

Final Internal Audit Report

Staff Lone Working

June 2024

Distribution: Corporate Director (Resources) and S151 Officer
Corporate Director of Sustainable Communities, Regeneration and Economic Recovery
Interim Director of Commercial Investment and Capital
Health and Safety Senior Compliance Officer
Head of Learning and Organisational Development
Chief People Officer
Director of Finance (Deputy S151 Officer)

Assurance Level	Issues Identified	
Limited	Priority 1	2
	Priority 2	4
	Priority 3	0

Confidentiality and Disclosure Clause

This report ("Report") was prepared by Forvis 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 The Health & Safety at Work Act 1974 (HASAW) is the primary piece of legislation covering occupational health and safety in the UK. The Health and Safety Executive (HSE) is responsible for enforcing the Act and a number of other Acts and Statutory Instruments relevant to the working environment.
- 1.2 Local Authorities have a duty to provide and maintain a safe and healthy work environment for their staff, partners and others affected by their activities and must have robust governance arrangements to ensure compliance with these Acts and Statutory Instruments.
- 1.3 According to the HSE, a lone worker is any individual that works on their own without close or direct supervision. The HSE estimates that approximately eight million people across the UK can be defined as a lone worker.
- 1.4 The Council operates a Lone Working Policy which provides a wide range of measures to keep all staff as safe as possible while performing their duties in accordance with the HSE.
- 1.5 The safety and security measures in place include management procedures, control measures to address identified and potential risks, training, sharing of information, as well as the provision of personal safety technology. An example of personal safety technology provided by the Council includes mobile phones, on which an application referred to as Skyguard is accessible to staff when working alone in isolated locations.
- 1.6 The Council operates a Red File Database as a means of recording and monitoring details of known abusive, violent, potentially violent or harassing members of the public. This Scheme acts to protect identified officers, staff and contractors via intelligence sharing across the departments of the Council.
- 1.7 In supporting lone worker mental health and wellbeing, the Council has established a mental health support network, of which the main forms of support comprise Guardians, Mental Health First Aiders, and the Employee Assistance Programme (EAP) which is provided by Health Assured Ltd.
- 1.8 The internal audit coverage includes staff working from home, social workers who make client visits and staff working remotely through office or other areas.
- 1.9 While our review and testing were performed remotely, we have been able to obtain most relevant documents required to complete the review, access to the Red File database was not provided.
- 1.10 This audit was undertaken as part of the agreed Internal Audit Plan for 2023/24. The objectives, approach and scope are contained in the Audit Terms of Reference at Appendix 1.

2. Key Issues**Priority 1 Issues**

Interviews with the Head of Learning and Organisational Development and six Team Managers across the Children, Young People and Education (CYPE), Adult Social Care and Health and Housing directorates found that the completion of training related to lone working was not monitored on a consistent basis. **(Issue 1)**

Evidence demonstrating that the Red File database was up to date at the time of fieldwork was not provided and thus assurance cannot be provided over controls relating to this area. Furthermore, regular monitoring and discussion of Red File Database through Corporate Health and Safety Group meetings was not evidenced. **(Issue 2)**

Priority 2 Issues

The Council wide 'Lone Working' and 'Home Working' risk assessments did not include consideration of those risks related to mental health. In addition, risk assessments specific to lone working within the CYPE, Adult Social Care and Health and Housing directorates were not conducted. **(Issue 3)**

Review of the Employer Assistance Programme (EAP) report from July 2022 to June 2023 found that breakdown of mental health cases arising due to lone working arrangements was not captured within the report.

