

INTERNAL AUDIT REPORT

FROM:	Audit and Risk Manager	SUBJECT:	Corporate Health and Safety
то:	Head of Neighbourhood and Assets	DATE:	31 December 2022
C.C.	Chief Executive Deputy Chief Executive Head of Customer and Digital Services Head of People and Communications Compliance Manager Senior Health and Safety Officer Head of Finance Portfolio Holder (Cllr Matecki)		

1 Introduction

- 1.1 In accordance with the Audit Plan for 2022/23, an examination of the above subject area has recently been completed by Jemma Butler, Internal Auditor, and this report presents the findings and conclusions for information and, where appropriate, action.
- 1.2 Wherever possible, findings have been discussed with the staff involved in the procedures examined and their views are incorporated, where appropriate, into the report. My thanks are extended to all concerned for the help and cooperation received during the audit.

2 Background

- 2.1 The Health and Safety at Work etc. Act 1974 is the primary piece of legislation covering occupational health and safety in Great Britain.
- 2.2 Under this Act, the Council has statutory duties that include ensuring that the working environment is safe, that there are no undue risks to health, and that staff and Members are given appropriate information and training.
- 2.3 Whilst the legislative element is focused primarily on employees, the Council also aims to protect the public from exposure to health and safety risks arising from its activities and those of its employees and Members acting on its behalf.

3 **Objectives of the Audit and Coverage of Risks**

3.1 A 'risk-based audit' approach has been adopted whereby key risks have been identified during discussion between the Internal Auditor and key departmental staff and upon review of the Significant Business Risk Register and the relevant Departmental Risk Register.

- 3.2 The management and financial controls in place have been assessed to provide assurance that the risks are being managed effectively. The findings detailed in the following sections confirm whether the risks are being appropriately controlled or whether there have been issues identified that need to be addressed.
- 3.3 In terms of scope, the audit covered the following risks:
 - 1. Potential for fines, compensation claims, prosecution costs, and increased insurance premiums in the event of accidents and incidents.
 - 2. Non-compliance with legislation.
 - 3. Adverse press coverage in the event of accidents and incidents on Council premises or affecting staff working in or out of their normal workplace.
 - 4. Staff confidence in the Council's arrangements is impaired.
 - 5. Inability to demonstrate compliance with legislation and adequate hazard management.
 - 6. Lone working arrangements are inadequate putting staff at unnecessary risk.
 - 7. Inadequate defence against action resulting from safety incidents.
 - 8. Avoidable impacts on staff morale.
- 3.4 These risks, if realised, would be detrimental to the Council with regards to meeting the following corporate objectives, as set out in the Fit for the Future Strategy:
 - Contributing to making the district a great place to live work and visit by ensuring the safety of the Council's staff, operations and buildings.

4 Findings

4.1 **Recommendations from Previous Reports**

4.1.1 The current position in respect of the recommendations from the audit reported in January 2020 was also reviewed. The current position is as follows:

	Recommendation	Management Response	Current Status
1	The review of the Driving for Work Policy should be expedited and the final document rolled out to staff as soon as possible.	The driving for work policy is being reviewed and will be consulted upon in due course	Driving for work policy last updated May 2021 and approved by the Workforce Steering Group.
2	Checks on the eligibility of staff to drive on Council business should be undertaken in a uniform manner across the Council with consideration to rolling out the Driver Declaration Form to all staff.	The driving for work policy is being reviewed and will be consulted upon in due course	Eligibility checks may not be carried out in a uniform manner across the Council. See 4.5.2 for current status and recommendation.

	Recommendation	Management Response	Current Status
3	The role and activity of the Safety Representative Groups should be revisited in light of the failure to re- institute properly attended meetings.	A review of the function of the group, its attendees will be undertaken	A new Health and Safety working group has recently been formed. An up-to-date terms of reference document was available on the intranet to accompany the details of the new working group.

