

The next meeting of the Organisational Development Committee will be held on **Monday 7 October 2019 at 4.00 pm** in the Boardroom, Langside Campus.

## **A G E N D A**

<b>19.36</b>	Welcome and Apologies		S Heidinger
<b>19.37</b>	Declarations of Interest		S Heidinger

### **Minutes of Previous Meeting**

<b>19.38</b>	Minutes of Previous Meeting –5 June 2019	P	S Heidinger
<b>19.39</b>	Matters Arising – Action Grid	P	S Heidinger
<b>19.40</b>	Notes of Support and Teaching JCNC Meeting	P	S Heidinger

### **Items for Discussion**

<b>19.41</b>	Assistant Principal HR Report	P	L McGaw
<b>19.42</b>	Employee Engagement Survey 2018 Update	P	L McGaw
<b>19.43</b>	Attendance Management Report May to July 2019 – Quarter Four	P	N Patton
<b>19.44</b>	Annual Attendance Management Report for 18/19	P	N Patton
<b>19.45</b>	Work related stress and mental health	P	N Patton
<b>19.46</b>	Annual People Report 18/19	P	L McGaw
<b>19.47</b>	Organisational Development Report	P	G Crankshaw
<b>19.48</b>	Health and Safety Report	P	G Crankshaw
<b>19.49</b>	KPI Report	P	L McGaw

### **Items for Noting \***

<b>19.50</b>	Internal Audit – Health and Safety	P	G Crankshaw
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### **Continual Improvement**

<b>19.51</b>	Equalities Impact Assessment on Decisions Made		S Heidinger
<b>19.52</b>	Review of Papers (Including disclosable status)		S Heidinger
<b>19.53</b>	Any Other Business		S Heidinger

**Date of Next Meeting:** 15 January 2020,  
Langside Boardroom

**\*These items will not be discussed unless there is a request to do so.**

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## **ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING**

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Date of Meeting	7 October 2019
Paper Title	Assistant Principal, Human Resources Report
Agenda Item	19.41
Responsible Officer	Lorraine McGaw, Assistant Principal, Human Resources
Status	Disclosable
Action	For Discussion

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### **1 INTRODUCTION**

The purpose of this report is to provide an update to the Organisational Development Committee on the type of activity that has been happening within the Human Resources and Organisational Development function since the last Committee meeting not covered within other Organisational Development Committee papers.

### **2 ADMINISTRATION RESTRUCTURE CONSULTATION**

On 14 May 2019, the College set out proposals to restructure the Administrative functions within Faculty Administration, MIS, Quality and Executive Support. The proposals aimed to deliver improved services for students and stakeholders, enhanced access to management information as well as reducing staff costs to assist the College to achieve a financially sustainable position for the future.

A range of consultation methods have been used to communicate proposed changes:

- staff group sessions were held on 14 May 2019 to explain the rationale for the new structure and commence discussions with staff with the opportunity to raise issues and concerns;
- all staff affected by the proposals and relevant trade union representatives were asked to return comments on the consultation by Friday 16 August 2019;
- further opportunities for discussion have been provided to staff through meetings with trade union representatives and 1:1 meetings;
- a dedicated e-mail box was setup to receive all correspondence and questions relating to the proposed restructure;
- staff were offered opportunities to meet with a Human Resources Adviser to raise individual concerns.

A total of sixty-five responses were received during the period of the consultation, thirty-nine from lecturing staff and twenty-six from support staff. One of the twenty-six responses was from UNISON on behalf of their

members. This was received on 14 August 2019 and the College provided a response to them on 26 August 2019.

Applications for voluntary severance were invited in the initial consultation document from all staff across the college on grade 8.2. Sixteen applications were received, ten from staff directly affected by the restructure and six from other areas of the College. These are currently being considered, taking into account the proposed amended structure outlined in this document.

On 12 June 2019, the Board of Management delegated to the Remuneration Committee authority to make decisions on the administrative restructure following the conclusion of consultation. In these discussions and delegation, the Board had stipulated that any decision to make compulsory redundancies should be a decision for the full Board.

On 5 September 2019, the Remuneration Committee were briefed by the Assistant Principal, Human Resources on the proposed modifications to the original restructure proposal as a result of the consultation process. The main thrust of these was to reduce the number of administrative staff who would be located centrally, while increasing the number located within Faculties. The revised model would retain central management of the Faculty based administrative staff, and would involve a net reduction of 8.3 FTE posts, as originally proposed.

Having discussed the revised proposals; the Remuneration Committee agreed that they should now be subject to a further brief consultation exercise with the aim of the new structure being introduced with effect from 1 November. The Committee were advised that the required reduction in staff numbers would be achieved through a combination of unfilled vacancies, redeployment to vacant positions and offers of voluntary severance (approximately 3FTE). There would be no requirement for compulsory redundancies.

The table below summarises the timeline for the further stages of the administration restructure.

<b>DATE/S (2019)</b>	<b>ACTIVITY</b>
<b>Week Beginning</b>	
9 September	Feedback to all affected groups on amended structure
16 – 30 September	Consultation on amended structure
16 – 30 September	Individual meetings available upon request
16 September	Redeployment of Executive Support Administrators process begins
<b>Decision Week Beginning</b>	
7 October	Collation and review of feedback from staff and Trade Unions and reflection of structure proposal.
7 October	Staff communication meeting (Trade Unions invited) Final structure released
<b>Implementation</b>	
21 October	Implementation Commences <ul style="list-style-type: none"> <li>Vacancy Process/Matching/Interviewing</li> <li>Interviews for vacant posts</li> <li>VS Leavers notified</li> </ul> Preference
11 November	Transition into new structure

### 3 NATIONAL SUPPORT STAFF JOB EVALUATION PROJECT

The Job Evaluation Project Team are continuing to support Managers and post holders to complete role questionnaires and update job descriptions where this is appropriate to do so. Given the length of the role questionnaire, and the practicalities of getting staff together across the three campuses, progress has been challenging in some areas especially where staff have also been involved in the restructuring consultation exercise. However, progress is being made and as at 24 September, 46% of our jobs in scope have been submitted. We have been advised that the current national position across the Scottish FE sector is sitting at 54% as at the same date.

The Project Team are continuing to provide support and encouragement to post holders and Managers through open staff sessions, one to ones and facilitated discussions. We continue to work in close partnership with our trade union colleagues to address any concerns at the earliest opportunity.

### 4 ACADEMIC MANAGEMENT RESTRUCTURE

The Vice Principal, Curriculum and External Relations is currently working on a review of the academic management structure. Benchmarking with other

colleges of a similar size has shown that Glasgow Clyde College, with 15 Heads of Curriculum and 80 Senior Lecturers has a relatively high proportion of senior academic roles.

The proposal to restructure was discussed at the Remuneration Committee meeting on 5 September 2019 with the Vice Principal outlining the College intention to consider reducing the academic management overhead, and to simplify the management structure, by moving to a one-tier model with a smaller number of senior positions.

The financial impact of any restructure, in scale and timing, is difficult to predict at this stage. However if significant savings are to be realised it will be necessary to reduce staff numbers. In order to achieve the reduction a Voluntary Severance Scheme available to Heads of Curriculum and Senior Lecturers will need to be put in place.

The Remuneration Committee supported the proposal to restructure the College's academic management. The next stage in the process for a restructure consultation paper to be issued to staff, and this is likely to be issued in early October 2019.

## **5 HR PROCEDURES UPDATE**

Attached in Appendix 1 is the progress report on HR procedures. Progress has been extremely slow however, we are continuing to work with the Trade Union representatives.

## **6 RISK ANALYSIS**

There are no risks associated with this paper.

## **7 LEGAL IMPLICATIONS**

There are no legal implications associated with this paper.

## **8 FINANCIAL IMPLICATIONS**

The cost of approximately 3 FTE voluntary severance costs associated with the Administration restructure.

## **9 REGIONAL OUTCOME AGREEMENT IMPLICATIONS**

N/A

## **10 HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

An Equality Impact Assessment of the original Administration restructure proposal has been undertaken. A further Equality Impact Assessment will be undertaken on the final structure.

