G T T Y OF GLASGOW COLLEGE

Board of Management

Date of Meeting	Wednesday 28 August 2019
Paper No.	BoM1-B
Agenda Item	5
Subject of Paper	Health and Safety Audit , April 2019: update
FOISA Status	Disclosable
Primary Contact	Dr Sheila Lodge
Date of production	21 August 2019
Action	To note

1. Recommendations

The Board is asked to note this update on progress towards completing the actions arising from the Internal Audit report on Health and Safety, April 2019 (audit no. 2019/04).

2. Purpose of Report

To update the Board on progress to date towards completing the actions arising from the Internal Audit report on Health and Safety, April 2019 (audit no. 2019/04).

3. Context and Content

In April 2019, our internal auditors, Henderson Loggie, undertook an audit of Health and Safety across the College. The audit report noted that the area 'required improvement'. A management response showed that all recommendations had been accepted, and an action plan was put into place.

The attached version of the Audit report incorporates the management response, the action plan and an update on progress to date towards completing each action.

The College has, however, extended its ambitions to improve Health and Safety beyond complying with the recommendations of the audit.

For example, over the months since the audit was undertaken:

- The Health and Safety Committee has been reviewed and meetings are being held regularly with an expanded membership.
- The Health and Safety Team has been strengthened by seconding the Health and Safety Administrator to the role of Health and Safety Officer, with the Administrator post being backfilled. In addition, Nothabo Ngwenya, a recent graduate in Risk Management of the University of the West of Scotland, is undertaking work experience with the team for a period of six months, so providing extra resource.
- The title of the Health and Safety Compliance Manager has been changed to Health and Safety Manager, to suggest a more direct approach. (Unfortunately, the Health and Safety Manager has recently gone on sick leave for 4 weeks, but we hope to welcome him back as soon as possible.)
- Given the generally low awareness of Health and Safety issues across the College, it has been agreed that all Deans, Associate Deans, Curriculum Heads, Directors and Associate Directors (104 colleagues in all) will undertake the Institute of Occupational Safety and Health (IOSH) 'Managing Safely' programme. This is a six-week course where staff will attend for half a day each week, followed by an assessment. This CPD activity will raise awareness, teach participants how to carry out risk assessments in their areas, and so forth. It is intended that this investment in staff will facilitate a step-change in our approach to Health and Safety across the College, so helping to reduce accidents and near-misses.
- The College has purchased 10 more defibrillators, bringing the total available across the College to 15.

4. Impact and implications

Complying with the recommendations of the audit, and taking further actions	beyond
compliance, will lead to improvements in health and safety for students, staff a	and visitors
at City of Glasgow College.	

Appendix:

Internal Audit report on Health and Safety, April 2019 (audit no. 2019/04), with management response and update on actions, 21 August 2019.



City of Glasgow College

Health and Safety

Internal Audit Report No: 2019/04

Draft Issued: 17 April 2019

Final Issued:

Action Plan Update: 21 August 2019

LEVEL OF ASSURANCE

Requires Improvement



Content

		Page No.
Section 1	Overall Level of Assurance	1
Section 2	Risk Assessment	1
Section 3	Background	1
Section 4	Scope, Objectives and Overall Findings	1 - 2
Section 5	Audit Approach	2
Section 6	Summary of Main Findings	3
Section 7	Acknowledgements	3
Section 8	Main Findings and Action Plan	4 - 16

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 Improvement

System 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.



