

**Bolsover, Chesterfield and North East Derbyshire District
Councils'**

Internal Audit Consortium

Internal Audit Report

Authority:	Chesterfield Borough Council
Subject:	Corporate Health and Safety
Date of Issue:	26th January 2018

Report Distribution:	Executive Director – James Drury
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INTERNAL AUDIT REPORT

HEALTH AND SAFETY

Introduction

In October 2016 a review of health and safety arrangements was undertaken and the resulting audit opinion was unsatisfactory. Due to the importance and high risk factors associated with Health and Safety a follow up audit has been undertaken.

Scope and Objectives

The purpose of the audit is to establish the progress made against the recommendations at the last audit.

Conclusion

The conclusion of the audit was that the assurance in place is **inadequate** - There are fundamental control weaknesses, leaving the system/service open to material errors or abuse and exposes the Council to significant risk. There is little assurance of achieving the desired objectives.

Despite an implementation schedule being agreed at the last audit little progress has been made against this. The levels of resource within the corporate health and safety unit have been compounded by the time required on asbestos issues and the departure of the Health and Wellbeing manager. Most of the recommendations made at the last audit have been re stated and during the course of the audit additional issues were also arising leading to further new recommendations.

The Executive Director (James Drury) is currently reviewing corporate health and safety requirements and undertaking a service redesign as it is likely to be another 3 months before there is a Health and Wellbeing manager in post.

Since the completion of the audit, the Executive Director has met with the Council's Health and Safety Advisors and the Commercial Services Manager to address the issues raised during the audit and also wider issues. A recovery plan is in the process of being finalised following on from which the resources required to implement this will need to identified.

Findings and Recommendations

The table below summarises the position in respect of the implementation of previous recommendations.

	H	M	L	Originally agreed to be implemented by	Implemented in full
R1	√			April 17	No
R2		√		December 16	Yes
R3		√		February 17	No
R4		√		March 17	No longer applicable
R5		√		June 17	No
R6	√			June 17	No
R7	√			May 17	No
R8	√			January 17	No
R9		√		January 17	Part
R10			√	September 17	No
R11	√			March 17	No
R12		√		February 17	Yes

Previous Recommendation 1

A review of Health and Safety policies, protocols and guidance should be undertaken to ensure they are up to date and reflect the most current legislation and approved codes of practice

- 1.1 The Health and Wellbeing Manager was to revise the suite of policies with a view to rationalising the number of policies and providing links to relevant legislation and guidance etc. Many of the policies are dated 2013 and were due for review in 2015. The Council's main Health and Safety policy runs out at the end of 2017. This will soon have an impact on OSD as they require a current Health and Safety policy in order to be able to stay registered with Construction line and compete for work.
- 1.2 The Health and Wellbeing Manager has now left the Council and no notes can be located to demonstrate the progress made in respect of the review of policies. The Corporate Health and Safety Advisor stated that a review of the Council's main Health and Safety Policy will be his first task in the New Year.

- 1.3 One of the big issues in terms of being able to deliver on this recommendation has been resource. The Corporate Health and Safety Advisor has spent the bulk of his time over the last year working on asbestos issues.
- 1.4 An Executive Director is currently working on a service redesign. The review may not necessarily mean additional corporate resource but may utilise other health and safety officers that work out in services.
- 1.5 The Executive Director also stated that a lot of work was required in respect of the staff caution list.
- 1.6 This recommendation therefore remains outstanding and has been raised again.

	Recommendations
R1	The service redesign of health and safety should be progressed as a matter of urgency. In addition to this consideration should be given to the resource required in the interim period to meet all legislative requirements. (Priority: High)
R2	A review of all Health and Safety policies, protocols and guidance should be undertaken to ensure that they are up to date and reflect the most current legislation and approved codes of practice. (Priority : High)

Previous Recommendation 2

To ensure all Health and Safety related information and guidance is available to employees the intranet should be updated to contain links to relevant policies.

- 2.1 The intranet has been updated to include all of the Council's Health and Safety policies. However, as already stated most of these policies are very out of date.
- 2.2 This recommendation has therefore been implemented

Previous Recommendation 3

Generic training needs for all employees should be reviewed to ensure training is up to date

- 3.1 A suite of health and safety training modules now sit on Learning Pool and these are available for staff to complete. During Employee Performance Development Reviews managers should assess each persons learning requirements and ensure that the relevant training modules are completed.