## REVIEW AND STANDARDISATION OF HR PROCEDURES

Policy Title	Sections for inclusion	Lead Officer	Union	Deadline	Progress
Alcohol, drugs and substance misuse		Gillian Crankshaw		August 2019	Complete
Agency Worker Regulations		Nicole Patton	N/A	August 2019	Complete
Adverse Weather		Nicole Patton		January 2019	Complete
Conflicts of Interest and Personal Relationships		Nicole Patton	N/A	January 2019	In progress – Deadline for December 2019
Dealing with Anonymous Communications regarding members of the workforce		Lorraine McGaw	N/A	January 2019	Complete
Discipline		Nicole Patton	N/A	National Bargaining	N/A
Disclosure Scotland (PVG)		Nicole Patton	N/A	September 2019	Complete
Fixed Term Contracts		Nicole Patton	N/A	September 2019	Complete
Grievance		Nicole Patton	N/A	National Bargaining	N/A
Job Evaluation/Grading Reviews		Nicole Patton	N/A	National Bargaining	N/A
Learning and Development	<ul style="list-style-type: none"> <li>• Mandatory Training</li> <li>• Personal Development Plans</li> <li>• SLT Development Plans</li> <li>• Further and Higher Education Sponsorship</li> </ul>	Gillian Crankshaw	N/A	June 2019	In progress – Deadline for completion December 2019
Leave and Holidays	<ul style="list-style-type: none"> <li>• Adoption</li> <li>• Bereavement</li> <li>• Emergency</li> <li>• Leave of Absence</li> <li>• Maternity</li> <li>• Paternity</li> <li>• Paternity Leave when adopting</li> <li>• Shared Parental Leave</li> <li>• Holiday</li> <li>• Career Break</li> <li>• Jury Service</li> <li>• Fertility Treatment</li> <li>• Foster Carers</li> <li>• Surrogacy</li> </ul>	Nicole Patton	N/A	National Bargaining	N/A
Managing Health and Absence	<ul style="list-style-type: none"> <li>• Ill Health</li> <li>• Guidance for Managers</li> <li>• Guidelines for Employees</li> <li>• Unauthorised Absence</li> <li>• Frequent/intermittent Absence</li> <li>• Fit Notes</li> <li>• Return to Work</li> <li>• OH Referral</li> </ul>	Nicole Patton		February 2019	New procedure written and passed to Trade Unions for comment. Deadline for completion November 2019
Organisational Change	<ul style="list-style-type: none"> <li>• Matching Document</li> <li>• Restructuring</li> </ul>	Gillian Crankshaw		April 2019	Complete
Probation/Progression		Nicole Patton		June 2019	Complete

<b>Recruitment and Selection</b>	<ul style="list-style-type: none"> <li>• Criminal Convictions</li> </ul>	Nicole Patton		March 2019	Delayed – new deadline December 2019 due to iTrent System Strategic Review
<b>Redundancy</b>		Nicole Patton		March 2019	In progress – new deadline November 2019
<b>Relocation Expenses</b>		Nicole Patton	N/A	May 2019	Complete
<b>Respect at Work (Bullying and Harassment)</b>		Nicole Patton		February 2019	In progress – new deadline November 2019
<b>Secondment and Step-up</b>		Nicole Patton		May 2019	Complete
<b>Smoking</b>		Gillian Crankshaw	N/A	March 2019	Complete
<b>Performance Improvement (Capability)</b>	<ul style="list-style-type: none"> <li>• Performance Capability</li> <li>• Ill Health Capability</li> </ul>	Nicole Patton		March 2019	In progress – new deadline November 2019
<b>Social Networking</b>		Nicole Patton	N/A	May 2019	In progress – new deadline of December 2019
<b>Travel Allowance</b>		Nicole Patton	N/A	March 2019	Complete
<b>Voluntary Severance</b>		Lorraine McGaw	N/A	January 2019	Complete
<b>Work-Life Balance</b>	<ul style="list-style-type: none"> <li>• Job Share</li> <li>• Flexible Working</li> <li>• Career Break</li> <li>• Carers at work</li> <li>• Childcare Vouchers</li> <li>• Cycle to Work</li> <li>• Home working</li> <li>• Phased Retirement</li> </ul>	Nicole Patton	N/A	March 2019	In progress – new deadline December 2019

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## **ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING**

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Date of Meeting	7 October 2019
Paper Title	Annual People Report
Agenda Item	19.46
Responsible Officer	Lorraine McGaw/Lindsey Ferries, Assistant Principal: Human Resources
Status	Disclosable
Action	For Discussion

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### **1 INTRODUCTION**

- 1.1 Further to previous discussions, it was proposed that an annual People Report is produced for 2018/2019 which would contain staffing data about our workforce and showcase the work that has been done to support the investment in our people.

### **2 PROPOSAL**

- 2.1 Our intention is to publish our 2018/2019 People Report by the end of November. This will allow sufficient time to gather and analyse the data. We would envisage a wide audience for the Report including the Board, staff and our stakeholders and we would work with Marketing to produce the final polished product. We would also intend to publish on the College intranet.

### **3 RECOMMENDATION**

- 3.1 Attached is a list of the proposed contents for the Report.  
The Committee are asked to comment on the proposed content of the Report.  
The Committee will have the opportunity to review it before it is published.

### **4 RISK ANALYSIS**

- 4.1 There are no risks associated with this paper.

### **5 LEGAL IMPLICATIONS**

- 5.1 None.

### **6 FINANCIAL IMPLICATIONS**

- 6.1 There may be some expenditure required to produce the Report in a professional format.

### **7 REGIONAL OUTCOME AGREEMENT IMPLICATIONS**

- 7.1 N/A



**8 HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

8.1 N/A

## **Annual People Report**

### **Draft Contents**

#### **Introduction**

Brief summary of highlights from the year (i.e. achievements, awards, professional development and sponsorship, Healthy College etc.) plus:

- The Team
- Our Values
- Our Aims

#### **Staffing Profile (core data)**

- Headcount/FTE (split between teaching and support)
- Turnover
- Sickness Absence
- Age profile and diversity profile

#### **Recruitment Activity**

Opening paragraph around review of recruitment process, values based recruitment, E recruitment etc.

- Number of vacancies
- Applicant to job ratio
- Length of time to recruit

#### **Rewards, Benefits and Employee Relations**

Opening paragraph around working in partnership, national collective bargaining, local JCNCs and interim HR procedures.

- Current benefits package and statistics
- Long service awards
- Staff Awards

#### **Learning and Development**

- Statistics on training/CPD days
- TQFE numbers
- Awards and accreditations
- Leadership Framework
- Embedding the Values

#### **Health and Safety**

Opening paragraph on progress against our Health and Safety agenda.

- Awards (i.e. ROSPA, Healthy Working Lives etc.)
- Key statistics
- Health and Wellbeing Initiatives

**The Year Ahead i.e. high level priorities to support us becoming an Employer of Choice.**

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**ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING**


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Date of Meeting	7 October 2019
Paper Title	Organisational Development Report
Agenda Item	19.47
Responsible Officer	Gillian Crankshaw, Organisational Development Manager
Status	Disclosable
Action	For Discussion

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## **1 INTRODUCTION**

- 1.1 This report will provide details of some of the activities of the Organisational Development team in respect of Staff Development since our last report in June 2019

## **2 COLLEGE VALUES**

- 2.1 The new College Values were launched at the Staff Conference in June 2019 and the Organisational Development team have been working on an implementation plan to embed the values into everyday life at the College.
- 2.2 The team have presented their plan to the Senior Leadership team and have worked with the Marketing Department on an internal communications plan.
- 2.3 The Marketing Department have created artwork promoting the values and this is displayed at various points throughout the College. The Organisational Development Team have sent a communication to staff highlighting that work will be done with teams across the College to promote discussion on what the values mean to them as a team and as individual members of staff.
- 2.4 A Leadership Charter has been created through focus groups with members of the College Management Forum and the Senior Leadership Team. The Charter will be finalised in October and promoted across the College. This Charter will be embedded in the Personal Development Plan (PDP) process for Managers and used as a benchmark for staff wishing to progress their career within the College.
- 2.5 A Leadership Framework has been developed and is based on the new values. A workshop with the SLT will take place in October to progress this framework into a model that will be used to base our Leadership Programme on and set the standards for Leadership across the College.
- 2.6 A workshop with Managers is planned for November 2019 and will provide information and tools to facilitate the embedding of the values in their

teams. This workshop will include guidance on how to engage staff on discussion around the values and start them thinking about how their behaviours directly impact the values.

### **3 PERSONAL DEVELOPMENT PLANS**

- 3.1 259 Personal Development Plans have been returned with the outputs being utilised to inform the content of the Learning Days in June and August 2019.

### **4 INDUCTION**

- 4.1 Two welcome induction days have taken place so far, with a mixture of teaching and support staff in attendance. The feedback from both groups has been very positive.
- 4.2 A schedule of the Welcome Day dates for the remainder of the year has been shared with all presenters.
- 4.3 The online programme is still in the development phase with the technical issues still outstanding.
- 4.4 The Welcome Pack has been designed by an external graphic designer and this is being finalised.

### **5 GENERAL TEACHING COUNCIL SCOTLAND (GTCS) PROFESSIONAL UPDATE VALIDATION**

- 5.1 Professional Update is required to be undertaken by any lecturing staff registered with GTCS in order to maintain their registration. The key purpose of Professional update is to ensure professional learning is recorded and registered members engage in ongoing career long, high quality, professional learning.
- 5.2 Registered college lecturers complete Professional Update through their GTCS account.
- 5.3 It is not currently a requirement for college lecturers to be registered with GTCS. GTCS have however been working with the Employers Association in respect of introducing compulsory Lecturer Registration
- 5.4 Validation criteria has been established to assess the College PDP system to allow completion of the Professional Update sign-off through college employer schemes.
- 5.5 To ensure the College PDP process is validated in the event of the Lecturer Registration being adopted an application for validation was made in May 2019.
- 5.6 Following an extensive validation process and event which included:

- Providing information and documentation on the PDP process
- Validation Panel meeting
- Focus groups with College Lecturers

GTCS have fully validated Glasgow Clyde College with no conditions.

- 5.7 The Principal was presented with the validation certificate by GTCS on 28 August 2019.

## **6 PROFESSIONAL DEVELOPMENT SPONSORSHIP**

- 6.1 This year the College received 36 applications from staff to embark on a further or higher education qualification. The applications are currently on hold and the College are considering whether there can be a Learning and Development budget available to support the funding of any of these applications.

