

## Board of Management Audit & Assurance Committee

<b>Date of Meeting</b>	<b>Tuesday 6 September 2022</b>
<b>Paper No.</b>	<b>AAC1-F</b>
<b>Agenda Item</b>	<b>5.2.1</b>
<b>Subject of Paper</b>	<b>Internal Audit Report – Health &amp; Safety</b>
<b>FOISA Status</b>	<b>Disclosable</b>
<b>Primary Contact</b>	<b>Henderson Loggie</b>
<b>Date of production</b>	<b>30 August 2022</b>
<b>Action</b>	<b>For Discussion and Decision</b>

### 1. Recommendations

The Committee is asked to consider and discuss the report and the management responses to the internal audit recommendations.

## 2. Purpose of report

The purpose of this review is to provide management and the Audit and Assurance Committee with assurance on key controls relating to the curriculum and financial plans in place for City of Glasgow College and their alignment with the regional plan for Glasgow and the college student number targets.

## 3. Key Insights

This internal audit of Health and Safety provides an outline of the objectives, scope, findings and graded recommendations as appropriate, together with management responses. This constitutes an action plan for improvement.

The Report includes a number of audit findings which are assessed and graded to denote the overall level of assurance that can be taken from the Report. The gradings are defined as follows:

Good	System meets control objectives.
Satisfactory	System meets control objectives with some weaknesses present.
Requires improvement	System has weaknesses that could prevent it achieving control objectives.
Unacceptable	System cannot meet control objectives.

## 4. Impact and implications

Refer to internal audit report.

LEVEL OF ASSURANCE

Satisfactory

# City of Glasgow College

## Health & Safety

Internal Audit report No: 2022/05

Draft issued: 17 August 2022

Final issued: 30 August 2022



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## Level of Assurance

In addition to the grading of individual recommendations in the action plan, audit findings are assessed and graded on an overall basis to denote the level of assurance that can be taken from the report. Risk and materiality levels are considered in the assessment and grading process as well as the general quality of the procedures in place.

Gradings are defined as follows:

<b>Good</b>	System meets control objectives.
<b>Satisfactory</b>	System meets control objectives with some weaknesses present.
<b>Requires improvement</b>	System has weaknesses that could prevent it achieving control objectives.
<b>Unacceptable</b>	System cannot meet control objectives.

## Action Grades

<b>Priority 1</b>	Fundamental issue subjecting the organisations to material risk which requires to be addressed by management and the Audit and Assurance Committee as a matter of urgency.
<b>Priority 2</b>	Issue subjecting the organisations to significant risk, and which should be addressed by management as a priority.
<b>Priority 3</b>	Matters subjecting the organisations to minor risk or which, if addressed, will enhance efficiency and effectiveness.



## Management Summary

### Overall Level of Assurance

<b>Satisfactory</b>	System meets control objectives with some weaknesses present.
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### Risk Assessment

Our review of the City of Glasgow College risk register, identified the following specific risks relating to health and safety:

- Reputational Risk - **FAILURE TO COMPLY WITH HEALTH AND SAFETY REQUIREMENTS**, with the following associated risks:
  - Failure to effectively manage health and safety, with consequent risk or damage to staff and students.
  - Damage to the College's good standing.
  - Financial penalties and / or loss of income.
- Estates and Facilities Management - **FAILURE TO MEET ALL REGULATORY REQUIREMENTS**, with the following associated risk:
  - Non-compliance with Health and Safety regulations.
- Commercial Issues - **FAILURE TO ACHIEVE IMPROVED BUSINESS DEVELOPMENT PERFORMANCE WITH STAKEHOLDERS**, with the following associated risk:
  - Staff Health and Well Being.

### Background

As part of the Internal Audit programme for 2021/22 we carried out a review of the College's health and safety arrangements. The Audit Needs Assessment, agreed with management and the Audit and Assurance Committee in March 2022, identified this as an area where risk can arise and where Internal Audit can assist in providing assurances to the Board of Management and the Principal that the related control environment is operating effectively, ensuring risk is maintained at an acceptable level.

