

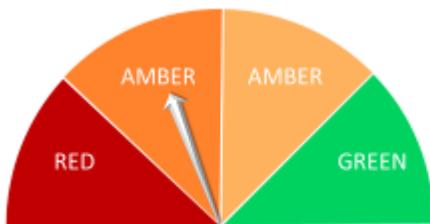
Flintshire Internal Audit

Audit Report

Title: 21/22 Statutory Training
Portfolio: Streetscene & Transportation
Issued Dated: December 2021
Report No: 19-2021/22
Report Status: Final v2

Internal Audit engagements are conducted in conformance with the Public Sector Internal Audit Standards.

Audit Opinion



1 Executive Summary:

Introduction and Scope:

This review has been carried out as part of the agreed Internal Audit Plan 2021/22.

Streetscene & Transport (S&T) have a large and varied workforce, it comprises of 295 operatives working in areas as diverse as waste disposal to highway maintenance. Operatives can be internal or sourced from agencies and the task of ensuring they are up to date with statutory training and certification before they are assigned to work is a complex one. There are different statutory training events and certifications the operatives must attend or renew prior to working on a particular job or task.

Currently the Compliance & Training team consists of one manager, two administration officers and two training officers. The service has found recruiting training officers difficult in the last two years. The roles are currently in the process of being re-advertised for a third time following two unsuccessful rounds of recruitment. Staff rotas are produced by the Logistics Manager with the supervisors of each team setting daily/weekly tasks to the operatives on shift.

In 2019 the Compliance & Training Team delivered in excess of 2400 training events which were attended and completed by managers, supervisors and operatives, in over 90 different course areas. In some cases training and assessment will be carried out by an external body, for example HGV driving but the Council does have internal trainers and assessors.

The risks the audit focussed on included:

- Roles and responsibilities are not clear and risks and mitigations have not been identified via the risk registers
- Managers are unaware / have incorrectly defined the mandatory training for each job role (internal / contractors)

Audit Opinion:

In each report we provide management with an overall assurance opinion on how effectively risks are being managed within the area reviewed. Appendix A of the report details our assurance levels:

Assurance:	Explanation
Amber Red - Some	<p>Some Assurance – Significant improvement in control environment required (one or more of the following)</p> <ul style="list-style-type: none"> • Controls exist but fail to address all key risks identified and/or are not applied consistently and effectively • Key management information exists but is unreliable <p>Conclusion: key controls are generally inadequate or ineffective.</p>

The table below highlights the number and priority of agreed actions to be implemented.

Priority	High (Red)	Medium (Amber)	Low (Green)	Total
No.	2	4	1	7

- The system in place does not accurately record and evidence the level of training/certification including where due for renewal or expired
- Operatives are assigned to work in areas for which they do not have the requisite training, thereby failing to comply with statutory regulations. This could result in injury, legal proceedings, financial loss and reputational damage to the Council
- The policy and system in place does not deliver a dynamic and responsive workforce, risking an increased use of external contractors and a higher financial cost to the Council.
- The impacts of COVID 19 have not been adequately mitigated/managed

This audit has been assessed as Amber Red assurance. This is due to a failure to address strategic risks and that the limitations of the key controls to mitigate the risk; namely accuracy of data in current training spreadsheet, reconciliation of spreadsheet to rotas and heavy reliance on a single point of knowledge, are not effective.

It should be noted the testing did not identify any instances of any operatives who had been asked to do work for which they were not trained, the assurance is based on the risks identified.

2 Summary Findings:

Areas Managed Well	Areas for Further Improvement
<ul style="list-style-type: none"> • The Training Team are diligent with updating and managing training for the workforce. • Training schedules developed using the master rotors are sent to managers and supervisors on a weekly basis. • Non-attendance at training is reported to Managers and Supervisors and analysis of causes for non-attendance carried out to help with continuous improvement of training. • The Training Team obtain management information from their systems and report numbers of trained/untrained to SMT. This data is also used in an annual by the Corporate H&S group. • Testing did not identify any instances of any operatives who had been asked to do work for which they were not trained. 	<ul style="list-style-type: none"> • Clarity of mandatory and non-mandatory training requirement – the training spreadsheet holds all training and there is no identifier of statutory training, nor is statutory training numbers reported separately. • Reliance on manager awareness of training requirements for roles and jobs - There is no process or system to ensure the managers and supervisors are aware of the training needed for each role or job. • Risk management – There are no general risks for training stated on the portfolio’s risk register, or risk method statements completed. • Lack of S&T Training Strategy or Policy - The service does not have a training strategy to reflect is very specific needs. • Lack of Training Recovery Plan - The increased training needs caused by Covid have not been included in the portfolio’s recovery plan. • Use of Spreadsheet & data quality - The training record is being kept on a spreadsheet rather than a database and has limitations of use. • Job Description - personal responsibility for continuous improvement - The requirement for operatives to be responsible for attending training and highlighting any skill gaps is not included in the job descriptions.

