



SAFETY AND HEALTH AUDIT STRATEGY

2016 - 2019

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SAFETY AND HEALTH AUDIT STRATEGY

1. INTRODUCTION

As we embark upon a revised system of audit we have reviewed and revisited our overall approach to auditing. It is essential that the schools and services we engage with understand the benefits our auditing system will bring and see the audits as an enabler to help them achieve their objectives and goals rather than an inhibitor. We want to move away from audit being seen as ‘something that is done to you’ to a process where we work in partnership to improve performance and raise standards across the University.

This Strategy sets out our new audit system, the types of audit we will undertake, how we will identify, plan and deliver the audit programme and how will monitor and measure performance of the system.

The revised system has been introduced following consultation and approval from key stakeholders including the H & S Consultative Committee, Executive H & S Group, UPARC & HR Committee.

2. AIMS AND OBJECTIVES

The aim of our audit system is to **‘provide a framework in which we can work in partnership with schools and services across the University to help them achieve their goals and objectives by identifying and driving improvements in their health and safety management systems and performance, seeking assurance that risks are being effectively controlled and legislation complied with’.**

3. DEFINITIONS

For the purposes of this Strategy the following definitions will apply:

AUDIT

An independent objective assurance activity designed to add value and improve operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to improve the effectiveness of risk management control and governance processes.

ASSURANCE

An objective examination of evidence for the purposes of providing an independent assessment of H & S risk management or governance processes across the University.

AUDIT SPONSOR

In line with best practice each audit will have a sponsor. This sponsor provides senior approval and commitment to the audit and audit process. For most cases the sponsor for audits will be the Director of Health and Safety. In circumstances where Safety and Health Services receives a request to undertake an audit the sponsor will be the senior leader of that area of the University.

AUDIT OPINION

This is typically the overall rating of assurance given following an audit. There are four options available and these are based on the assessment of the issues identified, whether they are systemic or specific to an area within the scope of the audit, the risk of harm or damage or level of non-compliance with legislation, best practice or University standards.

The four assurance options will be FULL, SUBSTANTIAL, LIMITED and LITTLE OR NONE.

Descriptions of each rating can be found in subsequent sections of this strategy.

4. OUR AUDIT FRAMEWORK

We will develop an auditing framework that blends the following 4 key elements:

- Professionalism
- Partnership
- Planning
- Performance

PROFESSIONALISM

As well as being H & S professionals we will equip our auditors with recognised auditing skills that will further enhance their competence and raise professional standards. We will provide them with opportunities to gain experience and insight into the role of auditors through closer liaison with the University's internal auditors. Our auditors will have credibility and integrity providing objective and independent opinion and advice.

PARTNERSHIP

We will work in partnership with Schools and Services and staff representatives (eg TU Safety Reps/SSAs etc) to ensure value and benefits are derived from each audit. We will engage early and often, agreeing a clear and defined scope of each audit with Heads/School Managers, Deans or Divisional Heads as appropriate. We will actively encourage their involvement throughout the audit process and ensure that any findings and resulting actions/timescales are understood and agreed. We will then provide post audit advice and guidance to support the Schools/Services in addressing any areas for improvement identified through the auditing process.

PLANNING

We will develop and agree a 3 year programme of audit. More detailed planning will take place every 12 months to ensure that sufficient notice can be given and auditing resource can be planned and allocated appropriately. In developing the audit plan we will engage with a range of stakeholders including: -

- H & S Consultative Committee;
- Executive H & S Group/UPARC;
- Safety & Health Services;
- Audit Committee;
- Internal Audit.

The following drivers will influence the audit plan including: -

- Mandatory audits (as required by specific legislation)
- Audits undertaken by external parties including enforcement or regulatory authorities
- Accidents/incidents;
- Changes in legislation/best practice.

The programme will cover audits undertaken by Safety and Health Services (including food safety and, where appropriate, occupational health related audits) plus external audits (including those undertaken by enforcing/regulatory agencies and authorities. This is to ensure we clearly understand the resources required to not only undertake audits but to administer and facilitate.

