



Midlothian

Audit Committee  
Tuesday 12 December 2017  
Item No: 5.4

**Internal Audit Report**  
**Health and Safety**  
**Issued: November 2017**  
**Final**

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| <b>Level of Assurance</b> | See Audit Conclusion on page 4 |
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## Executive Summary

### 1.0 Introduction

The Council has a legal duty to put in place suitable arrangements in response to statutory requirements and ultimately to manage and control key health and safety risks creating a safe and healthy working environment.

To support the Council in meeting its health and safety obligations and to provide advice throughout the Council's activities, there is a dedicated Health and Safety team within Commercial Services, part of the Resources Directorate. The team are principally involved in supporting the Council to develop and review all elements of its health and safety management system. The Health and Safety team have been working in partnership with East Lothian Council's Health and Safety team and both Councils have developed a common health and safety policy and training framework. Midlothian Council's Risk Manager manages the Health and Safety team across both councils.

Health and Safety legislation in the UK is enforced by the Health and Safety Executive (HSE) and in the case of Local Authority operated functions, the HSE are the enforcing body. The Health and Safety Executive is responsible for producing the regulatory framework within which businesses in the United Kingdom must comply. National and International Standards setting out Management System approaches to Managing Health and Safety have evolved. The most widely recognised of these is the International Standard 18001 and the Health and Safety Executive's model for 'Successful Health and Safety Management' set out in its publication HS(G)65, as shown in Appendix 1. The Council has sought to develop its health and safety management system on the HS(G)65 model which is based broadly on the concept: Plan, Do, Check, Act as detailed below:

#### Plan

- In 2013, a report was submitted to the Council Management Team (CMT) by the Risk Manager proposing to redevelop the Council's Health and Safety management system and recommended a Health and Safety Improvement plan (2013 – 2016) which was subsequently approved and the Health and Safety policy was also updated and approved. The report noted the applicable legislation requirements and it was agreed to update the policies in place at that time (as detailed in Appendix 2) and to develop new policy arrangements (known as Management Arrangements) to address the policy gap in the Council's Health and Safety Management system.
- A list of Management Arrangements under development and those approved to date are shown in Appendix 3. These have been developed with input from key stakeholders, consulted through the Council's Divisional Consultative Groups and approved by the Council Management Team. The development of these new Management Arrangements set the standards by which health and safety will be managed and provide direction to employees. Health and Safety guidance is also available which complements these Management Arrangements.

### Do

- A new Health and Safety Management Information System (RIVO) was procured jointly with East Lothian and West Lothian Councils via the digital market place framework contract. A two year contract was agreed in August 2015 and in Midlothian the system went live in April 2016. The Risk Manager is progressing the next procurement exercise in consultation with East Lothian and West Lothian Councils. The RIVO system has improved the speed of incident reporting, sharing of information and has reduced the use of paper forms.
- The Health & Safety team provide a comprehensive range of management and assessment based training to support managers in their role of managing health and safety. This offering has developed significantly from the range of training provided back in 2013. This is another area where Midlothian and East Lothian Council have benefited from partnership working.

### Check

- Much of the work in developing the health and safety system to date has been in relation to addressing the Plan and Do sections of the management system. The Health and Safety team are aware and have planned and developed a range of audit tools to enable them to check performance against the range of health and safety Management Arrangements in place. Not having this in place makes it difficult for the Council to assure itself it is fulfilling its statutory obligations. There is reassurance from the Risk Manager this work has been developed and is evidenced and a forward plan of audits/reviews now need to be agreed with CMT.

### Act

- Following the application of the check stage it will then be possible for the Health and Safety team to report on any items which require further action as a result of audit/review of working practices.

The Council's health and safety function is benchmarked against 11 other Scottish local authorities every 3 years. The last benchmarking exercise was undertaken in February 2015 and reported that some work is still required before good practice can be deemed as "established" within Midlothian Council. The Council scored better in some elements such as Occupational Health Provision but were not meeting the minimum standards for undertaking Health and Safety audits and inspections.

## **2.0 Objectives of the Audit**

The objective of the audit was to review the adequacy of the control framework designed by management to allow compliance with Health and Safety legislation. A copy of the terms of reference for the review is attached at Appendix 5.

### 3.0 Conclusion

Since 2013, the Health and Safety team has made significant progress with implementing the Plan and Do phases of the HSE model which includes setting up an appropriate framework, developing Management Arrangements, providing training and procuring and embedding a suitable system. The team have concentrated resources on these aspects before focusing attention on the Check and Act phases of the model. The partnership with East Lothian Council has offered the opportunity to develop a common policy framework and gain efficiencies by sharing the workload in developing arrangements across both councils. Positive elements of the health and safety framework are:

- the introduction of a new health and safety management information system which is being rolled out across the Council and has reduced the usage of paper forms to record accidents;
- the development of a health and safety portal on the Council's intranet has created a single information resource for Managers, including details of current Management Arrangements, guidance and details of training and development opportunities available;
- Management Arrangements have been developed and consulted on through the three Divisional Consultative Groups and the key stakeholders, senior management and trade unions have been involved in the development of subject specific policies;
- fire inspections have been undertaken across all operational properties with a program of review in place using the publicly available standard PAS79;
- the Health and Safety team is well established in the Council and employees know who to contact if they have any Health and Safety concerns;
- first aid training courses are now SQA accredited and the Health and Safety team are reviewing options to replace the Institute of Occupational Safety and Health's training course to suit the range level and job demands of managers. The proposed new course will be SQA accredited, enabling ongoing commercial income to be generated;
- the implementation of a first aid emergency helpline across the Council;
- health and safety concerns regarding public safety that have occurred over the past few years have been reported to Elected Members / CMT and appropriate action was taken by the Council;
- a health and safety user group has been set up at Stobhill depot which gives employees working in higher risk areas an opportunity to discuss, raise and resolve local health and safety issues; and
- providing expertise, advice and guidance to the Council's Safety Advisory Group arrangements for events held within Midlothian.