3 Action Plan:

Priority	Description
High (Red)	Action is imperative to ensure that the objectives of the area under review are met.
Medium (Amber)	Requires action to avoid exposure to significant risks in achieving the objectives of the area.
Low (Green)	Action encouraged to enhance control or improve operational efficiency.

No.	Findings and Implications	Agreed Action	Who	When
1 (R)	<p><u>Clarity of mandatory and non-mandatory training requirement</u></p> <p>The service needs to be able to demonstrate that all operatives have the requisite mandatory training to discharge their responsibilities safely.</p> <p>The service maintains a training spreadsheet (Compliance & Training team) which is sent weekly to the managers and supervisors, this is based on the main rota of operatives which records the availability of all staff.</p> <p>We tried to analyse the data to provide assurance that all operatives have an up to date set of mandatory training for their role. Testing identified that</p> <ul style="list-style-type: none"> The spreadsheet does not distinguish between mandatory and non-mandatory training. It shows 60% of operatives will be overdue for training in the next 1-3 months, but it does not highlight which are mandatory and which are added value and personal development courses. The reporting of training in the Health & Safety report and to senior management again reports the numbers of training sessions undertaken by the operatives. There is nothing to state if these were statutory training or not. Interrogation of the spreadsheet is difficult due to size 	<p>We are pleased the testing did not identify any instances of any operatives asked to do work for which they were not trained.</p> <p>A training matrix will be developed to identify mandatory training required for each role. This will be a project for all the supervisors and managers with the Streetscene Service Manager ensuring the action is implemented by the agreed due date.</p> <p>The training spreadsheet will be redesigned to ensure statutory and non-statutory training are easily identified and training reports can specify how much training has been completed in the mandatory areas. Senior Compliance & Training Officer will report progress to the Streetscene Service Manager to ensure Pentana is updated with either an implementation date or revised due date if necessary.</p> <p>URN 03254</p>	Neil Cox	31/03/2022

No.	Findings and Implications	Agreed Action	Who	When
	<p>a high number of duplicates (see URN 03239).</p> <ul style="list-style-type: none"> Accuracy of data is an issue, whilst these have been reported to the Training and Compliance team, there is a risk data will not be reported accurately (see URN 03239). <p>The service has documents which state which training and skills are needed for each role, however this is not linked with the training spreadsheet. Management state they rarely refer to the documents in practice when producing the weekly work rotas (see URN 03223).</p> <p>If statutory training is not recorded and reported separately, it becomes more difficult to produce useful management information to help with the decision making on budgets and staffing needed for training a large and varied work force.</p>			
2 (R)	<p><u>Reliance on Manager awareness of Training Requirements for Roles and Jobs</u></p> <p>There are documents which state which training and skills are needed for each role, however these are rarely referenced by the Managers and Supervisors. The Manager also states he does not use the training record as it is confusing, and of such a size it is slow to open and prone to crashing.</p> <p>The service is heavily reliant on the extensive knowledge of the Logistics Manager and his team of supervisors. However this is not an adequate control. This form of control relies on nothing changing in both the workforce and in statutory training regulations.</p> <p>There is a risk, staff absence and turnover (including</p>	<p>Once the training matrix has been developed (see 3254), the information will be used to help restructure the training spreadsheet (see also 3239). Data protection regulations will be observed in how the spreadsheet will be made available to all relevant managers and supervisors. With these two documents there will be a process for managers and supervisors to show which training is required and which operative has the relevant, up to date skills.</p> <p>URN 03223</p>	Gemma Boniface	30/04/2022

No.	Findings and Implications	Agreed Action	Who	When
	<p>managers and supervisors) and changes in the regulations determining training and skills would negate local knowledge and could result in unskilled operatives being assigned roles for which they were not trained.</p> <p>With no processes or system in place for checking the training and skills needed for each role to the training and skills an operative has, there is a risk the Council could face insurance claims and sanctions by HSE if unskilled/untrained operatives are tasked to do a job and caused harm to themselves or others.</p>			
3 (A)	<p><u>Risk management – operational risk not acknowledged</u></p> <p>The Council has a risk management framework which defines how risks are identified, recorded, managed and reported. The framework encourages that all risks should be reflected in the risk register, the controls recorded in the risk method statement and that management use the monitoring and reporting processes to review and score their risks based on evidence and performance data. This gives the services, portfolio and council sufficient assurance that risks are being managed and mitigated appropriately.</p> <p>Whilst there are two risks relating to statutory training on the S&T portfolio register (ST16 and ST30) they are both in regard to the difficulties posed by the Pandemic.</p> <p>The overall risk to ensure an effective statutory training strategy for a large and varied workforce is in place, monitored and managed is not included within the S&T portfolio risk register. The risk of an operative undertaking work for which they are not trained causing</p>	<p>Portfolio risks are reviewed on a monthly basis. The team will expand the stated risks to specify the risk associated with training a large and varied work force. This can be completed at the next monthly review in December.</p> <p>Risk Method Statements for these newly stated risks will be completed by the end of January</p> <p>URN 03196</p>	Ruth Tully	31/01/2022