PERFORMANCE

The H & S performance of schools and services will be monitored and reported to a range of stakeholders including those set out above and also reported via the H & S Annual Report through an agreed set of Key Performance Indicators. More details on the KPIs can be found under the following sections relating to the types of audit. We will also monitor and report the performance of the audit strategy itself and the auditors. We will work in partnership with the schools and services to evaluate and provide feedback to help identify and improve performance where required and where appropriate to maintain high levels of assurance.

As part of our commitment to continuous improvement we will seek feedback on the audit experience and effectiveness of the audit process.

5. TYPES OF AUDIT

Over the period of our previous audit programme we focussed our audit activities on seeking assurance that schools and services had all the core elements of an H & S management system in place. This has been generally successful with effective management systems in place across most of the University. However it was recognised that a change in focus was required to determine how successfully and consistently these management systems were embedded within the Schools and Services. To achieve this we will now undertake 3 types of audit. These will be: -

- Self- verification assurance assessment;
- Bespoke;
- Sample

It is important to note that whilst inspections will remain a fundamental tool for the active monitoring of H & S management systems & performance it should not be regarded as part of the audit system.

Each of the audit types are described in the following sections.

SELF VERIFICATION ASSURANCE ASSESSMENTS

INTRODUCTION

This is a significant step forward in the evolution of the University's H & S management system. Success will depend on high levels of trust, professional behaviours and recognition and understanding of H & S roles and responsibilities with the process aligning directly to the H & S roles, responsibilities and organisation document agreed by the Board of Trustees and published in November 2015. However we must be clear about what this process is not. It is not about making a statement that everyone and everything is safe, that no accidents will ever happen and that no enforcement action will be taken by the relevant authorities.

A pilot of the process was undertaken by the Faculty of Health Sciences. This enabled the process to be refined. However it is recognised that the process will continue to evolve and improve as it matures.

ASSESSMENTS

Assessments will be undertaken annually by each School and Service with responsibility for the completion of the assessments sitting with the Head of that School or Service in liaison with School Managers. They may ask other managers or members of staff to help coordinate the completion of the assessment or seek advice and opinion (eg local SSA/TU reps and H & S groups/committees).

Heads of School or Service may also wish to seek further advice from Safety and Health Services and refer to previous audits for information.

The assessments will be used to provide a level of assurance to the Deans/Divisional Heads that H & S is being managed effectively in their area of responsibility and to identify and drive improvements in their performance. These assessments will be used in addition to other auditing and monitoring activity to provide assurance to the Deputy Vice Chancellor and Registrar and then through to the Board of Trustees.

The assessment will cover the following 4 key areas: -

- Managing H & S risks;
- Leading and promoting H & S;
- H & S policies and procedures;
- Continuous improvement.

A series of pertinent questions relating to each area has been produced. These will be used to prompt and guide the assessment. These questions and supporting advice may change over time as the assessment is used and feedback on its effectiveness is received.

Schools/Services will determine the most appropriate time for assessment to be undertaken but the annual requirement will remain. This will also make it easier for Safety and Health Services to review an appropriate number or sample size as part of the H & S audit programme.

ASSURANCE LEVELS

We will use 4 ratings of assurance, FULL, SUBSTANTIAL, LIMITED and LITTLE OR NONE. For consistency in language and terminology it makes sense for these levels to be used as part of the assurance assessment. These levels have been used as part of the previous audit process of which schools and services have been involved. Short descriptors of the levels are set out below.

Full – There is an appropriate H & S management system in place which is working effectively. Some minor areas for improvement exist but these have been identified and clear plans are in place to address them.

Substantial – There is an appropriate H & S management system in place which is working effectively across most areas. A few areas of improvement exist but these have been identified and clear plans are in place to address them.

Limited – There is an H & S management system in place but is only working effectively in some areas. Numerous areas of improvement exist but these have been identified and clear plans are in place to address them.

Little or none – There is little or no evidence of any management system in place and there is no clear evidence that plans are in place to address areas for improvement.