- 6.2 Organisational Development are coordinating a celebration event for all staff who completed a qualification last year, including those from the Professional Development Award for Teaching (PDA) and Teaching Qualification in Further Education (TQFE) intake.

## **7 TEACHING PATHWAY**

- 7.1 The Organisational Development Team work with the College Teaching Fellows on recruiting and supporting staff through a professional pathway aimed at bettering the quality of Teaching and Learning throughout the College. There are 4 stages to the pathway the first of which, Classroom Essentials (formerly The Foundation Programme for College Lecturers), is now mandatory for all new entrants and Lecturing staff who do not yet have the Professional Development Award (PDA) or Teaching Qualification in Further Education (TQFE) or equivalent.

### **7.2 Classroom Essentials**

- 7.2.1 The Classroom Essentials programme aims to provide a practical framework for planning an effective learning experience, better understand the needs of learners and provide constructive assessment and feedback. To date 76 new and existing members of staff have completed the programme since inception in 2017/18.

### **7.3 Professional Development Award (PDA)**

- 7.3.1 The PDA is the second stage in the Teaching Pathway and is an SCQF level 9 qualification delivered by the College Teaching Fellows. The assessments require candidates to produce written work, writing reflectively and evaluate their learning and teaching practice. In 2018/19 14 members of staff passed PDA.

- 7.3.2 This year the College has 25 lecturing staff enrolled on the PDA from across all 4 faculties and our Commercial Department

#### **7.4 Teaching Qualification in Further Education (TQFE)**

- 7.4.1 The third stage in the Teaching Pathway is the Teaching Qualification Further Education (TQFE). The TQFE is the College Sector accepted qualification for teaching practice in Scotland and our preferred supplier for delivery is The University of Dundee by distance learning. Each year the College try to fund as many places as possible, however, the new Lecturing Terms and Conditions, have introduced a 150 hours teaching remission for all staff participating in college-funded TQFE. This significantly increases the cost of supporting staff due to the levels of backfill required.

- 7.4.2 This year we have approved 11 funded places and have offered these places to the most eligible staff based on length of service which is the criteria agreed with the local EIS representatives.

#### **7.5 Developing Learning and Teaching**

- 7.5.1 The Developing Learning and Teaching programme is the final stage in the Teaching Pathway and is a post-qualification programme for Lecturers who have TQFE or equivalent. The programme aims to deepen understanding of learning and teaching processes and strengthen knowledge about effective teaching methods. Participants learn about evidence-informed approaches to learning and teaching, and complete a short assignment considering how they will put their learning into practice. It is a college-devised programme (uncertificated). This programme is funded by Glasgow Clyde Education Foundation to allow Lecturers remission of 3 hours per week to attend tutorials delivered by the College Teaching Fellows. To date 80 members of staff have completed this programme since inception.

### **8 RISK ANALYSIS**

There are no risks associated with this paper.

### **9 LEGAL IMPLICATIONS**

There are no legal implications associated with this paper.

### **10 FINANCIAL IMPLICATIONS**

There are no financial implications associated with this paper.

### **11 REGIONAL OUTCOME AGREEMENT IMPLICATIONS**

N/A

### **12 HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

N/A

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## ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING

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Date of Meeting	7 October 2019
Paper Title	Health and Safety Report 2018/19
Agenda Item	19.48
Responsible Officer	Gillian Crankshaw, Organisational Development Manager
Status	Disclosable
Action	For Discussion

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### **1 INTRODUCTION**

- 1.1 This report covers activity undertaken by the Organisational Development team in relation to Health & Safety in 2018/19.

### **2 THE ROYAL SOCIETY FOR THE PREVENTION OF ACCIDENTS (RoSPA)**

- 2.1 The College have membership of the Royal Society for the Prevention of Accidents and we participate in their awards scheme annually. RoSPA awards are non-competitive and are based on the organisation's individual occupational health and safety performance assessed against the judging criteria.
- 2.2 Entrants must provide evidence of a good health and safety management system by answering key performance questions and supporting the answers with a concise portfolio of relevant documentation.
- 2.3 We have successfully been awarded the Gold Medal for the second year running. Gold Medal status is awarded for achievement of the Gold Award more than 5 consecutive times.

### **3 AUDIT**

- 3.1 The College Internal Auditor, Henderson Loggie carried out an audit on our Health and Safety procedures and practice.
- 3.2 There were 6 recommendations from the audit 5 of which were graded "satisfactory" and one "requires improvement", with an overall grading of "satisfactory"
- 3.3 The recommendation graded "requiring improvement" was in respect of the Health and Safety induction completion rates, which the team will be able to address through the new online induction programme.

- 3.4 The team already had in place actions to address 5 of the recommendations, however, we have added the additional recommendation to our work schedule.

## **4 STATISTICS**

### **4.1 Recording of Statistics**

- 4.1.1 As reported in June, the team have been working with the Systems Development team to create a new online system for reporting accidents, incidents, hazard observations and near misses.
- 4.1.2 Systems Development have advised us that the system will be ready in November. Roll out will include training for first aiders, awareness raising sessions for Managers, online information for all staff and a poster campaign directed at staff and students.
- 4.1.3 It was agreed to realign the accident, first aid and near miss statistics with the College Academic year therefore the final *quarter* for 2018/19 will show 2 months instead of 3 and the year 2018/2019 will show 11 months only.

### **4.2 Accident Statistics**

#### **4.2.1 1 March 2019 to 31 May 2019**

- 4.2.1.1 The accident statistics from 1 March 2019 to 31 May 2019 are attached. Appendix 1
- 4.2.1.2 The total number of accidents/incidents reported in the period was 28. For the same period in 2018, the number was 24.
- 4.2.1.3 Over this period year there was 1 accident reported to the HSE (RIDDOR). The accident occurred due to a sheet of clear acetate falling on the floor from a student folder. The lecturer stepped on this slippery surface and fell, twisting her ankle in the process.
- 4.2.1.4 The highest category of accidents was cuts with 6. For the same period last year, the highest category was Machinery Tool Cuts with 9 recorded incidents.
- 4.2.1.5 Machinery and tool cuts continue to be addressed and discussed at forum meetings. Arrangements are in place to attend Faculty staff meetings to reinforce the need for instruction in use of small tools and the use of PPE. Given the nature of some of the courses an element of minor injury is unavoidable, however, the Senior Health and Safety Officer is scheduled to meet with the Head of Curriculum to discuss strategies to reduce incident/ accident trends.



4.2.1.6 Over the period 1 March 2019 to 31 May 2019, 5 accidents required hospital attention and details are supplied on each individual campus report.

#### 4.2.2 **1 June 2019 to 31 July 2019**

4.2.2.1 The accident statistics from 1 June 2019 to 31 July 2019 are attached Appendix 2. Comparisons made are against the 3 month period June to August 2018.

4.2.2.2 The total number of accidents/incidents reported in this period was 6. In the similar period last year, the number was 7.

4.2.2.3 Over this period year there were zero accidents reported to the HSE (RIDDOR).

4.2.2.4 The highest category of accidents was Machinery/Tool cuts with 4. For the similar period last year, the highest category was cuts with 3 recorded incidents.

4.2.2.5 Over the period 1 June 2019 to 31 July 2019, 1 accident required hospital attention and details are supplied on each individual campus report.

#### 4.2.3 **1 September 2018 to 31 July 2019**

4.2.3.1 The accident statistics from 1 September 2018 to 31 July 2019 are attached Appendix 3. Comparisons made are against the 12 month period in 2017/18.

4.2.3.2 The total number of accidents/incidents reported in this period was 97. In 2017/18 the number was 84.

4.2.3.3 Over this period year there were 3 accidents reported to the HSE (RIDDOR). A student lost her footing and fell over in the Langside car park and broke her right wrist. A member of staff slipped on acetate on the floor in Cardonald campus and fell over, breaking her ankle. A student caught her foot on the stair grip in Anniesland campus, causing her to fall down the stairs and fracture her ankle.

4.2.3.4 The Senior Health and Safety Officer has initiated a programme of inspection walk-rounds of each campus on a regular basis. Issues with stair grips etc. are picked up early in this programme and remedial action is taken immediately.

4.2.3.5 The highest category of accidents in this period was Machinery/Tool cuts with 32. In 2017/18 the highest category was also Machinery and tool cuts with 28 recorded incidents.

4.2.3.6 Over the period 1 September 2018 to 31 July 2019, 16 accidents required hospital attention.

### **4.3 First Aid Call Outs**

- 4.3.1 Over the period 1 March 2019 to 31 May 2019 the College First Aiders have attended 51 calls. 28 of these were accidents, which are recorded in the accident statistics. Details of first aid call outs are attached. Appendix 4. For the same period last year, the first aiders attended 55 call outs of which 24 were recorded accidents.
- 4.3.2 Over the period 1 June 2019 to 31 July 2019 the College First Aiders have attended 7 calls. 6 of these were accidents, which are recorded in the accident statistics. Details of first aid call outs are attached. Appendix 5. In June to August 2018 the first aiders attended 11 call outs of which 7 were recorded accidents.
- 4.3.3 Over the period of 1 September 2018 to 31 July 2019, the College First Aiders have attended 175 calls. 97 of these were accidents, which are recorded in the accident statistics. Details of the remaining 78 first aid call outs are attached. Appendix 6. Eighteen of these resulted in a visit to hospital as a precautionary measure. In 2017/18 (12 month period) the first aiders attended 179 call outs.

