



BRISTOL INTERNAL AUDIT

Internal Audit Follow-up Report: Health & Safety Processes

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Executive Summary

SCOPE SUMMARY	FOLLOW UP OF MANAGEMENT ACTIONS
<p>The objective of this assignment was to review and assess progress with the agreed management action plan arising from the previous Internal Audit review of Managers' Health and Safety (H&S) Self-Assessment (CHaSMs) Process, dated 6 June 2021.</p> <p>The scope was revised to exclude any arising or additional issues and specifically excluded the following areas:</p> <ul style="list-style-type: none"> • Discussion with individual service managers about the revised Health & Safety Policy Statement and their understanding of it • Analysis of requests for Health & Safety training initiated by service managers • An assessment of the work programme of the Corporate Health & Safety Team. 	<p>This report reviews progress with the implementation of agreed management actions from the "Managers' Health and Safety (H&S) Self-Assessment (CHaSMs) Process" Internal Audit Report dated 6 June 2021.</p> <p>Of the one high priority and five medium priority findings found that management actions in respect of one medium priority finding had been implemented at the time of the audit fieldwork up to April 2022.</p> <p>This related to publishing the revised Health and Safety Policy Statement (revised H&S Policy) which was due in July 2021. The revised H&S Policy was published in January 2022; the five-month delay was due to slow progress in the governance over its approval.</p> <p>There has been progress in implementing the management actions relating to the remaining five medium and high priority findings. Revised "due dates" for these management actions have been agreed with the Head of Safety, Health, and Wellbeing (HoSHW). These are included in the "Follow-up of Management Actions" table below, with management providing further updates as at September 2022.</p> <p>Internal Audit reviewed the revised H&S Policy and concluded it accords with best practice from the HSE guide HSG65 - 2013. This adopts the "Plan, Do, Check, Act" approach.</p> <p>The revised H&S Policy provides a useful starting point for H&S across the Council; there is a need for this to be embedded and awareness of H&S increased for all staff. The HoSHW and Corporate Health & Safety Team (CHST) are taking the lead. Internal Audit acknowledge that the HoSHW and CHST are facilitators and advisors and that embedding H&S across the Council requires the commitment of all managers and staff.</p> <p>Internal Audit have agreed with the Director: HR & Organisational Development that further Internal Audit work will be undertaken in Quarter 4 of 2022/23.</p>

Follow-up of Management Actions

Audit Finding	Summary of Key Agreed Management Actions and Original Due Dates	Status, Revised Due Date	Internal Audit Progress Comments, up to April 2022 and Further Management Update
<p>1. A sample of managers, at all levels, were interviewed as part of the audit. These discussions identified poor understanding in a few areas:</p> <ul style="list-style-type: none"> • A lack of clarity of how management of H&S risks works at the council and the role of the Health and Safety Team and Advisors • Confusion as to responsibilities and ownership for H&S risks at both corporate level and within Directorates and service level • Ownership of H&S risks and resolving 'risk incidents' • The role and authority and governance arrangements of the Directorate H&S committees. <p>Lack of clarity from managers on responsibilities for resolving H&S issues when identified, particularly in relation to facilities management.</p> <p>Poor understanding of governance structures, roles and responsibilities could result in H&S risks going unaddressed. It is acknowledged that a new governance framework has been agreed by CLB which should support understanding by managers once rolled out.</p>	<p>The Health and Safety policy is subject to final consultation with EDMs and Trades Unions and once agreed it will be published on the source with access through SharePoint.</p> <p>Original Due Date: July 2021</p>	<p>Completed</p>	<p>The revised H&S Policy was approved and signed by the Chief Executive and Elected Mayor, dated 1 January 2022. It is now published on SharePoint.</p> <p>The five-month delay was due to delays in the governance over its approval. Other actions depended on the revised H&S Policy being published. Consequently, deadlines slipped and needed to be revised.</p> <p>At EDM meetings during January 2022 the revised H&S Policy was presented along with a summary of the new Governance requirements.</p> <p>Management Update as at September 2022</p> <p>Members of CHST now regularly attend EDM's and provide advice and support for managers when requested.</p>
	<p>Targeted briefings will be delivered to managers to ensure the arrangements are understood and requirements/accountabilities are understood.</p> <p>Original Due Date: July to October 2021</p>	<p>Commenced April 2022 onwards and ongoing</p>	<p>Following the late publication of the revised H&S Policy and to align with the current restructuring and "succession planning", the targeted briefings for managers have now started.</p> <p>Management Update as at September 2022</p> <p>The steady change in senior management due to "succession planning" is ongoing. Where timely, the CHST has provided training for</p>