The uptake of, or participation with, the mental health services offered was also not monitored and reported on at the Council. **(Issue 4)**

Interviews with Six Team Managers from the Housing, Adult Social Care and Health and CYPE directorates identified that DSE self-assessment forms were not completed for staff identified as subject to prolonged use of DSE. **(Issue 5)**

Assurance on whether lone workers who are eligible for mobile phones have been provided with such corporate mobile phones could not be provided, as a corporate record of lone workers is not currently maintained by the Council. Furthermore, review of sample minutes for the Corporate Health and Safety Group meetings noted that the current mobile phone contract and coverage was unsatisfactory, presenting a safety implication for lone workers. **(Issue 6)**

3. Actions and Key Findings/Rationale

Control Area 2: Staff Training Plan

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 1
1	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>A detailed training programme to be provided by each operational team to support those workers required to do lone working.</p> <p><u>Response from Interim Head of Health and Safety</u></p> <p>H&S team in process of procuring Lone Working module for the LMS. This should be in place and ready to be rolled out by July 2024. Teams with lone workers will be able to make this module mandatory for their staff or staff can choose to complete this</p>	<p>Expected Control</p> <p>A detailed training plan identifying mandatory courses specific to lone working and defining the timeframes for completion of these courses should be in place.</p> <p>Regular meetings of the Health and Safety Group within each directorate should be held where results of the training needs analysis performed by the Group are discussed and reported to the Head of Organisation Learning and Development.</p> <p>The completion of lone worker training by staff across the Council should be monitored on a regular basis, with instances of non-compliance recorded and escalated to the responsible line manager.</p> <p>Finding/Issue</p> <p>Discussion with the Head of Learning and Organisational Development established that a training plan covering the delivery of mental health and lone working training to directorates across the Council has not been in place since 2019/20.</p> <p>While a training module specific to lone working was due to be added to the series of training modules available on the Croydon My Learning Knowledge Platform in September 2023, it was noted that a training plan outlining methods for the delivery of relevant mandatory training had not yet been formalised at the time of testing.</p>

	<p>module if it's required as part of the risk assessment.</p>	<p>Further discussions with Health and Safety Senior Consultant found that a dedicated Health and Safety Group was in place for each directorate across the Council. Each Health and Safety Group is responsible for conducting an in-depth training needs analysis, based on the risk profile of their directorate. However, it was noted that the formation/establishment of these groups remained in its infancy and had not gained priority since Covid-19 and thus the training needs analysis had not yet been done for any directorates.</p> <p>The Croydon My Learning Knowledge Platform has the functionality to capture the training completed by each individual across the Council, allowing all Team Managers within each directorate to monitor the completion/non-completion of mandatory training within their respective teams via reports run on this Platform. However, interviews with six Team Managers across the CYPE, Adult Social Care and Health and Housing directorates found that the lone worker training completion rates were not monitored on a consistent basis.</p>
<p>Responsible Officer</p>	<p>Deadline</p>	<p>Risk</p>
<p>Heads of service supported by H&S team.</p>	<p>December 2024</p>	<p>Where lone workers have not completed training, they may lack understanding around what to do in the event of unsafe or dangerous situations. The Council may not be providing a duty of care to the lone workers due to the absence of training and potentially understanding of the policy. The lack of a training record will also impact on the Council's ability to demonstrate that it has been duly diligent.</p>

Control Area 5: Lone Workers’ Safety and Security

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 2
1	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>Red File Scheme and Procedures are under regular review and remain relevant to the needs of the service.</p> <p><u>Response from Interim Head of Health and Safety</u></p> <p>This should be completed by May 2024.</p>	<p>Expected Control</p> <p>The Red File Scheme and Procedures, developed by the Council in August 2019, requires that a regular item be placed on the agenda of the departmental Health and Safety Groups to review access rights within the department to the Red File Database.</p> <p>The Independent Reviewing Officer should also undertake six-monthly reviews of the red file status of individuals on the Red File Database.</p> <p>Finding/Issue</p> <p>The Red File Scheme and Procedures requires that a regular item is placed on the agenda of the departmental Health and Safety Groups to review the role of the Independent Reviewing Officer (IRO) and access rights within the department to the Red File Database. Although a review of minutes for the Corporate Health and Safety meeting held on 4 November 2022 confirmed that updates to the Red File Database were discussed, it was noted, through our review of meeting minutes to July 2023, that this was not a standing item on the agenda of the Corporate Health and Safety meetings. Thus, there is lack of oversight by the Corporate Health and Safety Board over the high-risk issues recorded, and changes made to the Red File database.</p> <p>The Digital Platform Manager maintains the Red File Database and explained that this is updated prior to being submitted to the H&S Board. However, access to this Database was not provided during the audit and thus cannot confirm if it was up to date at the time of fieldwork. Therefore, it was unclear as to whether the Council obtains assurance that the Red File Database is up to date, and changes within this Database are communicated to frontline staff.</p>