KEY PERFORMANCE INDICATORS

It is proposed that performance of this process will be monitored and reported through the following KPIs:-

- Number of assessment returns by due date;
- Reported assurance levels;
- The number of verifications of assessments undertaken annually by Safety and Health Services

ROLE OF SAFETY AND HEALTH SERVICES

Safety and Health Services will be responsible for the following:-

- Overseeing the end to end process, updating and refining the process as necessary;
- Providing annual reminders to schools/services and any subsequent follow up reminders;
- Providing regular updates to committees and groups on agreed KPIs;
- Providing support, guidance and advice to schools/services
- Undertaking an agreed number of verification audits on an annual basis;
- Collating and recording assessment outcomes.

OTHER POINTS OF INTEREST

An indicator of a strong commitment to effective H & S management is the willingness to be honest about performance and have the confidence to seek ways of identifying areas for improvement and acting upon them. This may include requesting more detailed audits of subjects/areas within a school or service where concerns may exist. Developing action plans to raise standards further, seeking advice and support from S & HS or even learning from other schools or services are all great examples of this.

END TO END PROCESS

The following diagram outlines the end to end process.



BESPOKE AUDITS

INTRODUCTION

This process provides a further step forward in the evolution of the University's H & S management system which will introduce a shift in the focus of our auditing activity and may identify areas where the previous audit system acted as a comfort blanket for a number of schools or services. These audits are not in place to compensate for the absence of assurance mechanisms adopted by line management but provide added value through independent and stringent evaluation.

The process was tested during a pilot audit which focussed on the management of moving and handling risks within IT Services. This pilot provided a great learning environment and gave the auditors valuable experience. In addition feedback helped to refine and improve the process further.

BESPOKE AUDITS

These audits will look to determine what controls are in place and then test those controls to determine whether they are being effectively implemented. Our previous auditing system focussed primarily on the former.

This new approach aligns with internal audit best practice and will require a shift in focus as our auditors (H & S Advisors) move from an aide memoire/checklist approach to an approach that requires more professional auditing judgement.

We will ensure that the scope and objectives of each audit are agreed by senior representatives of the activities and areas of focus and each audit will have 2 main phases. The first phase will involve the collecting and collating of evidence of controls ((procedures, risk assessments, training records etc) with the second phase focusing on testing those controls (interviews, observing etc).

As a result the audits will be more rigorous and will cover a range of activities and themes. This new approach will offer opportunity to move us away from audit being seen as something that is done to you to a process which is valued and requested.

AUDIT OPINION

The 4 levels that were in use in the previous system will remain unchanged these being, Full, Substantial, Limited and little or none.

However unlike the previous system two audit opinions will be given. The first will be for the adequacy of the documented controls in place and the second will be for the effectiveness of those controls. Again this aligns with internal audit best practice.

SCOPE AND OBJECTIVES

Ahead of any audit the scope and objectives will be understood and agreed by the Director of Health and Safety and a suitably senior representative of the area/s audited. Where the audit focuses on a theme that is cross university then this may require agreement from a number of senior representatives.

The scope and objectives must be realistic and achievable and will take into account the resource and time available to undertake the audit. The objectives will clarify what the audit wishes to seek assurance on and provide direction for the auditor and auditee

The scope and objectives will be set out using an audit planning memorandum set out below.

AUDIT PLANNING MEMORANDUM

Sponsor		Subject Area	
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Key contacts		Auditors	
Estimated no. of days		Draft report (targets)	
Start date		Management responses (target)	
Finish date		Final report (target)	
Audit scope			

Audit objectives	

Confirmation that scope and objectives are agreed	Signature	Date

FIELDWORK

The first phase of the audit will be the collation and review of evidence associated with the scope and objectives of the theme/risk as set out in the audit planning memorandum. Primarily this will be documented evidence such as guidance notes, risk assessments, safe systems of work, training records and local rules, however evidence and background information on culture, areas of strength and areas for improvement may be collated via interviews with relevant staff or through on line surveys.

Once this evidence and information has been collated the auditor will review the strength of the evidence against the scope and objectives of the audit and then identify areas they wish to test. This will be the second phase of the audit where the effective implementation of controls in place will be tested. This phase may require further interviews of relevant staff or direct observation of activities.