City of Glasgow College - Health & Safety DRAFT

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		1	2	3	Actions
to obtain reasonable assurance that the College has:	Assurance	No. of Agreed Actions			already planned
 A H&S policy and documented procedures which are communicated to all staff 	Requires Improvement	0	4	1	✓
A formal risk identification and assessment process	Satisfactory	0	0	2	✓
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	Requires Improvement	0	2	0	
5. An incident and accident recording system with follow-up and implementation of new controls where required	Requires Improvement	0	1	0	
Regular reporting of H&S to the SMT and to the Board of Management.	Good	0	0	0	
		0	8	3	
Overall Level of Assurance	Requires Improvement	_	vent it ac		that could control

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 management 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	
 Policies The College currently has the following H&S policies in place, which are available to staff on the College intranet: H&S policy statement; H&S policy – organisation and responsibilities (which highlights roles and responsibilities); and Fire Safety Policy. 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 	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.	R1 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.	To be actioned by: Hamanager / Depute Print Efficiency and Marketi Manager. No later than: Augus Update 21.9.19: Actional decided and the second sec	documents currently nt. y: H&S Compliance Principal / Operational keting and Research gust 2019	
A new H&S policy has been developed by the 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 Resp	oonse
 Procedures There are a range of procedures in place including: Risk Assessment Procedure; Accident / Incident Reporting / Investigation Procedure; Display Screen Equipment Procedure; Manual Handling Risk Assessment Procedure; Lone Working Procedure; Work Placement Procedure; Educational Visits and Field Trips Procedure; Violence at Work Procedure; and Fire Safety Procedure. We noted that some procedures were out-ofdate, 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 	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	R2 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.	The state of the s	develop and ve H&S Management review of existing and new H&S policies / H&S Compliance incipal / Operational ting and Research mber 2019 Inding introduction of ping software in





H&S procedures in place. Given that H&S is a devolved responsibility it is important that appropriate departmental H&S procedures are developed.

R3 Develop succinct departmental H&S procedures and ensure that staff are made aware of these.

Accepted. On the implementation of the H&S Management System, work areas will develop local procedures to implement corporate H&S arrangements.

To be actioned by: Deans / Directors

No later than: March 2020 Update 21.9.19: Deans/Directors to undertake once IOSH training completed in September.

Note: Given the generally low awareness of H&S issues across the College, it has been decided that all Deans, Associate Deans, Curriculum Heads, Directors and Associate Directors (104 staff in all) will undertake the IOSH 'Managing Safely' programme, unless they already hold this or a higher H&S qualification. This is a six-week course where colleagues will attend for half a day each week, followed by an assessment. This CPD activity will raise awareness, teach participants how to carry out risk assessments in their areas, and so forth: it is thought this investment in staff CPD will facilitate a step change in our approach to





	Health & Safety across help to reduce accider	
	Grade	2



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

Observation	Risk	Recommendation	Management Resp	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 considering replacing this, no recommendation has been raised.	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.	R4 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 existing resources will be revie ensure that staff have H&S information to he are fully aware of the resource fully aware fully aware of the resource fully aware fu	wed and updated to access to relevant elp ensure that they required standards. &S Compliance al Efficiency and danager / Depute D19 Tent has been drafted. In the introduction of



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

Observation	Diele	Decommendation	Management Deep	0.14.0
Observation	Risk	Recommendation	Management Resp	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; 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.	R5 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 stanspection template and quarterly recorded instant all relevant local mare fully implemented. Relevant Deans / Direct depute now attend Harman attended to the pute of	and implement pections to ensure risk control systems and effective. Stors or nominated RS Committee. 88 Compliance cipal / Deans / 84 2019 The template to help spections of work eted, and will be





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.



Observation	Risk	Recommendation	Management Response
Risk Assessment Completeness 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.	R6 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 inhouse Connected Risk Assessment will be replaced by a commercial risk management system that will allow both general and specific risk assessments to be conducted. The management system includes checks and balances to ensure that actions are implemented prior to approval of the risk assessment, and allows central tracking and monitoring by the H&S Team. College management currently identifying resources required for completion of COSHH risk assessments. To be actioned by: H&S Compliance Manager / Depute Principal / Deans / Directors
			No later than: December 2019



Update 21.9.19: In-house sessions to introduce the new Risk Assessment platform have been scheduled to tag on to the IOSH training.