		Due to the above, assurance cannot be provided in relation to effectiveness of controls within this area.
		Risk
Responsible Officer	Deadline	Where the Red File Database is not up to date, there is a risk that potentially violent or vulnerable individuals are not identified prior to visits undertaken by frontline staff, such as those working within Adult Social Care and Health and CYPE which may lead to increase in safeguarding issues with lone workers.
H&S and heads of service	On-going	

Control Area 3: Support for Lone Workers’ Mental Health and Wellbeing

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 3
2	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>H&S team are working with each operational team to ensure that relevant and appropriate risk assessment and methods statement are in place to cover the day-to-day operations of each team and directorate.</p> <p><u>Response from Interim Head of Health and Safety</u></p> <p>H&S team will look at this as part of the management review, however, lone working would be one of the hazards identified in an activity i.e. visiting service user home. I would expect to see an activity RA and hazards related to that activity to be identified in detail.</p> <p>As an organisation, we need to be clear that we are assessing</p>	<p>Expected Control</p> <p>The HSE Stress Management Standards state that employers have a legal duty to protect employees from stress at work through the completion of risk assessments. These Stress Management Standards also include the importance of relations with, and support from, other workers.</p> <p>The Lone Working Policy in place at the Council details that risk assessments should be conducted in all areas of work where lone working poses and actual or potential risk to staff.</p> <p>Finding/Issue</p> <p>The Council’s Lone Working Guidance, issued on 12 May 2023, requires that Managers undertake risk assessments prior to lone working events to determine whether safeguards should be put in place to mitigate any immediate hazards and therefore help ensure that working conditions are safe for lone workers. It was noted that the Council wide lone working and home working risk assessments had been made available for use across the Council.</p> <p>Review of the lone working and home working risk assessments noted that, although physical health and safety hazards were identified on both risk assessments, mental health hazards were not covered (for example, anxiety/panic attacks).</p> <p>Interviews with six Team Managers across the CYPE, Adult Social Care and Health and Housing directorates highlighted that the lone and home working risk assessment was used at directorate level, however service area level lone and home working risk assessments were not developed.</p>

	<p>hazards associated with an activity, not hazards on its own. In some operational activity, a specific hazard will be significant.</p>	<p>Management advised that a Task and Finish Group has been introduced at the Council, which performs and manages sample testing of 25% of all risk assessments managed by the Health and Safety Team. The intention in the longer term is to support the departmental Health and Safety teams to sample check directorate risk assessments for quality assurance, however a Terms of Reference (TOR) covering the scope of responsibilities of Task and Finish Group was not available.</p> <p>Moreover, it was noted that the Health and Safety Team, within the Management and Facilities Division, was aiming to establish a portal of folders within which individual risk assessments for all directorates will be stored. Management confirmed that it was intended that this portal will be accessible via SharePoint and that contact has been made with the SharePoint Team to discuss this arrangement further.</p> <p>Risk</p> <p>Where risk assessments specific to lone working are not undertaken at an individual/service area level, it is probable that potential risks arising from lone working within specific roles/service areas are not identified, particularly within directorates with an elevated risk exposure. This could affect the ability of management to ensure that decision making in respect of lone working is both appropriate and consistent.</p>
<p>Responsible Officer</p>	<p>Deadline</p>	
<p>Heads of service and Directors</p>	<p>July 2024</p>	