- 3.2 Learning Pool has been operational since January 2017 and the health and safety modules recently added. Prior to 2015 some health and safety courses such as fire safety and asbestos were completed on line by all staff however these were withdrawn in 2015 when it was decided to change the system. The Council decided to use the same system for all learning and development and this was not introduced until 2017 leaving a gap of 2 years and a big back log of training to be caught up on.
- 3.3 None of the health and safety modules have yet been made compulsory to complete. Recently, the Health and Safety Corporate Advisor has sent out a request to managers to complete a spreadsheet detailing the health and safety training requirements of their staff with a deadline completion date of the end of December 17. This form was last completed by managers in 2014/15. Once the forms have been returned the Corporate Health and Safety Advisor will use these to liaise with HR and request that employees are required to complete the relevant courses. Of the forms completed by managers to date, many have not been completed correctly as in some instances they have not ticked training for all staff such as fire safety which is a corporate requirement for everyone to complete each year.
- 3.4 Ten employees starting with the council between April and June 2017 were selected and it was established from HR that none of these employees had yet completed the relevant health and safety e learning induction module.
- 3.5 Some progress has been made against this recommendation however the Council is a long way from being able to effectively demonstrate that all of its employees have undertaken the health and safety training that they require for their roles. The recommendation has therefore been raised again albeit in a different format.

	Recommendations
R3	Responses from managers in terms of health and safety training requirements for their staff should be vigorously pursued and checked for accuracy/ reasonableness. (Priority : Medium)
R4	Basic health and safety training should be made mandatory for all staff on aspire learning. Other health and safety training identified as mandatory by managers for specific roles e.g. asbestos management should also be made mandatory for relevant staff. (Priority: Medium)
R5	The completion of mandatory health and safety training should be monitored corporately and action taken where it is not completed in a timely manner. (Priority : Medium)

Previous Recommendation 4

It must be ensured all corporate health and safety training is recorded on the SHE system against the individual employee record.

- 4.1 This recommendation is no longer applicable as the SHE system is no longer going to be used to record all health and safety training, instead aspire learning is to be used.
- 4.2 However, enquires as to what the SHE system is to be used for led to further points arising. The SHE system should still be used to log all accidents and work related absence including e.g. stress.
- 4.3 A review of the Health and Safety Committee reports from October 2017 revealed some anomalies in the figures presented. In the Health and Safety Officers report (which is derived from information on the SHE system) there were only 6 ill health related incidents and these all related to Queens Park Sports Centre. However, in the same report HR reported 22 incidents of work related stress between 1st July 17 and 30th September 17. It was evident that managers are not logging all incidents of work related stress on the SHE system. A reconciliation should take place between the data recorded on SHE and that presented by HR to the Health and Safety committee to ensure that all incidents are correctly logged and that reporting to Members is accurate.
- 4.4 Whilst reviewing the October 2017 incidents report to the Health and Safety Committee it was also noted that in terms of the incidents recorded many of the boxes headed up "Action taken to prevent recurrence" had not been completed, this included for instances where working days had been lost. The reason for this was discussed with the Health and Safety Corporate Advisor and it was established that the reports are taken from SHE and that boxes are blank because officers are not completing them. This could either be because no action has been taken or there has been a failure to update the system with the action taken.
- 4.5 It was also evident that there is now a lack of resource to keep the administration of the SHE system up to date and functioning correctly as a part time member of staff has left. It was planned that IT would take over the administration of the system however this has not occurred and this has now fallen to the Health and Safety Corporate Advisor. This issue of the maintenance and administration of the SHE system should be addressed as part of the service redesign (R1).

	Recommendations
R6	Managers need to be reminded that all work related stress absence should be logged on SHE. (Priority : Medium)
R7	A reconciliation should be performed between the work related illness information logged on SHE and HR data. (Priority : Medium)
R8	That officers are reminded that when there is an incident/ accident that appropriate action should be taken to prevent a re-occurrence and that this should be recorded on the SHE system. There should be some central monitoring to ensure that details are completed in full and correctly. (Priority : Medium)

Previous Recommendation 5

Procedures for monitoring and measuring performance in respect of the Corporate Health and Safety Unit should be identified and reported on a periodic basis.

- 5.1 No progress has been made in respect of this recommendation and therefore it has been raised again.

