



Final Internal Audit Report Parks Health and Safety August 2020

Distribution:

Executive Director of Place Director of Public Realm Director of Council Homes, District and Regeneration Creative Director Principal Facilities Manager Head of Environmental Services Live Well Programme Manager Assistance Contract Manager Health and Safety Compliance Manager

Assurance Level	Issues Raised		
	Priority 1	3	
Limited Assurance	Priority 2	4	
	Priority 3	1	

Confidentiality and Disclosure Clause

This report ("Report") was prepared by Mazars LLP at the request of London Borough of Croydon and terms for the preparation and scope of the Report have been agreed with them. The matters raised in this Report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this Report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this Report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

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Please refer to the Statement of Responsibility in Appendix 3 of this report for further information about responsibilities, limitations and confidentiality.

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1. Introduction

- 1.1 There are 127 parks and greenspaces in Croydon, which are used for a wide range of recreational pursuits. The 'A to Z of parks services & information' is contained on the Council's internet site.
- 1.2 Most of the parks and green spaces are detailed as having a 'Location, area, facilities and history', although some of these have additional recreational aspects, such as playgrounds, cycle ways, bowling greens and horse rides.
- 1.3 The maintenance of paths, lighting and the facilities within these parks needs to be maintained to a safe standard, with any hazards (particularly in playgrounds) identified and clearly marked.
- 1.4 This audit was conducted as part of the agreed Internal Audit Plan for 2019/20.

2. Key Issues

Priority 1 Issues

A Parks Strategy was not in place, (Issue 1.)

Weekly reports of playground area visual inspections were missing in a number of instances, **(Issue 3.)**

Fire risk assessments for most of the parks and greenspaces (where applicable) required review and, where appropriate, update, **(Issue 6)**.

Priority 2 Issues

The list of responsibilities for the various teams/services involved in parks/greenspaces was generic, lacking any role details of processes, **(Issue 2.)**

69 (out of 116) parks had not yet been visited to conduct risk assessments, **(Issue 4.)**

The central Action Log only included action plans for 5 parks (of the 47 that have been visited), **(Issue 5.)**

The Park Programme Board terms of reference was not up-to-date, (Issue 7.)

The Priority 3 issue is detailed in area 4 below.

Detailed Report

3. Actions and Key Findings/Rationale

<u>Control</u>	Control Area 1: Regulatory, Organisational and Management Reguirements			
Priority Action Proposed by Management			Detailed Finding/Rational – Issue 1	
1An Open Space / Green Infrastructure (GI) strategy / policy for the borough would support the outcome to ensure our greenspaces are fit for purpose from a H&S perspective, in addition to other strategic outcomes incl. financial, environmental & social. This work would require significant resource to ensure that suitable internal and external engagement/consultation is delivered, with the potential for the procurement of specialist consultants. In the interim, an internally-developed Parks & Greenspaces (P&G) Recovery Plan will support strategic direction of the teams and services contributing to		/ policy for the borough the outcome to ensure ces are fit for purpose erspective, in addition to outcomes incl. financial, & social. This work significant resource to suitable internal and agement/consultation is h the potential for the of specialist consultants. an internally-developed aspaces (P&G) Recovery ort strategic direction of	A Parks Strategy should be in place to set out Council's strategic framework on the management plan for all the 127 parks and greenspaces across the borough. This should set out the Council's priorities for deployment of its resources in parks and open spaces in order to maximise return on investment and improve any services provided to the community. Discussion with the Active Lifestyle Programme Manager and Grounds Maintenance Assistance Contract Manager established that, while a list of responsibilities was in place detailing the responsibilities from each team involved in managing the parks, a Parks Strategy was not in place to provide a framework and protocol for the coordination and monitoring of park management. Without a strategy in place to provide a framework and overall direction, there is a risk that the respective teams involved in managing the park lack proper direction and do not appropriately align their objectives to the delivery of the Council's Corporate Plan.	
Responsible officer Deadline		Deadline		
Live Well Programme Manager P&G Recovery Plan - September 2020 GI Strategy / Policy - September 2021		September 2020 GI Strategy / Policy -		