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	<p>Follow up monitoring will be completed by the CHST to ensure requirements are embedded.</p> <p>Quarterly updates and progress to EDMS will be provided HoSHW.</p> <p>Original Due Date for monitoring: October 2021 to March 2022</p>	Commenced April 2022 onwards and ongoing	<p>newly in post managers on health & safety.</p> <p>Interactions between the CHST and EDM's were delayed until the revised H&S Policy was published in January 2022.</p> <p>At EDM's during January 2022 the revised H&S Policy was presented along with a summary of the new Governance requirements.</p> <p>The CHST has begun advising managers and will provide ongoing updates on progress to EDMs</p> <p>September 2022 update</p> <p>Members of CHST now regularly attend EDM's and provide advice and support for managers when requested.</p>
<p>2. Several managers at all levels confirmed that mandatory training has not been completed. Reasons sighted for this are:</p> <ul style="list-style-type: none"> • Inability to book training as courses are fully booked • Inability to track who has had the training and when refresher training is due • Unclear understanding of the requirements for mandatory face to face training v e-learning training. <p>Failure to complete the training could result in managers not understanding their responsibilities and unable to discharge their H&S duties effectively.</p> <p>Implementation of a new 'Learning Hub' from June 2021 should support managing completion of training going forward for all mandatory training, including that relevant to H&S.</p>	<p>A training needs analysis will be complete and training requirements revised to identify core, local and specialist training requirements.</p> <p>Original Due Date: September 2021</p> <p>Refresher training will also be developed. The learning hub will provide a means to record mandatory training. Research will be completed to determine if all H&S can be recorded and monitored.</p> <p>Original Due Date: September 2021</p> <p>All training provided will require aims, objectives and outcomes with a follow up to determine the difference the training has made to improve H&S arrangements.</p> <p>Original Due Date: September 2021</p>	<p>Commenced April 2022 onwards and ongoing</p> <p>Commenced April 2022 onwards and ongoing</p> <p>Commenced April 2022 onwards and ongoing</p>	<p>The HoSHW recognised that documents and training materials available on SharePoint were piecemeal and largely generic.</p> <p>Specialised training requirements have not yet been evaluated or requested formally by the functions.</p> <p>Early work on preparing "risk profiles" specific to functions has started.</p> <p>Internal Audit noted there were training requests contained in the action plans submitted following the CHaSMs returns due and received on and after November 2021.</p> <p>Internal Audit notes the view of the HoSHW that the CHST's role is not to propose or initiate training</p>

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			<p>requirements, but to provide advice and exceptionally facilitate any training events.</p> <p>Management Update as at September 2022</p> <p>Some work has taken place in improving the Health & Safety documents available on SharePoint. This is an ongoing task.</p>
<p>3. CHaSM is a compliance tool used by managers to submit H&S returns twice a year. The return prompts management to review H&S arrangements in several key areas to confirm arrangements are in place and effective. Where this is not the case, actions required should be recorded and completed.</p> <p>A 100% return rate is anticipated for CHaSMs. Review of returns submitted to the central safety team has confirmed a good level of completion of the CHaSM across the Resources and the Growth and Regeneration Directorates. However, completion levels in the People directorate are lower with approximately 50% of returns expected completed.</p> <p>Reasons sighted for non-completion of CHaSMs were irrelevance to operational area, lack of reminders to complete, it is time consuming and adds little value as a tool to help manage H&S risks. (See finding 4 below).</p>	<p>CHaSMs will in future be completed annually resulting in an annual action plan of improvement. Progress against the action plan will be reported to quarterly EDM's and other groups (e.g., Health & Safety Committee). This will be included in the briefing to managers.</p> <p>EDM's will be responsible to chase non-completion of CHaSMs and understand H&S risks related to non-completion</p> <p>Original Due Date: Not recorded</p>	<p>November 2022</p>	<p>A simplified CHaSMs with considerably less questions (around 75% fewer) will be available for the November 2022 returns.</p> <p>Chief Executive previously stated nothing less than 100% of returns expected. In November 2021, 87% of returns were achieved. No Directorate was 100% compliant, with G&R best at 81%.</p> <p>Management Update as at September 2022</p> <p>A revised CHaSMs has been finalised. This will be circulated to managers with health and safety responsibilities during November 2022.</p> <p>The revised CHaSMs will be promoted to managers and at EDM's with an expectation of 100% returns.</p>
<p>There is inconsistency in respect of who completes the CHaSM with some managers completing on behalf of a bigger team and others completed by line managers. Where line managers are not responsible for completion of the CHaSM, there is a risk that the information provided is not accurate and inclusive of all teams covered. This could result in 'missing' a H&S risk.</p>	<p>The HoSHW will drive the new way of working and work with EDM's to enable effective monitoring.</p> <p>Original Due Date: September 2021</p>	<p>Commenced April 2022 onwards and ongoing</p>	<p>The accompanying new Governance and H&S Strategies place monitoring responsibilities for any action plans to improve Health & Safety with EDM's and their Directorate. Action plans are expected to be a permanent agenda item for EDM's and included in quarterly meetings.</p>

