



## Health & Safety Committee

### Health & Safety Checks for the Corporate Estate: Internal Audit Progress Update

**Date:** 4 October 2022

**Key decision:** No

**Class:** Part 1

**Ward(s) affected:** All

**Contributors:** Rich Clarke, Head of Assurance

### Outline and recommendations

In the early months of 2022 the Council's Internal Audit service undertook a review of Corporate Health & Safety. That review concluded with 'Limited' Assurance and raised a number of high priority findings demanding swift remedial action. This paper summarises progress made towards implementing those remedial actions.

We ask Members to comment on the report and note progress.

### Timeline of engagement and decision-making

December 2021 to January 2022: Audit Fieldwork

1 February 2022: Draft Audit Report published

25 March 2022: Final Audit Report published

## 1. Summary

- 1.1. As part of the routine audit plan, Internal Audit examined the Council's corporate Health & Safety controls in late 2021. That review, published as final in March 2022, gave a 'Limited' assurance rating. This is an adverse rating, indicating insufficient controls in place and, where present, inconsistently applied.
- 1.2. A few months after the report was published, responsibility for the Health & Safety team passed to the Head of Assurance. Since then, among other tasks, the Team has been working to address the deficiencies highlighted in the audit report.
- 1.3. This paper summarises progress so far and planned next steps. We present it to Members to give an overview of arrangements and their development.

## 2. Recommendations

- 2.1. Comment on the report and note progress towards completing remedial actions.

### 3. Policy Context

- 3.1. The Council has various legal, regulatory and ethical responsibilities in ensuring the continuing health and safety of all those to whom it owes a duty of care. The work of this Committee in general helps to ensure the Council meets its responsibilities, especially to non-domestic service users. This report contributes to the Committee's understanding of health & safety governance at the Council and so aids in the effective completion of its responsibilities.

### 4. Background

- 4.1. An engagement on the [Internal Audit Plan agreed by the Audit Panel in June 2021](#) was to examine controls for ensuring the Council meets its health and safety responsibilities on its corporate estate. The full title on the plan was *Review of compliance team's arrangements for health & safety checking of the corporate estate* and was budgeted to take 10 audit days during Quarter 2.
- 4.2. The final engagement took the title *Health & Safety Checks for the Corporate Estate* reflecting internal changes as responsibility moved from a Compliance Team to an expanded Health & Safety team. Owing to delays in concluding 2020/21 work it did not begin until Quarter 3. The audit also took more than 30 days, once the scale of work required to organise, understand and test the arrangements in place became clear.
- 4.3. The audit engagement concluded at the controls offer only **Limited** assurance. The full definition of 'limited' is: "There are insufficient controls in place. This increases the likelihood of the service area not achieving its objectives. Where controls do exist they are not consistently applied". For context, this was one of five limited assurance engagements published in 2021/22, compared to 26 'satisfactory' and 6 'substantial' assurance.

### 5. Internal Audit Findings

- 5.1. The full audit report is at Appendix A. It drew out 7 principal findings, 2 at 'high' severity level and 5 at 'medium' severity. The table below summarises:

High Severity Findings
The last full Health & Safety audit programme [intended as an annual process] took place in 2018/19. On property compliance checks, almost a third were overdue.
The Corporate Health & Safety Board and Member Committee had both effectively stopped during Covid and not re-started.
Medium Severity Findings
Key Health & Safety policies and procedures were significantly out of date. The asbestos, fire and water system policies were dated 2018 but had never received formal approval, meaning that the 'formal' policies dated from 2011. A smaller proportion of supporting risk and control procedures lacked recent review.
Terms of reference for Directorate health & safety committees were in significant need of review, being static since 2017. There was also no committee supporting the Chief Executive's Directorate.
Remedial actions were left unreported and unactioned from some Water Systems risk assessments, notably at Evelyn Community Centre.
The standard compliance check instruction was missing some required elements, for example first aid arrangements, leaving them unchecked.
The service did not retain evidence that remedial actions were completed.

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5.2. In the report, these findings prompted a range of remedial actions. The table below lists those actions including due dates and a note on the current status (note that some actions are abbreviated here from the full description in the report).