### **4.4 Near Miss Reports**

- 4.4.1 The total number of near misses reported in the period 1 March 2019 to 31 May 2019 was zero. For the same period in 2018, the number was also zero.
- 4.4.2 The total number of near misses reported in the period 1 June 2019 to 31 July 2019 was zero. In June to August 2018 the number was one.
- 4.4.3 The total number of near misses reported in the period 1 September 2018 to 31 July 2019 was zero. In 2017/18 (12 month period) the number was six.
- 4.4.4 We believe there is under-reporting of near misses. The new online system which will be introduced along with the publicity for it should increase reporting of near misses and introduce reporting of hazard observations.

## **5 GENERAL UPDATE**

### **5.1 Occupational Health Surveillance**

- 5.1.1 As part of the Health and Safety Review the team are undertaking a full review of the Occupational Health Surveillance provision. In the meantime we are running baseline clinics for all new starts identified as working in an area/position "at risk" and have our normal surveillance clinics scheduled to commence in November.

## **5.2 Service Desk Provision**

- 5.2.1 From 1 September 2018 to 31 July 2019, 119 requests have been logged. 115 of these requests have been closed and 4 requests are currently active. The highest volume of requests was to carry out Personal Emergency Evacuation Plans (PEEP's).

## **5.3 Health and Safety Review**

- 5.3.1 The Health and Safety review is ongoing with 31 policies/procedures having been identified for update or introduction. The Health and Safety Policy was published in final format in July and the full programme of works has been reported to EMT to ensure progress is being made.

## **6 RISK ANALYSIS**

- 6.1 There are no risks associated with this paper

## **7 LEGAL IMPLICATIONS**

- 7.1 The College has already put in place adequate policies and procedures aimed at ensuring the health, safety and welfare of staff and students working on the campuses. It is imperative that Management and staff adhere to prescribed measures to ensure compliance across all levels. Our ability to demonstrate a culture of compliance will serve to significantly reduce the rate of incidents/accidents recorded and also mitigate any legal challenges arising therefrom.

## **8 FINANCIAL IMPLICATIONS**

- 8.1 The financial implications for the Organisational Development team in respect of Health and Safety this year come from staff time for delivery of training.

## **9 REGIONAL OUTCOME AGREEMENT IMPLICATIONS**

- 9.1 N/A

## **10 HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

- 10.1 Equality Impact Assessments will be undertaken for each new procedure being developed.

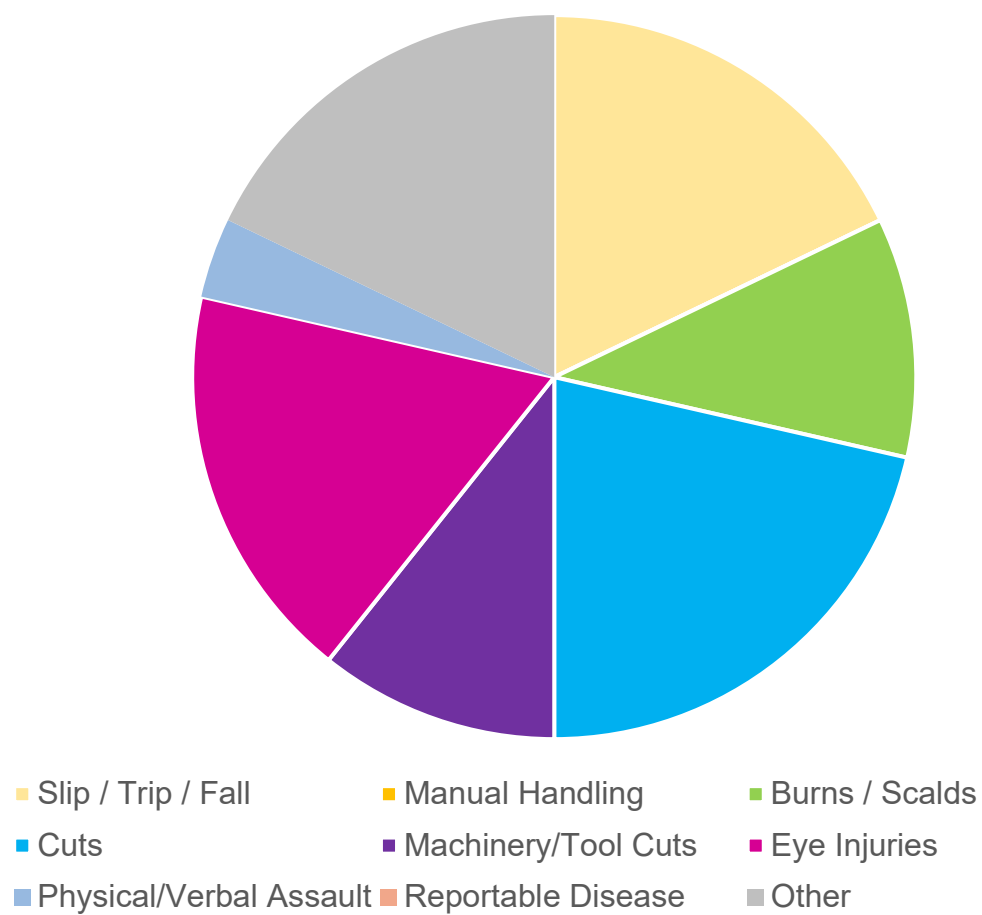
## Health & Safety

### Accident Statistics for Glasgow Clyde College

1 March 2019 – 31 May 2019

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	1	1	1	4									5
Manual Handling													
Burns / Scalds				3									3
Cuts	3	1		3									6
Machinery/Tool Cuts				3	1								3
Eye Injuries				5									5
Physical/Verbal Assault	1												1
Reportable Disease													
Other	3			1	1		1						5
<b>TOTAL ACCIDENTS</b>	<b>8</b>	<b>2</b>	<b>1</b>	<b>19</b>	<b>2</b>		<b>1</b>						<b>28</b>

## Accident Category



## Anniesland Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall				1									1
Manual Handling													
Burns / Scalds													
Cuts	1			1	1								2
Machinery/Tool Cuts				3	1								3
Eye Injuries				4									4
Physical/Verbal Assault													
Reportable Disease													
Other				1	1		1						2
<b>TOTAL ACCIDENT</b>	<b>1</b>			<b>10</b>	<b>3</b>		<b>1</b>						<b>12</b>

Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/incident to be reported to the HSE.

1 x student, for x ray.

1 x student, swollen hand.

1 x student, cut to head.

## Cardonald Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	1	1	1	3									4
Manual Handling													
Burns / Scalds				2									2
Cuts	2	1		1									3
Machinery/Tool Cuts													
Eye Injuries													
Physical/Verbal Assault													
Reportable Disease													
Other	2												2
<b>TOTAL ACCIDENT</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>6</b>									<b>11</b>

\*Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/incident to be reported to the HSE.

1 x member of staff, cut to head.

1 x member of staff, broken ankle (RIDDOR)

## Langside Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall													
Manual Handling													
Burns / Scalds				1									1
Cuts				1									1
Machinery/Tool Cuts													
Eye Injuries				1									1
Physical/Verbal Assault	1												1
Reportable Disease													
Other	1												1
<b>TOTAL ACCIDENT</b>	<b>2</b>			<b>3</b>									<b>5</b>

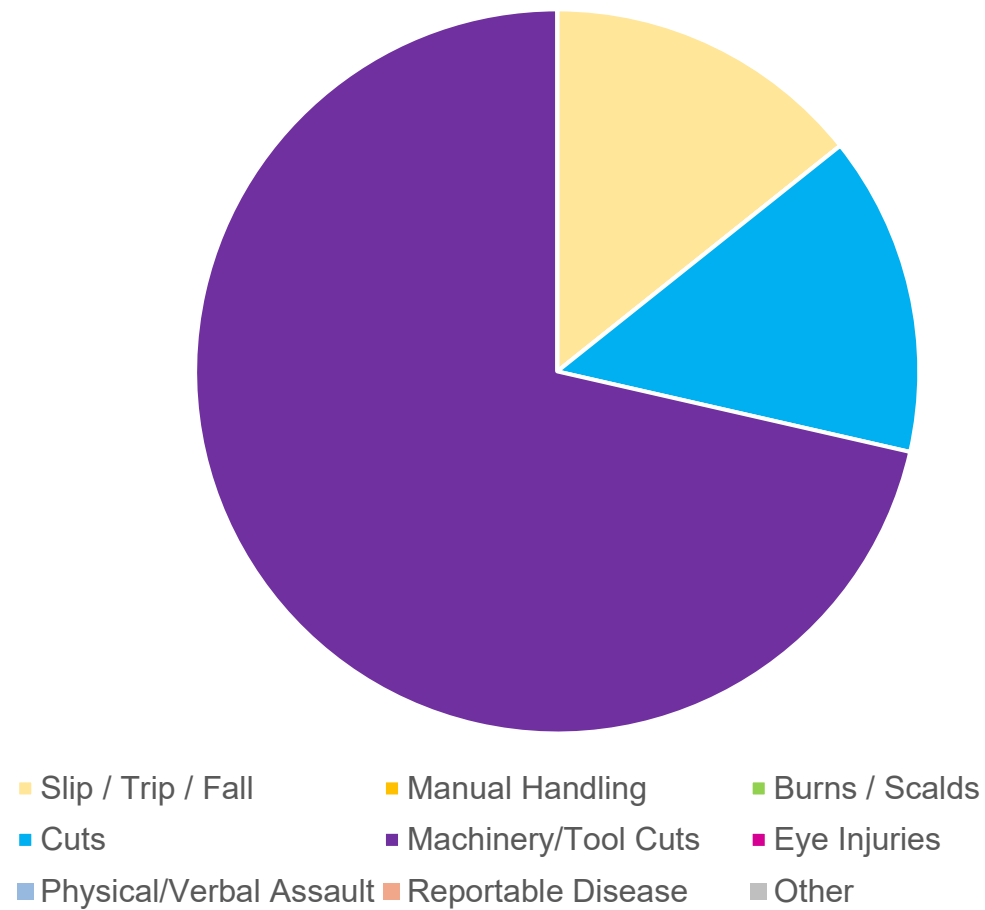
\*Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/first aid call out to be reported to the HSE.