<u>Control</u>	Control Area 1: Regulatory, Organisational and Management Requirements			
Priority Action Proposed by Management			Detailed Finding/Rational – Issue 2	
2 The referenced R&R Matrix is beir reviewed and updated by members the PPB. (The matrix will identi- responsible teams and individuals b budget restrictions will remain.) A regards to process, individual team have their own operational ar management processes in plac Where/when issues arise, these are be brought for discussion at PPB. more structured approach (e.g. tracker) to this can be developed ar		updated by members of he matrix will identify ams and individuals but ctions will remain.) As ocess, individual teams own operational and processes in place. ssues arise, these are to r discussion at PPB. A red approach (e.g. a	The Council's parks and greenspaces within the Borough are managed and worked on by various teams/services within different Council departments, including the District Centres Regeneration Division – Active Lifestyle Team; the Streets Division – Environmental Services; Facilities Management, and Asset Management. In order for the work of these teams to be properly co-ordinated, their respective roles and responsibilities need to be properly defined. Examination of the list of responsibilities for the various teams/services noted that the list was generic, lacking any role details or processes (in terms of operation, management and communication between teams). Furthermore, discussion with the Active Lifestyle Programme Manager established that the list was last updated in February 2019, but that subsequently some of the responsibilities had changed. Where roles and responsibilities are not fully defined and up to date, there is a risk of operational gaps, poor communication and inefficiencies where duplication or	
Responsible officer Deadline		Deadline	overlap occurs.	
Live Well Programme 1 st Draft of new R&R Manager Matrix 11 August 2020				

<u>Control</u>	Control Area 2: Inspections				
Priority	Action Propo	sed by Management	Detailed Finding/Rational – Issue 3		
1 The addition of a Play Development officer in September 2019, will be responsible for the collection of data and ensure the Council are compliant. GM now have 4 fulltime officers trained to carry out (PRII) inspections on a weekly basis.		ptember 2019, will be or the collection of data e Council are compliant. 4 fulltime officers trained	A weekly visual inspection is conducted of all playground areas by the supervisor who are qualified Register Of Play Inspectors International (RPII) playgrou inspectors. These supervisors are required to ensure that there are no defects hazards in the playground and record their inspection and findings on an inspecti- report sheet. These reports are subsequently submitted to the Play Developme Officer for review and so that task orders can be raised to the contractor (F Conway) for any corrective maintenance required.		
A redesign of the play inspection sheet has been initiated and an improved process in place for all inspections is to be emailed directly to the Play		iated and an improved	October 2019, November 2019 and January 2020 found that a number of completed inspection reports were missing, as follows:		
	development officer to action. New inspection process implemented		 In October 2019, inspection reports for 12 of the expected 40 inspections were missing; In November 2019, inspection reports for 18 of the expected 50 inspections were missing, and 		
			 In January 2020, inspection reports for 27 of the expected 50 inspections were missing. 		
Respons	Responsible officer Deadline		Where weekly visual inspections reports are not available, there is a risk that these inspections were not conducted and that the Council may be unable to demonstrate due diligence in case of accidents involving damaged or unsafe playground		
Assistant Contract 12 August 2020 Manager		12 August 2020	equipment.		

Control Area 3: Risk Assessment				
Priority	rity Action Proposed by Management		Detailed Finding/Rational – Issue 4	
2	12/03/20 and completion of could be sha within the PPI without Coron possible to assessments A) Identify be iden B) Agree r	by end of Summer 2020. where staff capacity will	 In order to identify the risks at each park or greenspace and consequently devise appropriate work plans for each park to mitigate these, a risk assessment for each park should be undertaken. Park risk assessments are recorded on a central monitoring sheet, which contains a list of all parks under the Council, each park's risk assessment status and the progress of the risk assessment report. This monitoring sheet is available to access via the Council's SharePoint. It was established that a plan to complete risk assessments of all parks was initiated by the Parks Programme Board at the beginning of 2019, with it being estimated that these would be completed by March 2020. Examination of the monitoring sheet used to record the status of risk assessments at the beginning of March 2020 noted that: 69 (of the 116) parks / greenspaces had not yet been visited; Risk assessments were detailed as being in draft for 3 of the parks / greenspaces detailed as not yet being visited; 10 (of the 47 parks / greenspaces detailed as being visited) did not provide a status regarding the progress of the risk assessment report, and 17 (of the 47 parks / greenspaces that had been visited) which were visited more than 5 months ago (i.e. Jan-Sept 2019), still detailed that the risk assessment reports were still in draft. 	
			Discussion with the Active Lifestyles manager highlighted that risk assessments were not being conducted at the originally anticipated pace as a result of staff capacity issues and there was no longer a target date of completion, although he expected that the risk assessments would be completed at the end of summer.	
-	sible officer	Deadline PPB in August 2020	When risk assessments are not in place for all parks and greenspaces, there is a risk that hazards will not be identified and eliminated, which could lead to accidents	
All PPB in August 2020			and injuries.	