Ref	Action	Due Dates (Original & Current)	Position
01.1	Create and maintain a H&S policy register	31/05/22	<input checked="" type="checkbox"/>
01.2	Approve and publish revised Asbestos, Fire and Water Systems Management policies.	31/05/22 (31/01/23)	See 5.3
01.3	Update management procedures published on the Council's intranet	31/05/22	<input checked="" type="checkbox"/>
01.4	Consider consolidating policies into a single document.	30/06/22 (31/01/23)	See 5.3
02.1	Revise terms of reference for Directorate H&S Committees	30/04/22	<input checked="" type="checkbox"/>
02.5	Create a H&S Committee for the Chief Executive's Directorate	30/04/22	<input checked="" type="checkbox"/>
03.1	Document review of water risk assessment remedial actions tracker	31/05/22	<input checked="" type="checkbox"/>
03.2	Carry out remedial actions at Evelyn Community Centre risk assessment.	31/03/22	<input checked="" type="checkbox"/>
04.1	Develop H&S audit programme following completion of service self-assessments.	30/06/22 (31/12/22)	See 5.4
04.2	Complete compliance checks on high risk properties.	31/03/22	<input checked="" type="checkbox"/>
05.1	Add glazing and signage risks to statutory compliance inspections	31/07/22	<input checked="" type="checkbox"/>
05.2	Revise standard checklist for property compliance checks.	31/03/22	<input checked="" type="checkbox"/>
05.3	Update management procedure with property related risks.	31/05/22	<input checked="" type="checkbox"/>
06.1	Document correspondence on communicating remedial actions arising from compliance checks.	31/03/22	<input checked="" type="checkbox"/>
06.2	Agree procedures for escalating non-cooperation with compliance checks.	30/04/22	<input checked="" type="checkbox"/>
07.1	Add meetings of H&S Committee	30/04/22	<input checked="" type="checkbox"/>
07.2	Retain minutes of H&S Board	31/03/22	<input checked="" type="checkbox"/>
07.3	Retain minutes of Directorate H&S Committees	30/04/22	<input checked="" type="checkbox"/>
07.4	Document attendance and review of action trackers on minutes.	30/04/22	<input checked="" type="checkbox"/>

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Ref	Action	Due Dates (Original & Current)	Position
07.6	Retain minutes and papers within the Corporate H&S team	30/04/22	<input checked="" type="checkbox"/>
07.7	Report conclusion of the audit programme to the H&S Board	31/01/23 (30/06/23)	See 5.4
07.8	Commission external audit on British Standard compliance	30/04/22 (N/A)	See 5.5

- 5.3. After a little delay caused by the need to tweak roles and responsibilities to reflect the changing position of the Health & Safety team in the organisation, drafts for all these policies now exist. They are currently being reviewed by the Head of Assurance and, in consultation with the Executive Director of Corporate Resources (who Chairs the Corporate Health & Safety Board) are likely to go to that Board's January meeting for approval. It is unlikely we will be able to consolidate the documents given the differing legal regimes and roles, but will review that option once we have approved individual drafts.
- 5.4. The first stage of developing the audit programme was asking individual services to complete a self-assessment. These were circulated in April with an original due date of the end of May. Currently around a third of self-assessments are still outstanding. Over the autumn the Health & Safety team will reach out to those services offering additional support to complete their assessments, including escalating to Management Team where difficulties exist. Our aim is to have a complete set by the end of the year to allow development of an audit programme that the January Corporate Health & Safety Board can review. We would then aim to bring the audit programme at the start of 2023 and report progress regularly thereafter.
- 5.5. The audit report specifically mentioned British Standard OHSAS 18001. However, the use of this standard is being phased out and replaced with an international standard, ISO 45001. We would need to assess the differing obligations of the new standard and consider carefully whether the additional costs necessary to achieve external accreditation are worthwhile. This consideration is especially acute given the Council's wider financial circumstances. As such, we have agreed with the audit team to remove this from the list of actions to be followed up.

## 6. Financial implications

- 6.1. The report is to note. There are no financial implications arising from the recommendations.

## 7. Legal implications

- 7.1. The report is to note. There are no legal implications arising from the recommendations.

## 8. Equalities implications

- 8.1. The report is to note. There are no equalities implications arising from the recommendations.

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## **9. Climate change and environmental implications**

- 9.1. The report is to note. There are no climate change and environmental implications arising from the recommendations.

## **10. Crime and disorder implications**

- 10.1. The report is to note. There are no crime and disorder implications arising from the recommendations.

## **11. Health and wellbeing implications**

- 11.1. The report is to note. There are no health and wellbeing implications arising from the recommendations.

## **12. Background papers**

- 12.1. Appendix A – Final Internal Audit Report in full, as published.

## **13. Report author and contact**

- 13.1. Rich Clarke, Head of Assurance. [rich.clarke@lewisham.gov.uk](mailto:rich.clarke@lewisham.gov.uk). Telephone (020) 8314 8730 (ext. 48730).

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