

**Date: 17 March 2015**

## **Item 11: Key Findings from Internal Audit Reports**

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### **This paper will be considered in public**

#### **1 Summary**

- 1.1 The purpose of this paper is to inform the Panel about Internal Audit Reports related to Safety, Accessibility and Sustainability issued during Quarter 3.

#### **2 Recommendation**

- 2.1 **The Committee is asked to note this paper.**

#### **3 Background**

- 3.1 Appendix 1 provides a summary of the HSE and Technical audit reports issued during Quarter 3. On completion of each HSE and Technical Audit, an audit report is issued to the 'Client' within the business who commissioned the work and copied to other relevant staff involved in the audit. Where corrective actions or improvement actions are agreed to address issues identified by the audit, these are tracked by the audit team, including review of supporting evidence, in order to confirm that the issues have been properly addressed.
- 3.2 Currently there are 156 open actions, none of which is more than 30 days overdue, and 11 of which are between 0 and 30 days overdue. None of the overdue actions gives any ground for concern. If an audit action does go overdue by more than 30 days, it is reported to the Rail and Underground Value and Sustainability Programme Board (VSPB), and the manager responsible for the action is required to attend the VSPB to explain what is being done to get the action back on track.
- 3.3 One of the Interim Internal Audit Reports issued during Quarter 3 is also of relevance to the panel. A summary is included in Appendix 2.

#### **Embedded assurance**

- 3.4 In addition to HSE and Technical audits carried out by Internal Audit, a number are carried out during the year by staff 'embedded' throughout TfL for whom auditing is just a part of their role. At this time, we are aware of audits being carried out in the following areas:
- Surface Transport;
  - London Overground; and
  - LU Capital Programmes Directorate

- 3.5 Embedded audit work in relation to Surface Transport and London Overground was incorporated in the Integrated Assurance Plan for 2014/15 approved by the Audit and Assurance Committee in March 2014, and progress is reported below. Information from the LU Capital Programmes Directorate, and other areas that may be identified, will be incorporated into reports in due course.
- 3.6 Surface Transport – Fifteen contractor audits were completed by embedded auditors within Surface Transport, consisting of management system audits at 11 bus operators, two boat operators, and two contractors. There were no significant issues identified.
- 3.7 London Overground – No reports were issued during Quarter 3 as a result of a staff vacancy.

**List of appendices to this report:**

- Appendix 1 – HSE and Technical Reports Issued in Quarter 3 2014/15
- Appendix 2 – Interim Reports Issued in Quarter 3 2014/15

**List of Background Papers:**

None

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<b>Finals</b>
WC= Well Controlled
AC= Adequately Controlled
RI= Requires Improvement
PC= Poorly Controlled

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
<b>Rail and Underground</b>				
<b>Disruption to quality of service</b>				
IA_14_721	Planning and Production of Pre-fabricated Points and Crossings	29/10/2014 RI	To provide assurance in relation to the production of prefabricated points and crossings by Progress Rail.	<p>A good level of co-operation and collaboration was identified between Progress Rail and London Underground Track and Signals.</p> <p>Good Practice:</p> <ul style="list-style-type: none"> <li>Progress Rail have started to hold generic stock items for some variants of components in stores (e.g. Soleplates), so when specialist configurations of these components are required, they can be customised and do not have to be manufactured from scratch, reducing lead times.</li> </ul> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>The arrangements and flexibility of staff ensure that delivery dates are consistently met.</li> <li>The use of the layout master sheet ensures there are sufficient resources and space at Beeston to undertake the assembly of P&amp;C panels.</li> <li>Staff at Beeston are suitably trained and hold the required licences to undertake their roles.</li> </ul> <p>High Priority Issues:</p> <ul style="list-style-type: none"> <li>Communication and instruction with regards design changes and approvals between LU and Progress Rail need to be formally recorded and documented.</li> </ul> <p>Other Issues:</p> <ul style="list-style-type: none"> <li>The physical condition of the yard at Beeston should be addressed to ensure Progress Rail provide a consistent quality product that can be demonstrated to meet customer requirements.</li> <li>LU should provide a definitive acceptance Certificate of Conformance for designs submitted by Progress Rail.</li> <li>The Progress Rail materials database needs to be reviewed on a regular basis to ensure lead times are accurate.</li> </ul>