**1 June to 31 July 2019**

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	1												1
Manual Handling													
Burns / Scalds													
Cuts				1									1
Machinery/Tool Cuts	1			3	1								4
Eye Injuries													
Physical/Verbal Assault													
Reportable Disease													
Other													
TOTAL ACCIDENTS	2			4	1								6

### Accident Category



## Anniesland Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	1												1
Manual Handling													
Burns / Scalds													
Cuts				1									1
Machinery/Tool Cuts				1									1
Eye Injuries													
Physical/Verbal Assault													
Reportable Disease													
Other													
<b>TOTAL ACCIDENT</b>	<b>1</b>			<b>2</b>									<b>3</b>

\*Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/incident to be reported to the HSE.

## Cardonald Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall													
Manual Handling													
Burns / Scalds													
Cuts													
Machinery/Tool Cuts	1			2	1								3
Eye Injuries													
Physical/Verbal Assault													
Reportable Disease													
Other													
<b>TOTAL ACCIDENT</b>	<b>1</b>			<b>2</b>	<b>1</b>								<b>3</b>

\*Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/incident to be reported to the HSE.

1 x student sent to hospital cut to forearm.

## Langside Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall													
Manual Handling													
Burns / Scalds													
Cuts													
Machinery/Tool Cuts													
Eye Injuries													
Physical/Verbal Assault													
Reportable Disease													
Other													
<b>TOTAL ACCIDENT</b>													<b>0</b>

\*Next to each category there is a note of whether there was a requirement for a hospital visit or for the accident/incident to be reported to the HSE.

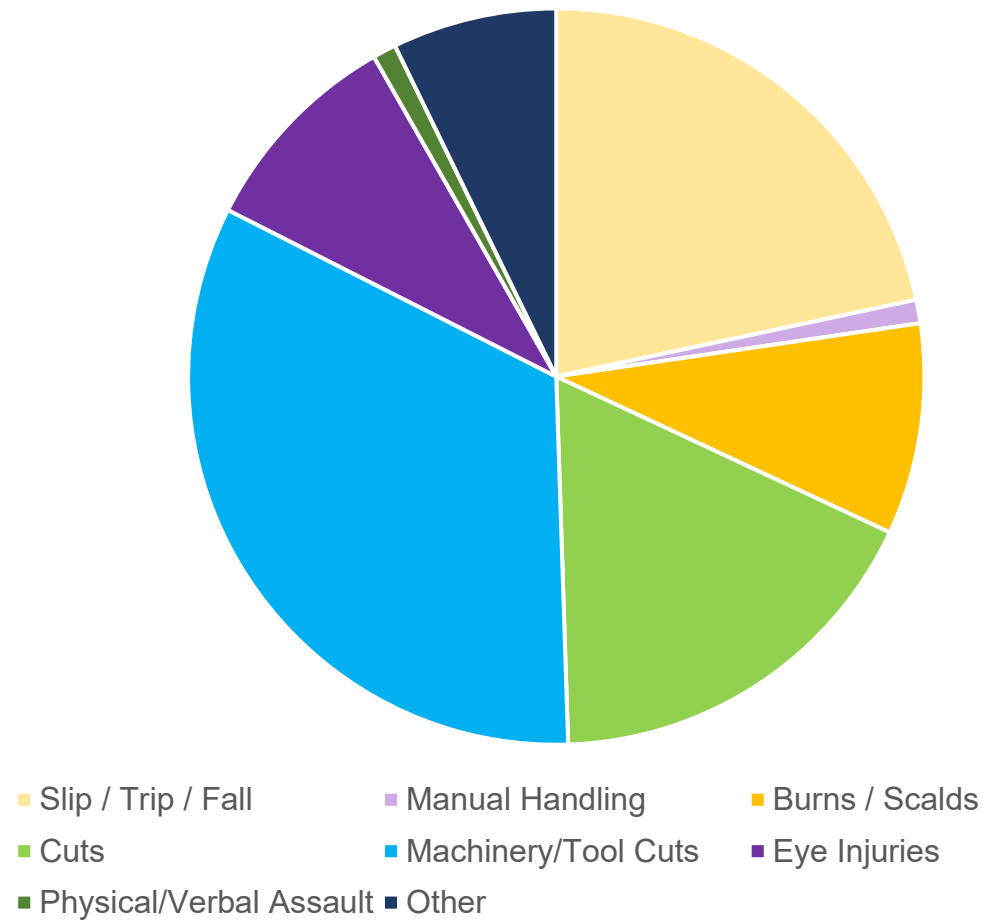
## Health & Safety

### Annual Accident Statistics for Glasgow Clyde College

1 September 2018 to 31 July 2019

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	4	2	1	16	3	2				1	1		21
Manual Handling	1												1
Burns / Scalds	1			8									9
Cuts	4	1		13	2								17
Machinery/Tool Cuts	2	1		30	4								32
Eye Injuries				9	1								9
Physical/Verbal Assault	1												1
Reportable Disease													
Other	4			2	1		1						7
<b>TOTAL ACCIDENTS</b>	<b>17</b>	<b>4</b>	<b>1</b>	<b>78</b>	<b>11</b>	<b>2</b>	<b>1</b>			<b>1</b>	<b>1</b>		<b>97</b>

**Accident Category**



## Anniesland Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	1			5	1	1							6
Manual Handling													
Burns / Scalds				1									1
Cuts	1			2	1								3
Machinery/Tool Cuts	1	1		17	2								18
Eye Injuries				5	1								5
Physical/Verbal Assault													
Reportable Disease													
Other	1			2	1		1						4
<b>TOTAL ACCIDENTS</b>	<b>4</b>	<b>1</b>		<b>32</b>	<b>6</b>	<b>1</b>	<b>1</b>						<b>37</b>



## Cardonald Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall	3	2	1	7						1	1		11
Manual Handling	1												1
Burns / Scalds	1			4									5
Cuts	2	1		7	1								9
Machinery/Tool Cuts	1			12	2								13
Eye Injuries				2									2
Physical/Verbal Assault													
Reportable Disease													
Other	2												2
<b>TOTAL ACCIDENTS</b>	<b>10</b>	<b>3</b>	<b>1</b>	<b>32</b>	<b>3</b>					<b>1</b>	<b>1</b>		<b>43</b>

## Langside Campus

Accident Category	Staff	Hospital	Riddor	Students	Hospital	Riddor	Contractors/ Visitors	Hospital	Riddor	Other	Hospital	Riddor	Total
Slip / Trip / Fall				4	2	1							4
Manual Handling													
Burns / Scalds				3									3
Cuts	1			4									5
Machinery/Tool Cuts				1									1
Eye Injuries				2									2
Physical/Verbal Assault	1												1
Reportable Disease													
Other	1												1
<b>TOTAL ACCIDENTS</b>	<b>3</b>			<b>14</b>	<b>2</b>	<b>1</b>							<b>17</b>

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## **ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING**

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Date of Meeting	7 October 2019
Paper Title	KPI Report
Agenda Item	19.49
Responsible Officer	Lorraine McGaw, Assistant Principal Human Resources
Status	Disclosable
Action	For Discussion

---

### **1. REPORT PURPOSE**

- 1.1 This attached paper provides an update on the Key Performance Indicators as at the end of Quarter 4 2018/19 which are either reported for each quarter or for the full year based on the individual KPI and how it is monitored and reported.

### **2. KEY PERFORMANCE INDICATORS**

#### **2.1 Occupational Health Surveillance**

Although this KPI falls short of the 100% target there has been progress made over the year and there are some staff who do not attend when invited. The team are undertaking a full review of the Occupational Health Surveillance provision. In the meantime baseline clinics for all new starts identified as working in an area/position "at risk" will be scheduled as usual.

#### **2.2 Health and Safety On Line Induction Completion Rates**

The figures for the Health and Safety induction being completed within the first month of employment remain disappointing. For quarter 4 only 1 new start completed the on line induction. The new induction welcome days are now in place and one hour of the day is a comprehensive Health and Safety briefing. The issue remains with the on line induction and we will be ensuring managers follow up with new starts.