The College provides higher and further education to c.25,000 students in the central belt and west of Scotland. Across the two College campuses, there are practical courses delivered which involve heavy machinery, power tools, and corrosive chemicals, which increases the health and safety risk profile of the College. Alongside these specific areas within departments, there are significant health and safety risks across the campuses as a result of the volume of people located on site, and the inherent nature of human error. The Health & Safety department within the College is responsible for ensuring staff members are suitably trained to assess health and safety risks within their departments, to ensure that effective measures are implemented appropriately to mitigate key health and safety risk, and to ensure that all accidents and incidents are recorded, investigated and reported to the relevant authority in a timely manner. We specifically focused our testing on the policies, procedures and other relevant documentation in place, as well as training, risk assessment completion, accidents & incidents reporting and reporting to Senior Management and the Board.



### Scope, Objectives and Overall Findings

The scope of this audit was to conduct a high-level review of the arrangements in place within City of Glasgow College to identify and monitor compliance with legislation relevant to business activities.

The table below notes each separate objective for this review and records the results:

Objective	Findings			
	1	2	3	
<b>The objective of our audit was to ensure that:</b>	<b>No. of Agreed Actions</b>			
1. A health and safety policy and documented procedures are in place which are communicated to all staff.	Satisfactory	-	-	2
2. A formal risk identification and assessment process is in place.	Satisfactory	-	-	2
3. A health and safety training programme which includes induction training, refresher training and training for new equipment and legislation is in place.	Good	-	-	-
4. Regular monitoring of Health & Safety systems is performed to ensure that they are functioning effectively including Health & Safety audits, carried out either internally or by external agencies such as the Health and Safety Executive.	Good	-	-	-
5. An incident and accident recording system with follow-up and implementation of new controls where required.	Satisfactory	-	-	2
6. Regular reporting of Health & Safety to the College Executive Team and to the Board of Management is in place.	Good	-	-	-
<b>Overall Level of Assurance</b>	<b>Satisfactory</b>	-	-	<b>6</b>
		System meets control objectives with some weaknesses present.		

### Audit Approach

Through discussions with the Director of HR, the Interim Associate Director People & Culture, and the Health & Safety Advisors, we identified the mechanisms for managing key health and safety risks; recording accidents and incidents; and reporting to the Board. A walkthrough of these processes was undertaken, in addition to sample testing of documentation, to establish the application of procedures in practice across the College campus.



### Summary of Main Findings

#### **Strengths**

The audit identified the following areas of good practice:

- A 'walk-round' process is in the final stages of implementation within the Education & Humanities department, which will act as a periodic detective control to identify any health and safety issues across the department, with a College-wide rollout planned in the near future;
- All required health and safety documentation is available to all College staff via the intranet;
- Air quality monitors are fitted in all practical classrooms across the College, with monitors in place in a significant number of non-practical classrooms in addition to this. These allow the lecturer to ensure that the air which the students breathe is sufficiently clean at all times, reducing the risk of any respiratory issues for the College's students;
- The hard copy incident and accident reports are held in a locked cupboard, with the Health & Safety Team in full control of its access, in line with Data Protection requirements;
- During the pandemic, the Health & Safety Committee met monthly instead of quarterly to communicate any risks to the wellbeing of staff and students as a result of the changing landscape of the covid-19 virus. Additionally, the Vice Principal of the College (who is also the Chair of the Health & Safety Committee) met with the Principal to discuss key health and safety issues to ensure actions were delegated to the appropriate members of staff to ensure prompt remediation;
- Quarterly reporting via the Finance and Physical Resources Committee is in place to ensure that the Board is aware of all key Health and safety issues facing the College;
- A College-wide health and safety training exercise was undertaken in 2021 to ensure that all staff across the College were suitably trained to correctly complete a risk assessment and had a sufficient understanding of the health and safety procedures within the College;
- The College received a proactive visit from the Health and Safety Executive's (HSE) HM Inspector of Health and Safety and a Local Authority Environmental Health Officer on 21 October 2020, which concentrated on the Hair and Beauty department. Although no formal report was received following the visit, we were advised that initial feedback from the HSE Inspector commended the College's systems and COVID-19 measures as some of the best practice they had observed. (Also noted in Business Continuity Review);
- Despite being based at the City Campus, the Health & Safety Advisors visit the Riverside Campus multiple times each week on a rota basis to increase the team's visibility and accessibility;
- The Health & Safety Advisors perform ad-hoc investigations into issues and trends identified out with their general responsibilities (for instance, high number of staff sickness in one department) to identify any potential additional controls which could be implemented to prevent a recurrence. Investigations were initially undertaken due to monitoring of covid-19 breakouts, however, other instances of non-covid related sicknesses may be investigated to ensure they are not as a direct result of the conditions within the College;
- From a walk-round of a section of the City Campus, health and safety signage was clearly visible, and hard copies of safety procedural documentation was pinned on the notice board within the construction area of the campus, for quick access to users; and
- The Health & Safety Advisors have permission to issue prohibition notices to any dangerous practices they see on-site, without being required to seek further authority, to prevent potential injury occurring.



