# Loch Lomond & The Trossachs National Park Authority

**Review of Health and Safety** 

**Final Report** 



November 2021



Loch Lomond & The Trossachs National Park Authority Review of Health and Safety

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Loch Lomond & The Trossachs National Park Authority Review of Health and Safety

#### 1. Introduction

- 1.1 As part of the 2021/22 Internal Audit plan we have carried out a review of the health and safety arrangements within Loch Lomond & The Trossachs National Park Authority (the Park Authority).
- 1.2 Effective health and safety procedures and arrangements within an organisation are important to ensure a safe work environment is maintained for staff and the public. The Park Authority has a Health and Safety Policy in place which sets out organisational responsibilities and the overall approach to health and safety. The Health and Safety Advisor within the Park Authority is responsible for ensuring that the Policy is up to date and communicated across the organisation.
- 1.3 The purpose of the audit was to gain assurance that the health and safety arrangements in place within the Park Authority are being complied with.

The scope of the audit included:

- Reviewing the documented policies and procedures in place in relation to health and safety;
- Ensuring there is a suitable nominated officer responsible for overseeing the management of health and safety and that the roles and responsibilities of other officers in relation to health and safety are clearly defined and understood;
- Reviewing the risk assessment strategy and ensuring that regular risk assessments are undertaken to identify

any required preventative and protective measures to ensure the safety of employees and others;

- Reviewing arrangements in place to ensure that staff (including any temporary staff) receive induction and regular training;
- Ensuring robust processes are in place for incident recording, reporting and monitoring including the maintenance of records and statistics and regular review by senior management e.g. incident reports, work related absences etc.;
- Ensuring suitable arrangements are in place in relation to Fire Safety and First Aid, including the appointment of a fire wardens and the provision and training of qualified first aiders; and
- Ensuring that management have considered any changes required to the health and safety procedures and arrangements as a result of the Covid-19 Pandemic.

The audit reviewed the Park Authority's health and safety arrangements and adherence with these arrangements, however, it did not verify that the Park Authority is compliant with health and safety legislation/regulations.

#### 2. Audit opinion

2.1 Based on the audit work carried out a reasonable level of assurance can be placed upon the control environment. The audit has identified some scope for improvement in the existing arrangements and five recommendations which management should address.

#### 3. Main Findings

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3.1 We are pleased to report that some key controls are in place and operating effectively. A Health and Safety Committee is in place which is made up of service representatives across all levels of the organisation. The Committee meets on a monthly basis and its remit is documented within its Terms of Reference. Service representatives are responsible for ensuring that all relevant staff are informed of health and safety updates and these are communicated via the Park Central intranet page and email.

- 3.2 The areas of the organisation most susceptible to significant or major incidents have been identified and measures put in place to ensure these are managed appropriately. A Risk Assessment Policy is in place that sets out how the Park Authority identifies and manages hazards and this is available to all relevant staff.
- 3.3 A suite of Covid-19 related documents have been developed, including operational guidance and workplace risk assessments; these have been referenced in the Health and Safety Policy and communicated to all staff.
- 3.4 However, our audit testing found that there are areas of noncompliance. A Health and Safety Policy is in place that outlines staff roles and responsibilities and is available to all staff, however we found that only 34% of staff have confirmed that they have read and understood the Policy in the E-Learning System (where the Policy is held). In 2018, four introductory E-Learning health and safety training courses were introduced that are required to be completed by all new starts, however we were advised that staff in post prior to these being introduced are not required to undertake these.
- 3.5 Through review of a sample of generic and service specific risk assessments, we identified that a number of these are out of date and/or do not contain sufficient information Park.

We were advised that a review of risk assessments is currently underway.

- 3.6 An Accident, Near-Miss Reporting and Investigation Policy is in place that clearly outlines the process to be followed when reporting health and safety incidents and near misses. These are reviewed by the Health and Safety Advisor to confirm whether they warrant being reported to the Health and Safety Executive. However, through sample testing we found that two incidents/accidents had been closed in advance of the identified action being implemented.
- 3.7 Although we were advised that health and safety audits were previously undertaken by the Health and Safety Advisor, these have not been carried out since 2019 due to the Covid 19 pandemic. The process that should be followed when undertaking these audits is also not documented.
- 3.8 Although Fire Wardens and First Aiders have been appointed to each location and evidence was provided to demonstrate that all Fire Wardens had completed the relevant training, a central record of all First Aid training completed is not held.
- 3.9 Health and safety updates are provided to the Board and senior management, however we found that Key Performance Indicators (KPIs) have not been developed in relation to health and safety.
- 3.10 An action plan is provided at section four outlining our observations, risks and recommendations. We have made five recommendations for improvement. The priority of each recommendation is:

Priority	ority Definition	
High	Key controls absent, not being operated as designed or could be improved. Urgent attention required.	1
Medium	Less critically important controls absent, not being operated as designed or could be improved.	4
Low	Lower level controls absent, not being operated as designed or could be improved.	0
Service Improvement	Opportunities for business improvement and/or efficiencies have been identified.	0

- 3.11 The audit has been undertaken in accordance with the Public Sector Internal Audit Standards.
- 3.12 We would like to thank officers involved in this audit for their cooperation and assistance.
- 3.13 It is recommended that the Chief Internal Auditor submits a further report to the Audit and Risk Committee on the implementation of the actions contained in the attached Action Plan.

