# **GITY** OF **GLASGOW COLLEGE**

## Board of Management Audit Committee

Date of Meeting	Wednesday 15 May 2019
Paper No.	AC5-E
Agenda Item	8.1
Subject of Paper	Internal Audit Report – Health and Safety
FOISA Status	Disclosable
Primary Contact	David Archibald/Stuart Inglis, Henderson Loggie
Date of production	May 2019
Action	For Discussion

#### 1. Recommendations

The Committee is asked to consider and approve the attached Internal Audit Plan 2018-19.

### 2. Purpose of report

The purpose of this document is to present for consideration by management and the Audit Committee the annual operating plan for the year ended 31 July 2019.

### 3. Context

- 3.1 The plan is based on the proposed allocation of audit days for 2018/19 set out in the Audit Needs Assessment and Strategic Plan 2016 to 2020, which was presented to the Audit Committee and approved at its meeting on 8 March 2017.
- 3.2 The plan sets out the outline scope and objectives for each audit assignment to be undertaken during 2018/19, together with the audit approach. These have been arrived at following discussion with members of the College Senior Management Team (SMT) during the Audit Needs Assessment process in February 2017.
- 3.3 The outline scopes will be finalised after discussion with responsible managers in each audit area as follows:
  - Health and Safety
  - Quality Assurance & Improvement
  - Libraries and Learning Technologies
  - Student Recruitment Targets
  - Staff/Organisation Development
  - Student Fees
  - Innovation and Research
  - Business Continuity
  - Data Protection
  - Systems Development/Implementation
  - Credits Audit
  - Follow-Up Reviews

#### 4. Impact and implications

- 4.1 In producing the Internal Audit Plan for 2018-19 the Internal Auditors have sought to provide assurance to City of Glasgow College that proper controls, policies and processes are in place to deliver the overall business strategy and objectives of City of Glasgow College. The Audit reports will include agreed recommendations for improvement as required, referencing the key challenges and strategic risks facing City of Glasgow College.
- 4.2 This process will enhance performance and compliance, and mitigate against strategic failures as outlined in the College Strategic Plan.

**City of Glasgow College** 

Health and Safety

Internal Audit Report No: 2019/04

Draft Issued: 17 April 2019

Final Issued: 6 May 2019

LEVEL OF ASSURANCE

**Requires Improvement** 



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#### **Level of Assurance**

In addition to the grading of individual recommendations in the action plan, audit findings are assessed and graded on an overall basis to denote the level of assurance that can be taken from the report. Risk and materiality levels are considered in the assessment and grading process as well as the general quality of the procedures in place.

Gradings are defined as follows:

Good	System meets control objectives.
Satisfactory	System meets control objectives with some weaknesses present.
Requires improvement	System has weaknesses that could prevent it achieving control objectives.
Unacceptable	System cannot meet control objectives.

### **Action Grades**

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

### 1. Overall Level of Assurance

Requires	System has weaknesses that could prevent it achieving control objectives.
Improvement	bystem has weaknesses that could prevent it achieving control objectives.

### 2. Risk Assessment

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

- Failure of the College's Duty of Care to Students (Risk rating: Green);
- Negative impact of statutory compliance failure (Risk rating: Amber); and
- Negative impact upon College reputation (Risk rating: Amber).

### 3. Background

As part of the Internal Audit programme at the College for 2018/19 we carried out a review of Health and Safety (H&S). The Audit Needs Assessment, completed in March 2017, 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 sector it is important to demonstrate full implementation and embedding of H&S legislation. It is important that H&S is considered by all staff, management and Board members at the College in order to reduce the risks related to accidents and occupational health. Furthermore, all staff should understand that H&S is their responsibility, and not only that of management and the Board.