	Recommendation
R9	Procedures for monitoring and measuring performance in respect of the Corporate Health and Safety Unit should be identified and reported on a periodic basis. (Priority : Medium)

Previous Recommendation 6

It is essential that the programme of health and safety audits are recommenced as soon as possible

- 6.1 The purpose of health and safety audits is to ensure that legislation, policies and procedures are being adhered to. At the last audit it was confirmed that no corporate health and safety audits had been undertaken since 2014. These audits have not yet recommenced. The audits are partially reliant on a review of policies to ensure that the reviews are based on current legislation and guidance.
- 6.2 This recommendation has not been actioned therefore is raised again.
- 6.3 On the back of this recommendation further enquiries were made in respect of what monitoring takes place to ensure that premises managers are undertaking appropriate safety actions e.g. in terms of fire drills and assessments.

- 6.4 Around a year ago a consultant was employed to undertake fire risk assessments for all the Council's properties. The results were logged on an on line system and each of the premises managers should complete the actions required arising from the assessment and update the system accordingly. 62 properties are detailed on the system.
- 6.5 The Corporate Health and Safety Advisor has not had the capacity to review the online system to ensure that all actions have been completed. Outstanding recommendations are highlighted in red and are tagged as pending. One year on, 2 properties records were reviewed and numerous fire actions required were detailed as pending. This may be because the actions have not been completed or may be because the system has not been updated. There is a risk that if a fire occurs and someone is injured or worse that this could be partly attributable to outstanding actions. The fire risk assessment consultant is due in again early next year.
- 6.6 A further issue uncovered was in relation to an HSE investigation that took place at 6 Ashgate Road. A whistleblowing complaint was received that some asbestos ceiling panels had been knocked and that staff had been exposed to asbestos. The Health and Wellbeing Manager and the Health and Safety Corporate advisor met with the HSE and on the basis of the proposed action plan the HSE decided not to take enforcement action. Having reviewed the action plan it is evident that many of the actions detailed are long over due for completion. There is a risk that the HSE will ask for an update and if not satisfied may then proceed with enforcement action.

	Recommendations
R10	It is essential that the programme of health and safety audits are recommenced as soon as possible. (Priority : High)
R11	Premises managers should be reminded that they need to complete the actions arising from their fire risk assessment and update the online system accordingly. (Priority : High)
R12	A Corporate check should be undertaken in a timely manner to ensure that identified fire actions are being completed. (Priority : Medium)
R13	The HSE action plan in respect of 6 Ashgate Road should be reviewed to ensure that all outstanding actions are completed as soon as possible. (Priority : High)

Previous Recommendation 7

It is essential that the Corporate Asbestos Management Plan is reviewed as soon as possible

- 7.1 The Corporate Asbestos Management Plan is a corporate document to cover housing and non housing and should detail how CBC manages it's asbestos. This piece of work has been contracted out to a consultant. There is a draft plan however this still requires completion and approval. The recommendation is therefore repeated in a slightly different format.

	Recommendation
R14	It is essential that the Corporate Asbestos Management Plan is finalised and approved as soon as possible. (Priority : High)

Previous recommendation 8

It is essential that the programme of inspections and surveys of the Council – owned non – domestic premises to make a materials assessment for asbestos is commenced as soon as possible

- 8.1 Many inspections have taken place and progress is well underway against this recommendation. However, as at the middle of December there were still 31 properties to survey (mainly industrial and commercial units). Until this work is undertaken it is not possible for a prioritised plan of remedial action required to be completed. Once the prioritised action plan of remedial actions required is completed the associated budget will need to be allocated.
- 8.2 The recommendation has therefore been repeated in a slightly different format.

	Recommendations
R15	It is essential that the programme of inspections and surveys of Council – owned non – domestic premises to make a materials assessment for asbestos is completed as soon as possible. (Priority : Medium)
R16	The action plan to prioritise identified asbestos remedial actions should be completed as soon as possible and the associated budget required identified and allocated. (Priority :High)

Previous Recommendation 9

Closer working between the Health and Safety Unit and other Council departments should take place during the early stages of organisational developments e.g. office moves / structural changes.

- 9.1 Business transformation have now introduced a project management office where any programme or project goes through a “gateway assessment”. The business transformation manager stated that health and safety would be one of the many resources that the Gateway Zero Board would consider. The form does not need to be completed for anything classed as business as usual, the form also does not make specific reference to health and safety.
- 9.2 A capital project in respect of improvements to the Winding Wheel was approved in November 2017. It was confirmed that the Corporate Health and Safety Advisor has not yet been consulted.
- 9.3 The recommendation has therefore been repeated in a different format.