4.2 **Financial Risk**

4.2.1 **Risk: Potential for fines, compensation claims, prosecution costs, and** increased insurance premiums in the event of accidents and incidents.

The relevant insurance is in place and a copy of the certificate is available on the staff intranet. The insurance runs from November 2022 until 2023. An in-depth review of the insurance cover has not been completed, however, as it is covered in the "Insurances" audit.

An accident or incident causing injury or damage could arise from a health and safety failure. A review of claims or potential claims from employees or from accidents at non-housing property was completed. There were 21 claims or potential claims logged within the last five years. Potential claims are noted when the insurance officer is made aware of something that has happened resulting in an injury or damage but a claim has not yet been made against the Council. The details are logged at the time to ensure they reflect the incident accurately if it does become a claim. Where the Council was found at fault or the incident could have been prevented, control measures have been put in place to reduce or remove the opportunity of recurrence.

In one of the cases the procedures were changed when there was almost an accident (i.e. a near miss). Once it was realised that the accident could have been significant, controls were immediately implemented into the procedure to ensure it wouldn't happen again. There has not been an impact on the premiums paid yet as there has not been any large claims made against the Council.

4.3 Legal and Regulatory Risks

4.3.1 **Risk: Non-compliance with legislation.**

There is a health and safety policy statement in place. Last reviewed in May 2020, the policy sets out the responsibility and expectations of the Council to ensure, so far as is reasonably practicable, the health, safety, and welfare at work of all its personnel, and that it does not expose the public to health and safety risks by its activities and those of its personnel. The policy also states that the Council will comply fully with all relevant health and safety legislation. The statement highlights the relevant statutory duty placed upon them by the Health and Safety at Work Act 1974 supported by various regulations and

approved codes of practice. The Council benchmarks its health and safety systems against the HSE's "Managing for Health & Safety" (HSG65) model.

Although the policy sets out the responsibilities of staff and identifies key personnel as responsible for service areas and actions, the roles identified are not up-to-date and refer to historic Head of Service positions.

Recommendation

The health and safety policy statement should be reviewed and updated with current information from the organisational structure agreed in October 2022.

The Policy sets out the following responsibilities:

- All employees to co-operate with supervisors and managers to chieve a healthy and safe workplace and to take reasonable care of themselves and others.
- Union safety representatives functions as defined with "The Safety Representatives and Safety Committees" Regulations 1977" and the associated codes of practice and guidance notes.

The policy is shared with employees and training provided highlights the responsibilities of staff. There is also Union representation on the Health and Safety Working Group as prescribed in the regulations.

The policy is in line with relevant legislation including:

- Health and Safety at Work Act 1974
- COSHH (Control of Substances Hazardous to Health)
- Employers Health and Safety Policy Statements Regulations 1975/1584
- Health and Safety Regulations 1996 and 1992 (2002, 2013 and 2017 amendments)
- Health and Safety (first aid) 1981
- Management of Health and Safety at Work Regulations 1999
- Manual Handling Operations Regulations 1992
- RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- The Workplace (Health, Safety and Welfare) Regulations 1992
- Electricity at Work Regulations 1989
- Gas Safety Regulations 1996
- Lifting Operations and Lifting Equipment Regulations 1998
- Management of Health and Safety at Work and Fire Precautions Regulations 2003

The Council's compliance with the above legislation is included within the audit of Health and Safety Compliance of Council Buildings and therefore not been reviewed in this audit.

4.4 **Reputational Risks**

4.4.1 Risk: Adverse press coverage in the event of accidents and incidents on Council premises or affecting staff working in or out of their normal workplace.

There is no reporting function on the health and safety page on the intranet. The details of two first aiders are included on the intranet, although one of these members of staff infrequently works at Riverside House (RSH). There is an additional member of staff who is first aid trained and is often in the building. This additional member of staff is listed on posters found around the building but not on the first aiders link. The location of the available on-site first aiders is also incorrect as it provides working locations that are pre-COVID.