FINDINGS AND RECOMMENDATIONS

Following the field work the auditor will provide the Director of H & S (as audit sponsor) with an overview of the audit to ensure that the Director of H & S is satisfied that the audit has met its objectives. The auditor will then meet with the senior representative/s from the area/theme audited to run through the findings of the audit including positive observations & strengths as well as areas for improvement. The auditor will also advise them of the proposed audit opinions. The auditor will then outline any recommendations for improvement. Each recommendations will be given a priority based on the risk arising from the finding identified. This risk will be clearly articulated under each finding. It is important that the senior representatives are given opportunity to challenge or question each finding and recommendation.

Following the meeting the auditor will provide the senior representatives with a draft copy of their report with findings and recommendations. This will provide a further opportunity to reflect on the findings and provide a management response to the recommendation. If the recommendation is agreed then the senior representative must provide a proposed target date for completion plus a suitably senior named individual responsible for the delivery of that recommendation. Once this has been provided and the auditor is comfortable with the information provided then a final report will be issued.

FOLLOW UP AND ESCALATION

Once the actions and target dates have been agreed then the auditor will issues the final version of the audit report. The Auditor will then decide on an appropriate time to seek information of progress towards delivering the agreed actions. The auditor should seek reassurance that progress is being made. Unplanned or unforeseen circumstances may arise that could impact the delivery of agreed actions therefore the Auditor should allow some flexibility to extend targets dates or change or amend actions if appropriate.

If the auditee does not provide sufficient evidence that progress is being made or where target dates are being missed or the action undertaken has not been as agreed, then they should seek advice in the first instance from the Audit Sponsor (in most cases the Director of H & S). If appropriate, the Director of H & S will seek reassurance from the senior representative/s responsible for the delivery of the action/s that they will be delivered by an agreed target date. The Audit Sponsor will state that if the target dates are missed or the action is deemed unsatisfactory then further escalation will be considered. Further action will include escalating to the Dean/Divisional Head, then, if necessary to the Deputy Vice Chancellor/Registrar. If the risk arising from the inaction is deemed serious enough to safety or health then the Director of H & S, on behalf of the Vice Chancellor and President to take

emergency mitigating action (this may include prohibiting an activity) as set out in the University's Health and Safety Roles, Responsibilities and Organisation document.

KEY PERFORMANCE INDICATORS

It is proposed that performance of this process will be monitored and reported through the following KPIs:-

- Completion of audits in line with agreed audit programme;
- Levels of audit opinion.