Grade 3

Objective 2: A formal risk identification and assessment process (continued)

Observation	Risk	Recommendation	Management Response
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	If identified risks are not adequately assessed and appropriate controls put in place, then H&S risks may not be adequately mitigated against.	R7 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 measure, Curriculum Head and Associate Deans from medium hazard work areas will undertake the Institution of Occupational Safety and Health Managing Safely Certificate to develop their competencies for completing suitable and sufficient risk assessments. In addition, Curriculum Heads and Associate Deans in Higher hazard areas will complete The National Examination Board in Occupational Safety and Health





authorisation required by the Associate Dean or Associate Director, or a more senior staff member.	National Genera Occupational He	
	To be actioned Organisational Deans / Director Principal / H&S Manager	Development / rs / Depute
	No later than: I Update 21.9.19 facilitated by the Assessment syst rolling out in Se	: This will be e new Risk em, which is
	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
Refresher training 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.	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.	Accepted. A health and safety learning needs assessment tool will be developed and implemented to ensure that corporate and local health and safety training needs are identified and training plans are developed and implemented. To be actioned by: Deans / Directors / Head of Organisational Development / Depute Principal / H&S Compliance Manager No later than: December 2019 Update 21.9.19: A meeting between H&S, OD and HR to discuss progress has been scheduled.





			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 currently 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 currently in place since the recent restructure 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 Compliance Manager 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 checks exposure monitoring that were carried out in 2018 by an external company 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
Responsibilities 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.	R9 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. Clarification will be provided to staff who are H&S duty- holders to ensure that they are fully aware of their duties, responsibilities and accountabilities for managing for health and safety. To be actioned by: Head of Organisational Development / Depute Principal / H&S Compliance Manager / Deans / Directors No later than: August 2019 Update 21.9.19: Duty-holders have been reminded of their responsibilities, and this will be further emphasised during the IOSH training. The new risk





	assessment plat documenting ar checks.	form will aid in nd evidence
	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 Response
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.	R10 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, issues should be escalated to the H&S Compliance Manager.	Accepted. Operational areas will develop local processes for measuring and reporting on health and safety performance. H&S Team will develop and implement an audit programme to monitor and report on local H&S performance To be actioned by: Deans / Directors / H&S Compliance Manager / Depute Principal No later than: August 2019 Update 21.9.19: Operational areas have been asked to produce Health & Safety plans by December 2019. A proforma inspection form has been developed. A programme of internal H&S audits by the H&S team has been developed and is to be approved at the next Health & Safety Committee meeting.





	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 form could not be located, however as this was recorded on the spreadsheet of forms received it appears that it had been misplaced. An Accident / Incident Report Form was not available as one had not been submitted by the work area. The information on the spreadsheet was gathered from a First Aid Report Form. The relevant work area was contacted on a number of occasions to provide a Report From but none was submitted.

Observation	Risk	Recommendation	Management Response
First Aid Assistance 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	The College is not meeting its legal requirement regarding first aid.	R11 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 arrangements are currently being finalised. Formal rotas will be in place and First Aiders will be issued with 2- way radios to improve communication and response times.

City of Glasgow College - Health & Safety DRAFT



first aiders, including difficulties in finding first aiders during evening classes or weekends. **To be actioned by:** Depute Principal / VP Corporate Services / H&S Compliance Manager

No later than: June 2019. Update 21.9.19:

New arrangements have been developed for First Aid to be provided by staff on a rota basis.

First Aiders will carry walkietalkies to facilitate communication and this should greatly reduce response times.

Some existing First Aiders have stepped down, and new volunteers have been sought. Seventeen staff members have already come forward.

Training of 4 Concierges as First Aiders is underway: this will also strengthen our First Aid provision in the evenings and on Saturdays.

HR is currently discussing with a paramedic and a nurse who work part-time for the College as





provide back-up First Aiders whe arise. Note: Over th	ner they might o support to our en serious issues ne summer, the
additional defibi	rillators, bringing the 2 campuses

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.