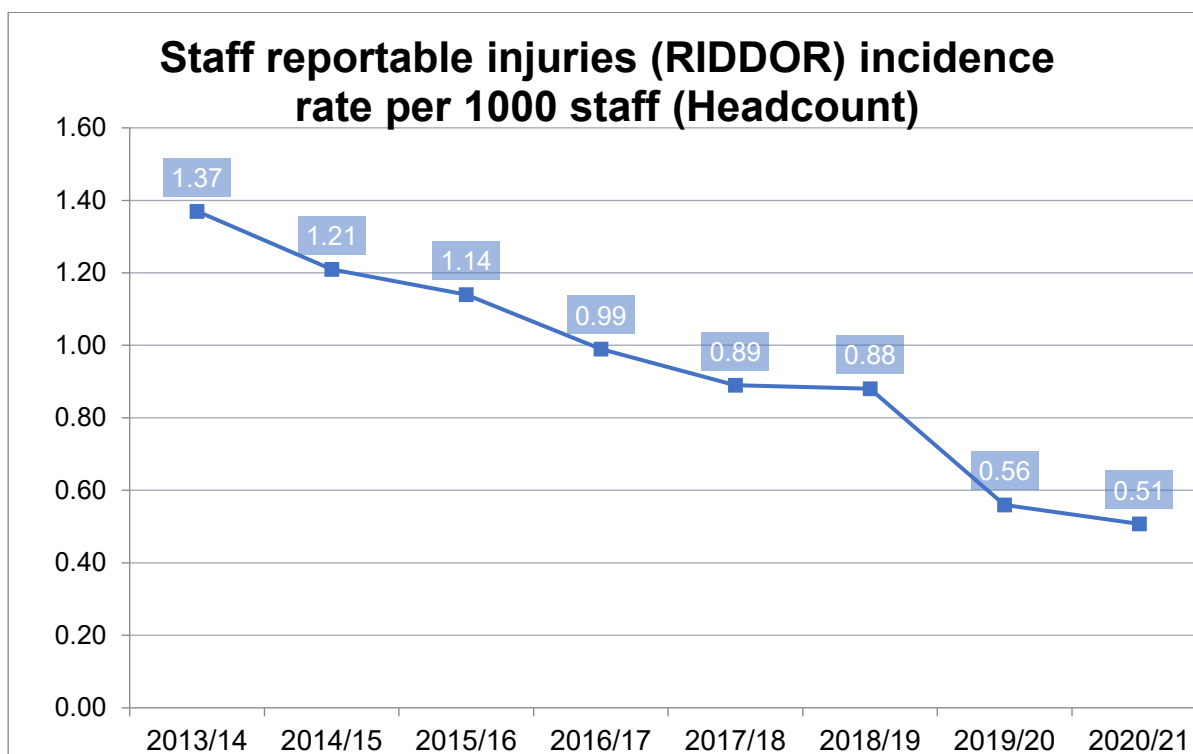
##### Summary

USHA Incident Data	2017-18	2018-19	2019-20	2020-21
Number of staff RIDDOR reportable injuries	198	269	111	118
Number of student RIDDOR reportable injuries	124	75	45	36
Total of non-injury/near misses	3,313	5,805	2,315	2,090
Total number of occupational diseases reportable under RIDDOR	13	8	6	5
Number of staff fatalities	0	0	0	0
Number of student fatalities	2	3	0	0

The graph below shows the reportable accident rate since the 2017/18 for *employees*. It is good to note that RIDDOR injuries remain low, with a fall in near misses and no fatalities for the second year. The figures provided for 2020-21 are based on a sample of 70 responding HEIs.

## Total staff reportable injuries – RIDDOR

\*Source: USHA



The overall reportable accident rate in HE reflects well when compared with the HSE figures of UK-wide accident reporting, which ran at 1.85 per 1,000 employees (injuries reported under RIDDOR) for the period 2020-21 (provisional) – see the RIDHIST data at:

[www.hse.gov.uk/statistics/tables/index.htm#riddor](http://www.hse.gov.uk/statistics/tables/index.htm#riddor). The figure provided for 2020-21 is based on a sample of 70 responding HEIs.

