Item 08b
For Approval

LEVEL OF ASSURANCE
Good

Glasgow Kelvin College

Health and Safety

Internal Audit report No: 2023/06

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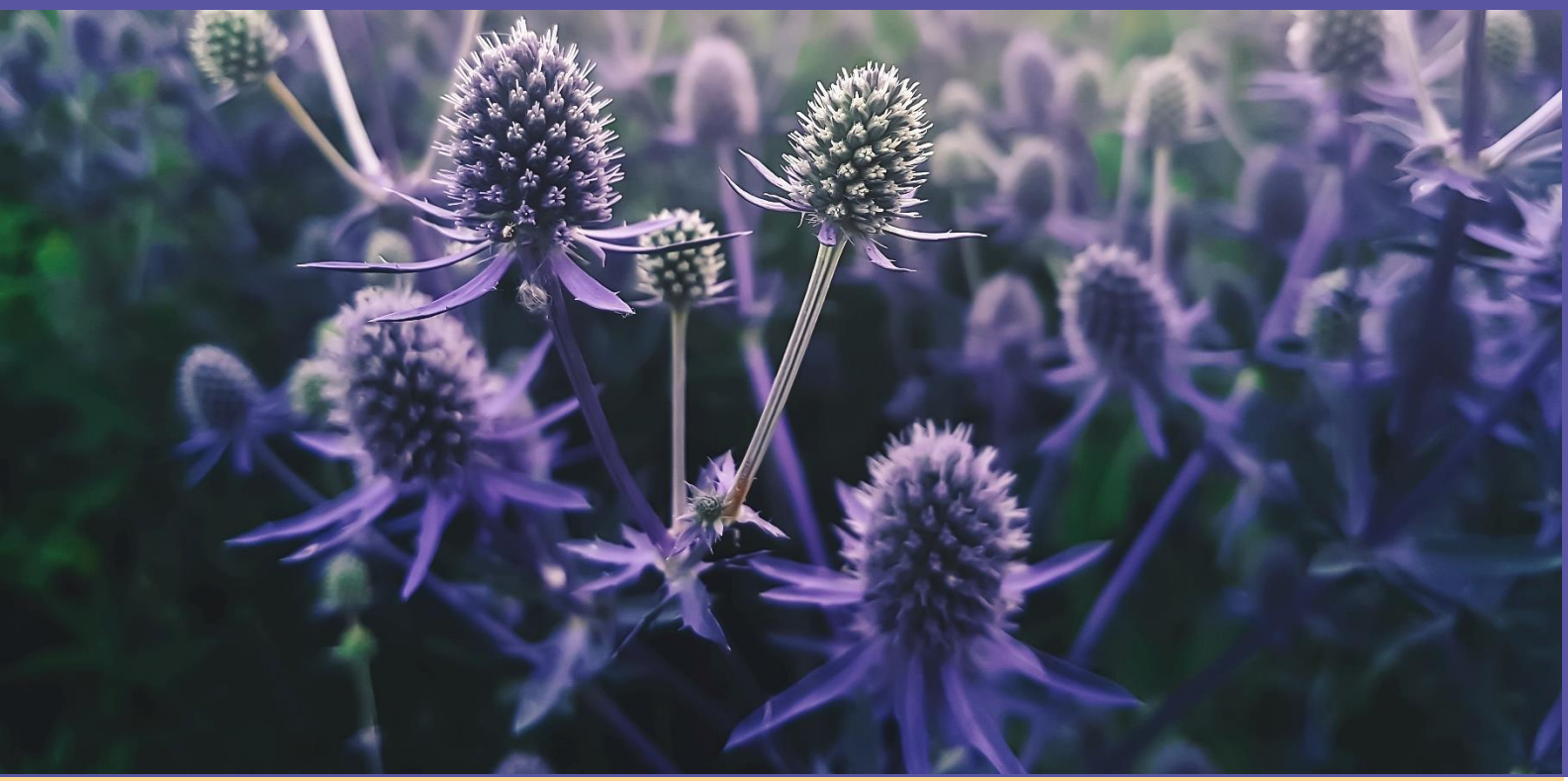

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Level of Assurance

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:

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.