Management have advised that the health and safety management system is still under development and that they intend to move onto the next phases of implementing the HSE model (Check and Act) which will address the areas which still require improvement. The improvements required are detailed below and more fully in the Audit issues and Management Action plan in section 4 of the report:

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- the new management arrangements approved by the Council have not currently been subject to audits and inspections by the Health and Safety team. Management have reported that resource has been focused on developing the Management Arrangements which are the standards by which the Council will audit against as a component of the Council's Health and Safety management system;
- there is currently a lack of health and safety management reports and performance indicators as the roll out of the Health and Safety Management System (RIVO) is not yet complete. The first year of data is now in the system which will enable reactive indicator reporting. The proactive indicators will be linked to the item above;
- risk assessments and COSHH assessments are not being regularly reviewed and updated by all services;
- a number of Management Arrangements have not yet been agreed by CMT and some have not been kept up to date;
- Management Arrangements have not been adequately communicated to relevant services, other than through the training courses delivered by the Health and Safety team and their publication on the Council's intranet;
- there is not a centralised system for recording statutory inspections undertaken across the Council which means that any recommendations raising health and safety concerns may not be reported to or be independently monitored by the Health and Safety team;
- training records, risk assessments and COSHH records have not been recorded centrally across the Council prior to the introduction of the Health and Safety Management Information System (RIVO) making it difficult for management / the Health and Safety team to monitor and have oversight of this; and
- there is an inconsistency of reporting of accidents as some areas record all accidents and incidents whereas others only report accidents. A number of areas are still submitting paper accident forms although this is reducing as the system is rolled out across the Council.

We have on this occasion rated the implementation of the individual elements of the HSE Model within the Council rather than applying an overall assessment as follows (see Appendix 4 for definitions):

|                           |  |
|---------------------------|--|
| <b>Level of Assurance</b> | <ul style="list-style-type: none"><li>• Good – the controls introduced in relation to the 'Plan' and 'Do' phases of the Council's Health and Safety Management System</li><li>• Weak – the processes and controls required to be implemented for the 'Check' and 'Act' phases of the system. This reflects the implementation progress of the Council's Health and Safety Management System.</li></ul> |
|---------------------------|--|

We have raised a number of recommendations which are detailed in the Management Action Plan and these recommendations have been agreed with management.

### 4.0 Audit Issues and Management Action Plan

#### 4.1 Audits and Inspections

As part of the Council's developing Health and Safety Management system, audits and inspections will form a key component to confirm if the Council are meeting the Health and Safety regulations requirements. Inspections are undertaken by the Health and Safety team and a number of inspections are undertaken by external companies, authorities and the Council's contractors. Inspection reports are provided to the relevant Service Manager and the Property Maintenance team who are responsible for rectifying maintenance issues reported and have regular meetings with all services across in the Council. Any major issues identified are required to be reported to the Health and Safety team. Independent external inspections containing critical safety failures are reported directly to the HSE by the contractor.

The following issues were noted during the audit:

- although the Health and Safety team have been undertaking inspections in high risk areas such as Waste Services, there is no formal audit or inspection programme. Management reported that historically, audits were undertaken to ensure that the Workplace, Health Safety & Welfare Regulations were complied with but they did not include the other 22 aspects of the health and safety laws outlined in the new Health and Safety Management Arrangements. A suite of audits have been developed to enable comprehensive auditing to be carried out. This is supported by a Health and Safety Management Arrangement matrix identifying which Management Arrangement applies to which teams. The Health and Safety team will use this to ensure audit compliance with all of the approved Management Arrangements;
- the new Management Arrangements have not been subject to audits and inspections undertaken by the Health and Safety team which means there is limited assurance that Midlothian Council is complying with the current health and safety laws. Internal Audit testing found a number of hazards in the areas reviewed (eg trip hazards and blocked fire exits) and these may have been identified if audits and inspections were regularly undertaken by the Health and Safety team. However, staff have been trained to identify hazards and take responsibility for rectifying these. The Risk Manager reported that audits have not been undertaken as the focus is currently on developing the Management Arrangements and the health and safety system and the team are developing a range of audit tools;
- from the two Management Arrangements approved in 2014, regular audits have been undertaken for the Fire Safety Management Arrangement but only 2 reviews have been undertaken for the Water Management Arrangement. Water hygiene inspections and maintenance are outsourced to a contractor and Property Facility Services oversee these inspections. The Health and Safety team have only undertaken independent monitoring in two areas although the Risk Manager reported that there is a protocol in place to ensure any serious health and safety concerns identified are reported to the Health and Safety team;
- the current policy does not provide clarity on the differences between an inspection and an audit;

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- there is no standard formal reporting of inspections. Each inspection that has been reported to date has not been reported in a consistent format. Some reports had a checklist and other reports had information on issues identified;
- there is not a centralised system to hold all the external inspections undertaken across the Council and engineering items and recommendations raising health and safety concerns. This contributes to the challenges for the Health & Safety team to independently monitor these. The Property Maintenance Team has access to 3 of the contractors' systems to review inspection reports but other reports are filed in the areas via paper files. Internal Audit noted that a chair lift inspection undertaken by a contractor reported that a number of concerns were highlighted but no action was taken on items over a 29 month period. Management reported that a process is in place with one of the main contractors to ensure critical safety failures are immediately rectified and will investigate whether there is similar process in place with the contractor that inspects the chair lift;
- an ongoing program of fire risk inspections was undertaken by the Health and Safety team as part of the Fire Risk Assessment periodic review process, however it was found that there was a delay in completion of the emergency lighting issues identified in these fire risk inspection reports. These were reported to the Property Maintenance team but were not rectified immediately. The Property Maintenance team advised that there were issues with the contractor inspection reports which made it difficult to rectify the issue but this has now been resolved. The Risk Manager reported that actions from the fire risk assessments are now being recorded on the RIVO system and this will be used to track tasks allocated to Council staff and services;
- services manually record fire tests that are undertaken and in some areas, not all fire test records were retained. Management reported that as the Health and Safety Management System has been rolled out with over 500 members of staff trained to use it, a recurring task can be set on the RIVO system to undertake fire tests which will be recorded on the system. This will be progressed by the Health and Safety team in conjunction with Council Services; and
- following an incident at a nursery, the Health and Safety team undertook an inspection and provided appropriate advice. However, there was no documented information on how the enquiry was dealt with and how the inspection was undertaken. The Risk Manager reported that the Health and Safety team can be asked to provide advice on a wide range of topics and the areas where services seek advice normally relate to items where the Council has not provided written guidance (usually because the item has not been identified before or is very specific to a single or limited area of a Service). The Risk Manager did note that the team have an enquiries database to record tasks that are outstanding but they do not record queries which were received and completed on the same day.

| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
| 1  | A Health and Safety audit and inspection programme should be implemented.<br><br><b><u>Management Comment:</u></b><br>Inspection workplace is based on high risk areas and therefore these premises will be | High     | Risk Manager | 31/12/17    |

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| No | Recommendation   | Priority | Manager      | Target Date |
|----|--|----------|--------------|-------------|
|    | <p>inspected more frequently than others. The RIVO system has an audit application which is a tool that will be used to support the auditing approach taken by the Council. This will include self audits completed by Managers and independent audits undertaken by the Health and Safety team.</p> <p>The old audits and inspections undertaken were constrained in the areas they covered, providing limited assurance to the organisation on statutory compliance, therefore the Council, on the advice of the Risk Manager, required to develop appropriate audit and inspection tools. This work could not be completed in isolation and required to follow the development and approval of the Health &amp; Safety standards managers were to be measured against. The development of auditing arrangements have been a planned element of the Council's Health &amp; Safety Management system from the outset and will be developed and implemented as planned, utilising the new RIVO system.</p> |          |              |             |
| 2  | <p>The difference between an inspection and an audit needs to be clarified and documented.</p> <p><b><u>Management Comment:</u></b><br/>The Health and Safety team are planning to implement a Management Arrangement on the Audit and Inspection approach which will highlight the difference. This Management Arrangement will be reported to Council Management Team for approval.</p>  | Low      | Risk Manager | 31/12/17    |
| 3  | <p>A standard health and safety reporting format should be used to ensure all health and safety inspection reports are consistent and complete (eg standards assessed, areas reviewed, issues identified etc).</p> <p><b><u>Management Comment:</u></b><br/>The Health &amp; Safety team have prepared a standard workplace inspection form as part of the development of the Audit and Inspection Management Arrangement.</p>   | Low      | Risk Manager | 31/12/17    |
| 4  | <p>As part of the audit process, the Health and Safety team should select a sample of external inspections undertaken in the area to ensure any issues containing critical defects are actioned.</p>   | High     | Risk Manager | 31/12/17    |



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| No | Recommendation   | Priority | Manager      | Target Date |
|----|--|----------|--------------|-------------|
|    | <p><b><u>Management Comment:</u></b><br/>The Risk Manager recognises the need to provide adequate assurance through the newly developed audits and will ensure that work equipment and lifting equipment based audits will include an element of checking independent inspections are taking place and that items requiring attention are responded to. The Risk Manager will report audit findings to Divisional Consultative Groups, and the Council Management Team as part of the performance reporting approach within the Council's new Health &amp; Safety Management System.</p> |          |              |             |
| 5  | <p>All fire tests undertaken within properties operated by Midlothian Council and issues reported from the fire inspections should be recorded and monitored on the RIVO system.</p> <p><b><u>Management Comment:</u></b><br/>The Health &amp; Safety team plan to work with Council Services to set up scheduled tasks on the RIVO system which are required to be completed. Before rolling this approach out, it was necessary to train the 500 users which has been the focus of the team's activity in the past year along with the other support they provide.</p>                 | Medium   | Risk Manager | 31/03/18    |
| 6  | <p>All enquiries received and actioned by the Health and Safety team should be recorded.</p> <p><b><u>Management Comment:</u></b><br/>Information from the enquires database will be used to review areas where services require advice over and above the training, Management Arrangements, and guidance provided to identify potential developments in training content and available guidance. The Health and Safety team are supporting service managers to be capable of managing health and safety themselves on a day to day basis with a sound knowledge base.</p>              | Medium   | Risk Manager | 31/12/17    |

### 4.2 Management Arrangements and Health and Safety Guidance

The Council's Health and Safety policy was updated in 2013 and CMT approved to develop and update additional specific health and safety policies which are known as Management Arrangements. The report noted the applicable legislation requirements and it was agreed to update the policies in place at that time shown and to develop new policy arrangements to address the policy gap in the Council's Health and Safety Management system. A Management Arrangement describes the measures the Council needs to take to comply with legal requirements in

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ensuring that a safe working environment is in place. Management Arrangements have been developed and consulted on through the three Divisional Consultative Groups and the key stakeholders, senior management and trade unions have been involved in the development of these. Health and Safety guidance is also available which complements the Management Arrangements. Testing by Internal Audit identified the following:

- some of the Management Arrangements approved by CMT are out of date and a number are yet to be approved by CMT;
- the Divisional Consultation Group meetings do not minute that Management Arrangements were consulted on but it was reported that discussions with Divisional Consultative Groups were held before taking Management Arrangements to CMT for approval;
- the health and safety policy requires updating as it has not been updated since 2013 (eg the old policy does not state that managers must display the approved H&S poster or provide each employee with access to the approved H&S leaflet);
- there is a lack of clarification / policy explaining the difference between a Management Arrangement and Health and Safety guidance which could cause confusion and result in staff mistaking guidance for a Management Arrangement. The Risk Manager advised that Management Arrangements highlight the specific risks and the systems in place within the Council which is part of the Health and Safety overarching policy. Guidance is in place to assist service managers in carrying out their duties which is linked to Management Arrangements. The Risk Manager advised this position will be clarified in the revision of the Health and Safety Policy; and
- Management Arrangements approved in November 2016 were not updated on the Council's Intranet until January 2017 (one Management Arrangement has still not been updated) and have not been communicated to relevant services, other than through the training courses delivered by the Health and Safety team and their publication on the Council's intranet.

| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
| 7  | <p>Management Arrangements identified in April 2013 should be implemented and embedded in the Council. Any approved Management Arrangements should be reviewed and updated. Outstanding Management Arrangements reported as 'under consultation' should be concluded and submitted for approval to CMT. The Health and Safety policy should be updated to reflect current practice.</p> <p><b><u>Management Comment:</u></b><br/>A report will be presented to CMT and the Risk Manager will also update and inform CMT of any new Management Arrangements proposed. The Risk Manager is also planning to update the 2013 Health and Safety policy.</p> | High     | Risk Manager | 31/12/17    |
| 8  | The Risk Manager should retain an audit trail of the discussions and consultations that are held  | Medium   | Risk         | 31/12/17    |