## Health & Safety

### **Weaknesses**

The audit also identified some areas for improvement including:

- The Health & Safety Policy was not updated, reviewed and published in line with the annual renewal date;
- The Fire Safety Policy has not been formally approved following review, since 2014 to note the changes in College campuses and the significant Fire Safety drills and procedure reviews undertaken in 2021/2022;
- Instances of accident forms being incomplete were identified during sample testing;
- Reporting of near misses is not, for the year 21/22, proportionate to the number of accidents and incidents reported. Meaning opportunities to prevent future accidents and incidents may not be identified;
- Filing of completed risk assessments could be improved to allow for consistent references and accuracy of the information on the Risk Assessment Tracker against the information recorded on the risk assessment documents;
- Four of the five Health & Safety staff members are located within the College at any one time (two Advisors are 0.5 FTE) and therefore these staff are overseeing c. 25,000 students and c.1,000 staff. This reliance on the function's capacity to deliver work is at risk, due to the temporary contracts under which the staff members are employed.

### **Acknowledgment**

We would like to take this opportunity to thank the staff at City of Glasgow College who helped us during our audit.





## Main Findings and Action Plan

**Objective 1 - A Health and Safety policy and documented procedures are in place which are communicated to all staff.**

### Health and safety Documentation

We reviewed the current 'Occupational Health & Safety Policy' document in order to gain an understanding of the processes in place at the College. We also reviewed the training presentation which was published in tandem with the Policy. A further review of the risk assessment processes and Accident & Incident procedures was undertaken to ensure that these documents reflected the information in the current Policy, and that these were accessible to staff across the College. From our review we confirmed that all of these documents are available on the intranet, and the Policy was also issued as an attachment to staff-wide health and safety training, which was undertaken in the Spring of 2021, and is available on the College's website.

The Health & Safety Policy has not been reviewed in line with the defined renewal date set out within the current Policy document. The version control section of the Policy notes that the Policy should be reviewed on an annual basis. However, it was established that the 2022 update was still in draft at the time of the audit, with publication due in the Autumn of 2022. As the previous version was issued following Board approval in December 2020, this has not been updated and signed off in line with the review frequency described within the Policy document. Following discussions with the HR Director and Interim Associate Director of People & Culture, it was identified that the required changes relate solely to job title references, with no legislative updates required in the period. However, in order to ensure the document is reflective of current practices, the Policy should be reviewed and updated in line with the timeframe defined in the document.

### Fire Safety Policy

The Fire Safety Policy was also reviewed as this is a key part of health and safety documentation. From our review it was identified that the Fire Safety Policy is available on the College's website. However, the current iteration of the document has not been formally approved since 2014, though reviews have taken place in 2019 and 2022 with draft documents updated. From discussions with the HR Director and Interim Associate Director People & Culture, it was established that no legislative/ regulatory changes have taken place, and that the Fire Safety Risk Assessment procedure is due to be updated in August 2022. Despite there being no legislative/ regulatory changes, the Policy was last formally approved prior to the Riverside Campus opening to students and staff, and therefore references to the different campuses could be beneficial to the reader, and as such, the Policy should have been formally approved and published following any reviews, from a best practice perspective.