Action Grades

Priority 1	Issue subjecting the organisation to material risk and which requires to be brought to the attention of management and the Audit and Risk Committee.
Priority 2	Issue subjecting the organisation to significant risk and which should be addressed by management.
Priority 3	Matters subjecting the organisation to minor risk or which, if addressed, will enhance efficiency and effectiveness.

Management Summary

Overall Level of Assurance

Good	System meets control objectives.

Risk Assessment

A review of the Glasgow Kelvin College risk register, identified the following specific risks relating to Health and Safety:

- Risk Ref. 4 - Non-compliance with key legislative or regulatory requirements including COSHH (Medium)

Background

As part of the Internal Audit programme at Glasgow Kelvin College for 2022/23 we carried out a review of the systems in place in relation to Health and Safety. The ANA identified this as an area where risk can arise and where Internal Audit can assist in providing assurances that the related control environment is operating effectively, ensuring risk is maintained at an acceptable level.

Responsibility for ensuring the college is compliant with the applicable health and safety regulations and legislation sits with the Board of Management, in conjunction with the operational oversight held by the Principal and the Vice Principals and Directors. The College has a Health and Safety Manager in place, who assists the management team and all College staff in managing health and safety risks, and undertakes operational responsibility for monitoring the completion of risk assessments and incident and accident reporting.

The College's health and safety practices are defined in a formal Health and Safety Policy which details the specific responsibilities of college management and staff, whilst also highlighting the responsibilities of all staff and students across the college in ensuring the safety and wellbeing of their peers. The policy is available to all staff, students and stakeholders via the college's website, and this is maintained and periodically updated by the Health and Safety Manager.

The College has risk assessment and incident and accident reporting mechanisms in place, to ensure that it is monitoring the risks in place within the College and implementing effective mitigants to manage these risks. Oversight of the completion and maintenance of the risk assessments is undertaken by the Health and Safety Manager, who helps to ensure that all risk assessments are reviewed on time. The Health and Safety Manager also reviews all incident forms, which are submitted by College staff, to establish whether mitigating actions are required, including reporting to the Health & Safety Executive (HSE) for RIDDOR reportable incidents.

Scope, Objectives and Overall Findings

This audit reviewed the arrangements in place within the College to deal with Health and Safety (H&S) issues.

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

Objective	Findings			
The objective of the audit was to obtain reasonable assurance that:		**1**	**2**	**3**
		No. of Agreed Actions		
1. A H&S policy and documented procedures which are communicated to all staff is in place.	**Good**	-	-	-
2. A formal risk identification and assessment process is in place.	**Good**	-	-	-
3. A H&S training programme for staff and students is in place which includes induction training, refresher training and training for new equipment or legislation.	**Good**	-	-	-
4. Regular monitoring of H&S systems to ensure that they are functioning effectively including H&S 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.	**Good**	-	-	-
6. Regular reporting of H&S to senior management and to the Board.	**Good**	-	-	-
Overall Level of Assurance	**Good**	**-**	**-**	**-**
		System meets control objectives		

Audit Approach

Through discussions with the Health and Safety Manager, and review of procedural documentation, we identified the internal controls in place and compared these with expected controls. A walkthrough of key systems was then undertaken to confirm our understanding, and this was followed up with compliance testing, where considered necessary. We have reported on any areas where expected controls are found to be absent or where controls could be further strengthened.