	Recommendation
R17	Consideration should be given as to how an early consultation with health and safety in respect of any proposed projects etc. can be guaranteed. (Priority : Medium)

Previous Recommendation 10

The possibility of benchmarking against other local authorities should be considered

- 10.1 This recommendation has not been progressed and has therefore been repeated. As part of the benchmarking process it would be useful to establish the health and safety staffing arrangements of similar sized Council's.
- 10.2 In terms of being able to benchmark it was also noted that very little information is given to the Health and Safety Committee in respect of sickness absence data. The only information detailed in the report is number of stress cases, number of musculoskeletal cases and “other”.
- 10.3 This lack of information makes it very difficult to monitor trends or to establish actions that may help employees return to work.

10.4 Other information produced by neighboring authorities includes:

- Average number of sick days per employee
- Sick days in each quarter compared to the same quarter the previous year
- Split between long term and short term sickness
- Split by service
- Split by age / sex
- Break down of sick days by cause – Musculo skeletal problems, stress/depression/ viral infection/ headache / migraines, hospital treatments, heart / blood pressure etc.

10.5 The S2 forms that are completed gather this information so could be used to focus attention where it is most required and perhaps where employees could be offered more assistance and support.

	Recommendations
R18	The possibility of benchmarking against other local authorities should be considered. Data should be sought from similar sized Council's as to the number and make up of Health and Safety officers employed. (Priority : Low)
R19	Sickness absence data/ occupational health statistics reported to the Health and Safety Committee should be in much greater detail and used to develop initiatives to help and support staff return to work. (Priority : Medium)

Previous recommendation 11

It must be ensured that the Managing Contractor Code of Practice and related procedures must be adhered to. If departmental failings are identified the appropriate reminders / training should be given.

11.1 A working group has been established to review the managing contractors procedures and this has met a couple of times however the review is not yet complete.

	Recommendation
R20	It must be ensured that the Managing Contractors Code of Practice is reviewed, updated and adhered to. If departmental failings are identified the appropriate reminders / training should be given (Priority : High) .

Previous Recommendation 12

The Health and Safety Units budget should be closely monitored with adverse variances in respect of professional fees having already been identified. The Health and Wellbeing Manager should continue to investigate the possibility of the virement/centralization of budgets regarding health and safety expenditure.

- 12.1 Budget reports are distributed to managers on a monthly basis. The latest health and safety budget monitoring report was reviewed and no major variances were noted.

Acknowledgement

1. The auditor would like to thank the Executive Director and the Corporate Health and Safety Advisor for their helpful assistance during this audit.

Assurance Level	Definition
Substantial Assurance	There is a sound system of controls in place, designed to achieve the system objectives. Controls are being consistently applied and risks well managed.
Reasonable Assurance	The majority of controls are in place and operating effectively, although some control improvements are required. The system should achieve its objectives. Risks are generally well managed.
Limited Assurance	Certain important controls are either not in place or not operating effectively. There is a risk that the system may not achieve its objectives. Some key risks were not well managed.
Inadequate Assurance	There are fundamental control weaknesses, leaving the system/service open to material errors or abuse and exposes the Council to significant risk. There is little assurance of achieving the desired objectives.

Internal Audit Report – Implementation Schedule

Report Title:	Health and Safety follow up audit January 2018	Report Date:	26 th January 2018
		Response Due By Date:	16 th February 2018

Recommendations		Priority (High, Medium, Low)	Agreed	To be Implemented By:		Comments
				Officer	Date	
R1	The service redesign of health and safety should be progressed as a matter of urgency. In addition to this consideration should be given to the resource required in the interim period to meet all legislative requirements.	High	Yes	ED and AD HWB when starts (April 18)	June 2018	Initial work undertaken for consideration by new AD in April and reports to Joint Cabinet and Employment & General Committee. Aim for process to be completed and recruitment undertaken by end of June 2018.
R2	A review of all Health and Safety policies, protocols and guidance should be undertaken to ensure that they are up to date and reflect the most current legislation and approved codes of practice.	High	Yes	AD HWB	May 2018	Initial review to be undertaken by H&S specialist (non CBC) and finding reported to panel of CBC H&S specialists
R3	Responses from managers in terms of health and safety training requirements for their staff should be vigorously pursued and checked for accuracy/ reasonableness.	Medium	Yes	Emails issued and CMT reminded	March 2018	Completed but monitoring to continue
R4	Basic health and safety training should be made mandatory for all staff on aspire learning. Other health and safety training identified as mandatory by managers for	Medium	Yes	ED /AD	June 2018	Different categories of users being identified by H&S experts and training requirements being identified for each group