## 6. Statistics on sickness absence in HE 2020-21

UCEA has conducted annual sickness absence surveys for HE since 2012. A summary of some of the headline results from the most recent five surveys – for the academic years 2016-17 to 2020-21 – is presented below. UCEA members can download the full reports of the last two surveys, including detailed data tables in Excel for benchmarking, from the UCEA website at:

[www.ucea.ac.uk/member-resources/health-safety-and-wellbeing/Sickness-Absence-Survey/](http://www.ucea.ac.uk/member-resources/health-safety-and-wellbeing/Sickness-Absence-Survey/)

### a) Overall sickness absence levels in HE

Absence measure	2016-17	2017-18	2018-19	2019-20	2020-21
Mean number of days absence per employee per year	5.8 days	6.0 days	6.2 days	5.5 days	4.4 days
Mean percentage working time lost per year to sickness absence	2.6%	2.7%	2.9%	2.5%	2.0%

The Covid-19 pandemic, along with restrictions on campus-based working and a rise in the number of staff working from home, has resulted in a considerable fall in the average number of working days lost to sickness absence to levels not seen during the time UCEA has been reporting this data. In the 2020-21 academic year, the average number of days lost to sickness absence was 4.4 days. This

was 1.1 days lower than in 2019-20 and 1.8 days lower than in 2018-19. As a percentage of working days lost, the reported fall in sickness absence is equivalent to a reduction of almost 1 percentage-point, when compared to pre-pandemic reporting levels (2.9% of working days were lost to sickness absence in 2018-19, which fell to 2.5% in 2019-20, and 2.0% of working days in 2020-21).

These trends are not unique to the HE sector. Compared with 2019, XpertHR also reported a fall in days lost to sickness absence in 2020 (6.5 days per employee in 2019 compared with 5.7 days in 2020). This fall was entirely driven by workplaces in the public sector and private services sector (not including manufacturing and production industries). By contrast, manufacturing and production industries reported a rise in sickness absence of 0.2 days per employee compared with 2019.

### b) Percentage of sickness absence that is long-term

Absence measure	2016-17	2017-18	2018-19	2019-20	2020-21
Mean percentage of sickness absence which is long-term (over 20 consecutive working days)	53.3%	52.2%	54.6%	56.0%	62.1%

Long-term sickness absence, defined as absence of 20 or more consecutive working days, has fallen in absolute terms. This may be as a result of the efforts that HEIs are investing in staff support, occupational health and other wellbeing interventions. However, as the fall in long-term sickness absence is smaller than the fall in short-term sickness absence, the proportion of sickness absence that is long-term represents a larger proportion of total absence reported when compared to short-term absence and pre-pandemic reported levels. As recently as 2017-18, the proportion of sickness absence that was long-term was 52%, in 2020-21 this had risen to 62%.

If the pattern of short-term sickness absence remains lower than pre-pandemic levels and can be attributable to the continuation of staff who are working from home and/or a greater prevalence of hybrid working practices, then it could be the case that a greater proportion of future sickness absence will be primarily due to long-term health conditions. The trend could further be exacerbated as a consequence of a backlog of patient care and treatment arising from the impact of Covid-19 and reprioritisation of services in the NHS.

A number of HEIs have already begun to consider this with new interventions that target the causes of long-term sickness absence. These include introducing mental health support, increasing use of occupational health or offering staff access to physiotherapy and other well-being provisions, such as those offered through Employee Assistance Programmes and wider packages of support to assist with other areas of wellbeing such as financial health or legal support.

