



Internal Audit Report

FINAL

Chief Executive's Unit

Review of Health & Safety

January 2011

1 INTRODUCTION

This report has been prepared as a result of the Internal Audit review of Health & Safety, Chief Executives Department as part of the 2010/2011 Internal Audit programme.

As part of the Council's modernisation programme Health & Safety has recently been brought together to create one centralised resource. Health & Safety staff who previously worked for the Departments is now part of the centralised resource, along with Civil Contingency staff and training staff from Community Services. The centralised resource consists of 14 staff, made up of a Health & Safety Manager, Assistant Health & Safety Manager, 3.5 Health & Safety Officers, a Health & Safety Assistant, a Health Improvement Officer, Civil Contingency staff, 1 Moving & Handling Trainer, 1 Personal Safety Trainer and an Administrative Assistant.

2 AUDIT SCOPE AND OBJECTIVES

The scope of this review is limited to the Internal Control Questionnaire (ICQ) issued to the relevant department contact for completion.

The broad objectives of the review were to ensure:

- There are up to date Corporate Health & Safety Policies and Plan that ensure compliance with statutory requirements and that they are reviewed on a regular basis;
- There is an up to date Corporate Health & Safety Training Plan that is reviewed on a regular basis to take account of new legislation;
- There is consultation with departments and their services to identify their training requirements;
- There is a Corporate Health & Safety Training Programme that reflects the needs of the services and that it is delivered in accordance with agreed timescales;
- There are adequate Corporate/Departmental Training Records and that they are kept up to date.
- There are Corporate and Departmental processes to ensure that at an operational level Corporate Health & Safety Plan actions are implemented.
- There are Corporate and Departmental processes to ensure that performance management records reflect Health & Safety Planning.
- There is a proportionate and risk based Corporate and Departmental approach to Health & Safety testing in place; and that Health & Safety tests and associated actions are verified, recorded at both departmental and corporate level.

3 RISK ASSESSMENT

As part of the audit process and in conjunction with our Systems Based Auditing, ICQ approach, the risk register was reviewed to identify any areas that needed to be included within the audit.

SR 25 Failure to comply with Health & Safety Legislation.

4 CORPORATE GOVERNANCE

There are no Corporate Governance issues to be reported as a result of this audit.

5 MAIN FINDINGS

The Council has a well defined Corporate Policy on Health & Safety and this is supported by underlying policies for specific legislative requirements. The Council has recently gone through a departmental and service modernisation exercise and a revised Health & Safety Plan has been prepared for approval.

All Departments have Health & Safety Plans in place and these are being monitored and updated to reflect the recent modernisation of Departments.

Officers with responsibility for Health & Safety previously located within Services now form part of a centralised Health & Safety Team.

Health & Safety training courses are currently organised by Corporate Health & Safety staff.

Previously Health & Safety information was located on the Councils' Public Folders. This information has now been relocated to the Employee Information section on the Councils 'Hub'.

6 RECOMMENDATIONS

11 recommendations were identified as a result of the audit, 4 are high priority, 4 are medium priority and 3 are low priority. The recommendations are shown in the action plan attached at Appendix 2 and has been compiled with the co-operation and agreement of the Supervisor/Manager.

Internal Audit considers that, in an effort to improve the quality of information, monitoring and control, the recommendations should be implemented in accordance with the agreed action plan. Management have set achievable implementation dates and will be required to provide reasons to the Audit Committee for failure to implement within the agreed timescale. Where management decides not to implement recommendations it must evaluate and accept the risks associated with that decision.

A system of grading audit findings, which have resulted in an action, has been adopted in order that the significance of the findings can be ascertained. Each finding is classified as fundamental, material or minor. The definitions of each classification are set out below:-

High - major observations on high level controls and other important internal controls. Significant matters relating to factors critical to the success of the objectives of the system. The weakness may therefore give rise to loss or error;

Medium - observations on less important internal controls, improvements to the efficiency and effectiveness of controls which will assist in meeting the objectives of the system and items which could be significant in the future. The weakness is not necessarily great, but the risk of error would be significantly reduced if it were rectified;

Low - minor recommendations to improve the efficiency and effectiveness of controls, one-off items subsequently corrected. The weakness does not appear to affect the ability of the system to meet its objectives in any significant way.

7 AUDIT OPINION

Based on the findings we can conclude that there are robust Health & Safety Plans and Policies in place.

Recommendations arising from the audit work should be implemented by the nominated responsible officer within the agreed timescale. Recommendations not implemented will require explanation to the Audit Committee. This could lead to findings being reported in the Internal Control Statement produced by the Council in support of the Annual Accounts.

8 ACKNOWLEDGEMENTS

Thanks are due to the Health & Safety Manager and his staff for their co-operation and assistance during the Audit and the preparation of the report and action plan.