## 4. Action Plan

**Title of the Audit:** Loch Lomond & The Trossachs National Park Authority – Review of Health and Safety

No.	Observation and Risk	Recommendation	Priority	Management Response
Key C	ontrol: Staff have accessed the relevant he	ealth and safety guidance and training.		
	A Health and Safety Policy is in place that outlines staff roles and responsibilities and is available to all staff via the E- Learning System, however from a recent E- Learning report it was found that only 34% of staff have confirmed that they have read and understood the Policy. In 2018, four introductory E-Learning health and safety training courses were introduced that are required to be completed by all new starts, however we were advised that staff in post prior to these being introduced are not required to undertake these. Various other specific health and safety courses are provided to staff with specific health and safety responsibilities. Although a list of the First Aid training completed was provided, a central list of the dates each officer has completed the training is not maintained therefore is not readily available. This increases the risk that staff are not fully aware of their responsibilities in relation to health and safety.	Management should ensure that a central list of First Aid completion dates is maintained for future reference, this should include any expiry dates of training. Consideration should be given as to whether the current introductory E- Learning health and safety training courses should be rolled out to all staff. Steps should also be taken to improve the acceptance of the Health and Safety Policy. Thereafter, management should develop arrangements to ensure that the completion levels for health and safety training, in particular the training considered mandatory, is monitored and reported regularly to senior management and the Health and Safety Committee.	Medium	<ul> <li>Response: Accepted.</li> <li>All First Aid training including expiry dates will be recorded in the new HR system.</li> <li>Policy acceptance completion rates will be provided to Operational Managers on a regular basis and will form part of our regular H&amp;S reporting.</li> <li>The recommendation to roll out the current introductory E-learning health and safety training courses will be presented to the H&amp;S committee for consideration.</li> <li>Officer Responsible for Implementation:</li> <li>HR Manager</li> <li>Timescale for Implementation:</li> <li>28 February 2022</li> </ul>

No.	Observation and Risk	Recommendation	Priority	Management Response			
Key C	Key Control: Risk assessments are undertaken to identify any required preventative and protective measures.						
2	<ul> <li>Through review of the suite of generic risk assessments available, we found that:</li> <li>The fire risk assessments were last updated in March 2020;</li> <li>The manual handling, new expectant mothers and noise risk assessments were last updated in 2016; and</li> <li>The asbestos risk assessment does not contain a sufficient level of detail and is not presented in a format to constitute a comprehensive risk assessment.</li> <li>The auditor selected three service areas (Rangers Service, Land Operations Service and Facilities) and requested copies of the risk assessments in place. Ten risk assessments were provided in total and we found that seven of these are overdue for review, with some dating back to 2014.</li> <li>This increases the likelihood that health and safety risks are not identified at the earliest opportunity and that action may not be taken to mitigate these risks.</li> </ul>	Management should ensure that the out of date risk assessments highlighted as part of the audit are reviewed and updated to ensure they are fit for purpose. Thereafter management should implement a process to ensure that risk assessments are being undertaken and reviewed as expected.	High	<ul> <li>Response: Accepted.</li> <li>Risk Assessments are currently subject to a comprehensive review. An action plan is currently being developed for the review of Core Risk Assessments and will be rolled out across the organisation.</li> <li>Action plan to be issued with timescales for completion.</li> <li>Officer Responsible for Implementation:</li> <li>HR Manager</li> <li>Timescale for Implementation:</li> <li>Action Plan - 31 December 2021</li> <li>Risk Assessments – 31 July 2022</li> </ul>			

No.	Observation and Risk	Recommendation	Priority	Management Response
		s in place for monitoring compliance with the Health Management should ensure that a planned programme of health and safety audits is devised		<b>-</b> .
	recommendations or actions arising from a health and safety audit is followed up. This increases the risk that health and safety issues may not be identified and appropriate action may not be taken.	and shared with all relevant staff.		HR Manager <b>Timescale for Implementation:</b> 31 March 2022

No.	Observation and Risk	Recommendation	Priority	Management Response
4	An annual health and safety report is presented to the Board that outlines key aspects of health and safety such as progress made in the year and a summary report of accidents, incidents and near misses. Whilst there are standing agenda items that are discussed at the Health and Safety Committee, Key Performance Indicators (KPIs) have not been developed in relation to health and safety. This increases the risk that senior management may not be fully aware of key issues or trends in relation to health and safety that require action.	KPIs in relation to health and safety should be developed and performance against these reported to senior management and the Health and Safety Committee on a regular basis.	Medium	Response: Accepted.Active monitoring and reporting of key H&S activities will be developed and reported to the H&S committee and the Executive on a regular basis.OfficerResponsiblefor Implementation:HR ManagerTimescale for Implementation:31 January 2022

No.	Observation and Risk	Recommendation	Priority	Management Response
	<b>Control</b> : Accidents, incidents and near misse An Accident, Near-Miss Reporting and Investigation Policy is in place that clearly outlines the process to be followed when reporting health and safety incidents and near misses. These are reviewed by the Health and Safety Advisor to confirm whether they warrant being reported to the Health and Safety Executive and		Medium	Response: Accepted.         Actions       from       any         Accidents/Incidents       that       have         transferred       over       to       'business       as         usual' will now remain open until the       action has been fully implemented.
	accidents/incidents can only be closed by a limited number of appointed officers. From review of a sample of three entries within the current accident/incident log, we confirmed that the relevant form had been completed and action had been identified, however two of the entries had been closed on the log despite the "closed out" details suggesting the action had not yet been fully implemented. This increases the risk that action may not be taken to help avoid the re-occurrence of such incidents.			<ul> <li>This has been implemented with immediate effect.</li> <li>Officer Responsible for Implementation:</li> <li>HR Manager</li> <li>Timescale for Implementation:</li> <li>19 November 2021</li> </ul>