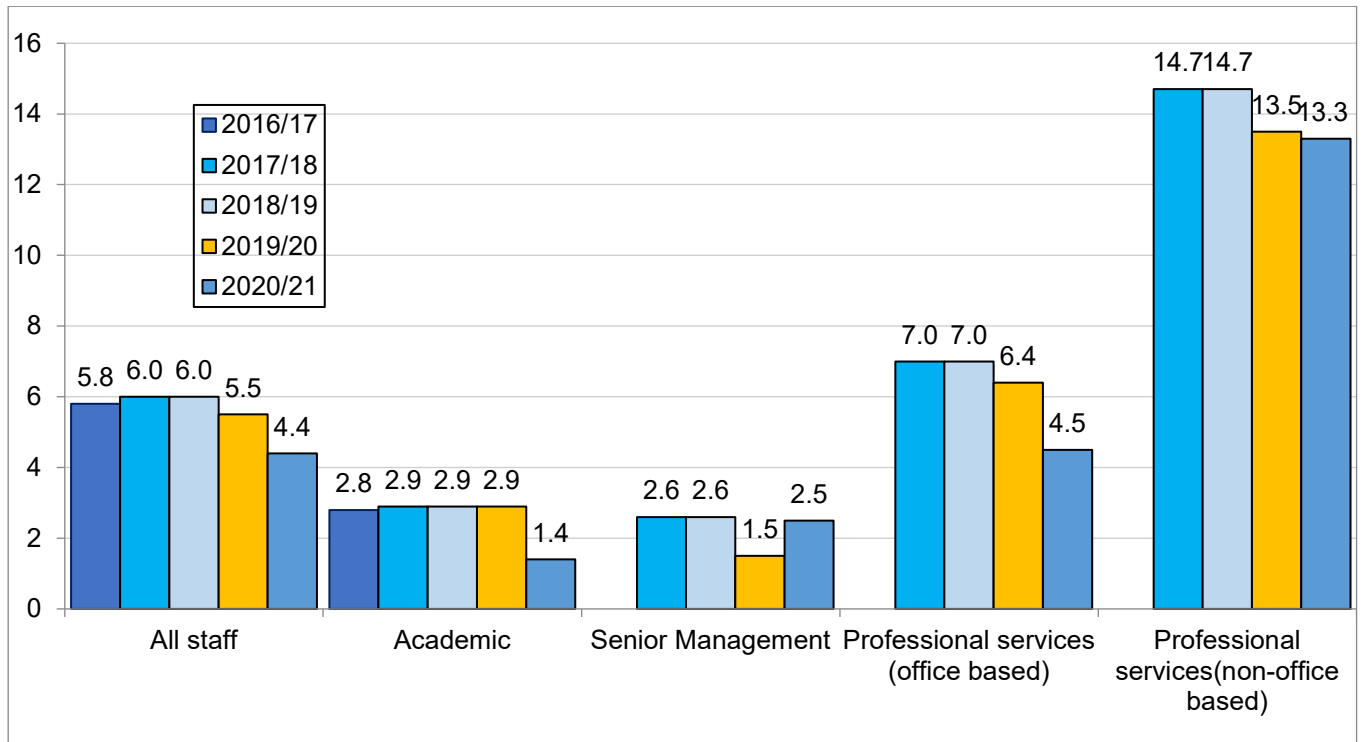
### c) Sickness absence levels by category of staff

Perhaps unsurprisingly, as a consequence of the nature of work, HEIs have always reported their manual/non-office-based staff group, as having more days of sickness absence leave than other staff groups. On average, manual/ non-office-based staff had approximately three times as many days sickness absence leave as other staff groups.

Manual/non-office-based staff were also more likely to be placed on furlough leave which meant that the total number of working days in the reporting period for this group of staff was fewer than for other staff groups. As a consequence, while it is the case that the number of days lost due to sickness absence has fallen for this group of staff, when adjusted to remove the total number of furlough leave days taken from the total number of working days available in 2020-21, the proportion of days lost to sickness absence is actually higher than in pre-pandemic reporting periods, rising from 6.7% in 2018-19 to 7.1% in 2020-21.

Office-based professional services staff saw the largest drop in sickness absence year-on-year from an average of 6.6 days in 2019-20 to an average of 4.5 days in 2020-21. As was the case in academic year 2019-20, when working from home became more prevalent.

**Average working days lost (total days' sickness absence divided by total FTE)**



In the current survey, HEIs reported an increased concern that their office-based professional services staff may be underreporting sickness absence. In 2018-19 (before the pandemic) the proportion of HEIs reporting that they had either moderate or significant levels of underreporting within office-based professional services staff was 2.2%. In 2019-20 this had risen to 14% and in 2020-21, this rose again to a concern in 16% of HEIs.

Meanwhile, although there has been a smaller reduction in the number of days lost to sickness absence (from 3% in 2018-19 to 2.5% in 2020-21) for academic staff, the concern about levels of underreporting for this group of staff have, in contrast to office-based professional services staff, fallen. However, the perception of underreporting continues to be of concern for this group of staff in 55% of HEIs.



## Appendix

### Full names of Higher Education member associations represented on the UCEA Health and Safety Committee

<b>Acronym</b>	<b>Full name</b>
AHUA	Association of Heads of University Administration
AMOSSHE	The Student Services Organisation (Formerly the Association of Managers of Student Services in Higher Education)
AUDE	Association of University Directors of Estates
AURPO	Association of University Radiation Protection Officers
BUFDG	British Universities Finance Directors Group
CUBO	Colleges and Universities Business Officers
CUC	Committee of University Chairs
HEOPS	Higher Education Occupational Physicians / Practitioners
MSC	Medical Schools Council
UCEA	Universities and Colleges Employers Association
UHR	Universities Human Resources
USHA	Universities Safety and Health Association
UUK	Universities UK

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