<u>Control</u>	Control Area 3: Risk Assessment			
Priority	Action Propo	sed by Management	Detailed Finding/Rational – Issue 5	
 As above, reduced staff numbers impacted capacity to effectively implement this system. This tracker and monitoring of it needs to be owned by all relevant members of PPB and reviewed, as intended, jointly on a monthly basis at PPB or an operational level alternative. This was discussed at PPB on 12/03/20. A) Present current tracker for discussion at PPB B) Agree method of effective joint ownership of Parks Risks 		apacity to effectively s system. This tracker g of it needs to be owned t members of PPB and intended, jointly on a at PPB or an operational re. This was discussed at /20. t current tracker for ion at PPB method of effective joint	Each completed risk assessment form includes an 'Action log', where '(1) Hazards with Moderate or Substantial rating need monthly review. Intolerable hazards need to be pursued until resolution. (2) Moderate / Substantial / Intolerable hazards need to be added to the central Action Log spreadsheet. This resource will be used to monitor the hazards and actions towards their resolution.' Examination of the central Action Log noted that this only included the action plans for 5 parks (out of the 47 that have been visited). The Active Lifestyles manager highlighted that it was intended for the log to be monitored monthly, but due to capacity issues it is not currently being monitored and thus it is not being effectively utilised. When the action plans are not centrally monitored on a monthly basis, there is a risk that remedial and corrective maintenance will be neglected and that hazards will continue to exist that may cause harm or injury to visitors.	
Responsible officer Deadline		Deadline		
Live Well Programme PPB in August 2020 Manager / All		PPB in August 2020		

<u>Control</u>	Control Area 3: Risk Assessment			
Priority	y Action Proposed by Management Detailed Finding/Rational – Issue 6			
1 The Health & Safety Consultancy has carried out 3 Fire Risk Assessments to date and an ongoing programme has been put into place to undertake the remainder of these within the relevant buildings. In order for these FRAs to		Fire Risk Assessments to ongoing programme has place to undertake the these within the relevant order for these FRAs to	Facilities Management is responsible for arranging the various health and safety assessments of buildings in the respective parks and greenspaces, which include fire risk assessments, water safety assessments and asbestos register assessments. Typically these assessments are completed by an external contractor, who subsequent provides a risk assessment report to Facilities Management.	
	be completed Facilities Management will require assistance from the parks team to gain access to the buildings in line with the programme as any prevention of access will cause a delay with the programme being completed.		Examination of the records for a sample of 11 parks / greenspaces found that 3 of the fire risk assessments were carried out more than 10 years ago, as follows:	
			 Ashburton Park on 3 January 2008; Norwood Grove 26 April 2010, and Queens Gardens 24 January 2008. 	
			Furthermore, examination of the spreadsheet used to monitor the various health and safety assessments of buildings in the respective parks and greenspaces found that 26 (out of an applicable 31 parks /greenspaces) of the fire risk assessments were recorded as needing review.	
			The Regulatory Reform (Fire Safety) Order 2005, paragraph (3) details that 'Any such assessment must be reviewed by the responsible person regularly so as to keep it up to date and particularly if (a)there is reason to suspect that it is no longer valid; or (b)there has been a significant change in the matters to which it relates including when the premises, special, technical and organisational measures, or	
Responsible officer Deadline		Deadline	organisation of the work undergo significant changes, extensions, or conversions'	
Principal Facilities August 2020 Manager		August 2020	When fire risk assessments are not regularly reviewed, The Council is in breach of the Regulatory Reform (Fire Safety) Order 2005 and there is a risk that circumstances will have changed at the respective sites and new hazards may be unidentified which pose a health and safety hazard.	