## Health & Safety

### Objective 1 - A Health and Safety policy and documented procedures are in place which are communicated to all staff.

Observation	Risk	Recommendation	Management Response	
<p>From review of the current Occupational Health &amp; Safety Policy, it was established that the document was not updated and approved in line with the timeframe stipulated in the version control section of the document. It was also identified that, at the time of our audit, the 2022 update was still in draft, with publication due in the Autumn of 2022. As the previous version was issued following Board of Management approval in December 2020, this has not been updated and signed off in line with the stipulations within the Policy document.</p> <p>Following discussions with the HR Director and Interim Associate Director of People &amp; Culture, it was identified that the changes made relate only to job title references, which although minor, results in the current Policy document not being fully accurate.</p>	<p>The Health &amp; Safety Policy does not reflect current practices, and therefore inconsistent practices are administered across the College, resulting in potential health and safety risks not being adequately mitigated.</p>	<p><b>R1</b> – It is recommended that the ongoing review of the Health &amp; Safety Policy should be concluded as a matter of urgency, and issued to the Health and Safety Committee and Board for consideration and approval. Following approval, the revised Policy should be communicated to all staff members across the College and the updated version uploaded to the intranet for internal access and published on the College's website for external access.</p>	<p>This is scheduled to be presented to the Finance and Physical Resources Committee (FPRC) on 14 September 2022.</p> <p>Thereafter it will be published and discussed further at H &amp; S Committee.</p> <p><b>To be actioned by:</b> John Gribben, Executive Director Human Resources</p> <p><b>No later than:</b> 30 September 2022</p>	
			<p><b>Grade</b></p>	<p><b>3</b></p>



**Objective 1 - A Health and Safety policy and documented procedures are in place which are communicated to all staff.**

Observation	Risk	Recommendation	Management Response		
<p>Our review of the current Fire Safety Policy, identified that this document has not been reviewed and updated since 2014.</p> <p>From discussions with the HR Director and Interim Associate Director People &amp; Culture, it was established that a key reason for this was that there have been no relevant legislative/regulatory changes since then, and in addition to this, the Fire Safety Risk Assessment procedure is due to be updated in August 2022, however, fire drills and procedural reviews have been ongoing throughout 2022.</p> <p>Despite there being no legislative/regulatory changes since 2014, in relation to Fire Safety, the Policy was last updated prior to the opening of the Riverside Campus to students and staff, and therefore references to the different campuses could be beneficial to the reader, and as such, the Policy should have been updated more regularly from a best practice perspective.</p>	<p>The Fire Safety Policy does not reflect current practices, current job roles and incorporate specific issues relating to and therefore inconsistent practices are administered across the College, resulting in potential health and safety risks not being adequately mitigated.</p>	<p><b>R2</b> – It is recommended that the College conduct a review of the current Fire Safety Policy to ensure alignment with current practices, and to ensure accuracy of references such as campuses and job titles. The Policy should then be issued to the Health and Safety Committee and Board for consideration and approval. Following approval, the revised Fire Safety Policy should be communicated to all staff across the College and the updated version uploaded to the intranet for internal access, and published on the College’s website for external access.</p>	<p>A separate independent Fire Risk Assessment has been undertaken in August 2022. This will be actioned accordingly, through Board, H &amp; S committee and published.</p> <p>Recruitment for a dedicated Fire Safety Adviser will take place during September 2022.</p> <p><b>To be actioned by:</b> Jill Loftus, Interim Associate Director, People &amp; Culture</p> <p><b>No later than:</b> 31 October 2022</p>		
			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; background-color: #d9d9d9;"><b>Grade</b></td> <td style="width: 30%; background-color: #76b82a; color: white; text-align: center;"><b>3</b></td> </tr> </table>	<b>Grade</b>	<b>3</b>
<b>Grade</b>	<b>3</b>				



### Objective 2 - A formal risk identification and assessment process is in place.

All Health and Safety Risk Assessments are completed by the responsible party (i.e. the lecturer) and submitted to the Health & Safety Team for review and sign off, submission to the relevant Trade Union (where necessary) and for central retention. The details of the risk assessments is then recorded on the Risk Assessment Tracker, which is held and maintained by the Health & Safety Team, in order to monitor timely completion of the assessments, and ensure where any renewals/ updates are required, that these can be obtained in a timely manner.

As described in our discussions with the Health & Safety Advisors, all risk assessment documents should be complete, dated and evidenced as having been reviewed by a suitably senior member of staff.

A 'walk-round' process is in the final stages of implementation within the Education & Humanities Department to act as a periodic detective control of any health and safety issues across the department, with a College-wide rollout planned in the near future. As the process is in the planning stage at the time of our audit, the process for managing actions arising out of the walk rounds has not been defined. As such, there is a risk that not all issues identified through the walk-rounds will be addressed in a timely manner.

#### Sample Testing

A sample of ten risk assessments was selected to establish whether the documents had been adequately completed, reviewed by an Associate Dean / equivalent and retained in the secure central folder. From inspection of these ten assessments, it was noted that nine had been reviewed and signed off by an Associate Dean, with the remaining document having been completed in its entirety by an Associate Dean. All documents were adequately complete, with the only disparity identified being the completion date on the Risk Assessment Tracker differing from the completion date shown on the actual document, for three of the documents sampled.