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| No | Recommendation   | Priority | Manager      | Target Date |
|----|--|----------|--------------|-------------|
|    | <p>on the draft Management Arrangements.</p> <p><b><u>Management Comment:</u></b><br/>                     Divisional Consultancy Group minutes are written by Business Support or by the Directors' PAs. In future a covering report will be presented to the Divisional Consultancy Group with the draft Management Arrangement proposed. The report will demonstrate the regulation background, Performance Indicators and the appropriate application. The comments received will be accumulated in the draft report sent to CMT for approval.</p>   |          | Manager      |             |
| 9  | <p>A policy should be in place which explains the difference between a Management Arrangement and Health and Safety guidance.</p> <p><b><u>Management Comment:</u></b><br/>                     The Risk Manager will reflect this in the new Health and Safety policy.</p>  | Low      | Risk Manager | 31/12/17    |
| 10 | <p>All approved Management Arrangements should be promoted to relevant services and made available on the Intranet.</p> <p><b><u>Management Comment:</u></b><br/>                     A number of Management Arrangements are now available on the Intranet. Appropriate ownership implementation is required by the Directors in respective areas and annual reviews undertaken to note the progress and impact on the implementation. This will be monitored in Divisional Consultancy Group meetings and training needs to be clarified.</p> <p>All Heads of Service have a service manager meeting and normally cascade information from CMT/DMT and Divisional Consultancy Group to their service managers. Trade Unions can also present information from the Divisional Consultancy Group meetings.</p> | Medium   | Risk Manager | 31/12/17    |

### 4.3 Risk and COSHH (Control of Substances Hazardous to Health) Assessments

The Council is required to make an assessment of the health and safety risks arising from their activities and implement controls to protect people from harm. The COSHH Management Arrangement states that COSHH assessments should be undertaken on a regular basis and following any significant change in working practice, plant and equipment and/or any incident or near miss. Both Risk and COSHH assessments involve the process of identifying the level of risk associated with a product, work activity or substance.

HSE guidance states that there is no set frequency for carrying out a risk assessment review but it should be undertaken if it is no longer valid and there has been a significant change. However, as good practice, the Council's Risk Assessment Management Arrangement requires services to review risk assessments on an annual basis to ensure they remain current and relevant to the operations carried out in the workplace.

Both Risk and COSHH assessments can be updated and accessed on the RIVO system or from the service via the service directory. A sample of Risk and COSHH assessments reviewed identified the following issues:

- Risk and COSHH assessments are not regularly reviewed and updated by services. This may be because some risk assessments are still on paper format or are saved on a word document. This has historically made it difficult for the Health and Safety team and the Service to review a risk assessment to ensure it is still appropriate as they are not recorded on a centralised system. The Health and Safety team can't identify the number of overdue risk assessments if it is paper based or the word document is saved on the service directory. However, during the audit review some services started migrating their risk and COSHH assessments onto the Health and Safety Management Information System introduced by the Health and Safety Team (RIVO);
- one high risk area was given significant resource to update risk assessments by the Health and Safety team but these have not been kept up to date by the Service;
- some areas don't have COSHH assessments but are required to maintain a list of all substances hazardous to health for their areas of responsibility; and
- it was reported that first aid risk assessments may require to be reviewed and updated to meet the new First Aid Management Arrangement which was approved in 2016. Service areas are required to regularly record, review and update their first aid provisions in relation to changes in their work activities or personnel. Internal Audit found a lack of first aid stock records which should be recorded on the first aid risk assessments. There was a lack of audit trails to confirm that service management have been undertaking checks to ensure that the first aider has the appropriate first aid equipment.

| No | Recommendation  | Priority | Manager      | Target Date                      |
|----|---|----------|--------------|----------------------------------|
| 11 | <p>All Risk and COSHH assessments must be input into the RIVO system and services should be reminded of their responsibility of maintaining these. The Health and Safety Team should provide regular reports to the Divisional Consultancy Group and CMT on the status of risk and COSHH assessments within services.</p> <p><b><u>Management Comment:</u></b><br/>Training courses rolled out across the Council educates users how to input Risk Assessments into the RIVO system.</p>  | High     | Risk Manager | 31/03/18                         |
| 12 | <p>The Health and Safety team should ensure that service areas have the appropriate updated Risk and COSHH assessment in place.</p> <p>Checks should be undertaken to ensure that the first aid risk assessment is reviewed and equipment is in the first aid box as detailed in the first aid risk assessments.</p> <p><b><u>Management Comment:</u></b><br/>This will be reviewed and checked as part of the audit and inspection process.</p> <p>There are benefits to Midlothian Council by sharing COSHH assessments with neighbouring councils as councils tend to use the same products.</p> | High     | Risk Manager | 31/03/18 and thereafter annually |

#### 4.4 Training

The Council is required to provide training, information, instruction and supervision as stated in the Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999. East Lothian and Midlothian Council have been delivering a joint health and safety training programme and a training brochure details the range of courses available. Emails are sent to employees from the Health and Safety team highlighting available courses where the full capacity has not been booked up. Checks are undertaken to ensure employees are maintaining their first aid qualification. The following issues were noted:

- a training strategy is in place which details the courses delivered by the Health and Safety team. However, there is lack of guidance on the health and safety training required for employees, agency staff and Councillors. There is a Council framework for workplace

induction for new employees to work through with their line Manager but this is not monitored beyond the line manager to ensure it has been completed;

- there is not a centralised Health and Safety training record as training records for training arranged locally are recorded locally in services. A number of training records were found to be out of date and were not recorded in a consistent manner (eg some areas recorded training records in employees' files and others recorded information on a spreadsheet). The accurate recording of health and safety training is essential as it can be required by insurers to enable the Council to refute claims. The Risk Manager reported that all training courses provided by the Health and Safety team will be centrally recorded on the RIVO system and any job specific training will be managed and recorded by the Service (there is a facility to record this on the RIVO system as this was a weakness recognised by the Health and Safety team); and
- an in-house first aid training programme (which is SQA credited) is provided by the Health and Safety team. However, a number of Health and Social Care services choose to undertake training externally which the Risk Manager has estimated is costing the Council approximately £10K per annum. The Health and Safety team are currently discussing this issue with the Health and Social Care Service.

With the exception of first aid training, all courses provided by the Health and Safety team are not currently recharged to services. An initiative to generate income for the section is being considered as part of the Delivering Excellence Framework, and is likely to include providing and charging for training courses delivered to third parties and recharging services for training courses provided.

