



**INTERNAL AUDIT**  
**FINAL REPORT**

**Title: Health & Safety**

**Report Distribution**

For Action:            Barry Saunders            Safety Officer

For Information:    Mark Kimberley            Head of Corporate Services  
                              Richard Walton            Audit Commission

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Draft Issued:        25<sup>th</sup> August 2010

Final Issued:        27<sup>th</sup> August 2010

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## EXECUTIVE SUMMARY

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### Introduction

The report details the findings of an audit carried out on the relevant health & safety documentation at Gedling Borough Council. Phoenix Health & Safety were requested to undertake the review to provide independence and impartiality throughout the review process. The audit review was undertaken in May 2010.

The purpose of the review was to compare the health and safety management system documentation, including the health and safety policy, in use by the Council, with the Health & Safety Executives (HSE's) guidance document HSG65, 'Successful Health & Safety Management' and the content of a health and safety policy as described in the Health and Safety at Work etc Act 1974 (HASAWA74).

In doing so an assessment of compliance with legislation and best practice regarding hazard control and risk management could be made, conclusions drawn and recommendations made as to any improvements required.

### Principal Findings

	High	Medium	Low
Number of recommendations	0	0	1

The detailed findings and associated recommendations are provided in the second part of the report. There were no high / medium risk recommendations made in the report.

### Assurance Statement

Internal Audit can provide **substantial assurance** with respect to the adequacy and effectiveness of controls deployed to mitigate the risks associated with the areas reviewed.

## **INTRODUCTION**

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### **Objective & Scope**

To ensure the authority's Health & Safety arrangements comply with legal, regulatory and advisory requirements.

The scope of the review encompassed the following areas:

- The Health & Safety Strategy & Policy, including Safety Guidance Notes (SGN's).
- Accident reporting and investigation procedures.
- Health & Safety Training, including the maintenance of records.
- The risk assessment process.
- Health & Safety audits and reporting.
- Asbestos register.
- Fire procedures.
- Corporate reporting and relevant committee structure.

The key risks associated with the system objectives are:

- Failure to comply with relevant legal and regulatory requirements resulting in fines or imprisonment of employee's.
- Failure to protect members of staff and the public, resulting in costs of litigation, compensation and fines.

This audit report is presented on an exception basis. The detailed findings include only those areas where controls should be enhanced to improve their effectiveness and mitigate the risks that affect the authority's objectives for the system reviewed. Controls and risks identified in the scope that are not mentioned in the detailed findings were considered to be adequate and operating effectively.

### **Acknowledgement**

A number of staff gave their time and co-operation during the course of this review. We would like to record our thanks and appreciation to all the individuals concerned.

## DETAILED FINDINGS

Observation	Risks	Recommendation	Management's Response
<p><b>Recommendation 1 - Managers Safety Guidance Notes (SGN)</b>  <b>Level of Risk - Low</b></p>			
<p>Whilst Health &amp; Safety policies generally reflected current legislative and regulatory requirements a number of supporting Safety Guidance Notes require updating.</p> <p>Issues identified include:</p> <ul style="list-style-type: none"> <li>• Control of Substances Hazardous to Health (COSHH) - requires updating to reflect changes emanating from Work Place Exposure Limits (WEL).</li> <li>• Fire &amp; Emergency procedures require updating.</li> <li>• Noise – the SGN requires updating to reflect current legislation (noise action levels as stated in The Noise at Work Regulations 2005).</li> </ul>	<p>Failure of management to comply with legal or regulatory requirements due to following out dated SGN's.</p>	<p>Health and safety polices should be reviewed to ensure they reflect current legislative and regulatory requirements.</p> <p>Once confirmed as current, all supporting Safety Guidance Notes should be updated to ensure they are aligned to the respective policies.</p> <p><b>Action: Barry Saunders – Safety Officer</b></p>	<p><b>Management Comment:</b>  Current regulatory requirements, including COSHH exposure limits are contained in the Safety Policy (Arrangements Section). Both Noise and COSHH levels are taught in Safety Awareness training courses held twice a year. All policy documents are currently being reviewed as reported in the Safety Officer's Annual Report 2009-10.</p> <p><b>Planned Corrective Action:</b>  To continue updating Safety Guidance Notes this financial year as planned.</p> <p><b>Timescale:</b>  Safety Policy – 31 DEC 10  Other major SGNs – 31 MAR 11</p>

**ANNEX A**

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**Risk & Assurance – Standard Definitions**Audit Recommendations

Audit recommendations are categorised, depending upon the level of associated risk, as follows:

Level	Category	Definition
1	<b>High</b>	Action is essential to manage exposure to fundamental risks.
2	<b>Medium</b>	Action is necessary to manage exposure to significant risks.
3	<b>Low</b>	Action is desirable and should result in enhanced control or better value for money.

Assurance Statement

Each report will provide an opinion on the level of assurance that is provided with respect the risk emanating from the controls reviewed. The categories of assurance are as follows:

Category	Definition
<b>No</b>	The majority of the significant risks relating to the area reviewed are not effectively managed.
<b>Limited</b>	There are a number of significant risks relating to the area reviewed that are not effectively managed.
<b>Substantial</b>	The risks relating to the objectives of the areas reviewed are reasonably managed and are not cause for major concern.

### **What Happens Now?**

The final report is distributed to those involved with discharging the recommended action, the Head of Corporate Services, Audit Commission and, where applicable, the relevant Heads of Service.

A synopsis of the audit report is provided to the authority's Audit Committee. Internal Audit will carry out a follow-up exercise approximately six months after the issue of the final audit report. The on-going progress in implementing each recommendation is reported by Internal Audit to each meeting of the Audit Committee.

### **Any Questions?**

If you have any questions about the audit report or any aspect of the audit process please contact the auditor responsible for the review or Vince Rimmington, Manager of Audit & Risk Services on telephone number 0115 9013850 or via e-mail to [vince.rimmington@gedling.gov.uk](mailto:vince.rimmington@gedling.gov.uk)