Under the support teams listed there is a RSH support button but the link is broken.

Recommendation

The links and information available to staff on the intranet should be reviewed to ensure it is up to date and relevant.

Previously there was a link for staff to report building issues and health and safety concerns under the RSH button. This has been moved into the building support area on the intranet.

Staff can report accidents or injury using the Assessnet portal. Reports will then be forwarded to the Insurance and Risk Officer and relevant facility manager to resolve. Training is being developed for staff on how to use the Assessnet portal. There is an updated accident policy due to be circulated which provides guidance on how to report accidents, incidents and near misses. This is expected to be completed within the next few months.

The Media team also has a response procedure in place should there be an issue that could impact the reputation of the Council. Depending on the severity of the health and safety issue, they could release a statement to the press or post it on the Council's social media accounts, update the website or produce posters. Before issuing a statement or any form of response, they would liaise with the Democratic Services Manager and Deputy Monitoring Officer to ensure the wording was accurate.

There is a code of conduct in place which was last updated in 2019. The code contains a health and safety section which sets out the responsibility of the Council and employees. It encourages staff to take reasonable care of themselves and others and use protective equipment where provided. If they have concerns, staff are advised to discuss them with their manager or a senior person with responsibility for the issue.

The health and safety advice and information in the code of conduct is very office focused. This is not unsurprising as it was written before COVID when hybrid working hadn't been considered.

Recommendation

The health and safety section of the code of conduct should be reviewed to incorporate relevant hybrid health and safety concerns.

4.4.2 **Risk: Staff confidence in the Council's arrangements is impaired.**

A fire drill was recently carried out that identified a number of issues which has prompted a review of the current procedure in place. The procedure followed has not been re-written to incorporate hybrid working so still lists the Heads of Service as responsible for some of the tasks including the provision of fire wardens. As the Heads of Services are infrequently on site at RSH the Facilities Manager has taken on this responsibility.

There are a total of seven trained fire wardens at RSH. These staff have been selected as they mostly work from the building rather than at home or at another location. In the event of them not being on site they liaise with each other, providing cover and ensuring area sign-in books are collected.

The sign-in books are, at present, dotted around the building with no central location to collect them from in an emergency. As the fire procedures are being reviewed it may be worth considering the location of these to allow quick and easy collection of them in an emergency, such as at the staff entrance, and perhaps allocating the collection of them to another staff member, allowing the wardens to focus on clearing their designated area.

There have been signage updates that have been completed and put in place to accommodate the hybrid way of working. The signs have been printed in a large format and placed at various points around the building. They list clear instructions to follow in case of fire. There are also maps. However, these need attention as many are missing the "you are here" locator dots. This has been raised with the Facilities Manager who will be ensuring they are added to the maps to help staff and visitors navigate their way out of the building in an emergency.

As changes are being made to the procedure to accommodate / incorporate hybrid working, no recommendation has been made at this time.

There are three staff members trained in lift procedures to release trapped staff members and visitors. If they are unavailable or not on site, the lift has an emergency call button which transfers to Acorn Court where an operator will contact the lift contractors who will attend to release the trapped person/s. The lift release team receive training on an annual basis. Their contact details are provided in the lift so the staff member or visitor can contact them directly.

As highlighted above, there are two staff members identified as first aiders who frequently work from RSH. Lists, found near to exits and stair wells on all floors, provide the names of the fire wardens for that floor or area and the relevant first aiders.

There are HSE posters around the building, many of which are placed in kitchens. These need reviewing / removing as the information may be out of

date. The staff contacts provided are not current so the information on them may also need revising.

Advisory

The HSE health and safety guidance posters may need to be reviewed to ensure the information and contact details provided are current and up to date.