### 4. 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 main campus site.

### 4. Scope, Objectives and Overall Findings (Continued)

Objective	Findings				
The specific objectives of this audit were to obtain reasonable assurance that the		1	2	3	Actions already
College has:	Assurance	No. of	Agreed	Actions	planned
1. A H&S policy and documented procedures which are communicated to all staff	Requires Improvement	0	4	1	$\checkmark$
2. A formal risk identification and assessment process	Satisfactory	0	0	2	$\checkmark$
3. A H&S training programme which includes induction training, refresher training and training for new equipment and legislation	Requires Improvement	0	1	0	
<ol> <li>Regular monitoring of H&amp;S systems to ensure that they are functioning effectively including H&amp;S audits, carried out either internally or by external agencies such as the Health and Safety Executive</li> </ol>	Requires Improvement	0	2	0	
<ol> <li>An incident and accident recording system with follow-up and implementation of new controls where required</li> </ol>	Requires Improvement	0	1	0	
6. Regular reporting of H&S to the SMT and to the Board of Management.	Good	0	0	0	
	Romuinoo	0	8	3	
Overall Level of Assurance	Requires Improvement			knesses tl ng contro	hat could I objectives

### 5. Audit Approach

From discussion with H&S and other staff, and review of procedural documentation, we identified the internal controls in place and compared these with expected controls. A walkthrough of key systems was then undertaken to confirm our understanding, and this was followed up with compliance testing where considered necessary. We have reported on any areas where expected controls were found to be absent or where controls could be further strengthened.

### 6. Summary of Main Findings

#### Strengths

- The College has a range of H&S policies, procedures, guidance and forms in place;
- There is a College H&S Team which provides guidance on H&S matters;
- A new electronic software package is being introduced for preparing risk assessments and for incident reporting; and
- A H&S Committee is in place which receives H&S reports. The H&S Committee membership consists of trade union appointed Safety Representatives and Management Representatives.

#### Weaknesses

- H&S policies and procedures need to be updated, and better communicated to staff;
- From discussion with a number of staff and review of a range of College areas during a physical walk around we identified instances where there was a lack of H&S signage; one work area inspected was noted to have equipment with safety guards missing or broken; heavy or bulky items stored at height; staff having a lack of basic knowledge around H&S requirements; and departments not routinely sending a representative to H&S Committee meetings;
- Although there was a process for preparing risk assessments there was room for improvement in how these were completed and not all COSHH risk assessments had been prepared;
- Although there was appropriate H&S training for students there was room for improvement in providing H&S induction training and H&S refresher training to staff;
- There was not currently a formal framework of H&S audits or compliance checks; and
- Staff spoken to as part of the audit generally found it difficult to access first aiders when they needed one.

### 7. Acknowledgements

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

### 8. Main Findings and Action Plan

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

Observation	Risk	Recommendation	Management Respo	onse
<ul> <li>Policies</li> <li>The College currently has the following H&amp;S policies in place, which are available to staff on the College intranet:</li> <li>H&amp;S policy statement;</li> <li>H&amp;S policy – organisation and responsibilities (which highlights roles and responsibilities); and</li> <li>Fire Safety Policy.</li> <li>We noted that the policies required review, in particular the sections on roles and responsibilities of staff, as what was set out in the policies was not always being followed in practice.</li> <li>A new H&amp;S policy has been developed by the</li> </ul>	Without up-to-date policies there is a risk that the H&S framework in place is inadequate to meet the College's legal H&S requirements.	<b>R1</b> Review the H&S Policy statement, H&S Policy – organisation and arrangements and Fire Safety Policy to ensure that these are up-to- date and adequate. Once reviewed ensure that actual practice reflects what is in these documents.	Accepted. Policy docu development. To be actioned by: H Manager / Depute Princ Efficiency and Marketing No later than: August	&S Compliance ipal / Operational and Research Manager.
H&S Compliance Manager, but this has yet to be finalised and approved.			Grade	2