Recommendations		Priority (High, Medium, Low)	Agreed	To be Implemented By:		Comments
				Officer	Date	
	specific roles e.g. asbestos management should also be made mandatory for relevant staff.					
R5	The completion of mandatory health and safety training should be monitored corporately and action taken where it is not completed in a timely manner.	Medium	Yes	MJ	Ongoing	This is now happening but needs to be ongoing with reminders to managers regarding compliance. Resources limiting follow ups at present
R6	Managers need to be reminded that all work related stress absence should be logged on SHE.	Medium	Yes but see note	MJ	Reminder complete. Oct 2018	In the short term yes, but further consideration required to establish the best system to input this data once, rather than entering twice which wastes time, can result in errors and a requirement to reconcile
R7	A reconciliation should be performed between the work related illness information logged on SHE and HR data.	Medium	No – but see note			Need to establish a corporate way of logging this once in one place. If required in two systems then automated data transfer needs to be investigated
R8	That officers are reminded that when there is an incident/ accident that appropriate action should be taken to prevent a re-occurrence and that this should be recorded on the SHE system. There should be some central monitoring to ensure that details are completed in full and correctly.	Medium	Yes	AD	July 2018	Dependency on revised structure and additional capacity, but CMT reminded
R9	Procedures for monitoring and measuring performance in respect of the Corporate Health and Safety Unit should be identified and	Medium	Yes	AD	Pilot from Oct 2018,	Work required to identify relevant measures and pragmatic methods of capturing data. Dependency on resourcing

Recommendations		Priority (High, Medium, Low)	Agreed	To be Implemented By:		Comments
				Officer	Date	
	reported on a periodic basis.				full year April 2019	
R10	It is essential that the programme of health and safety audits are recommenced as soon as possible.	High	Yes	MJ	July 2018	Build in requirement for local plan checks into internal audits. Recommence following revised structure
R11	Premises managers should be reminded that they need to complete the actions arising from their fire risk assessment and update the online system accordingly.	High	Yes	MJ	March 2018	Email issued –complete, but ongoing compliance tests required
R12	A Corporate check should be undertaken in a timely manner to ensure that identified fire actions are being completed.	Medium		MJ	June 2018	Contractor will be engaged again to undertake review
R13	The HSE action plan in respect of 6 Ashgate Road should be reviewed to ensure that all outstanding actions are completed as soon as possible.	High	Yes	ED/ AD	April 2018	
R14	It is essential that the Corporate Asbestos Management Plan is finalised and approved as soon as possible.	High	Yes	ED/AD/ MJ	April 2018	Vast majority of this has been completed. Some access issues preventing full completion, data being loaded onto system and therefore analysis can be undertaken
R15	It is essential that the programme of inspections and surveys of Council – owned non – domestic premises to make a materials	Medium	Yes	ED/AD/ MJ	April 2018	Vast majority of this has been completed. Some access issues preventing full completion, data being loaded onto system and therefore analysis can be undertaken

Recommendations		Priority (High, Medium, Low)	Agreed	To be Implemented By:		Comments
				Officer	Date	
	assessment for asbestos is completed as soon as possible.					
R16	The action plan to prioritise identified asbestos remedial actions should be completed as soon as possible and the associated budget required identified and allocated.	High	Yes	AD	tba	Needs to be undertaken in the context of the outcomes from 13.14.and 15 above
R17	Consideration should be given as to how an early consultation with health and safety in respect of any proposed projects etc. can be guaranteed.	Medium	Yes	AD	April 2018	All proposed projects of a significant scale should be presented to CMT where H&S will be flagged. CMT reminded
R18	The possibility of benchmarking against other local authorities should be considered. Data should be sought from similar sized Council's as to the number and make up of Health and Safety officers employed.	Low	Yes	AD	Sept 2018	To be considered by new AD
R19	Sickness absence data/ occupational health statistics reported to the Health and Safety Committee should be in much greater detail and used to develop initiatives to help and support staff return to work.	Medium	Yes	AD	Dec 2018	Although supportive of the idea, current resources do not allow this. Priority is obtaining a single and accurate data record – see R7. When this is complete and resourcing issues addressed this can be considered
R20	It must be ensured that the Managing Contractors Code of Practice is reviewed, updated and adhered to. If departmental failings	High	Yes	AD	Sept 2018	The code of practice is considered to be adequate but the issue relates to corporate compliance which should be addressed through reminders / warning to CMT and

Recommendations		Priority (High, Medium, Low)	Agre ed	To be Implemented By:		Comments
				Officer	Date	
	are identified the appropriate reminders / training should be given					additional resource to 'police' processes