Summary of Main Findings

Strengths

- An up-to-date Health and Safety Policy is in place covering the key regulatory and legislative areas;
- The Health and Safety Policy is reviewed by the Principal, the Health and Safety Committee, and the Board;
- A hazard identification procedure is in place for process owners to assess where issues can arise, and this establishes the need for a risk assessment;
- Formal risk assessment processes are in place to ensure the risks associated with an activity are sufficiently documented, together with their mitigants;
- All risk assessment documentation is accessible via the WorkRite, to which all members of staff have access;
- Students are provided with risk assessment documentation by the process owners prior to engaging in the activity.
- Staff health and safety inductions are completed for all staff by the Health and Safety Manager, including a demonstration of the WorkRite system;
- Students are briefed on health and safety at the beginning of each year/ term.
- Refresher training is in place for any changes in regulations and/ or legislation which take place, the need for which is reviewed regularly by the Health and Safety Manager;
- eLearning modules are available through the Workrite system for specific disciplines and more general health and safety processes;
- Internal audits are undertaken regularly by the Health and Safety Manager;
- Monitoring of actions arising from both internal and external audits is undertaken by the Health and Safety Manager, with regular follow up in place;
- A COSHH audit was completed by an external organisation in 2022, with recommendations actioned and monitored by the Health and Safety Manager;
- No recent formal audit has been undertaken by the Health and Safety Executive (HSE);
- Incident reporting processes are in place, with review of documentation undertaken by the Health and Safety Manager to ensure that it remains sufficient for reporting purposes;
- Incident and accident processes also incorporate the reporting of near misses to help mitigate the risk of an accident in the future;
- From a sample of incident reports inspected, all documentation was noted as being complete;
- The Health and Safety Manager has weekly meetings with the Principal to discuss health and safety matters;
- There are six Health and Safety Committees per academic year, which are attended by senior managers and members of the Board of Management; and
- The Health and Safety Manager reports formally to the Finance & Resource Committee three times per academic year, and to the Board on an annual basis.

Summary of Main Findings (Continued)

Weaknesses

- There were no weaknesses arising from our review.

Acknowledgments

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

Main Findings and Action Plan

Objective 1: A H&S policy and documented procedures which are communicated to all staff is in place.

Health & Safety Policy

An up-to-date Health & Safety Policy is in place, which documents the College's obligations regarding health and safety. This is reviewed by the Health and Safety Committee, the College's Principal, and finally the Board of Management for approval.

The Health & Safety Policy defines the key pieces of legislation to which it must adhere, and highlights the organisational structure within the college, across its four campuses, who are in place to help ensure compliance with this legislation. Additionally, the responsibilities of the following members of staff/ committees are defined:

- Board of Management
- Finance & Resources Committee
- Principal
- Health & Safety Manager
- Vice Principals and Directors
- Director of Human Resources
- Head of Facilities and Environmental Sustainability
- Heads/ Managers/ Team Leaders/ Supervisors
- Employees
- Health & Safety Committee
- Learners
- Contractors

Finally, the Policy notes that it will be available through both the College website and its intranet, and from inspection of the College website, it was established that this is available for all staff, students and stakeholders to review under the 'Policies and Procedures' section on the College's website.

Procedures

The College has a procedural document in place to document hazards within a certain process/ department, which is utilised by all process owners in the preparation of risk assessments. This is titled as a 'Hazard Identification Form' and is available to all staff across the College via the College intranet.

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

All risk assessments are kept on the College's risk management system, WorkRite, with backup copies held on the College's intranet. This includes assessments for standard departmental processes across all campuses and exceptional risk assessments for events such as visits to external sites. The individual risks to student wellbeing are recorded with the relative mitigants in place. Any risk assessment within the College can be generated from the WorkRite system and issued to the relevant party. The system also shows the date on which the assessment was written up, last updated, last reviewed etc.

Any external visits would be the responsibility of the individual managing the visit. The process owner will initially complete a Hazard Identification form, and then use this to complete the risk assessment form. All staff have access to the WorkRite system and can access any existing assessments completed to prevent duplication. Naming conventions are in place to highlight responsibilities (H&S, Estates etc.)

The process owner who produces the risk assessment in the WorkRite system is then the person who receives reminders to update the document in line with the defined review period. Staff can also raise actions in the system against the risk assessment, i.e. a cracked window in a room, and can raise issues with estates which will issue an email to estates with a set completion date. The relevant member of the estates team can notify the action as being 'complete' via the link sent by the process owner, which then updates the risk assessment document and the actions list.