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

Observation	Risk	Recommendation	Management Respons	e
<ul> <li>Procedures</li> <li>There are a range of procedures in place including:</li> <li>Risk Assessment Procedure;</li> <li>Accident / Incident Reporting / Investigation Procedure;</li> <li>Display Screen Equipment Procedure;</li> <li>Manual Handling Risk Assessment Procedure;</li> <li>Lone Working Procedure;</li> <li>Work Placement Procedure;</li> <li>Educational Visits and Field Trips Procedure;</li> <li>Violence at Work Procedure; and</li> <li>Fire Safety Procedure.</li> </ul>	Without up-to-date procedures there is a risk that the H&S framework in place is inadequate to meet the College's legal H&S requirements	<b>R2</b> Where procedures are out-of-date review these and update them. Where additional procedures are required these should be developed and rolled out to staff concerned.	Accepted. A business cas development to identify the develop and implement an e System through the review development of new H&S p <b>To be actioned by:</b> H&S o Depute Principal / Operation Marketing and Research Ma <b>No later than:</b> December <b>Grade</b>	resources needed to effective H&S Management of existing and the olicies / procedures. Compliance Manager / onal Efficiency and nager.
We noted that some procedures were out-of- date, and that additional procedures were required in some areas, such as relating to COSHH (Control of Substances Hazardous to Health). In addition, we noted that not all academic and support departments had departmental H&S procedures in place. Given that H&S is a devolved responsibility it is important that appropriate departmental H&S procedures are developed.		departmental H&S procedures and ensure that staff are made aware of these.	Accepted. On the implem Management System, work procedures to implement co arrangements. To be actioned by: Dean No later than: March 202 Grade	areas will develop local orporate H&S s / Directors

Objective 1: A H&S policy and documented procedures which are communicated to all staff (continued)							
Observation	Risk	Recommendation	Management Respo	onse			
Communication of H&S Policies and Procedures As part of the audit we met staff from five curriculum areas, covering both City and Riverside campuses, and discussed H&S arrangements in their areas. We noted from these discussions that not all staff were aware of H&S policies and procedures. We consider that there would be benefit in having a better H&S homepage on the intranet that sets out clearly the key H&S requirements. In addition, we noted that some documents on the College intranet, Connected, could not be opened although we understand the future of Connected is currently being discussed, possibly with the view to replacing it. As the College is	If staff are not aware of H&S policies, procedures and responsibilities then staff may not comply with their requirements which could lead to H&S legal requirements not being met.	<b>R4</b> Develop a home page on the College intranet that clearly summarises key H&S roles and responsibilities, and provides links to key policies, procedures and forms.	Accepted. The existin will be reviewed and up staff have access to rele to help ensure that they required standards. To be actioned by: H Manager / Operational B Research Manager / Dep No later than: July 200	vant H&S information v are fully aware of the &S Compliance Efficiency and Marketing pute Principal / IT			
considering replacing this, no recommendation has been raised.			Grade	3			

Observation	Risk	Recommendation	Management Respo	onse			
From discussion with a number of staff and review of a range of College areas during a physical walk around (including carpentry and jewellery workshops, training kitchens, engineering workshops and construction workshops) we identified instances where there was a lack of H&S signage; one work area inspected was noted to have equipment with safety guards missing or broken; heavy or bulky items stored at height; staff having a lack of basic knowledge around H&S requirements; and departments not always sending a representative to H&S Committee meetings.	Staff may not comply with H&S policies and procedures because they do not consider that these are important.	<b>R5</b> The College should ensure that staff are more proactive in identifying, assessing, escalating and acting on both individual H&S issues and emerging trends and to ensure appropriate staff input for all departments through the H&S Committee.	Accepted. Develop st template and implement inspections to ensure th control systems are fully effective. Relevant Deal nominated depute now Committee. To be actioned by: H Manager Depute Princip No later than: August	at quarterly recorded nat all relevant local risk y implemented and ns / Directors or attend H&S &S Compliance pal / Deans / Directors			
			Grade	2			

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

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

It is the responsibility of departments to identify and assess H&S risks and put appropriate controls in place to mitigate these. Risks identified should have a risk assessment prepared which includes mitigating controls and these are required to be documented using the online risk assessment form on Connected. There is guidance provided to staff on how to complete risk assessments on Connected. The 'H&S Policy – organisation and responsibilities' states that the Directors' role includes checking that H&S risk assessments are carried out and recorded for all work activities in their area of responsibility and that any remedial actions are implemented.