4.5 Health and Safety Risks

4.5.1 **Risk: Inability to demonstrate compliance with legislation and adequate hazard management.**

By ensuring staff receive appropriate health and safety training the Council can support compliance with legislation and demonstrate hazard management. Health and safety awareness is provided to all staff as part of the induction training. The training includes manual handling, fire safety and general workplace hazards. Although no refresher training is given, staff are able to book onto additional or refresher training through I-Trent (payroll and leaning system), with approval from their line manager.

The Learning and Development officer said that, although most new starters have attended the training, there are a few who haven't as they were unavailable for the training sessions. They and their managers will receive reminders that the training needs to be completed.

The Facilities Manager provides additional, more specific, training for IOSH – working safely and managing safely. Both training courses have handbooks for staff with information, reminders and guidance available on the intranet. This training covers hazard management and working at height.

In addition to the training provided, there is a health and safety page for staff on the intranet. The page provides links to various policies, procedure documents and information about the Internal Health and Safety Group.

4.5.2 **Risk: Lone working arrangements are inadequate putting staff at unnecessary risk.**

There is an updated lone worker policy in place, approved by the newly formed Health and Safety Working Group and shared with the senior management team on 9 November 2022. The updated policy covers staff who work from home and other locations under the hybrid way of working.

Like the previous policy, up-to-date ICE ('in case of emergency') lists and emergency contacts are a mandatory requirement. ICE lists should be password-protected with access provided to all supervisors and above within each service area.

Upon review of a sample of four shared drives it was identified that, where access was provided, only one service area of the four had an ICE list in place.

Recommendation

Heads of Service should ensure there are ICE lists in place to comply with the lone worker policy.

Emergency contacts are expected to be input onto I-Trent by staff and kept up to date. At the last review completed in July 2022 there were 86 staff members who had not provided any emergency contact details. 40 of these employees sat within one service area (NB under the structure adopted in October 2022 this service area no longer exists).

Recommendation

Line managers should ensure that staff input emergency contact details onto I-Trent.

Before the lone worker policy was approved and shared, a draft copy was provided for the audit. It was noted that the draft didn't cover guidance for staff working in or visiting derelict buildings and sites. This was raised with the Senior Health and Safety Officer who updated the document accordingly.

The requirements for staff who are provided with work-issued mobile phones are included in the policy. Phones should be charged and mobile numbers displayed with the officer information on the staff intranet. From a list provided by ICT relating to contract renewal in January 2022 a sample of 152 work mobile phone users was reviewed. 84 had listed a mobile number on the staff search, three of which had a number listed that was different to the issued device. 64 had no work mobile number posted on staff search but were listed as having a work issued mobile phone. Only 55% of staff in the sample had their number listed. There are around 215 work mobile phones issued to WDC staff.

Recommendation

All staff issued with a mobile phone should be reminded to update the details on the staff search function in line with the lone worker policy.

The policy reinforces the use of solo devices, whiteboards and outlook calendars when working elsewhere, especially in derelict or unmanned buildings. Solo devices have been allocated and are available to staff that have been identified as having a need for them based on risk assessment and their duties.

The Council has a driving for work policy, approved by the Workforce Steering Group in May 2021. The policy references various relevant acts such as the Health & Safety at Work Act 1974, Road Traffic Act 1988, and Management of Health and Safety at Work Regulations 1999. The policy applies for both WDCowned vehicles and personal vehicles when driven for work purposes.

The policy clearly sets out the responsibilities of the employee and their line managers. However, there is no information provided in the document regarding the monitoring performed to ensure Council employees have provided the required documents. The policy is also missing the appendices A-E referred to within the policy.

Recommendation

The appendices listed should be included in the Driving for Work policy.

There is a section within the policy which states that, to comply with legal duties, staff who use their own vehicles should provide basic documentation to be checked on an annual basis. This includes the employees driving licence, MOT certificate and insurance documents showing that the vehicle is insured for business purposes. These documents should be shown to the employee's manager who is then responsible for logging the details on I-Trent. This applies to any staff members who claim mileage for "work" miles driven.