The 'Actions' tab on the dashboard within WorkRite documents both the actions allocated to the Health and Safety Manager and also an overview of actions raised by other risk assessment owners, and the number of documents outstanding, awaiting review, and overdue.
The Health & Safety Manager has completed a significant number of the risk assessments on file but also reviews and approves those completed by process owners to ensure they are sufficient.

<u>Sample Testing</u>

From inspection of a sample of risk assessments for adequate completion, documentation of the key risks and validity in the system, the following was noted.

- All risk assessments were up to date, with review dates scheduled in the future.
- Both general health and safety risks and activity specific risks were documented.
- The process owner per the documentation agreed to the owner per the WorkRite system.
- Mitigants for each of the risks identified were suitably documented.

Objective 3: A H&S training programme for staff and students is in place which includes induction training, refresher training and training for new equipment or legislation.

Staff Training

As a result of the Covid-19 pandemic, the College changed its focus on health and safety, with all members of the Senior Management Team undertaking a NEBOSH health and safety management course. At the time of this review, over 60 staff have also completed an IOSH general health and safety course.

Staff who work with dangerous substances undertook COSHH training in the current academic year to help ensure that they were familiar with any changes in regulations and to adopt any best practice. RPE Face Fitting training was also completed as a result of the issues raised during the external COSHH audit.

Induction Training

Health and safety training is undertaken for all staff within the college. With the Health and Safety Manager completing induction training for staff at the point of them joining the organisation. HR notify the Health and Safety Manager that there is a new member of staff and he contacts them directly to complete the training either on site or via a MS Teams call. The Health and Safety Manager talks through a set of slides detailing the health and safety processes and the legislation and regulations to which the college must adhere, and then sends a form with all the areas discussed and requires the staff member to provide an email signature to say that they have completed this and are happy to work safely in the college. This is sent to their Line Manager as evidence of completion.

A training needs matrix for staff which details all staff and individual faculties, and the training which is mandatory and the 'nice to haves' is in place, with training scheduled where required for any changes in roles and responsibilities.

Student Training

Students are provided with an induction brief at the start of each term, with all the basic health and safety information for the campus (evacuations, fire safety etc.). Lecturers are then responsible for providing students with a tour of the full campus, and passing out risk assessment documentation for any activities which require it. Posters detailing safe working practices and the legislative and regulatory requirements are also in place in all the practical classrooms/ workshops.

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

Internal review processes are undertaken within the College by the Health and Safety Manager. However, they also undertake delegation and subsequent monitoring of any actions arising from external reviews undertaken over health and safety related processes.

Internal Reviews

The internal reviews undertaken by the Health and Safety Manager were formerly undertaken every two to three years, however, the college is now aiming to complete a review of each of the facilities every two years. Actions arising as a result of these reviews will then be monitored to completion by the Health and Safety Manager.

The Health and Safety Manager undertakes safety inspections every three months for support staff, and carries out three inspections per academic year for the academic staff, including delivering workshops. The timings for these inspections are scheduled, and any issues arising from them are recorded on a spreadsheet, which is managed by the Health and Safety Manager. This spreadsheet is therefore regularly reviewed to ensure inspections and follow up of any issues is undertaken in a timely manner.

External Audits

A Control of Substances Hazardous to Health (COSHH) audit was completed by Health and Safety Consultants, Mabbett for the changes in regulations and the ways in which faculties were working. This report was finalised in June 2022, with actions monitored through to completion by the Health and Safety Manager via a tracker document. This audit raised various remedial actions, and as a result of this work, the Health and Safety Manager combined these with investigations undertaken and put these into one plan totalling 71 actions. A number of actions in the report were identified as being unable to be completed until a number of years have passed to ensure that all COSHH assessments have been reviewed. The actions had a completion rate of 65.8% at the time of our audit fieldwork, with the remaining actions scheduled for completion over the next 24 months.