The College has purchased off the shelf H&S software and is currently developing this for use with risk assessments. We reviewed this software and noted that it has better reporting and analysis functionality, which will allow managers to more easily identify when their risk assessments need review. In addition, if there are any identified action points, then these can be input into the software with a target completion date and the H&S Team can run a report to identify these and follow-up outstanding actions with the relevant departments.

There is a legal requirement for COSHH (Control of Substances Hazardous to Health) risk assessments to be prepared, however we noted that these were only prepared by the Culinary Arts area and by the cleaning staff. We discussed COSHH with a range of staff we met from curriculum areas who thought that chemical safety data sheets that they held were adequate to meet COSHH requirements, but this is not the case. We have raised under **R2** the need to create COSHH procedures.

In addition to the risk assessments noted above that should cover normal 'business as usual' activities there is also a risk identification, assessment and mitigation process in place for placements and field trips. The H&S Team is responsible for fire and first aid risks and processes have been put in place for these areas.

Objective 2: A formal risk identification and assessment process (continued)							
Observation	Risk	Recommendation	Management Response				
<b>Risk Assessment Completeness</b> We reviewed the list of risk assessments on Connected and they covered a wide range of areas. However, it was noted that risk assessments were often focused at specific pieces of equipment or processes, and that they did not always cover off general H&S risks such as manual lifting. From discussion with the H&S Compliance Manager it was noted that there would be benefit in departments having general risk assessments as well as specific risk assessments.	If all risks are not identified then controls may not have been considered and put in place, leading to unmitigated H&S risks.	<b>R6</b> Implement a system of departments and faculties having both general risk assessments (or referring to College wide general risk assessments where appropriate) and specific risk assessments.	Accepted. The existing in-house Risk Assessment will be replaced commercial risk management syst allow both general and specific ris to be conducted. The manageme includes checks and balances to en actions are implemented prior to risk assessment and allows centra monitoring by the H&S Team. College management currently ide resources required for completio risk assessments. To be actioned by: H&S Comp Depute Principal / Deans / Direct No later than: December 2019	by a sem that will sk assessments nt system nsure that approval of the I tracking and entifying n of COSHH liance Manager /			

Objective 2: A formal risk identification and assessment process (continued)								
Observation	Risk	Recommendation	Management Respons	e				
Adequacy of Risk Assessments We sample tested 10 risk assessments and found that generally the standard was adequate, however noted that they could be improved. In some cases there was an extremely long list of controls included which appeared as though it may have been copied from another document, and it was not clear which controls were the key controls, whether the controls were actually in place, and how the controls were being applied in practice. It was also not clear who had reviewed the risk assessment and we consider that there should be a centralised review of completed risk assessments by line managers for completeness and reasonableness. The H&S Compliance Manager advised that the new risk assessment system will have authorisation required by the Associate Dean or Associate Director, or a more senior staff member.	If identified risks are not adequately assessed and appropriate controls put in place, then H&S risks may not be adequately mitigated against.	<b>R7</b> Implement a system of review of risk assessments by line managers or more senior staff to ensure that risk assessments are appropriately completed and accurately reflect controls in place.	Accepted. As an interim Curriculum Head and Asso medium hazard work areas Institution of Occupational Managing Safely Certificate competencies for completin sufficient risk assessments. Curriculum Heads and Asso higher hazard areas will cor National Examination Board Safety and Health National in Occupational Health and <b>To be actioned by:</b> Head Development / Deans / Dir Principal / H&S Compliance <b>No later than:</b> December	ciate Deans from will undertake the Safety and Health to develop their ng suitable and In addition, ociate Deans in nplete The d in Occupational General Certificate Safety. of Organisational ectors / Depute Manager				
			Grade	3				

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

#### **Student H&S Training**

Students should be given a H&S presentation during induction by their lecturer. H&S information is available on MyCity, the College's virtual learning environment, and also on the College website.