#### **2.3 Number of Accidents Reported**

The team continue to work with staff and the Students Association to ensure that everyone is aware of how to report an accident.

#### **2.4 Staff On Line Induction Completion Rates**

Similarly to Health and Safety On Line induction this figure for staff induction is disappointing however the introduction of the new face to face Induction programme has ensure that all new staff have an induction welcome day.

#### **2.5 Working Days lost through Sickness Absence**

The figure for quarter 4 is 3.32% however the full year figure is high at 4.59%. The HR team continue to work with line managers on this and there is a full report on attendance management on the agenda.

#### **2.6 Protected Characteristic Reporting Data**

This figure remains unavailable at this time.

**3. FUTURE TARGETS FOR KEY PERFORMANCE INDICATORS**

A number of the targets are very high and some may be unachievable. The Committee are asked to consider the future targets for the KPIs and whether any need to be amended.

**4. RISK ANALYSIS**

There are no specific risks associated with this paper.

**5. LEGAL IMPLICATIONS**

There are no specific legal implications associated with this paper.

**6. FINANCIAL IMPLICATIONS**

There are no specific financial implications associated with this paper.

**7. REGIONAL OUTCOME AGREEMENT IMPLICATIONS**

There are no specific regional outcome agreement implications associated with this paper.

**8. HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

N/A

Key Performance Indicator	Reporting	Target	2017/18	2018/19 Quarter 1	2018/19 Quarter 2
<b>HEALTH AND WELLBEING</b>					
Occupational health surveillance baseline test completion for at risk areas	Quarterly	100% actioned within 2 months of start date	30%	80%	75%
Participation rate of staff in Healthy College events	Annually	All staff participation	321 (sessions)	N/A	N/A
<b>HEALTH AND SAFETY</b>					
Health and Safety induction completion rates	Quarterly	100% within 1 month	71%	37%	27%
Number of Accidents Reported	Quarterly	Increase awareness and reporting	84	35	28
<b>DEVELOPMENT AND TRAINING</b>					
Staff induction completion rates	Quarterly	100% within 2 months	61%	21%	32%
% of probationary/progress reviews completed at 3 months	Annually	100%	90%	N/A	N/A
% of probationary/progress reviews completed at 6 months	Annually	100%	49%	N/A	N/A
% of successful probationary/progress reviews	Annually	95%	49%	N/A	N/A
Support Staff PDP completion rate (%)	Annually	95%	N/A	N/A	N/A
Average days training/CPD uptake per employee	Annually	3 days per staff member	Data Unavailable	N/A	N/A
Level of permanent teaching staff with TQFE	Annually	90%	79%	N/A	N/A
Lecturing staff PDP completion rate	Annually	95%	N/A	N/A	N/A
<b>SICKNESS ABSENCE</b>					
Working days lost through sickness absence	Quarterly	4%	3.65%	4.37%	5.93%
<b>STAFF DIVERSITY PROFILES</b>					
Protected characteristic data recorded	Quarterly	85%	TBC	TBC	TBC
Equal Pay (Gender Pay Gap)	Annually	Less than 5.0%	5.77%	N/A	N/A
<b>RECRUITMENT AND RETENTION</b>					
% Permanent staff voluntary turnover	Quarterly	As this turnover is voluntary HR does not anticipate setting a target	3.54%	1.86%	1.08%

Staff engagement level	Annually	Target 10 - full staff engagement	6.3	N/A	N/A
Average number of applications per advertised external vacancy	Annually	more than 8 average per vacancy	11	N/A	N/A
<b>HUMAN RESOURCE MANAGEMENT</b>					
REDACTED FOR DATA PROTECTION PURPOSES					

\* Quarter 4 only covers June & July to realign reporting period

2018/19 Quarter 3	2018/19 Quarter 4	2018/19
55%	N/A	54%
N/A	N/A	Awaited
20%	10%	24%
28	6*	97
18%	10%	20%
N/A	N/A	72%
N/A	N/A	88%
N/A	N/A	88%
N/A		22%
N/A	n/A	Awaited
N/A	N/A	74%
N/A	N/A	24%
4.72%	3.32%	4.59%
TBC	TBC	TBC
N/A	N/A	6%
2.38%	0.69%	4.44%

[illegible]



**Items to be reported to Committee – Non KPI data**

Participation in Leadership Development Programme	Leadership Development Programme being reviewed and participation will be reported to Committee
HSE Reportable accidents (RIDDOR)	Health and Safety reports are submitted to each Committee meeting
Gender balance	An annual report will be submitted to the Committee on the gender balance across the College by grade level.
Participation rates in staff engagement surveys	A summary report will be submitted to the Organisational Development Committee after each survey including participation rates

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**ORGANISATIONAL DEVELOPMENT COMMITTEE MEETING**

---

Date of Meeting	7 October 2019
Paper Title	Internal Audit Report: Health and Safety
Agenda Item	19.50
Responsible Officer	Henderson Loggie, Internal Auditors
Status	Disclosable
Action	For Noting

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**1 REPORT PURPOSE**

The purpose of this paper is to submit to the Committee, for noting, the Health and Safety Internal Audit report which has been produced by the College's Internal Auditors, Henderson Loggie.

**2 BACKGROUND**

The Health and Safety internal audit report concludes that there is a satisfactory level of assurance in this area meaning that the system meets control objectives with some weaknesses present. There are five low priority recommendations and one medium priority recommendation in the report.

**3 RISK ANALYSIS**

There are no specific risk implications in this paper.

**4 LEGAL IMPLICATIONS/FINANCIAL IMPLICATIONS/ REGIONAL  
OUTCOME AGREEMENT IMPLICATIONS**

If the requirements of the health and safety law are not complied with (which includes complying with the recommendations of audit findings aimed at improving compliance levels, as well as the delivery of health and safety provisions) the omission may constitute a criminal offence with a penalty of a fine or imprisonment.

**5 HAS AN EQUALITY IMPACT ASSESSMENT BEEN CARRIED OUT**

N/A

# Glasgow Clyde College

## Health and Safety

**Internal Audit Report No: 2019/09**

**Draft issued: 06 August 2019**

**2<sup>nd</sup> Draft issued: 09 August 2019**

**Final issued: 23 August 2019**

**LEVEL OF ASSURANCE**

**Satisfactory**

# Contents

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	<ul style="list-style-type: none"> <li>• Overall Level of Assurance 1</li> <li>• Risk Assessment 1</li> <li>• Background 1</li> <li>• Scope, Objectives and Overall Findings 2</li> <li>• Audit Approach 2</li> <li>• Summary of Main Findings 3</li> <li>• Acknowledgements 3</li> </ul>
<b>Section 2</b>	<b>Main Findings and Action Plan 4 - 15</b>

## 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>	Issue subjecting the organisation to material risk and which requires to be brought to the attention of management and the Audit Committee.
<b>Priority 2</b>	Issue subjecting the organisation to significant risk and which should be addressed by management.
<b>Priority 3</b>	Matters subjecting the organisation 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
---------------------	--

### Risk Assessment

This review focused on the controls in place to mitigate the following risks on the Glasgow Clyde College ('the College') Strategic Risk Register:

- G1 – Failure to meet all legislative and regulatory requirements and / or recommended guidance (risk rating: medium).
- G3 – Failure to comply with Health and Safety (H&S) requirements (risk rating: medium).

### Background

As part of the Internal Audit programme at the College for 2018/19 we carried out a review of the College's H&S arrangements. Our Audit Needs Assessment, issued in February 2018, 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.

Within the College it is important to demonstrate full implementation and embedding not only of H&S legislation but demonstrate that H&S issues are considered by all staff, students and management. This will reduce the risks related to accidents and occupational health. Furthermore, all staff should receive appropriate training to not only identify risks to themselves but to understand that the H&S of all is their responsibility, and not only that of management.

## Health and Safety

### Scope, Objectives and Overall Findings

The scope of this audit was to review the arrangements in place within the College to deal with H&S issues.

The main objective of this audit was to review the College's overall arrangements for dealing with H&S issues and to consider whether these are adequate and operating effectively in practice at each campus site.

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

Objective	Findings				Actions already underway
The specific objectives of this audit were to obtain reasonable assurance the College has:		1	2	3	
1. a H&S policy and documented procedures which are communicated to all staff	Satisfactory	0	0	3	✓
2. a formal risk identification and assessment process	Satisfactory	0	0	0	✓
3. a H&S training programme which includes induction training, refresher training and training for new equipment and legislation	Requires Improvement	0	1	0	
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	Satisfactory	0	0	0	✓
5. an incident and accident recording system with follow-up and implementation of new controls where required	Satisfactory	0	0	2	
6. regular reporting of H&S to senior management and to the Board of Management	Good	0	0	0	
Overall Level of Assurance	Satisfactory	0	1	5	
		System meets control objectives with some weaknesses present			

### Audit Approach

From discussion with the Organisational Development Manager, H&S Officer and H&S Compliance Officer, as well as review of procedural documentation, we identified the internal controls in place and compared these with expected controls. A walkthrough of key systems was 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 were found to be absent or where controls could be further strengthened.