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			<p>The CHST will have a support and advisory role for managers with Health & Safety responsibilities and the associated action plans for improvements.</p> <p>Management Update as at September 2022</p> <p>Members of CHST now regularly attend EDM's and provide advice and support for managers when requested</p>
	<p>Quarterly reports will be provided to EDMs and Health & Safety Committees.</p> <p>Original Due Date: September 2021</p>	<p>Commenced April 2022 onwards and ongoing</p>	<p>In part, using monitoring generated through EDM's, the HoSHW will produce quarterly reports to feedback to the EDM's and advise the various Health & Safety Committees.</p> <p>The feedback will also include accident records from the new Accident and Incident Reporting System [AIRS].</p> <p>Management Update as at September 2022</p> <p>Members of CHST now regularly attend EDM's and provide advice and support for managers when requested</p> <p>The new AIRS system went live in April 2022. The system has now overcome initial implementation issues.</p>
<p>4. Managers reported they were unclear on some aspects of the CHaSM system and found it insufficient for supporting them in delivering their H&S responsibilities. A number of those interviewed viewed the exercise as tick box rather than an effective tool for managing H&S risk:</p> <ul style="list-style-type: none"> The system is web based and once returns are completed no record is available to the 	<p>There will be a new CHaSMs process, with training given to managers with a health & safety responsibility.</p> <p>In addition, "risk profiling" for all directorates will be completed by the CHST and the results reported to EDM and Corporate Safety Committee and relevant groups depending on the outcomes.</p> <p>Original Due Date: October 2021</p>	<p>In progress, and ongoing</p>	<p>Some work has already started with "risk profiling" of functions. As occasionally referred to in the latest CHaSMs due November 2021. Some CHaSMs and subsequent action plans, identify specific training requirements by functions. Mixed messages, but most place responsibility for generic training with the CHST.</p>

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<p>manager for reference and the resulting action plan is 'lost'</p> <ul style="list-style-type: none"> Managers reported that in cases where actions identified as required were not completed, there is no oversight to report and surface H&S risks caused by the inaction EDM oversight in the H&S process is unclear. Given the approach to minuting, the audit has been unable to confirm EDM role in oversight of H&S reporting vs that of the centre H&S team. It is also unclear to services what Corporate H&S team do. <p>It is understood that plans going forward include regular oversight of action plan implementation by Service Directors and at EDM which will enhance assurances provided in this area.</p>	<p>Briefing to managers will include reference this to help ensure understanding of arrangements.</p> <p>Original Due Date: October 2021</p>	<p>Commenced April 2022 onwards and ongoing</p>	<p>Internal Audit understands from the HoSHW that "risk profiling" is being promoted and lead by the CHST.</p> <p>Management Update as at September 2022</p> <p>"Risk profiling" is now part of the CHST's regular attendance of EDM's.</p> <p>Following the late publication of the revised H&S Policy and to align with the current restructuring and "succession planning", these targeted briefings for managers will start after 1 April 2022. This is to ensure the right long-term management structures receive the training.</p> <p>The HoSHW recognised that the materials available on SharePoint were piecemeal and largely generic.</p> <p>Management Update as at September 2022</p> <p>Where timely, the CHST has provided training for newly in post managers on Health & Safety.</p> <p>Some work has taken place in improving the Health & safety documents available on SharePoint. This is an ongoing task.</p>
<p>5. The Audit identified that in a significant number of cases necessary full risk assessments were not completed. Managers highlighted a need for greater support in completion of "risk assessment" in complex or specialist areas and reported that they felt they may not be managing these risks effectively. As a result, some H&S risks may not be effectively managed.</p>	<p>A core principle of the new strategy is around "risk control". "Risk assessment" and "risk control" will be covered in the training briefings.</p> <p>Original Due Date: October 2021</p>	<p>In progress and ongoing</p>	<p>Some work has already started with "risk profiling" with functions and Internal Audit understands this is being led by the CHST working with function managers. The relevance and importance of sufficient "risk assessments" and "risk control" is recorded in the new Governance and H&S Strategies.</p>