Control Area 3: Support for Lone Workers’ Mental Health and Wellbeing

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 4
2	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>Review is on-going.</p>	<p>Expected Control</p> <p>It is the duty of every employer to ‘ensure, as far as is reasonably practicable, the health, safety and welfare at work of all employees,’ under the Health and Safety at Work Act 1974. This includes the provision and maintenance of a working environment, with sufficient facilities and arrangements for their welfare at work.</p> <p>The Council analyse the mental health cases to determine if any of such cases are due to staff lone working and discuss the improvements in lone working arrangements.</p> <p>Finding/Issue</p> <p>Examination of the Intranet established that the main forms of mental health support offered by the Council include Mental Health First Aiders, Guardians and the EAP provided by Health Assured Ltd.</p> <p>Review of the EAP report covering the period of 1 July 2022 to 31 June 2023 found that, although mental health data was collected and reported on, a breakdown of mental health cases arising due to lone working arrangements was not captured.</p> <p>Moreover, it was noted that the uptake of, or participation with, the mental health services available across directorates where lone working is prevalent, was not monitored and reported on to determine the effectiveness of the current mental health support offering at the Council. A trend analysis of the uptake of, or participation with, mental health services could be a valuable tool in assessing the overall effectiveness of the mental health support offering at the Council.</p> <p>Risk</p>

		Where the uptake of mental health services is not monitored, the Council misses opportunities to improve the current mental health support offering and ensuring that the needs of lone workers are met.
Responsible Officer	Deadline	
Head of service	December 2025	

Control Area 4: Lone Working Equipment Set-up and Facilities

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 5
2	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>Regular reviews are on-going.</p> <p><u>Response from Interim Head of Health and Safety</u></p> <p>We should have the DSE system and a training module (mandatory for all office-based staff) in place by end of June 2024.</p>	<p>Expected Control</p> <p>The Health and Safety (Display Screen Equipment) Regulations 1992 requires that every employer performs a suitable and sufficient analysis of those workstations where staff are subject to prolonged use of Display Screen Equipment (DSE). Where risks have been identified as a consequence of an assessment, the employer should reduce these risks to a reasonably practicable level.</p> <p>The Council should monitor the completion levels of DSE assessment by staff to ensure all eligible staff have the necessary equipment as required for lone working.</p> <p>Finding/Issue</p> <p>Discussion with Management established that line managers/team managers are responsible for conducting Home Working Risk Assessments, which includes DSE self-assessments to determine the need of home/lone workers for certain items of equipment. These assessments should consider the level of risk exposure to lone workers.</p> <p>As noted in Issue 3, risk assessments specific to home working were not conducted at a service area level within the directorates. As a result, it was noted that there was no systematic basis for determining a need for certain items of equipment.</p> <p>Amongst the six Team Managers interviewed on sample basis, it was found that while there was a general awareness of the DSE self-assessment form made available on the Intranet (for all staff), these forms were not completed for home/lone workers within the Housing, Adult Social Care and Health and CYPE directorates.</p> <p>Risk</p>

		Where DSE self-assessments and risk assessments are not conducted at an individual/service area level, there is a risk that lone worker needs are not met, resulting in a decline in both the performance and mental and physical health of lone workers.
Responsible Officer	Deadline	
H&S team and heads of service	On-going	

Control Area 5: Lone Workers’ Safety and Security

Priority	Action Proposed by Management	Detailed Finding/Rationale – Issue 6
2	<p><u>Response from Interim Director of Commercial Investment and Capital</u></p> <p>IT team to review suitability and compatibility of Skyguard application on Council systems and phones.</p> <p><u>Response from Interim Head of Health and Safety</u></p> <p>In hand and being reviewed.</p> <p>We will be taking risk-based approach to move the corporate mobile phone work forward; however, I have a different view with a point that requires an organisation to maintain corporate record of lone workers as a way of identifying eligibility to get a mobile phone. An operational risk assessment should help identify lone worker and its risk level and control measures. A</p>	<p>Expected Control</p> <p>The Lone Working Guidance maintained by the Council highlights the importance of monitoring lone worker safety and security via measures proportionate to risk level, such as periodic visits and observations of lone worker by supervisors and regular checks to ensure that lone workers have returned to their base once their tasks have been completed. This is supported by the Management of Health and Safety at Work Regulations 1999 which requires employers to manage any health and safety risks prior to staff working alone.</p> <p>The Council provides mobile phones to help ensure lone workers’ safety and security.</p> <p>Finding/Issue</p> <p>Through discussions with six Team Managers from the Housing, Adult Social Care and Health and CYPE directorates, on sample basis, it was established that appointment diaries are maintained to monitor the location of lone workers, more specifically of those conducting visits in the local community.</p> <p>While the Council has encouraged the use of mobile phones to help monitor lone worker safety and security, including the introduction of the Skyguard application, the Director of Commercial Investment and Capital advised that there have been issues with mobile phone coverage which have rendered mobile phones ineffective in this regard.</p> <p>Review of the Corporate Health and Safety Group Internal Control Board meeting minutes dated 1 June 2023 confirmed that mobile phone coverage was listed as a matter for escalation to the CMT. It was noted within these minutes that the current mobile phone contract and coverage was unsatisfactory, presenting a safety</p>