Progress on the completion of these actions is provided to the Senior Management Team, the Health and Safety Committee and were also included in the annual report to the Board of Management.
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Objective 5: An incident and accident recording system with follow-up and implementation of new controls where required.

Incident forms were previously completed in hard copy format, for review and physical sign off by the Health and Safety Manager. However, these are now completed via a digital form, which automatically populates the Incident Report spreadsheet on Microsoft Teams. This allows central recording of all forms raised within the College.

If the form relates to a member of staff, HR automatically receive an alert and can implement any additional support (counselling etc.). The form covers the accident book from the HSE so the user will be aware whether the incident is RIDDOR reportable. Throughout the College, there are QR codes on internal doors which can be scanned to generate a form to be completed. These are clearly sign posted via posters on the doors.

The spreadsheet listing all incident forms, which have been submitted, is broken down into near misses, accidents and incidents. An incident is defined as something which has happened that did not result in an injury, i.e. fits, anxiety etc. which was not the direct result of an accident. With accidents defined as an event which has resulted in an injury, and a near miss defined as an event which could have resulted in an injury but this was avoided. Where any incidents/ accidents are RIDDOR reportable, these are submitted to the HSE by the Health and Safety Manager in line with the defined timeframes. A full investigation is then undertaken by the Health and Safety Manager to establish whether any controls could be implemented to prevent a recurrence.

All reports go to the Health and Safety Manager to ensure that they are RIDDOR reported in time (where applicable). They then receive a notification on MS Teams to highlight that a report has been completed and is required to be reviewed. The Health and Safety Manager then establishes whether an investigation is required, and obtains witness statements for documentation purposes. It was noted that investigations only undertaken where there is any extra work required to mitigate the risk or where there might be future ramifications for injuries to a staff member/ student.

The Health and Safety Manager can filter the database to highlight any trends in departments/ with particular lecturers, and can then arrange training where these are identified. Reports are printed for the purposes of retaining a backup, and these are filed in the Health and Safety Manager's office in a locked cabinet.

<u>Sample Testing</u>

A sample of reports were selected for testing to establish whether these were sufficiently complete, submitted in a timely manner, and followed up on where necessary, with the following noted:

- All forms were sufficiently completed.
- All forms were reviewed by the Health and Safety Manager, and held securely as evidence.
- Investigations were completed for two of the incidents, with actions raised where necessary.
- Two of the forms were submitted five and six days after the incident occurred, with all other forms submitted within 24 hours of the incident occurring.

Objective 6: Regular reporting of H&S to senior management and to the Board.

The Principal of the college is the Health and Safety Manager's direct line manager and meets with him on weekly basis. The Health and Safety Manager also sits in on Senior Management meetings and discusses any training gaps within each department. A benefit of these meetings is that the Health and Safety Manager can reiterate the responsibility which sits with the Senior Management Team and highlight the need for their contribution to ensuring the college is a safe place to work and learn.

The Health and Safety Manager also attends staff meetings periodically to notify them of any changes in training needs and any updates to legislation/ regulations. In order to stay up to date with any changes, the Health and Safety Manager checks the HSE, IOSH, RoSPA etc. publications regularly and prepares a document to notify the teams of any updates, and issues this within the monthly Health and Safety Memo, all of which are available on the college's intranet. Within this, links to the relevant articles are also provided to allow the staff an opportunity to further their understanding.

A review of the 'legal and current issues' section of the memo is undertaken at the Health and Safety Committee, to ensure that members are sufficiently aware of the current health and safety issues facing the college.

The Health and Safety Committee meets six times per academic year, and there is a committee folder on MS Teams where all the documentation is stored for review. The committee is chaired by a union member one year (EIS and Unison) and then a member college management staff the next year, and this alternates indefinitely.

The Health and Safety Manager reports accidents and incidents to the Health and Safety Committee and reports on a health and safety as a whole to the Finance & Resources Committee three times per academic year, with a comprehensive report submitted to the Board of Management on an annual basis.

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