As this helps the Council comply with legal duties there should be some form of monitoring or reporting in place to ensure that Council staff have the required insurance and MOT certificate for their vehicle.

Advisory

A review into the functionality and reporting features of I-Trent should be completed to see if monitoring and reporting could be implemented in regard to driver document information which has been uploaded to the system.

4.6 **Other Risks**

4.6.1 **Risk: Inadequate defence against action resulting from safety incidents.**

Health and safety issues and concerns can be reported via the "report a repair" button found within building support on the intranet. Building support can be accessed through the RSH button. The Facilities Manager plans to include the reporting button within the RSH page for ease of finding when staff wish to report something.

The reporting button is not specific to RSH and allows the user to report concerns for a number of other corporate buildings. No reports have been received within the last two years.

Risk registers allow staff and managers to identify potential health and safety risks and review the controls in place to help minimise or remove the risk entirely. However, the current risk registers are not available on the intranet. Those on the intranet no longer align with the present structure, predating the COVID pandemic and they do not include up-to-date and relevant risks. The updating of risk registers is being addressed via a recommendation in a separate report, due to be completed by December 2022.

A copy of the Assets 2021 risk register was provided for the purpose of the audit. The register identified the following risk:

• Failure to protect staff, Councillors, contractors and customers from physical Health and Safety Risks

Appropriate controls are in place to reduce or remove risk such as regular testing and checks of equipment, accident and incident reporting / monitoring procedures, training, inspection regimes and insurance.

As covered above in para 4.5.1, staff receive health and safety training as part of the new starter mandatory training. Lone worker training is also included as part of the new starter package. Where it is identified that staff could be working with hazardous substances, additional COSHH training is provided. If there are any updates to health and safety requirements this would be circulated to staff via a big button on the intranet and / or meta pop ups.

The identification of relevant risks in risk registers and the training provided to staff helps to prevent safety incidents which protects the Council from litigation.

4.6.2 **Risk: Avoidable impacts on staff morale.**

A walk-around was performed in RSH, observing any potential health and safety issues and the controls in place to minimise or remove the risk of accidents, injury and damage. Where there were risks identified that couldn't be repaired there were controls in place, such as posters warning not to use the item, or the correct way to use items.

Some health and safety issues are identified internally before they are reported. These include things like lack of heating. When this happens staff are notified via the intranet and updated once the repair or fix has been completed.

There are COVID measures, restrictions and guidelines still in place at RSH. This includes restrictions on the number of people in a meeting room, plastic screens to separate desks, hand sanitising stations and guidelines of when to stay away from the office if you are unwell. Whilst these controls are no longer required according to HSE, the auditor was advised that a decision had been made by the Ways of Working Group to keep them in place at RSH.

The meeting room restrictions mean some teams are too large to meet in the meeting rooms so either they do not meet as a team or they have been using 'The Space'. The Space has been designed as a staff break area or informal working space. For staff wanting to use it as a break area, allowing them to leave their desk, this could be uncomfortable or impossible to do when the area is used as a meeting space for larger meetings. This may impact staff morale as it means they can't use the space as intended to get away from their desk for a break.

When reviewing feedback and comments made by staff at various meetings, face-to-face conversations and comments made on Rumour Mill (anonymous staff questions / comments platform) it is clear that, for some staff, the restrictions in place and the general condition of the building (RSH) are not helping to motivate them to attend the office to interact with other staff. The Ways of Working group have advised that there has been a steady increase in staff using meeting rooms and subsequently desks from when the office first opened up in 2021, although not as significantly as expected.

A review of these restrictions and improvements to the building balanced against the health and safety rationale may, therefore, help to encourage staff to use RSH (or the locations to be used when the Council vacates the current offices), thus improving the environment for staff to meet in person where required or chosen to do so to ensure the 'social glue' is maintained. If staff cannot work from home for a variety of reasons there is a desk available for them to work from on a permanent basis. Staff are also actively encouraged to discuss any issues with their manager and provide feedback through staff surveys.