Where students require further H&S training as part of their course – for example if they work with heavy machinery or hazardous substances – the additional training is carried out as part of the course by department staff in a classroom environment before starting practical work in workshops, kitchens or other practical areas. In many cases H&S will also be a necessary part of achieving the qualification.

From discussion with curriculum staff interviewed as part of this audit the process by which students received H&S training appeared reasonable.

#### Staff H&S Training

All new staff should receive H&S information from their line manager, as well as having to complete the mandatory online H&S and fire training on MyCity and receive a copy of the Staff Integration Guide which includes information on fire actions and evacuations, first aid and accidents, personal protective equipment, and online mandatory H&S training.

The College provides further training to staff to ensure that key H&S related posts are filled, including first aid training and fire marshal training. Specific H&S training can be requested by staff if necessary.

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

Observation	Risk	Recommendation	Management	Response
<b>Refresher training</b> We noted from discussion with the staff interviewed that refresher H&S training, such as toolbox talks, was not always provided and that staff were not always aware of their H&S requirements, how to contact a first aider, or how to replenish first aid kits. As noted above we noted that risk assessments were not always as clearly completed as they could be, and the H&S Compliance Manager considered there would be benefit in training being provided to staff involved in preparing risk assessments.	Staff may not be aware of key H&S requirements.	<b>R8</b> Review the H&S training framework, including corporate H&S induction, department specific H&S induction, refresher H&S training and any specific H&S training required for staff roles and ensure it is robust and that controls are in place to ensure all required staff are receiving this training.	developed and im that corporate an safety training nee	esssment tool will be plemented to ensure d local health and eds are identified, are developed and <b>by:</b> Deans / of Organisational epute Principal / Manager
			Grade	2

### 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 H&S Policy specifies the following relating to audits:

- Executive Director Infrastructure (a post not in place since the recent restructure) responsible for ensuring that there are adequate means for auditing and monitoring safety arrangements and that necessary action is taken to remedy non-conformance;
- Curriculum/Service Heads responsible for assisting in carrying out safety inspections and audits; and
- The Head of Safety and Wellbeing (a post not in place since 2017) responsible for conducting internal audits / reviews and make recommendations for improvements.

From discussion with curriculum staff we noted that there was not a formal process for faculties to undertake H&S audits, except in the Culinary Arts area where audits were carried out.

The H&S Team undertook H&S audits of areas within the College up to April 2018, which were recorded on special iAuditor software which allowed action points to be identified (including with attaching photos) and these reports could then be sent out to the relevant department for actioning and with later follow-up. We were advised that these audits ceased due to insufficient staff resources to undertake them.

There is a Display Screen Equipment online assessment module that staff using computer screens should undertake, however we noted that not all staff who were required by the Display Screen Equipment Regulations to do this had completed the assessment.

There have been no recent H&S checks carried out by external agencies other than noise and dust exposure monitoring that were carried out in 2018 by an Occupational Hygienist contractor. The H&S Compliance Manager hopes that these will be undertaken regularly in future.