## Summary of Main Findings

### Strengths

- The College has a H&S Policy in place which is supported by a comprehensive range of additional H&S procedures which are subject to review.
- The College has a dedicated H&S Team which ensures compliance with relevant legislation and oversees H&S policies, procedures, risk assessments and a program of audits.
- All H&S policies / procedures are currently under review with a planned program of improvements, training and implementation of the revised / updated versions. The proposed new Risk Assessment and H&S Audit procedures will represent improvements in these areas when they are introduced.
- The College has a Health, Safety and Safeguarding Committee which meets three times per year and receives appropriate updates and statistics on all relevant H&S issues across all campuses. The committee includes members of the senior leadership team and senior managers who are well placed to respond to the H&S risks identified and make improvements to the H&S culture within the College.
- The suite of KPIs considered by the Organisational Development Committee allows the completion rates of the H&S induction modules to be tracked.
- The College has a H&S helpdesk in addition to a dedicated email address for staff and students to contact with any H&S concerns. These contact details are shown on posters across the College.

### Weaknesses

- While the H&S Team have a list of all the appointed Fire Wardens and First Aiders, they currently have no visibility of how many are available at any given time for each location / building.
- Recently available additional fire evacuation tools (such as the Fire TagEvac system) have not been assessed for their suitability for use across the College campuses.
- The system used to record mandatory induction training does not have the functionality to create reports showing which new starters have, and have not, completed the mandatory induction training modules. Therefore, there is little assurance that the H&S induction modules are being completed.
- The Accident Report form currently used by the College is the HSE approved recording form format, but this does not include a section for capturing details of the medical treatment / advice provided to injured persons.
- Our sample testing showed a lack of evidence as to whether accidents are investigated further, what recommendations are made to mitigate the risk of re-occurrences and how / when these recommendations have been implemented.

## Acknowledgements

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



## Main Findings and Action Plan

### **Objective 1: A H&S policy and documented procedures which are communicated to all staff**

The College has a H&S Policy which is supported by several supporting procedures covering areas including Risk Assessments and H&S Audits. The College has additional procedures including Fire Safety, Occupational Health and Manual Handling.

All of these policies and procedures have been subject to a planned program of review which commenced nine months ago and is ongoing. A H&S Compliance Officer was specifically recruited to perform this review. A program of training and implementation of these reviewed / revised policies and procedures is in place for 2019/20.

All policies / procedures are uploaded onto the staff intranet for easy access. Posters on various H&S issues are located across all College campuses which show how staff / students can contact the H&S Team with any questions or concerns they may have.

The responsibility for keeping up to date with H&S legislation and sharing this knowledge across the College, is delegated to the Senior H&S Officer who maintains a spreadsheet showing all the relevant, current legislation and guidance. Audit discussions, observations and testing showed no evidence that the College is failing to follow current H&S legislation or guidance.

Fire Wardens and First Aiders have been appointed to cover all areas in each campus to respond to and manage any fire and first aid incidents. The College has also appointed staff in each campus to support the delivery of mental health awareness, Mental Health First Aid, and suicide prevention first aid. The training, provided in collaboration with SAMH (Scottish Association for Mental Health), has enabled staff to provide enhanced support for students with their mental health.

Copies of the relevant policies and procedures were obtained and evaluated during the audit. This was supplemented by discussions with H&S Team members to understand and evaluate the practical application of these policies and procedures across the College.



## Health and Safety

### Objective 1: A H&S policy and documented procedures which are communicated to all staff (continued)

Observation	Risks	Recommendation	Management Response	
While the H&S Team have a list of all the appointed Fire Wardens and First Aiders, they currently have no visibility of how many are available at any given time for each location / building.	Without knowing which Fire Wardens and First Aiders are available, the College may not have adequate assurance that there is sufficient cover to deal with a fire or medical incident at all times and at all locations.	<b>R1</b> Explore the options for the H&S Team to be notified when Fire Wardens and First Aiders are not available. This information can be used to compile a weekly rota and ensure all areas across all campuses have sufficient fire warden and first aid cover at all times.	Fire Wardens and First Aiders will be contacted to request they agree to a sign-in procedure to ensure we know how many of each are available each day.	
			<b>To be actioned by:</b> G Crankshaw, Organisational Development Manager	
			<b>No later than:</b> 30 September 2019	
			Grade	3

## Health and Safety

### Objective 1: A H&S policy and documented procedures which are communicated to all staff (continued)

Observation	Risks	Recommendation	Management Response	
<p>Fire Wardens are responsible for designated areas in each location / building. In the event of a fire evacuation, each Fire Warden will verbally inform the Fire Controller that their area is clear.</p> <p>Audit discussions with key H&amp;S staff confirmed that this can become quite challenging for the Fire Controller to co-ordinate and assess during an evacuation.</p>	<p>Without a clear process in place, Fire Controllers may be unsure whether all areas within a building are clear during an evacuation.</p>	<p><b>R2</b> Consider whether the Fire TagEvac system would be suitable for installation into all, or some, of the College's buildings.</p>	<p>The H&amp;S team are investigating the options for a logging system of clear areas of the buildings. Due to the structures of some of the buildings a change to protocols may not be feasible.</p> <p><b>To be actioned by:</b> U Okoli, Senior Health &amp; Safety Officer</p> <p><b>No later than:</b> 31 October 2019</p>	
			Grade	3

## Health and Safety

### Objective 1: A H&S policy and documented procedures which are communicated to all staff (continued)

Observation	Risks	Recommendation	Management Response
<p>H&amp;S Team staff confirmed that the College receives a large number of items through the post. There is no central mail opening facility and the unopened post is distributed directly to the named recipients.</p> <p>Audit discussions also confirmed that there is currently no procedure in place for dealing with suspicious packages received by the College through the post.</p>	Without a clear procedure in place, a suspicious or potentially dangerous package received by the College through the post may not be adequately identified and appropriate action taken.	<p><b>R3</b> Create and implement a new procedure providing guidance to staff on what action should be taken should they receive a suspicious package through the post. This procedure should include details of who should make the decision on whether to evacuate a College building if a package is confirmed as suspicious / potentially dangerous.</p>	<p>The team will circulate guidance for all staff on what to do in the event of receiving a suspicious package.</p> <p><b>To be actioned by:</b> U Okoli, Senior Health &amp; Safety Officer</p> <p><b>No later than:</b> 30 September 2019</p>
			<p><b>Grade</b> <b>3</b></p>

## Health and Safety

### Objective 2: A formal risk identification and assessment process

The College maintains a Risk Register that includes a specific risk on failure to comply with H&S requirements. The responsibility to ensure ongoing review, updating and mitigation of this risk has been delegated to the H&S Team. A copy of the Risk Register was obtained during the audit and evaluated. The H&S risk includes details of four strategic actions that the College takes to mitigate this risk.

The College has a Health, Safety and Safeguarding Committee which meets three times per annum. The Committee includes the Principal, Deputy Principal, Vice Principal, the Organisational Development Manager (who manages the H&S Team) and the Senior H&S Officer. A report is provided to each Committee meeting on all H&S issues such as accident / incident statistics and updates on all relevant policies and procedures. The H&S Team are currently planning to provide additional training to all Committee members on H&S strategic objective setting, roles and responsibilities. Copies of the reports to, and minutes of, the two most recent Committee meetings were obtained during the audit and evaluated. No areas of concern were identified.

The College has a H&S Helpdesk as well as a H&S Team email address. These details are provided on the H&S posters located across all campuses so students and staff can contact the H&S Team to raise any concerns / questions they have. Statistics on contacts received through the Helpdesk are reported to the Health, Safety and Safeguarding Committee at each meeting.

Discussions with H&S Team members confirmed that the College has a Risk Assessment procedure in place which is currently being reviewed. The purpose of this procedure is to identify any risk of harm to people and ensure the College is taking adequate precautions to prevent this harm. The current procedure requires faculty and unit managers to create a schedule of risk assessments for their area, complete these assessments and draw up action plans to address any concerns / improvements identified. This work should be performed with assistance and advice from the H&S Team. However, currently, the schedule of assessments, the assessments and the action plans are being completed by members of the H&S Team. The proposed revised Risk Assessment procedure re-emphasises the need for the assessments to be completed by managers responsible for the tasks or areas to be assessed. The target is to introduce this revised procedure, and training, to managers in October 2019.

The introduction of this new procedure would represent an improvement in the efficiency and effectiveness of the H&S risk assessments performed by the College.

## Health and Safety

### **Objective 3: A H&S training programme which includes induction training, refresher training and training for new equipment and legislation**

The Health and Safety at Work Act 1974 places a general duty on employers to provide such information, instruction, training and supervision as is necessary to ensure, so far as practicable, the H&S at work of its employees.

All new starters to the College receive induction training which includes e-learning modules on relevant H&S issues. These should be completed within one month of the employee's start date. A new induction training program is being developed and will be rolled out to new starters in August 2019. The College Principal has recently requested that no new starters should pass their initial three-month probation period unless they have completed all the mandatory induction training modules, including those on H&S.

The Virtual Learning Environment (VLE) system, which is the platform used for the e-learning modules, does not have the function to provide reports on which new starters have completed all their induction modules and when. The H&S Team can only gain some assurance that the relevant H&S modules have been completed by checking whether the survey asking for feedback on the modules has been completed. The H&S Team contacts new starters by email if they have not completed the necessary modules within the deadline. Sometimes, up to five email reminders are required before this is resolved and the only assurance received that the module has been completed is confirmation from the new starter, or their manager, by email.