<u>Control</u>	Control Area 5: Advice and Information			
Priority	y Action Proposed by Management Detailed Finding/Rational – Issue 7			
2	can be re	the Roles and es Matrix, the PPB ToR viewed and updated the PPB members.		
1 st Draft of new PPB ToR			Examination of the copy of the Parks Programme Board ToR provided, which was a draft dated February 2017, found that this did not reflect the insourcing of the ground maintenance services on 1 February 2019 and the current Board membership. For instance:	
			The following were new members and not included on the ToR:	
			 Head of Environmental Services; Assistance Contract Manager, and Senior Estate Manager. 	
			The following changes in job titles were identified:	
			 Creative Director instead of Director of Culture ; Head of Active Lifestyle instead of Active Lifestyle Manager, and Director of Public Realm instead of Director of Streets 	
			The following staff were no longer employees of the Council:	
			Neighbourhood – Director of Safety	
Respons	sible officer	Deadline	 Area Based Regeneration – Head of Regeneration and Project Support – Development and Technical Manager. 	
Live Well Programme 11 August 2020 Manager		11 August 2020	Where the ToR is not being regularly reviewed and, where appropriate, updated, there is risk of inconsistency and poor decision making.	

Priority 3 Issue

Action Proposed by Management	Findings
The vast majority of planned works are completed within the recommended timescales, although occasionally there are delays due to budgetary or other external factors. Facilities Management, its oversight of planned expenditure, will ensure that any minor delays to scheduled works do not prejudice the health and safety of the properties/areas concerned. Planned maintenance works will be overseen by the PPB.	Planned maintenance work should be scheduled and conducted within the recommended time frame. Examination of the records held for a sample of 10 parks with planned maintenance work found that the planned maintenance work for one was not within the stated time frame. For this exception the latest maintenance was conducted in 2017, despite the maintenance planner and report detailing that the maintenance work should be repeated annually. When planned maintenance work does not take place within the recommended time frame, there is a risk that the facility will not be fit of purpose or possibly unsafe.

Appendix 1

TERMS OF REFERENCE

Parks Health and Safety

1. INTRODUCTION

- 1.1 There are 127 parks and green spaces in Croydon, which are used for a wide range of recreational pursuits. The 'A to Z of parks services & information' is contained on the Council's internet site.
- 1.2 Most of the parks and green spaces are detailed as having a 'Location, area, facilities and history', although some these have additional recreational aspects, such as playgrounds, cycle ways and horse rides.
- 1.3 The maintenance of paths, lighting and the facilities within these parks needs to be maintained to a safe standard, with any hazards (particularly in playgrounds) identified and clearly marked.
- 1.4 This audit is being conducted as part of the agreed Internal Audit Plan for 2019-20.

2. OBJECTIVES AND METHOD

- 2.1 The overall audit objective is to provide an objective independent opinion on the adequacy and effectiveness of controls / processes.
- 2.2 The audit will for each controls / process being considered:
 - Walkthrough the processes to consider the key controls;
 - Conduct sample testing of the identified key controls, and
 - Report on these accordingly.

3. SCOPE

3.1 This audit included the following areas (and issues raised):

	Issues Raised			
Control Areas/Risks	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)	
Regulatory, Organisational and Management Requirements	1	1	0	
Inspections	1	0	0	
Risk Assessment	1	2	0	
Programme of Park Works	0	0	1	
Advice and Information	0	1	0	
Total	3	4	1	

Appendix 2

DEFINITIONS FOR AUDIT OPINIONS AND ISSUES RAISED

In order to assist management in using our reports:

We categorise our **audit assurance opinion** according to our overall assessment of the risk management system, effectiveness of the controls in place and the level of compliance with these controls and the action being taken to remedy significant findings or weaknesses.

	Full Assurance	There is a sound system of control designed to achieve the system objectives and the controls are consistently applied.
\bigcirc	Substantial Assurance	While there is basically a sound system of control to achieve the system objectives, there are weaknesses in the design or level of non-compliance which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and/or non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or weak and/or there are high levels of non-compliance, leaving the system open to the high risk of error or abuse which could result in financial loss and/or reputational damage.

Priorities assigned to issues raised are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require the immediate attention of management to mitigate significant exposure to risk.
Priority 2 (Medium)	Control weakness that represent an exposure to risk and require timely action.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, action to address still provides an opportunity for improvement. May also apply to areas considered to be of best practice.

STATEMENT OF RESPONSIBILITY

We take responsibility to the London Borough of Croydon for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

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