Advisory

It may be useful to consider the above points and concerns when reviewing potential locations for the new offices.

5 Summary and Conclusions

5.1 Section 3.3 sets out the risks that were being reviewed as part of this audit. The review highlighted weaknesses against the following risks:

Risk 2 - Non-compliance with legislation.

Risk 3 - Adverse press coverage in the event of accidents and incidents on Council premises or affecting staff working in or out of their normal workplace. Risk 6 - Lone working arrangements inadequate putting staff at unnecessary risk.

- 5.2 Further 'issues' were also identified where advisory notes have been reported. In these instances, no formal recommendations are thought to be warranted, as there is little to no risk if the actions are not taken.
- 5.3 In overall terms, however, we can give a SUBSTANTIAL degree of assurance that the systems and controls in place in respect of Corporate Health and Safety are appropriate and are working effectively to help mitigate and control the identified risks.

Level of Assurance	Definition		
Substantial	There is a sound system of control in place and compliance with the key controls.		
Moderate	Whilst the system of control is broadly satisfactory, some controls are weak or non-existent and there is non-compliance with several controls.		
Limited	The system of control is generally weak and there is non-compliance with controls that do exist.		

5.4 The assurance bands are shown below:

6 Management Action

6.1 The recommendation arising above is reproduced in the attached Action Plan (Appendix A) for management attention.

Richard Barr Audit and Risk Manager

Appendix A

Action Plan

Internal Audit of Corporate Health and Safety – November 2022

Report Ref.	Risk	Recommendation	Rating*	Responsible Officer(s)	Management Response	Target Date
4.3.1	Non-compliance with legislation	The health and safety policy statement should be reviewed and updated with current information from the organisational structure agreed on October 2022.	Low	Senior Health and Safety Officer	This was updated in March 2022 and reviewed again following the recent restructure when Corporate internal Health and Safety responsibility was transferred to the Head of Service in the Assets team. An updated copy has been shared.	Completed
4.4.1	Adverse press coverage in the event of accidents and incidents on Council premises or affecting staff working in or out of their normal workplace.	The links and information available to staff on the intranet should be reviewed to ensure it is up to date and relevant.	Low	Senior Health and Safety Officer and Facilities Manager	The links are being reviewed and updated or removed as appropriate.	April 2023
		The health and safety section of the code of conduct should be reviewed to incorporate relevant hybrid health and safety concerns.	Low	Head of People and Communications	The agile working policy is currently being reviewed; once completed and approved the code of conduct will be updated to be brought in line with it.	December 2023

Report Ref.	Risk	Recommendation	Rating*	Responsible Officer(s)	Management Response	Target Date
4.5.2	Lone working arrangements are inadequate putting staff at unnecessary risk.	Heads of Service should ensure there are ICE lists in place to comply with the lone worker policy.	Low	Senior Health and Safety Officer	Although staff have been advised to do this there seems to be a reluctance with some in providing the information. HR have advised that the request for the information cannot be mandatory so the lone worker policy will be updated to reflect this.	March 2023
		Line managers should ensure that staff are inputting emergency contact details onto I-Trent	Low	Senior Health and Safety Officer	See above. Further requests to staff will be issued advising them to provide this information.	March 2023
		All staff issued with a mobile phone should be reminded to update the details on the staff search function in line with the lone worker policy.	Low	Head of Customer and Digital Services	All staff mobile phones are due to be replaced by the end of the next financial year, and as part of that replacement process, records of staff numbers on the intranet will be updated.	March 2024
		The appendices listed should be included in the Driving for Work policy	Low	Senior Health and Safety Officer	These have now been attached to the policy.	Completed

* The ratings refer to how the recommendation affects the overall risk and are defined as follows:

High: Issue of significant importance requiring urgent attention.

Medium: Issue of moderate importance requiring prompt attention.

Low: Issue of minor importance requiring attention.