Audit testing was performed on a sample of 20 new starters who had joined since July 2018 for evidence that they had completed the e-learning H&S induction training modules within one month of their start date. Testing showed evidence that six of these employees had completed the training within one month of their start date. The completion of the training for two new starters was self-certified by the starter or their line manager but the completion dates were unknown. For 11 new starters in the sample, either there was no evidence that they had completed the training, or they completed it after the one month deadline. The remaining new starter in the sample did not take up their employment.

The College maintains a Training Needs Analysis which identifies any additional training required for each role, this includes periodic refresher training. Examples of this are Estates employees who receive additional training on Asbestos Awareness and Working at Heights. A copy of this was obtained during the audit and audit testing of the new starter sample above confirmed all their roles have been included in the Training Needs Analysis.

Discussions with H&S Team members confirmed that additional training is provided as and when required for any new equipment or changes to legislation.

Statistics on completion rates of H&S induction training modules are provided as part of the suite of KPIs presented to the Organisational Development Committee. The draft minute of the June 2019 meeting of the Organisational Development Committee confirms that the completion rates of H&S induction training modules was raised by the members of the committee and that performance in this area will be the subject of ongoing scrutiny and monitoring.

## Health and Safety

### Objective 3: A H&S training programme which includes induction training, refresher training and training for new equipment and legislation (continued)

Observation	Risks	Recommendation	Management Response	
<p>As noted above, currently, the H&amp;S Team does not have a reliable and efficient way to check which new starters have completed their mandatory H&amp;S induction training modules within one month of their start date.</p> <p>This restricts their ability to chase completion of the training modules with the employee and their line manager.</p> <p>While new starters and managers may confirm completion of the modules by email, such evidence can be unreliable.</p>	<p>Without visibility and confirmation that all new starters have completed the relevant training modules, there is a lack of assurance that the College is complying with the requirements of the Health and Safety at Work Act 1974.</p>	<p><b>R4</b> Explore options for introducing a system or tool that can provide evidence and reporting capability on which new start employees have, and have not, completed their H&amp;S induction training modules within one month of their start date.</p>	<p>The College are seeking to implement a new VLE which the OD team use to release training. This system should have capacity to record progress and outcomes of training modules.</p> <p>In the interim the OD team are investigating other options for training packages, including H&amp;S, which would provide accurate data on completion.</p> <p><b>To be actioned by:</b> G Crankshaw, Organisational Development Manager</p> <p><b>No later than:</b> 31 December 2019</p>	
			Grade	2

## Health and Safety

### **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**

The College currently has a H&S Audit procedure in place to measure safety performance, examine critically the implementation of H&S procedures and evaluate how H&S is managed to ensure high standards are maintained. H&S Officers perform audits on an ongoing, rolling basis. Once every 12 months for all Faculties and once every 2-3 years for Support Units. The audit process includes pre-audit meetings, audit interviews / verification and an audit report with recommendations. The process ends with an audit review meeting, 3-6 months after the audit report is issued, to determine the progress made to implement the report recommendations.

This procedure is currently under review. The proposed new procedure recommends that audits should be performed by a H&S Internal Audit Team of approximately six specifically trained Lead Auditors. No Lead Auditor would perform an audit into their own faculty / unit. This draft new procedure is awaiting approval with a target for implementation in September / October 2019.

The new Audit procedure also requires the H&S Internal Audit Team to follow up all audit recommendations to ensure that they are implemented in line with agreed action plans. A summary of the status of all open findings will be presented at each Health, Safety and Safeguarding Committee meeting. If action plans are not completed by the expected date of implementation, a letter must be sent by the responsible individual to the Committee explaining why the date was not met and when the action will be completed. If the date is missed a second time, the responsible individual must provide an explanation to the Committee in person.

The introduction of this new procedure would represent an improved audit process with robust inspection arrangements in place to ensure staff and sites are following the College's H&S policies / procedures. The new procedure would also represent an improved process for collating, managing and reporting audit recommendations to ensure their implementation.

## Health and Safety

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

Discussions with H&S Team members confirmed that the College currently has a paper-based accident reporting process. Accident Books are located at each campus and these should be used by College employees to record accidents, near misses and first aid call-outs. Each Accident Book contains Accident Report Forms which the member of staff dealing with each incident should complete with details of the accident, who was involved, and the injury suffered.

Members of staff can either provide a copy of the Accident Report form directly to a member of the H&S Team or leave it in the Accident Book, which is inspected by the H&S Team on a daily basis. For each incident, a member of the H&S Team will consider whether further investigation or notification to the Health and Safety Executive (HSE) is required. If an investigation is performed, an Accident Investigation Report is completed. Should the report contain recommendations for action to be taken to ensure such an accident does not re-occur, this is passed to the relevant member of staff to action and record when the recommendations have been implemented.

The Organisational Development Manager confirmed that the College is currently considering the option of implementing an on-line accident reporting process.

Audit testing was performed on a random sample of 20 Accident Report and Accident Investigation Reports to ensure:

- The accident / incident was acted upon and satisfactorily addressed in a timely manner;
- The findings were clearly communicated to all interested parties;
- Effective action was taken to prevent any reoccurrences;
- Any relevant cases were reported to the HSE within the required timescale; and
- The Accident Report Form was fully completed.



## Health and Safety

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

Observation	Risks	Recommendation	Management Response	
<p>The current Accident Report form does not include a section for providing details of what action was taken in response to the incident or what medical treatment / advice was provided to the injured person.</p> <p>Seven of the Accident Report forms in the audit sample did not include these details.</p>	<p>Without recording what medical treatment or advice was provided, the College may not be able to defend allegations that either no, or inappropriate / inadequate, medical treatment or advice was provided.</p>	<p><b>R5</b> Revise the Accident Report form to require details of the action taken in response to the incident to be noted and what medical treatment / advice was provided to the injured person.</p>	<p>The College currently use Health and Safety Executive approved recording forms, however the team are working with the Systems Development Team to devise a new online recording system which will have mandatory fields ensuring completeness of reports. We will ensure extra fields are added to this report to include medical treatment/advice is also recorded</p> <p><b>To be actioned by:</b> U Okoli, Senior Health &amp; Safety Officer</p> <p><b>No later than:</b> 30 November 2019</p>	
			Grade	3

## Health and Safety

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

Observation	Risks	Recommendation	Management Response		
<p>Two of the incidents in the audit sample related to potentially re-occurring H&amp;S risks (one was an apparent failure to use personal protection equipment while the other related to potentially faulty equipment).</p> <p>However, audit testing showed no evidence of the completion of an Accident Investigation Report or a record of how / why the decision was made that no such investigation was required.</p> <p>During discussions, College staff stated that they were convinced that a further investigation had occurred in at least one of the incidents mentioned above but could provide no evidence of this investigation or its outcome.</p> <p>The sample tested also included an example where an Accident Investigation Report had been completed with three recommendations for action required to ensure that there would not be a re-occurrence. However, there was no record to show how / when the recommendations were implemented as this section of the report was not completed.</p>	<p>The failure to record the reason(s) for a decision not to investigate an accident further could lead to allegations that the College overlooked the matter and failed to take the appropriate action.</p> <p>The failure to record the completion and results of an accident investigation represents a lack of assurance that the appropriate action has been taken to mitigate the risk of a reoccurrence.</p> <p>Should an injured member of staff or student take legal action against the College for injury resulting from its failure to remedy known risks, the lack of recorded evidence as above may be detrimental to the College's defence to such an allegation.</p>	<p><b>R6</b> For every accident / first aid callout which does not result in a further investigation, a record should be kept of the reason(s) why this decision was made, by whom and when.</p> <p>An Accident Investigation Report should be completed, and retained, for all incidents which result in further investigation.</p> <p>All relevant members of staff should be reminded that all sections of Accident Investigation Reports should be completed including details of how and when recommendations in the report were actioned / implemented.</p>	<p>The team are working with the Systems Development Team to devise a new online recording system which will have mandatory fields ensuring completeness of reports and workflows prompting action from the relevant staff.</p> <p>The OD team will have the ability to monitor and advise staff on actions required through a live system. The team and relevant management will also be able to monitor when actions are closed-off.</p> <p><b>To be actioned by:</b> U Okoli, Senior Health &amp; Safety Officer</p> <p><b>No later than:</b> 30 November 2019</p>		
			<table><tr><td>Grade</td><td>3</td></tr></table>	Grade	3
Grade	3				

## Health and Safety

### **Objective 6: Regular reporting of H&S to senior management and to the Board of Management**

Discussions with H&S Team members established that periodic updates on all H&S matters are provided to every Health, Safety and Safeguarding Committee and Board Organisational Development Committee meeting. The Health, Safety and Safeguarding Committee includes all the relevant members of the College's senior management team.

During the audit, copies of the most recent two reports to both committees were obtained together with copies of the minutes for these meetings. An evaluation of these documents showed adequate reporting and consideration of all relevant H&S issues including:

- Accident Reporting / First Aid Callouts Statistics;
- H&S Service Desk enquiries;
- Occupational Health surveillance; and
- H&S Policies / Procedures Review.

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