Training reminders via email (which are now reported to be automated) are only sent out to staff trained on first aid and the IOSH Managing Safely Course (not for other Health and Safety courses). The training module on RIVO can be used as a tool by the Health and Safety team and by managers to identify when training certificates require to be revalidated. Management reported that the training section on RIVO has not been rolled out fully to services as the initial focus has been on using the incident reporting, risk assessment and task elements of the system. One of the Health and Safety team's future plans is to have online training records that can be accessed by line managers and used to send out training reminders.

Feedback has been provided on training courses and the Health and Safety team are re-vamping the IOSH training courses to suit the service manager's needs. A new course will be SQA credited and will be discussed with CMT prior to making any material change to the approach to management development.

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| No | Recommendation   | Priority | Manager      | Target Date |
|----|--|----------|--------------|-------------|
| 13 | <p>The Health and Safety team need to ensure relevant Health and Safety information is available to Heads of Service to enable them to identify training needs required in their areas.</p> <p><b><u>Management Comment:</u></b><br/>As part of embedding the Management Arrangements, the Health and Safety team will highlight and advise service managers what skills are required in their area and ensure they have identified and then train members of staff (eg for the Risk Assessment Management Arrangement the service area manager will need to check if they have appropriate trained risk assessors).</p> <p>The information from the service teams will be collated and the training strategy will be updated and reported to CMT. Divisions will be expected to report annually on future H&amp;S training needs within their Service, taking account of workforce planning and any service redesign.</p> | High     | Risk Manager | 31/03/18    |
| 14 | <p>Training records, including job specific training records, that relate to Health and Safety should be accurately recorded and held centrally, preferably on the RIVO system. The Health and Safety team should liaise with services to ensure this is undertaken.</p> <p><b><u>Management Comment:</u></b><br/>All training records that are delivered by the Health and Safety team are recorded on the RIVO system but any job specific skilled training will depend on the service manager. The Health and Safety team will promote the benefits of recording and maintaining training records on the RIVO system.</p>   | Medium   | Risk Manager | 31/03/18    |
| 15 | <p>The Health and Safety team should continue liaising with the Health and Social Care Service and other services that are using external training providers and asses if health and safety related training can be provided by the Health and Safety team.</p> <p><b><u>Management Comment:</u></b><br/>Discussions have been held but the Health and Social Care Service continues to go to an external provider. A survey is currently underway with Resources Service Managers to identify additional in-sourcing opportunities.</p>   | Medium   | Risk Manager | 31/03/18    |

### 4.5 RIVO system

The roll out of the RIVO system has resulted in over 500 users being trained across all services in the Council. Audit testing identified a number of services using paper based forms to record accidents as training was being rolled out. Accidents and incidents are recorded on the RIVO system and can be reported by any member of staff via a web portal on the Council's intranet. Accidents can also be reported via the trained staff at the Contact Centre.

A number of issues in relation to the system were noted as follows:

- it was noted that some employees, who have been trained on the system, are not fully taking advantage of the system (eg management are not using the reporting tool on RIVO to review the number of incidents/accidents occurring in their area or are advising another member of staff to record the accident). Internal Audit testing identified that in some areas, only one member of staff is using the RIVO system to record accidents;
- system users configuration checks undertaken by the Health and Safety team identified a member of staff who had access to 15 areas which were not all managed by the employee. The issue was rectified by the Health and Safety team;
- one accident occurred in Vogrie but was reported under Midlothian house and 3 reported accidents have not been allocated to any area; and
- currently the Health and Safety team do not have a control in place to ensure any system users who have left the Council are deleted from the system.

System security issues with the RIVO system have been discussed with the Council's Information Security Officer and have been referred to the supplier to rectify. Issues identified included:

- the Council's password complexity standard is not being adhered to and the system does not request the user to change their password when they first login. The Risk Manager reported that the RIVO system doesn't have the functionality to comply with the Council's standard;
- access to the system is not restricted to Midlothian Council computer IP addresses and the system can be accessed from a personal mobile device; and
- the RIVO system does not time out after a period of inactivity.



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| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
| 16 | <p>Training on the RIVO system needs to be rolled out across the Council and the Health and Safety team should monitor the system user activity to ensure the system and its features are being used by all employees who have been trained.</p> <p><b><u>Management Comment:</u></b><br/>The Council needs to move away from using papers forms as much as possible. The Health and Safety team will review the use of the system to ensure the Council are obtaining best value for money. This information will be collated and reported back to the Divisional Consultancy Group.</p> | High     | Risk Manager | Complete    |
| 17 | <p>System users should be reminded that when reporting accidents, it is a requirement to accurately document the area where the accident occurred.</p> <p><b><u>Management Comment:</u></b><br/>Recurring tasks can be set on RIVO to ensure incidents are reviewed and reported from the correct area. Risk area is now selected for every incident.</p>   | Medium   | Risk Manager | Complete    |
| 18 | <p>A leavers' report should be obtained from Human Resources and checked on a regular basis to ensure that leavers are deleted from the system.</p> <p><b><u>Management Comment:</u></b><br/>The leavers' report will also highlight to the Health and Safety team leavers who are first aiders so they can ensure the service area appoints a new first aider or undertake a new risk assessment. The Risk Manager is planning to discuss with Human Resources to ensure that information can be shared.</p>   | Medium   | Risk Manager | 31/12/17    |
| 19 | <p>The security of the RIVO system requires improvement to ensure Council password standards are used, access is restricted to the Council's IP address, the system times out after a period of inactivity and employees have the appropriate system user rights.</p> <p><b><u>Management Comment:</u></b><br/>Health and Safety are currently reviewing all employees' user access and liaising with the supplier regarding limiting access to Council devices, enabling full adherence with all Council</p>   | High     | Risk Manager | 31/12/17    |

| No | Recommendation       | Priority | Manager | Target Date |
|----|----------------------|----------|---------|-------------|
|    | policy requirements. |          |         |             |

## 4.6 Management Information, Reporting and Risk Registers

Measuring performance is part of the ISO 18001 standard and the HSE model for the successful management of Health and Safety. The Council can monitor its health and safety performance by producing regular information reports (eg the number of accidents in Council premises, accidents being investigated, areas audited and inspected etc). The following issues were noted during the Audit:

- a lack of management information reports are currently generated. The Health and Safety Improvement Action Plan (2013 - 2016) indicated that the Health and Safety team will provide annual reports to CMT which were not delivered. A small number of inspections have been undertaken by the Health and Safety team but the results from these were not reported to CMT or any Council Committees. One of the objectives in the Health and Safety Improvement Plan is to provide information to senior management teams on the Health and Safety performance of the Council Services. Management reported that they had a lack of confidence in the old data system and did not find the data reliable, given large quantities of incident reports identified which had not been entered into previous systems. The Risk Manager has addressed this for the benefit of historical comparison. The new RIVO system reduces the use of paper forms and enables accident data and other information to be collated on the system which will allow the Risk Manager to produce more meaningful management reports and performance indicators. Management will commence reporting information from the new system once it is fully embedded in the Council. This is also part of the new Health and Safety Improvement plan which is currently in draft;
- there are a lack of Health and Safety performance indicators (PIs) such as the number of RIDDOR incidents (Reporting of Injuries, Diseases and Dangerous Occurrences) reported to the HSE. A PI on the number of planned Health and Safety Audits completed successfully was recorded as 75% completion in 2016/17 for Q3 but there have only been audits undertaken on Fire Safety and Water Hygiene. Management reported that the previous PIs generated were meaningless and not reliable as they reported on reactive indicators only and did not provide the organisation with a sense of progress implementing its stated policies and their impact on incident reduction. New and improved PIs will be generated when the RIVO system is fully implemented in the Council, reflecting the requirements of the Management Arrangements set by the organisation with the purpose of confirming how well the organisation is doing with implementing its stated controls and using reactive indicators to confirm the impact of the same;
- the Commercial Services risk register indicates that the Council is developing Health and Safety Management Arrangements and it is intended that this will improve the Health and Safety culture in the Council. However, it doesn't highlight the risk that currently the new Management Arrangements have not been subject to audits and inspections undertaken in the Council;

## Midlothian Council - Internal Audit – Health and Safety

- the 2016/17 Q1 Performance Review and Scrutiny report states the progress made on the implementation of Management Arrangements but the progress was not reported in the 2016/17 Q2 report. However, the 2016/17 annual performance report states that Final Management Arrangements are being consulted on; and
- a health and safety user group has been set up at Stobhill depot which gives employees working in higher risk areas an opportunity to discuss and raise issues. This group meets on a quarterly basis however minutes recorded from this meeting were not produced on a timely basis.

| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
| 20 | <p>All health and safety inspection and audit reports should be reported to CMT which will improve the quality of information reported to the senior management team.</p> <p><b>Management Comment:</b><br/>Inspections and Audits undertaken will be reported to the Divisional Consultancy Group and CMT and then may report to Committee if there are significant audit findings. May raise a recommendation to CMT to raise to Committee or take advice from CMT.</p> | Medium   | Risk Manager | 31/03/18    |
| 21 | <p>The draft Health and Safety Improvement Action plan (2017-2021) should be consulted on and approved as soon as possible.</p> <p><b>Management Comment:</b><br/>Currently under review and receiving comments from key stakeholders.</p>  | Medium   | Risk Manager | 31/03/18    |
| 22 | <p>Relevant and accurate Health and Safety PIs should be generated and reported.</p> <p><b>Management Comment:</b><br/>The Health &amp; Safety Team have developed a suite of audit tools to reflect the Management Arrangement suite developed. PIs from these will be reported to Divisional Consultancy Groups and CMT as part of future performance reporting.</p>  | Medium   | Risk Manager | 31/12/17    |
| 23 | <p>The risk register should be updated to include the risk of not undertaking audits and inspections and the risk of failing to identify and rectify non compliance with Health and Safety regulations.</p>   | Medium   | Risk Manager | 31/12/17    |
| 24 | <p>Progress made on the implementation of Management Arrangements, and the health and safety RIVO system should be reported on a quarterly basis to the Council Management Team.</p>  | Medium   | Risk Manager | 31/12/17    |

| No | Recommendation  | Priority | Manager                                | Target Date |
|----|---|----------|--|-------------|
|    | Any other relevant information should also be reported.   |          |  |             |
| 25 | Minutes from the Health and Safety Stobhill user group meeting should be available on a timely basis. | Low      | Head of Property Facilities Management | 31/12/17    |

#### 4.7 Accident and Reporting Management Arrangement

The new Accident and Reporting Management Arrangement, approved in November 2016 and structured around the HSE guidance, documents the requirement to submit reports under the Reporting of Injuries and Diseases and Dangerous Occurrence Regulations. It states that all accidents, no matter how minor, should be recorded. Historically, accident reporting was paper driven and completed forms were input onto an Access Database developed by Midlothian IT Service and maintained by the Council's Health and Safety team. When accidents are reported on the RIVO system, management receive automated notifications and when serious incidents are reported automated email alerts are sent to senior management and the Health and Safety team. An accident requiring further investigation is allocated to an investigator who must report the outcome on the system. The following issues were identified:

- paper accident forms are still being completed in a reducing number of areas as training on the new system is rolled out. This continues a reducing risk of forms being misplaced, incomplete data being received and a risk of delays inputting accidents onto the system;
- there is an inconsistency of reporting of accidents as some areas record all accidents and incidents whereas other areas only report accidents. Management reported that the Health and Safety team are planning to promote the Accident and Reporting Management Arrangement requirements which will address what needs to be reported, this will be reinforced through planned auditing; and
- some records were found to be incomplete (eg don't detail if medical treatment was provided). This indicates that there is a need for further instruction to those completing incident details on the RIVO system. Management reported this has been a longstanding issue with paper based reports, highlighting the benefits the Health and Safety Management Information system brings to be able to allocate a task back to the system user to add specific details which have been omitted or not available at the original point of reporting.

| No | Recommendation   | Priority | Manager      | Target Date |
|----|--|----------|--------------|-------------|
| 26 | Awareness of the requirements of the Accident Reporting Management Arrangement should be promoted to all areas of the Council. This should include the requirement to report all incidents | High     | Risk Manager | Complete    |