Argyll & Bute Council's Internal Audit section has prepared this report. Our work was limited to the objectives in section 2. We cannot be held responsible or liable if information material to our task was withheld or concealed from us, or misrepresented to us.

This report is private and confidential for the Council's information only and is solely for use in the provision of an internal audit service to the Council. In any circumstances where anyone other than the Council accesses this report it is on the strict understanding that the Council will accept no liability for any act or omission by any party in consequence of their consideration of this report or any part thereof. The report is not to be copied, quoted or referred to, in whole or in part, without prior written consent.

APPENDIX 2 ACTION PLAN

No.	FINDINGS	PRIORITY	RECOMMENDATION	RESPONSIBLE OFFICER	IMPLEMENTATION DATE
1	The Council has a well defined Corporate Policy on Health & Safety and this is supported by underlying policies on specific legislative requirements. There is a Corporate Health & Safety Plan 2008/2011 in place and Internal Audit was advised that a revised Plan 2011/2013 which reflects the re-structuring of Services has been prepared for approval.	High	The Corporate Health & Safety Plan 2011/2013 should be submitted to the Strategic Management Team for approval at the next available meeting.	Head of Improvement and HR	31 May 2011
2	Departments have Health & Safety Plans in place that are incorporated into the Corporate Health & Safety Plan 2008/2011. The current Departmental Plans, included in the Corporate Health & Safety Plan 2008/2011, no longer reflect the current structure.	Medium	Departmental Health & Safety Plans should be reviewed in line with the Health & Safety Plan 2011/2013 and consideration should be given as to how Corporate Health & Safety will support the Departments in producing these Plans. Once reviewed these should be included in the Corporate Health & Safety Plan.	Head of Improvement and HR	30 June 2011

No.	FINDINGS	PRIORITY	RECOMMENDATION	RESPONSIBLE OFFICER	IMPLEMENTATION DATE
3	Officers with responsibility for Health & Safety previously located within Services now form part of a centralised Health & Safety Team which comprises a health and safety manager, a health and safety assistant manager, 3.5 health and safety officers, 1 H&S assistant, 1 moving and handling trainer, 1 personal safety trainer (seconded) and 1 admin assistant. Departments do not have designated officers responsible for Health & Safety.	High	Consideration should be given to allocating a link Health & Safety Officer from the centralised Corporate Health & Safety team to each Department. These officers should support the Departments in strategic matters relating to Health & Safety. Officers should attend Departmental Management Team meetings to provide Health & Safety advice, report on accidents, procedures and Health & Safety trends for the Department.	Head of Improvement and HR	30 June 2011
4	Internal Audit was provided with a list of staff within the Council that hold Health & Safety qualifications, however it was found to be out of date	Medium	Corporate Health and Safety should, in consultation with Departmental Management Teams define the expected role of IOSH and NEBOSH qualified staff within the Departments and should identify and circulate to all Departments a list of staff trained with IOSH and NEBOSH Health & Safety certificates for review and updating.	Health and Safety Manager	29 July 2011

No.	FINDINGS	PRIORITY	RECOMMENDATION	RESPONSIBLE OFFICER	IMPLEMENTATION DATE
7	Reporting Injuries, Diseases and Dangerous Occurrences (RIDDOR – Reportable to the Health & Safety Executive) is the only type of information recorded in Corporate HR Information on Pyramid.	Medium	Consideration should be given to recording all Accidents, Diseases and Dangerous Occurrences on Pyramid, whether internally or externally reportable with reduction targets for such incidents being set and performance measured against these targets.	Health and Safety Manager	30 June 2011
9	The reporting of Accidents, Diseases and Dangerous Occurrences is detailed in Policy number PER/GEN 3. Corporate Health & Safety maintain a spreadsheet of all Accidents, Diseases and Dangerous Occurrences.	High	The centralised Health & Safety Team should, as a priority, carry out an analysis of all records held for internally and externally reportable Accidents, Diseases and Dangerous Occurrences in order to establish whether there is any significant variances from the previous year and or any missing information and report to Departmental Management Teams.	Health and Safety Manager	30 June 2011

No.	FINDINGS	PRIORITY	RECOMMENDATION	RESPONSIBLE OFFICER	IMPLEMENTATION DATE
10	On enquiry Internal Audit found that not all Departments are following the procedure for reporting of Accidents, Diseases and Dangerous Occurrences as detailed in Policy number PER/GEN 3 resulting in inaccurate information being submitted to the Departmental Management Team.	High	The centralised Health & Safety Team should, as a priority, circulate to all Departments a reminder that PER/GEN 3 must be followed and that Departments as a priority must send any outstanding PER/GEN 100C Forms to Health & Safety.	Health and Safety Manager	31 May 2011
11	One Department has failed to send copies of PER/GEN 100C Forms to Health & Safety.	Medium	Consideration should be given to developing and organising a training event for all Line Managers which includes information on their responsibilities for Health & Safety.	Health and Safety Manager/Improvement and OD Manager	31 August 2011