No.	Findings and Implications	Agreed Action	Who	When
	<p>harm to themselves or others could result in insurance claims, financial loss and reputational damage from a Health & Safety Executive (HSE) investigation and improvement notice.</p> <p>Identifying risks and regularly reviewing them creates a culture where compliance and control is examined and continuously improved. This becomes part of the compliance checks to correctly train operatives or assign them to the right work. It also enables management to demonstrate the effectiveness of their strategy. Failure to state risks can result in a culture of stagnation and failure of service improvement.</p>			
4 (A)	<p><u>Lack of S&T Training Strategy or Policy</u> Currently S&T does not have a specific training strategy or policy, rather it relies on the Council's corporate policy. S&T have many operative roles which require statutory training. Jobs cannot be completed by an untrained member of staff. A specific training policy would set out the portfolio's arrangements and responsibilities for providing statutory training to operatives.</p> <p>Without a specific policy there is a risk there is no consistent standard to which compliance checks are carried out.</p> <p>There is a risk the roles of the various staff are unclear and lines are blurred between duties.</p> <p>There is also a risk the requirement for operatives to be responsible for attending training and raising training needs with supervisors is not being stated.</p>	<p>The Senior Management team are currently developing a People Management Strategy with HR and the Corporate Training team. A training strategy for S&T will be developed in conjunction with this strategy.</p> <p>URN 03219</p>	Katie Wilby	30/04/2022

No.	Findings and Implications	Agreed Action	Who	When
	A dedicated training policy would help to form part of the risk management of stated training risks.			
5 (A)	<p><u>Lack of Training Recovery Plan</u> Currently 60% of training logged on the system is overdue or due in the next 6 months. The service is in the process of recruiting 50 new operatives. Many will come from current long term agency staff, however they will add to the already increased training needs, The Training Manager does have a plan to increase training and introduce more e-learning were viable, however this is not part of the Portfolio's strategic recovery plan.</p> <p>During the height of the pandemic Welsh Government (WG) allowed some required training renewal to lapse, however as we continue to move out of the crisis period, it is unlikely this leniency will continue . With the majority of operatives' training in need of renewal and a planned recruitment of 50 operatives, not including training in the portfolio's recovery plan fails to acknowledge the scale of the training needs created by the pandemic and the risks to the portfolio if the workforce's skills and training is not brought up to date.</p> <p>A plan would be able to set out the seriousness of the task ahead of the training team, it would also show the costs and capacity the service needs to complete the training of their large workforce.</p>	<p>The issues to Statutory training caused by Covid and how the service will meet the increased need for training will be specified within the Recovery Plan. This will be done in conjunction with the updating of the Risk Register (see 3196)</p> <p>URN 03222</p>	Ruth Tully	30/01/2022
6 (A)	<p><u>Use of spreadsheet and quality of data held</u> The details of operatives, training received and due to expire is held in an internal spreadsheet, this is the document of record and would be used in any external</p>	The service acknowledges the training spreadsheet has, due to its size, become a problematic system. Currently the spreadsheet is backed up weekly to ensure	Gemma Boniface	31/04/2022

No.	Findings and Implications	Agreed Action	Who	When
	<p>audit by HSE. This is maintained by the Training Team, from reviewing this document it is clear the record is regularly maintained and updated. It is also clear they are monitoring when training has to be renewed.</p> <p>However the training record is nearly 6000 rows long and the manner in which it has been designed it will only get longer. Each time an operative attends a new training session (not updates training) another line is added duplicating name, payroll reference etc. Excel spreadsheets have a variety of tools for analysing data and can be an excellent programme, however it is not a database and the larger a sheet is the more unstable it becomes.</p> <p>The stability of a large sheet relies on the size of computer memory and speed. In the Council we use the thin client model, meaning all users access the program from a central online source. The reliance then is on the size of our servers, which is limited in the Council. This means larger spreadsheets will struggle and will be liable to corruption and loss of data. Managers have reported they find using the spreadsheet difficult and find that it can crash and be unstable when sorted.</p> <p>Analysis of the data found:</p> <ul style="list-style-type: none"> • A number of operatives who had been recorded with multiple payroll references. This could mean the training has been recorded under the wrong name. This was caused by Excel not copying the cell above but continuing the sequence and the Training Officer not identifying the error. This has been communicated to the team and rectified. • Duplicate names, payroll reference and courses, this due to the design of the spreadsheet and 	<p>the safety of the data. The Compliance Manager is also concerned about the free entry on the spreadsheet which allows for errors to be more easily introduced.</p> <p>In the short term the training spreadsheet will be restructured in conjunction with the development of the training matrix to make it more stable and easier to use and to obtain management information from.</p> <p>In the longer term a business case will be produced and presented for the purchase and introduction of a staff training management database.</p> <p>URN 03239</p>		