**Objective 2 - A formal risk identification and assessment process is in place.**

Observation	Risk	Recommendation	Management Response	
<p>Despite the risk assessments tested being adequately completed and reviewed, it was noted that the recording of the assessments on the tracker was not always reflective of the information recorded on the Dean approved risk assessment document.</p> <p>It should be noted, however, that in the absence of consistent referencing system, a brief description of the risk assessment is provided on the tracker, and from the sample selected, this information was recorded accurately.</p>	<p>There is a risk that the risk assessments are not updated in line with the required frequency as the completion date per the tracker document is not reflective of the date recorded on the risk assessment form. As a result of this, changes to processes may not be adequately assessed in a timely manner, increasing the likelihood of injury.</p>	<p><b>R3</b> – It is recommended that a review should be undertaken to ensure that the date of completion of each risk assessment is accurately recorded on the Risk Assessment Tracker, and that going forward, an additional check should be performed following the recording of the risk assessment on the Tracker document to ensure that dates agree.</p> <p>Consideration should also be given to implementing a standard referencing system to ensure that all documentation held has a unique identifier.</p>	<p>Improvements in Risk Assessment process and recording will take place in line with recommendations. Timescale will be subject to change dependant on staffing levels.</p> <p><b>To be actioned by:</b> Jill Loftus, Interim Associate Director, People &amp; Culture</p> <p><b>No later than:</b> 30 November 2022</p>	
			<p><b>Grade</b></p>	<p><b>3</b></p>



**Objective 2 - A formal risk identification and assessment process is in place.**

Observation	Risk	Recommendation	Management Response	
<p>As the health and safety walk-round is still in the development stages with the College's Senior Leadership Team, it is unclear as to how the process will be designed to ensure that all actions arising from the walk-round are resolved in a timely manner to sufficiently mitigate the risk.</p>	<p>There is a risk that health and safety issues identified from the walk-rounds are not addressed in a timely manner, resulting in injury or damage to property despite the issue being flagged by the relevant staff member during the walk-round.</p> <p>There is a further risk here related to Health &amp; Safety team staffing levels, where due to the temporary nature of the Health &amp; Safety staff contracts, the issues arising from these walk-rounds may not be suitably addressed in a timely manner.</p>	<p><b>R4</b> – It is recommended that once the walk-round process is implemented, that all actions arising from the walk-rounds are recorded on a central actions tracker, with due dates assigned to each issue recorded. This tracker should then be monitored by designated staff members, with appropriate follow up processes put in place to address any issues which are not remediated in line within the agreed target date.</p>	<p>Improvements will be made in line with recommendations.</p> <p><b>To be actioned by:</b> Jill Loftus, Interim Associate Director, People &amp; Culture</p> <p><b>No later than:</b> 30 November 2022</p>	
			<p><b>Grade</b></p>	<p><b>3</b></p>



### **Objective 3 - A health and safety training programme which includes induction training, refresher training and training for new equipment and legislation is in place.**

From discussions with the Executive Director of HR, Interim Associate Director People & Culture, and Health and Safety Officer, it was established that a college wide training exercise was performed in the Spring of 2021, across 179 managers in March 2021 and 845 staff between April and May 2021, to familiarise them with the updated Health and Safety Policy, teach them how to complete risk assessments, and familiarise them with other health and safety processes.

From review of the training documentation, it was established that the updated Policy was clearly communicated, the risk assessment process was clearly described, and the additional Health & Safety areas such as health surveillance, fitness to work and other preventative measures were included within the training.

Upon commencing their employment, all staff members are required to undertake online health and safety induction training, the progress of which is monitored by the Organisational Development Team who then communicate any staff members with outstanding training to the Health & Safety Team to follow up to ensure timely completion. This helps to ensure that all staff working within the College sufficiently understand their responsibilities, as well as any emergency procedures in place.



### **Objective 4 - Regular monitoring of Health & Safety systems is performed to ensure that they are functioning effectively including Health & Safety audits, carried out either internally or by external agencies such as the Health and Safety Executive.**

From discussions with the HR Director, it was established that certain key staff members within the Health & Safety Team are on fixed term contracts, with two staff members working 0.5 FTE each week (to collectively manage the responsibilities of a single 1 FTE role). As the Health and Safety Department services c. 1,000 members of staff and c. 25,000 students across two campuses, it is imperative that plans are in place to ensure that the function has sufficient resources at all times to be able to provide a timely service to all applicable parties within the College.