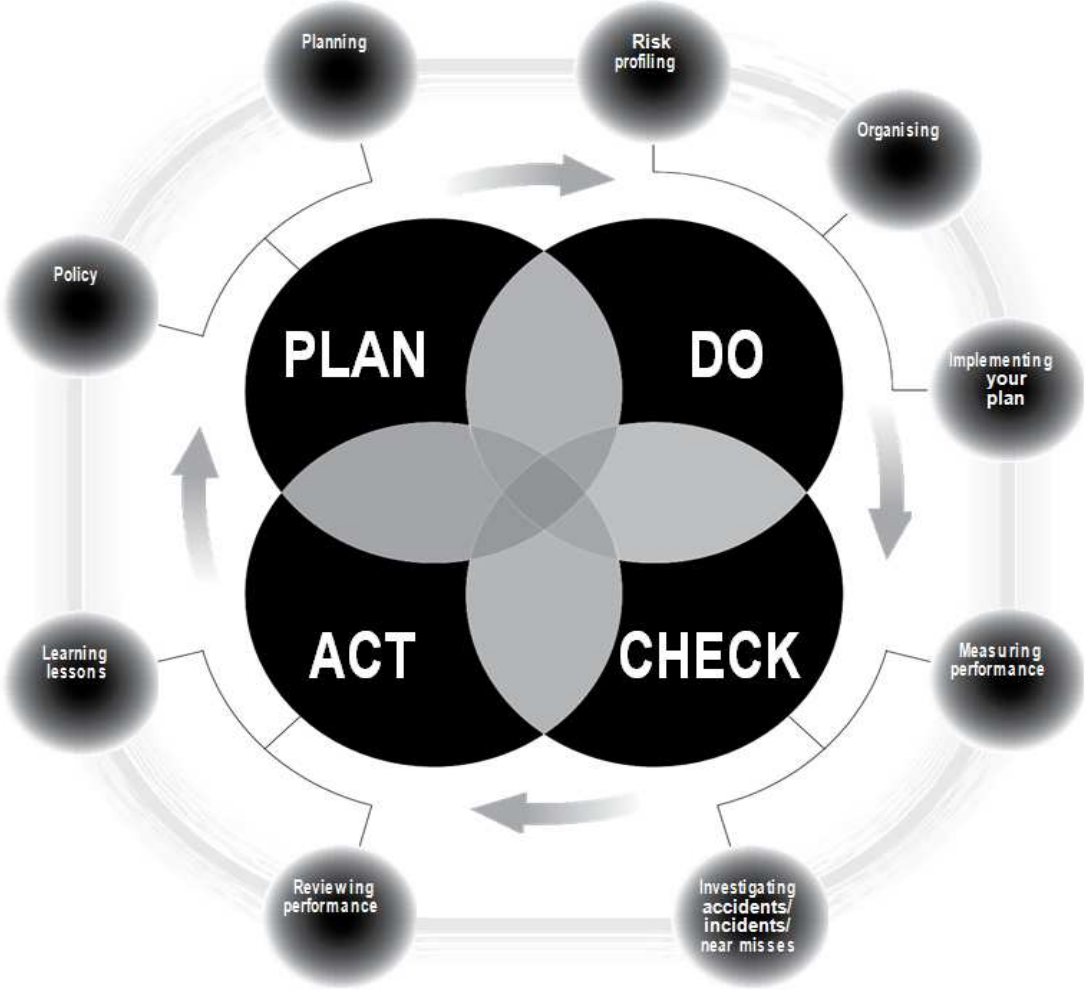
| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
|    | and accidents directly on to the RIVO web portal via the Intranet.  |          |              |             |
| 27 | <p>All incidents recorded on RIVO should be reviewed to ensure appropriate action was undertaken and the necessary information such as medical treatment has been recorded.</p> <p><b>Management Comment:</b><br/>The Health and Safety team have introduced a system of ensuring all incidents reported are reviewed and any information quality matters addressed. 1509 incidents were reported in the last financial year and the Health and Safety team review incidents as they come in and issue tasks or request additional information.</p> | Medium   | Risk Manager | Complete    |

#### 4.8 Health and Safety law poster

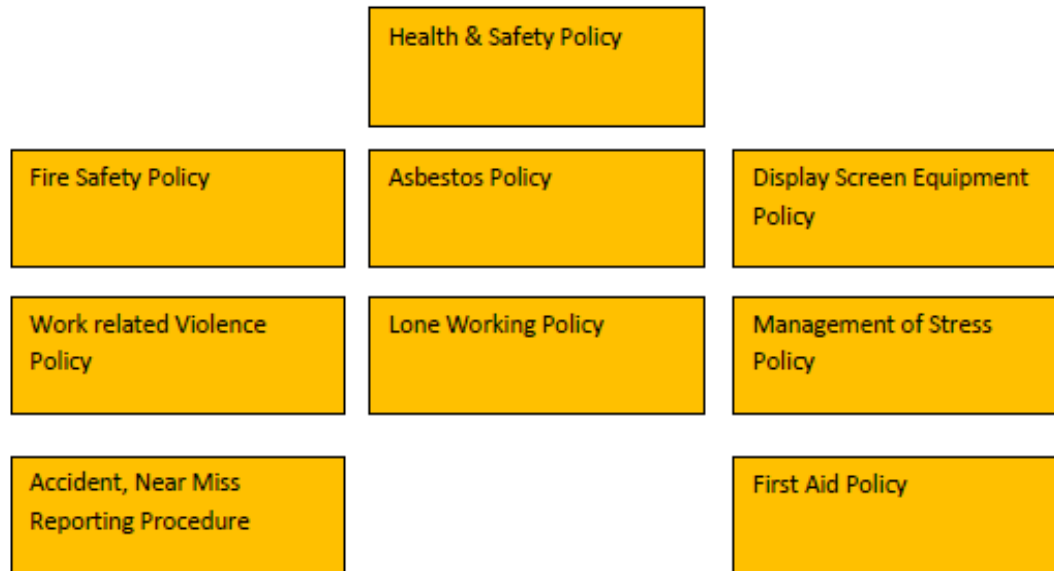
Employers have a legal duty under the Health and Safety Information for Employees Regulations (HSIER) to display an approved poster in a prominent position in each workplace or to provide each worker with a copy of the approved leaflet that outlines British Health and Safety law. Management reported that they do not display the Health and Safety poster because the Health and Safety leaflet is available to employees on the Intranet. However, Internal Audit noted that a number of Midlothian Council employees may not have access to the Intranet and it was difficult to locate the leaflet on the Intranet. The Risk Manager reported that the new Health and Safety policy will include the requirement that managers must display the approved poster or provide each employee with the approved leaflet either through the Intranet or in print for those without computer access. The Health and Safety team will review this in their cycle of inspections.