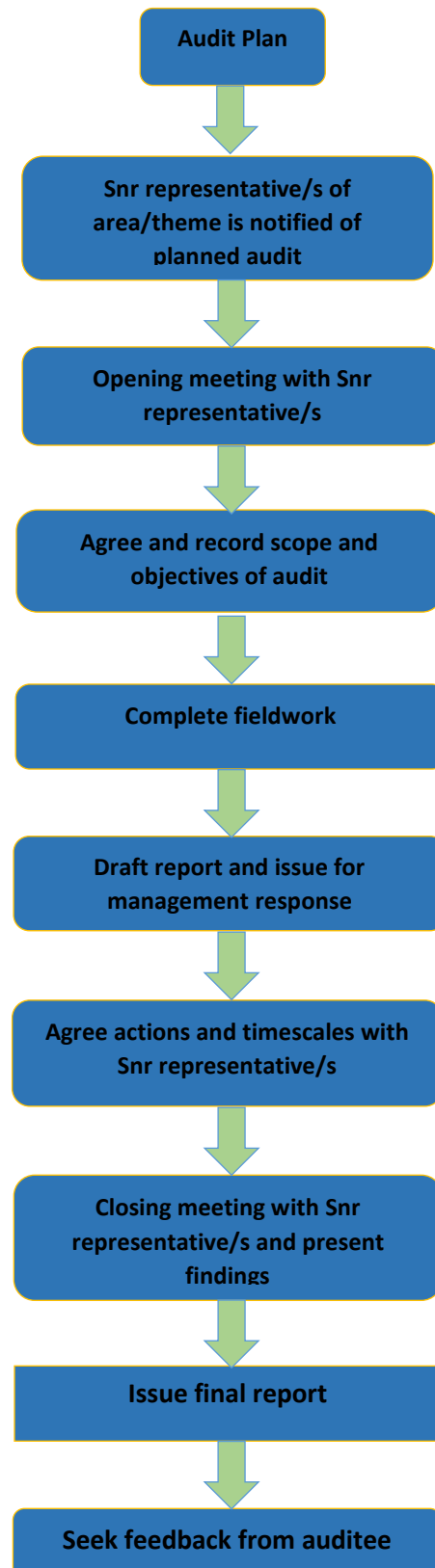
ROLE OF SAFETY AND HEALTH SERVICES

Safety and Health Services will be responsible for the following:-

- Overseeing the end to end process, updating and refining the process as necessary;
- Undertaking audits in line with agreed audit programme
- Providing regular updates to committees and groups on agreed KPIs;
- Providing support, guidance and advice to schools/services as appropriate
- Collating and recording audit outcomes;
- Providing after audit care and support;
- Monitoring and facilitating post audit actions, and escalating where necessary.

END TO END PROCESS

An overview of the end to end process is provided below.



SAMPLE

These audits overlap a little with the bespoke audits, except that standards are implicit and there is no need to consider the law and standards and their translation into practice. Examples may be of works at lab benches or workstation assessments, in which the workplace is visited by the auditor and questioned to determine: if the risk assessment has been undertaken, whether it has been followed, whether the emergency precautions have been identified and what information, instruction, training and supervision is in place.

These audits will, in the main, be unannounced.

A comprehensive picture of the whole of the school or service can only be gained by taking a large sample size, but care must be taken to differentiate between the role of management within the faculty or division to ensure that these arrangements are in place and the auditor's role of taking a random sample. The auditors are not in place to compensate for the absence of assurance mechanisms adopted by line management, but provide added value by the independent and stringent evaluation of the sample and of the effectiveness of the chain of management control back to the accountable duty holder in senior management. Root causes such as supervision, performance monitoring and management oversight will help move the focus of action taken by the auditee from blame of the individual carrying out the work and may challenge supervisors and managers in the whole chain of command, ultimately the head of school or service

6. AUDIT PROGRAMME

INTRODUCTION

A 3 year audit programme will be developed by Safety and Health Services. The programme will cover all audit activity undertaken by Safety and Health Services plus any relevant audits planned by Mazars (approved by the Audit Committee), other external auditors, by enforcing/regulatory agencies and authorities such as the Environment Agency, Environmental Health, HSE and Avon Fire & Rescue Service. This will ensure that we fully understand the extent of audit activity and resources required to not only undertake the audits but to administer and facilitate them.

DRIVERS

The content of the programme will be influenced by a number of drivers, including:-

- Risk Registers;
- Mandatory audits required by legislation;
- Where informed, external parties (enforcement/regulatory);
- H & S related audits organised/facilitated by other Schools/Services;
- Accidents/near misses;
- Changes in legislation/best practice
- Self- verification assessments;

AUDIT PROGRAMME

In developing a realistic and achievable audit programme we will ensure that the wider role of the auditors has been considered. We use highly skilled and competent H & S professionals who undertake a wide range of advisory roles across the University to support schools and services.

Whilst providing a framework for auditing activity the content and order of the programme will remain flexible and will be regularly monitored and reviewed as circumstances and the environment in which we work changes.

More detailed planning will take place every 12 months to ensure sufficient notice can be given and auditing resource can be planned and allocated appropriately.

THE PROGRAMME PLANNING PROCESS

An overview of the programme planning process can be found below.



ROLE OF SAFETY AND HEALTH SERVICES

- Ensure the delivery of the programme
- Regularly review and monitor the programme ensuring that relevant committees/groups are advised of progress and any changes or updates

Document control information

Published document name:	safety-health-audit-strategy-po.pdf
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