It was brought to our attention during the review, that three of the five Health & Safety Advisors (one of which shares their role with a permanent employee, working a 0.5 FTE) within the Health & Safety Team are not permanently contracted to the College. As the team is composed of five staff members, overseen by the Interim Associate Director People & Culture, (who is also on a temporary contract) the team is suitably equipped to service the c. 1,000 members of staff and c. 25,000 students noted above. However, should one or more of these staff members leave the College, or not have their contracts extended, then our understanding is that there are no contingency plans in place to ensure that the Health & Safety Team is adequately resourced to meet the collective obligations across the College. As such, key health and safety risks may not be addressed/ investigated/ remediated in a timely manner due to lack of resources within the team. We have raised this issue directly with senior management and we are satisfied that this risk has been recognised. Therefore, we have not included a specific recommendation on this operational point.

The Health & Safety Advisors perform ad-hoc investigations into issues and trends identified out with their general responsibilities (for instance, high number of staff sickness in one department) to identify any potential additional controls which could be implemented to prevent a recurrence. Investigations were initially undertaken due to monitoring of covid-19 breakouts, however, other instances of non-covid related sicknesses may be investigated to ensure they are not as a result of any aspect of the College.

From a walk-round of a section of the City Campus, health and safety signage was clearly visible, and hard copies of safety procedural documentation was pinned on the notice board within the construction area of the campus, for quick access to College staff and students should they need them.

The College received a proactive visit from the Health and Safety Executive's (HSE) HM Inspector of Health and Safety and a Local Authority Environmental Health Officer on 21 October 2020, which concentrated on the Hair and Beauty department. Although no formal report was received following the visit, we were advised that initial feedback from the HSE Inspector commended the College's systems and COVID-19 measures as some of the best practice they had observed.





### Objective 5 - An incident and accident recording system with follow-up and implementation of new controls where required

From our discussions it was established that all incidents and accidents are reported to reception in order for the receptionist to communicate with all the available first aiders through the internal radio system in order to ensure first aid is provided as soon as possible. The first aider then completes their duties and documents this on the first aid form, which is then passed to the Health & Safety Team. The Health & Safety Team then request the incident information from the staff member / lecturer responsible for the student, corroborate this with the first aid information and make a judgement as to whether the incident is classified as a RIDDOR incident. If it is, then a RIDDOR report is completed and issued to the HSE within ten days of the incident occurring. If not, then the file is completed, recorded on the incident and accidents spreadsheet, and the hardcopy file retained in a locked cabinet.

From the sample tested, it was identified that of the ten reports sampled, it was identified that:

- In Section C, which details whether the incident was a RIDDOR incident and whether further investigation was required, was not completed on eight reports. It should be noted, however, that where the incident was a RIDDOR (two instances), the report was attached and held on the intranet.

Due to the above testing outcome, a further five reports were selected for review to establish whether there were recurring issues across the wider population. From this additional testing sample, the following was noted:

- Section C was not completed on any of the five reports examined in our additional sample; and
- One incident was RIDDOR reportable and due to the staff member involved submitting incomplete information, the form was not sent until the information was obtained, and by this point, due to the staff member being on long-term absence for an unrelated issue, the deadline had passed. This was, however, out with the control of the Health & Safety Team.

From inspection of the storage area in which the incidents and accidents reports are held, it was established that the documents are kept securely, and that the key was stored in a locked drawer within the Health & Safety department, with access shared between Health & Safety Advisors to accommodate for annual leave/absence.



**Objective 5 - An incident and accident recording system with follow-up and implementation of new controls where required.**