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	<p>Targeted auditing will be done by the CHST to ensure “risk assessments” are completed, adequately manage risks and test that mitigations are actively in place.</p> <p>Original Due Date: starting after October 2021</p>	<p>Commenced April 2022 onwards and ongoing</p>	<p>Management Update as at September 2022</p> <p>“Risk profiling” is now part of the CHST’s regular attendance of EDM’s.</p> <p>The relevance and importance of sufficient “risk assessments” and “risk control” is recorded in the new Governance and H&S Strategies.</p> <p>The management action for the CHST is to challenge and test “risk assessments”. This will start once the function teams begin applying the new Governance requirements. Managers with H&S responsibilities are ultimately responsible for H&S “risk assessments” and “risk control”.</p> <p>Management Update as at September 2022</p> <p>Where timely, the CHST has provided training for newly in post managers on Health & Safety.</p> <p>Members of CHST now regularly attend EDM’s and provide advice and support for managers when requested.</p>
<p>6. The Internal web pages (The Source) provide details of how to report accidents and H&S incidents. However, the procedure and responsibility for actioning and monitoring the response to the incident is not clear from this.</p> <p>There is also a lack of management information and data in this area to help inform learning and improvement by managers with H&S responsibilities.</p> <p>It is understood that a new accident and incident reporting system is currently being sourced to</p>	<p>A new incident management system is currently being procured and implemented with a view to roll out across the council by September 2021.</p> <p>Original Due Date: September 2021</p>	<p>Complete</p>	<p>The new Accident and Incident Reporting System [AIRS] went live from 1 April 2022.</p> <p>In addition, a Corporate initiated Working Group is assessing the issues of H&S Module 3 – Violence & Aggression. The project lead is Richard Martin from HLS, Construction H&S Manager. This will include safety concerns for Lone Workers.</p>

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support improvement in this area and procedures are being re-written based on HSE good practice.			<p>Management Update as at September 2022</p> <p>The Working Group continues to provide insights on improving health & safety around incident reporting and the specific health & safety issues for lone workers.</p>

Scope and Release of Report

BACKGROUND

1. The first audit review of Health & Safety reported on 6 June 2021. It focused on the Corporate Health and Safety Management System (CHaSMs) - a self-assessment tool for service managers to check individual service performance and identify Health & Safety risks that require remedial action in their areas.
2. Internal Audit then provided a '**limited**' assurance opinion regarding the adequacy and effectiveness of the CHaSMs process in place for 2020/21. The key reasons were:
 - Lower application by the People directorate
 - Managers considered the process to be a 'tick box' that demonstrated that they may not fully understand their responsibility to ensure safe working arrangements
 - Universal requests for further training
 - Key actions, such as completion of required "risk assessments" and ensuring teams understand the mitigations have not been consistently completed.

SCOPE AND LIMITATIONS OF THIS AUDIT REVIEW

3. The scope of this assignment was revised and limited to the progress to date in implementing the high and medium priority agreed management actions in the Internal Audit Report dated 6 June 2021.
4. The scope of the assignment specifically excluded the following areas:
 - Discussion with individual service managers about the revised Health & Safety Policy Statement and their understanding of it
 - Analysis of requests for Health & Safety training initiated by service managers
 - An assessment of the work programme of the Corporate Safety Team.

REPORT DISTRIBUTION

5. This Internal Audit Follow Up Report has been issued to:
 - Steph Griffin, Director of HR, and Organisational Development
 - Christina Czarkowski-Crouch, Head of Safety, Health, and Wellbeing
 - Denise Murray, Director of Finance
 - Stephen Peacock, Chief Executive.

ACKNOWLEDGEMENT

6. The Audit staff involved in the review:
 - Richard Booth, Group Auditor
 - Mike Johns-Turner, Group Auditor
 - Phil Eames, Assurance Audit Manager.

7. Internal Audit would like to thank all staff involved in the review for their co-operation and assistance.

RELEASE OF REPORT

8. The report history is set out below:

Date Draft Report Issued:	21 October 2022
Date Management Responses Received:	24 October 2022
Date Final Report Issued:	24 October 2022

Appendix 1 – Level of Assurance and Priority Rating

Internal Audit provide an overall opinion on the level of assurance provided by the controls within the area audited. The levels of assurance are defined below:

Level of Assurance	Definition
Substantial	There are sound risk management, internal control and governance processes which are designed to achieve the service objectives, with key controls being consistently applied.
Reasonable	Whilst there is basically sound risk management, internal control and governance processes, there are some weaknesses which may put service objectives at risk.
Limited	There are weaknesses in the risk management, internal control, and governance processes; putting service objectives at risk.
No	The risk management, internal control and governance processes are generally poor and as such service objectives are at significant risk.

Internal Audit prioritise its audit findings as defined below:

Priority Rating	Definition
High (H)	A key risk is not being adequately addressed; legislation is being breached; or there is: substantial nonconformity with Council policy/regulations; a risk of material loss, or serious fraud.
Medium (M)	A service risk is not being adequately addressed; or there is nonconformity with Council policy/regulations; some risk of loss or fraud; scope to improve value for money, or efficiency in working practices.
Low (L)	There is non-compliance with best practice; benefit would be gained from improved control.