	<p>manager of a service should be responsible for identifying workers undertaking lone working activities, associated risks, and appropriate control measures.</p>	<p>implication for lone workers. Through a review the minutes for the CMT Health and Safety meeting held on 12 July 2023, it was found that this issue was raised with the CMT.</p> <p>In determining the effectiveness of the Skyguard application for the purposes of monitoring lone worker safety and security, discussion with the Team Managers from the Housing, Adult Social Care and Health and CYPE directorates found there to be a lack of awareness of the Skyguard application, which was a consensus across Housing, Adult Social Care and Health and CYPE.</p>
<p>Responsible Officer</p>	<p>Deadline</p>	
<p>Interim Chief Digital Officer and Director of Resident Access</p>	<p>July 2025</p>	<p>Moreover, discussion with the Health and Safety Compliance Senior Consultant established that the Council does not currently maintain a corporate record of lone workers. Therefore, assurance on whether those lone workers who are eligible to get a corporate mobile phone have been provided with such mobile phones by the Council could not be provided.</p> <p>Risk</p> <p>Where mobile phone coverage is poor or a lone worker is not provided with a mobile phone, there is a risk that a lone worker is unable to summon help in the event of an emergency, increasing the risk of danger/harm to the lone worker.</p>

AUDIT TERMS OF REFERENCE

Staff Lone Working

1. INTRODUCTION

- 1.1 The Health & Safety at Work Act 1974 (HASAW) is the primary piece of legislation covering occupational health and safety in the UK. The Health and Safety Executive (HSE) is responsible for enforcing the Act and a number of other Acts and Statutory Instruments relevant to the working environment.
- 1.2 Local Authorities have a duty to provide and maintain a safe and healthy work environment for their staff, partners and others affected by their activities and must have robust governance arrangements to ensure compliance with these Acts and Statutory Instruments.
- 1.3 The London Borough of Croydon (the Council) has a Lone Working Policy which provides a wide range of measures to keep all staff as safe as possible while performing their duties in accordance with the HSE. These include clear and robust management procedures, control measures to address identified and potential risks, training, sharing of information, as well as the provision of personal safety technology, e.g. mobile phones and the Skyguard phone application to provide greater protection for staff lone working in isolated locations.
- 1.4 The audit coverage includes staff working from home, social workers who make client visits and staff working remotely through office or other places.
- 1.5 This audit is part of the agreed Internal Audit Plan for 2023/24.

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, focused on the lone working arrangements in place at the Council, and was undertaken as part of the 2023/24 Internal Audit Plan. The specific scope included the following areas and recommendations:





Control Areas/Risks	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Regulatory, Organisational and Management Requirements	0	0	0

Control Areas/Risks	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Staff Training Plan	1	0	0
Support for Staff Mental Health and Well-being	0	2	0
Lone Working Equipment Set-up and Facilities	0	1	0
Lone Workers' Safety and Security	1	1	0
Management Oversight and Reporting	0	0	0
Total	2	4	0

Definitions for Audit Opinions and Identified Issues

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 constantly applied.
	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 of the controls which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and non-compliance that puts achieving the system objectives at risk,
	No Assurance	Controls are non-existent or extremely weak, leaving the system open to the high risk of error, abuse and reputational damage.

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

Priority 1 (High)	Fundamental control weaknesses that require immediate attention by management to action and mitigate significant exposure to risk.
Priority 2 (Medium)	Control weakness that still represent an exposure to risk and need to be addressed within a reasonable period.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, still provides an opportunity for improvement. May also apply to areas considered to be of best practice that can improve for example the value for money of the review area.

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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