Observation	Risk	Recommendation	Management Response	
<p>From the sample of accidents and incidents reports reviewed, it was identified that Section C of the report, where the Health &amp; Safety Advisor records whether the incident is RIDDOR reportable (and whether any further investigation is required) was not sufficiently completed in 13 of the 15 forms examined.</p> <p>Of these 13 forms where section C was not fully completed, three of the reports were RIDDOR reported. All three had the completed RIDDOR form attached, which was subsequently sent to the HSE, and therefore, the insufficient completion of Section C did not impact on the submission of the RIDDOR report. However, it would not be initially clear to the reader whether the issue was RIDDOR reported/investigated further without reviewing further documentation, ultimately reducing the value of the form.</p>	<p>There is a risk that accidents and incidents are not accurately recorded as requiring investigation/ RIDDOR reporting without review of the additional documentation attached, and therefore the forms may be unsuitable evidence for retrospective investigation of an incident, should the additional documentation be misplaced or lost.</p>	<p><b>R5</b> – It is recommended that a review be undertaken of the hard copy accident and incident forms completed for academic year 2021/22 to ensure completeness, with any incomplete forms identified and updated to incorporate the missing information. Going forward, a secondary check should be conducted to ensure that all forms are fully populated before they are filed.</p>	<p>Improvements will be made in line with recommendations.</p> <p>In addition:</p> <p>Responsibility for accuracy on incident forms will be cascaded via H &amp; S committee.</p> <p>This will become more prominent in any new training delivered.</p> <p>The H &amp; S committee will be advised of areas of non-compliance.</p> <p><b>To be actioned by:</b> Jill Loftus, Interim Associate Director, People &amp; Culture</p> <p><b>No later than:</b> 30 November 2022</p>	
			<p><b>Grade</b></p>	<p><b>3</b></p>



**Objective 5 - An incident and accident recording system with follow-up and implementation of new controls where required.**

Observation	Risk	Recommendation	Management Response		
<p>Through our discussions with the Health &amp; Safety Advisors, and further review of the Finance &amp; Physical Resources Committee papers, it was established that the accident &amp; incident data is reported to Senior Management on a quarterly basis, including routine reporting to Health &amp; Safety Committee meetings. A report of the full accidents and incidents data was obtained in order to gain an understanding of the accidents, incidents and near misses reported.</p> <p>From our inspection of the report noted above it was established that in academic year August 2021 to July 2022 (to the point of the audit fieldwork being performed), there were a total of 181 accidents/ incidents/ first aid visits, whereas there were only 3 near misses reported. From discussions with the Health &amp; Safety Advisors it was noted that the need for reporting of near misses has been communicated in training exercises and through regular engagement with College staff. However, in practice near misses are rarely reported.</p> <p>It was also noted through our discussions that what constitutes a 'near miss' is not currently clearly defined, and therefore, there may not be a clear understanding across the College of what should be reported as a 'near miss'.</p>	<p>Risks which would be identified through reporting of near misses are potentially not being identified in a timely manner, and therefore opportunities to prevent future accidents and incidents may be missed.</p>	<p><b>R6</b> – It is recommended that what constitutes a 'near miss' be defined by the Health &amp; Safety Team to ensure that a reasonable and efficient approach is undertaken when reporting near misses.</p> <p>Once defined, this should be communicated to all College staff and students, together with a reminder of the benefit of near miss reporting. Additionally, consideration should be given to the implementation of a near miss short form which can be completed and sent to the Health &amp; Safety Team's email inbox for simplicity of reporting.</p>	<p>Improvements will be made in line with recommendations.</p> <p><b>To be actioned by:</b> Jill Loftus, Interim Associate Director, People &amp; Culture</p> <p><b>No later than:</b> 30 November 2022</p>		
			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; text-align: center;"><b>Grade</b></td> <td style="width: 30%; text-align: center;"><b>3</b></td> </tr> </table>	<b>Grade</b>	<b>3</b>
<b>Grade</b>	<b>3</b>				



### **Objective 6 - Regular reporting of Health & Safety to the College Executive Team and to the Board of Management is in place.**

Quarterly reporting via the Finance and Physical Resources Committee is in place to ensure that the Board is aware of all key Health and safety issues facing the College, with details of the remediation(s) put in place to sufficiently address the issue(s) to provide the Board with assurance that the risk is adequately mitigated.

Trade Union representatives sit on the Health & Safety Committee from both large trade unions to which the College's staff are registered, ensuring that these representatives are aware of any changes to procedures/ any significant issues within the College and therefore providing them with an opportunity to raise any concerns on behalf of their members in a timely manner.

During the pandemic, the Health & Safety Committee met monthly, rather than quarterly, to communicate any risks to the wellbeing of staff and students as a result of the changing landscape of the covid-19 virus. Additionally, the Vice Principal of the College (who is also the Chair of the Health & Safety Committee) met with the Principal on a daily basis to discuss key health and safety issues to ensure actions were delegated to the appropriate members of staff to ensure prompt remediation. This helped to reduce the risk of covid outbreaks occurring within the College, and therefore helping to ensure the College was, and is, providing a safe work environment for its staff and students.



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