No.	Findings and Implications	Agreed Action	Who	When
	<p>makes it difficult to obtain useful management information using Excel tools.</p> <p>Whilst it is clear the Training Team are diligent in maintaining the training record, they are using a spreadsheet which is not an ideal system for the type and large amount of data being added. There is a risk data may be lost or corrupted due to the limits of the excel system, due to the size of the record it is not a simple task to carry out regular data cleanse or spot errors.</p>			
7 (G)	<p><u>Job Description - personal responsibility for continuous improvement</u></p> <p>There are job descriptions for all level of operatives in Streetscene, they are comprehensive in listing the principal accountabilities and knowledge and skills required for each post. Whilst they state all work must be completed in compliance with H&S regulations and to an expected standard, there is no requirement stated for continuous improvement and maintenance of skills and knowledge.</p> <p>It is the responsibility of the Council to ensure they only use the appropriately skilled operatives to carry out duties, and to funding or host training events however it should be the responsibility of the operative to actively take part in the training and raise skill gaps with their supervisor/manager.</p> <p>By sharing the responsibility between both the Council and the operative it will help promote a culture of continuous improvement resulting in a highly skilled workforce.</p>	<p>Changing the job descriptions requires a re-negotiation with the Unions. The risk can be addressed by including the requirement for operatives to be pro-active in taking part in training in both the induction and in letters of appointment. These changes can be made immediately so all future appointments can be advised of their responsibility to take part in the training provided by the Council.</p> <p>For current employees it will be highlighted in one-to-ones and supervisions.</p> <p>URN 03220</p>	Katie Wilby	31/12/2021

4 Distribution List:

Name	Title
Neil Cox	Officer Accountable for the Implementation of Agreed Actions
Katie Wilby	Chief Officer – Streetscene and Transport
Neil Cox	Streetscene Service Manager
Ruth Tulley	Programme Manager
Barry Wilkinson	Highways Network Manager
Gemma Boniface	Senior Compliance & Training Officer
Gareth Thomas (Streetscene)	Logistics Manager

Appendix A – Audit Opinion:

The audit opinion is the level of assurance that Internal Audit can give to management and all other stakeholders on the adequacy and effectiveness of controls within the area audited. It is assessed following the completion of the audit and is based on the findings from the audit. Progress on the implementation of agreed actions will be monitored. Findings from **Some** or **Limited** assurance audits will be reported to the Audit Committee.

Assurance	Explanation
Green - Substantial	<p>Strong controls in place (all or most of the following)</p> <ul style="list-style-type: none"> • Key controls exist and are applied consistently and effectively • Objectives achieved in a pragmatic and cost effective manner • Compliance with relevant regulations and procedures • Assets safeguarded • Information reliable <p>Conclusion: key controls have been adequately designed and are operating effectively to deliver the key objectives of the system, process, function or service.</p>
Amber Green – Reasonable	<p>Key Controls in place but some fine tuning required (one or more of the following)</p> <ul style="list-style-type: none"> • Key controls exist but there are weaknesses and / or inconsistencies in application though no evidence of any significant impact • Some refinement or addition of controls would enhance the control environment • Key objectives could be better achieved with some relatively minor adjustments <p>Conclusion: key controls generally operating effectively.</p>
Amber Red – Some	<p>Significant improvement in control environment required (one or more of the following)</p> <ul style="list-style-type: none"> • Key controls exist but fail to address all risks identified and / or are not applied consistently and effectively • Evidence of (or the potential for) financial / other loss • Key management information exists but is unreliable • System / process objectives are not being met, or are being met at an unnecessary cost or use of resources. <p>Conclusion: key controls are generally inadequate or ineffective.</p>
Red – Limited	<p>Urgent system revision required (one or more of the following)</p> <ul style="list-style-type: none"> • Key controls are absent or rarely applied • Evidence of (or the potential for) significant financial / other losses • Key management information does not exist • System / process objectives are not being met, or are being met at a significant and unnecessary cost or use of resources. <p>Conclusion: a lack of adequate or effective controls.</p>