| No | Recommendation  | Priority | Manager      | Target Date |
|----|---|----------|--------------|-------------|
| 28 | <p>Managers should be reminded of the requirement to ensure that the Health and Safety leaflet explaining the responsibilities of employers and employees is made available to all employees within their services.</p> <p><b>Management Comment:</b><br/>This will be advised and reflected in the new Health and Safety policy and the Health and Safety team will review this in their cycle of inspections.</p> | Low      | Risk Manager | 31/03/18    |

Appendix 1: The HS(G)65 - The Plan, Do, Check, Act Approach



**Appendix 2: Revision of Policies identified in 2013**



## Appendix 3 – Management Arrangements Approved and Under Development

### Management Arrangement approved in 2013

|   |                          |
|---|--------------------------|
| 1 | Health and Safety policy |
|---|--------------------------|

### Management Arrangements approved in 2014

|   |   |
|---|---|
| 1 | Fire Safety Management                        |
| 2 | Water Management (Hot and Cold Water Systems) |

### Management Arrangements approved in 2016

|    |  |
|----|--|
| 1  | Management of Vibration  |
| 2  | Smoke Free Working   |
| 3  | Manual Handling  |
| 4  | Control of Substances Hazardous to Health (COSHH)                              |
| 5  | Display Screen Equipment   |
| 6  | Personal Protective Equipment  |
| 7  | Construction Design and Management   |
| 8  | Accident Reporting and Investigation   |
| 9  | First Aid at Work  |
| 10 | Work Related Violence and Unacceptable Behaviour                               |
| 11 | Provision and Use of Work, Equipment, Lifting Equipment and Lifting Operations |
| 12 | Lone Working   |
| 13 | Management of Stress   |
| 14 | Management of Contractors  |
| 15 | New and Expectant Mothers  |
| 16 | Young Persons  |

### Management Arrangements approved in February 2017

|   |  |
|---|--|
| 1 | Working at Height                      |
| 2 | Health and Safety within the Workplace |
| 3 | Confined Spaces                        |
| 4 | Pressure Systems                       |
| 5 | Assessing Risks                        |
| 6 | Management of Noise at Work            |

### Management Arrangements under Development

|   |                                     |
|---|-------------------------------------|
| 1 | Control of Lead                     |
| 2 | Electricity at Work                 |
| 3 | Asbestos                            |
| 4 | Gas Safety                          |
| 5 | Management of Radiation             |
| 6 | Health and Safety at Special Events |



**Definitions of Ratings**

**Audit Opinion**

| <b>Level of Control</b> | <b>Reason for the level of Assurance given</b>  |
|-------------------------|---|
| <b>Excellent</b>        | The control framework is of a high standard with no unacceptable risks identified.  |
| <b>Good</b>             | The control framework is of a good standard with only minor elements of risk identified which are either accepted or being dealt with by management.  |
| <b>Average</b>          | The overall control framework is of an average standard. Some weaknesses have been identified in the controls and improvements are possible.  |
| <b>Weak</b>             | The control framework is weak and requires improvement as significant issues exist with the adequacy and effectiveness of the Internal Control arrangements. These control deficiencies could result in financial loss or reputational damage to the Council. |
| <b>Poor</b>             | The control framework is inadequate or ineffective and the issues identified require immediate attention to prevent financial loss or reputational damage to the Council.   |

**Recommendation Rating**

| <b>Priority</b> | <b>Risk Definition</b>  |
|-----------------|---|
| <b>High</b>     | Legal / regulatory issues would normally be regarded as high risks.<br><br>Strategic risks would normally be regarded as high risks.<br><br>Financial impact - £50K plus and / or national press interest |
| <b>Medium</b>   | £5K - £49K and / or local press interest  |
| <b>Low</b>      | Under £5K and / or no press interest.   |

## **Distribution**

- Members of the Audit Committee
- Kenneth Lawrie, Chief Executive
- John Blair, Director of Resources
- Ricky Moffat, Head of Commercial Operations
- Garry Sheret, Head of Property and Facilities Management
- Chris Lawson, Risk Manager
- Ernst and Young, External Audit

## **Audit Team**

Author: Amber Ahmed, Auditor

Reviewer: Elaine Greaves, Internal Audit Manager

**TERMS OF REFERENCE:**

**Audit Objective**

To review the adequacy of the control framework designed by management to demonstrate compliance with Health and Safety legislation.

**Scope of the Audit**

The review will focus on the following areas:

1. governance arrangements for Health and Safety within the Council which allow compliance with Health and Safety legislation;
2. Council wide Health and Safety policies and management arrangements, and their dissemination to and application within each directorate;
3. arrangements in place for Health and Safety audits, risk assessments and inspections;
4. adequacy of recording of Health and Safety incidents, accidents, near misses and response to incidents and actions taken to prevent similar events occurring in the future;
5. controls in place to ensure adequate staff training is provided and evidenced (including induction);
6. the adequacy of reporting and management information relating to Health and Safety; and
7. access to the RIVO software system is controlled effectively.

**Exclusions and Limitations**

Health and Safety resource provided to East Lothian Council.

**Potential Risks**

The main risks associated with Health and Safety are:

- death or injury to employees or members of the public by failing to comply with legislative requirements;
- risk of prosecution or criminal proceedings against the Council or officers through Health and Safety procedural or control failures;
- key responsible officers are not aware of their responsibilities; and
- increased level of employee absence due to poor workplace environment and inability therefore to achieve Council objectives.

|   |
|---|
| <b>Audit Approach</b>   |
| <p>The audit approach consists of:</p> <ul style="list-style-type: none"><li>• fact finding interviews with key employees;</li><li>• review of appropriate documentation which includes any risk or best value reviews that have been conducted and risk registers that are in place;</li><li>• interrogation of any relevant systems and sample testing as required;</li><li>• closure meeting with local management to discuss the findings and recommendations of the review; and</li><li>• reporting.</li></ul> |
| <b>Timescales &amp; Reporting</b>   |
| <p>The audit will commence in October 2016 and is anticipated to be reported to the March 2017 Audit Committee.</p> <p>Any issues arising will be communicated directly to local management as they are identified during the course of the audit. A formal audit report will be produced summarising the findings and recommendations of the review.</p>   |
| <b>Information Requirements</b>   |
| <p>Access to all relevant systems, documentation and employees.</p>   |
| <b>Audit Staff</b>  |
| <p>Auditor: Amber Ahmed<br/>Reviewer: Elaine Greaves</p>  |