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 (continued)

Observation	Risk	Recommendation	Management	Response
<b>Responsibilities</b> We noted from discussion with staff that they were not always clear on their roles and responsibilities regarding auditing and H&S compliance checks. Some staff advised that they were responsible for H&S compliance but had not identified any specific checks to be carried out to ensure staff were complying with H&S requirements.	Staff may not be complying with H&S policies and procedures.	<b>R9</b> Ensure the roles and responsibilities of all staff with a responsibility for undertaking H&S audits and compliance checks are clear, and that all required H&S checks required are formally documented and evidence is kept of checks being undertaken.	Accepted. Clar provided to staff duty-holders to e are fully aware of responsibilities an for managing hea <b>To be actioned</b> Organisational D Depute Principal Compliance Man Directors <b>No later than:</b>	who are H&S ensure that they f their duties, nd accountabilities Ith and safety. I <b>by:</b> Head of evelopment / / H&S ager / Deans /
			Grade	2

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 (continued)

Observation	Risk	Recommendation	Management Res	oonse
Audit / Compliance Check Schedule As set out above, H&S audits and compliance checks are generally not being performed. Audits / compliance checks should comprehensively cover all main H&S areas, including risk assessments, placements, field trips, fire evacuation, first aid and display screen assessments.	Staff may not be complying with H&S policies and procedures.	<b>R10</b> Ensure that H&S audits / compliance checks that are required to be carried out by faculties, support areas and the H&S Team are formally documented, including the responsible person, frequency of checks and where evidence will be kept. Evidence of these checks being performed should be retained, and a more senior staff member should check that these audits / checks have been completed. If there are any actions arising from these audits / checks then these should be formally documented and assigned to a staff member for implementation and once implemented an independent staff member should check that the rectification actions taken are appropriate and adequate. If necessary,	Team will develop and programme to monito H&S performance.	easuring and reporting erformance. The H&S i implement an audit or and report on local Deans / Directors / H&S ' Depute Principal
		issues should be escalated to the H&S Compliance Manager.	Grade	2

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

The College has a standard incident and accident recording system in place, with both incident / accident forms and first aid forms. These standard forms are available on the College intranet and these must be completed and passed back to the H&S team. It was noted that generally the first aid forms are received but not always the accident / incident forms. New software has been purchased and incident reporting functionality is being developed on this and this new system should overcome some of the shortcomings with the existing system.

If an incident is of such severity that it is considered to be covered by the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) a separate checklist must be completed to ensure any follow-up actions have been implemented.

Incidents are recorded on a spreadsheet and we selected a sample of eight incidents and noted that for seven incidents appropriate detail was recorded for each on the standard incident / accident forms. One Accident / Incident Report Form was not available as it had not been submitted by the work area. The information on the spreadsheet was gathered from a First Aid Report Form. We were advised by the H&S Team that the relevant work area had been contacted on a number of occasions to provide a Report Form, but none was submitted.

Observation	Risk	Recommendation	Management Respon	se
<b>First Aid Assistance</b> The Health and Safety (First-Aid) Regulations 1981 require employers to provide adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work. We noted from discussion with staff that they were not always aware of how to call a first aider, or what forms were required to be completed after an accident or incident. In addition, staff commented that there was a lack of first aiders, including difficulties in finding first aiders during evening classes or weekends.	The College is not meeting its legal requirement regarding first aid.	<b>R11</b> Review the current first aid provision and implement a more comprehensive system which will ensure that the College provides staff and students with access to a first aider should they require one.	Accepted. New First-Aid are currently being finalise will be in place and First-A issued with 2-way radios to communication and respon To be actioned by: Dep Corporate Services / H&S Manager No later than: June 2019	d. Formal rotas id staff will be o improve nse times. ute Principal / VP Compliance
			Grade	2



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

There is a monthly report from the H&S Compliance Manager to the Senior Management Team. This report includes information on incident and accident statistics, first aid treatments, fire prevention actions, training, H&S risk assessments and updates on any other key H&S management issues. There are also quarterly reports for the College's H&S Committee (which comprises management and union representatives) and the Finance and Physical Resources Committee which cover the same areas as the SMT reports. There is also an annual H&S report to the Board. We reviewed the contents of these reports and found that they provided appropriate summaries of H&S issues.