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
IA_14_776	Bridges and Structures Deep Tube Tunnels Maintenance Regime	12/11/2014 RI	To examine civil engineering maintenance processes to ensure that specified requirements are being met, that the maintenance regime is managed effectively through to completion and to identify any improvement opportunities.	<p>There were examples of Good Practice found which would benefit from being shared across the other maintenance teams. There are also some significant issues that need addressing and further opportunities for improvement.</p> <p>Good Practice</p> <ul style="list-style-type: none"> <li>• In BCV/SSL there is a strong link and co-ordination between the Line, Asset and Network Plan (LANP), the Active Work Plan and the S&amp;SD eighteen month plan.</li> <li>• In BCV/SSL key asset records provided by contractors relating to maintenance works are loaded into a central document repository (Livelink Core Asset Information).</li> <li>• In BCV/SSL the Asset Condition Assessment (ACA) is continuously updated soon after the completion of the Principal Inspection Report.</li> </ul> <p>High Priority Issues:</p> <ul style="list-style-type: none"> <li>• H&amp;S files are not updated following maintenance work in JNP</li> <li>• A Conceptual Design Statement has not been completed for the design of nosing stone supports in BCV</li> <li>• There is no risk assessment process in place to assess the impact on the asset and the operational railway when maintenance works are deferred</li> <li>• There are no defined timeframes for the completion of medium priority maintenance works in BCV and SSL</li> <li>• Required assurance documentation is not being provided for all maintenance jobs listed as substantially completed. This is being addressed through the updating of relevant guidance.</li> <li>• A controlled process is required to manage the addition and removal of jobs from the approved maintenance list in BCV/SSL</li> </ul> <p>Other Issues:</p> <ul style="list-style-type: none"> <li>• JNP competence assessors are not formally qualified as A1 vocational skills assessors.</li> <li>• The format of 'As Built Computer Aided Design drawings' were not in DGN format in BCV/SSL as required by the standard</li> <li>• Post-works inspections are not undertaken for DTT seepage works in order to check whether the maintenance activities have been successful or not.</li> </ul>
IA_14_773	Rolling Stock Calibration Process	27/11/2014 RI	To ensure there is a system in place for the management and control of Inspection, Measuring and Test Equipment (IMTE) used for Rolling Stock maintenance, at the Stonebridge Park, Upminster and Cockfosters depots.	<p>Good Practice:</p> <ul style="list-style-type: none"> <li>• The IMTE external calibration process is well documented and managed at Cockfosters depot. The Stores Personnel demonstrated good understanding of the process, and managed effectively IMTEs that are due or nearly due for external calibration.</li> </ul> <p>High Priority Issues:</p> <ul style="list-style-type: none"> <li>• Some torque testers at Upminster depot were not uniquely identified or calibrated. There is a risk of a lack of traceability and incorrect torque wrench setting, resulting in wrong tightening torque values being used for Rolling Stock maintenance work.</li> <li>• There was no certificate of calibration for six IMTEs at Stonebridge Park depot, therefore the calibration results cannot be authenticated or the recorded calibration details considered to be correct and valid.</li> <li>• There was no record at any of the three depots to indicate that the torque wrench force output is</li> </ul>

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				<p>checked against the wall mounted torque tester, at the beginning of a shift and every time the torque wrench is used on a different train. This could lead to incorrect torque value being applied and used for Rolling Stock maintenance.</p> <p>Other Issues:</p> <ul style="list-style-type: none"> <li>• There was no evidence of an IMTE registration process at Upminster depot to record the equipment movement. In the event the equipment is found to be out of calibration or damaged, it could not be easily traceable to the job it was booked out to.</li> <li>• The IMTEs in the temporary storage room at Upminster depot were not well stored and protected. This could affect the integrity and fitness for purpose of the equipment.</li> <li>• There was no generic Standard, Procedure or Work Instruction that defines the IMTE's requirement for Rolling Stock maintenance work. This will lead to different requirements being applied and used at the depots.</li> </ul>
IA_14_772	Depot Equipment Maintenance	16/10/2014 AC	To determine whether depot equipment – power and track assets are being maintained as specified, and to ascertain who owns the assets.	<p>Areas of effective control:</p> <ul style="list-style-type: none"> <li>• The Power Assets at both Upminster and Neasden depots are being maintained as specified, and there are records to substantiate maintenance of these assets.</li> <li>• The Track Assets at Upminster and Neasden depots are being maintained as specified, and there are records to support the maintenance being carried out.</li> <li>• The Axle Counters at Neasden depot are maintained regularly as specified, and there are records to demonstrate that maintenance activities are being carried out to specifications.</li> <li>• The Power Assets in the depots are owned and maintained by the Power Delivery Manager and his team, and there is documentary evidence to support this.</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>• There is no clear owner of the Track Assets in the depots.</li> <li>• The standard for Requirements for Electrical Track Equipment does not include ABB Megamax Circuit Breakers, in use at Neasden and Upminster depots.</li> <li>• The frequency of individual Track Quality (PM3) Inspections are recorded as 728 days in the Ellipse database.</li> </ul>
IA_14_747	Knorr Bremse Rail Systems (UK)	16/10/2014 WC	To provide assurance that Knorr Bremse Rail Systems (UK) Limited (KBRS), has implemented and is continuing to maintain an acceptable regime for the procurement and supply of maintenance replacement parts, equipment repair and overhaul, compliant with LU's contract objectives	<p>Good Practice:</p> <ul style="list-style-type: none"> <li>• KBRS has an established computer managed materials stocking system that will ensure accurate stock holding records and full traceability of individual batch or parts held.</li> <li>• An established materials receipt process involved a goods inspection 'Skip' process and a graded inspection requirement based on risk and supplier performance. Poor supplier performance can lead to review of receipt inspection and an increase in the risk based inspection requirement. Inspection scope is included with KBRS receipt documentation.</li> </ul> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>• KBRS has a mature and fully documented quality management system. The system procedure documentation includes highly descriptive process flow diagrams and hyperlinked procedures,</li> </ul>

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				<p>processes and records systems.</p> <ul style="list-style-type: none"> <li>Supply performance, customer reject returns and non-conforming materials statistics are comprehensively recorded.</li> <li>A new 'non-compliant material' reject record process had been recently implemented. The new process includes a high level of problem, cause and countermeasure analysis to be recorded and action taken to achieve closure.</li> <li>A comprehensive performance measurement and analysis reporting process is being maintained that includes visual graph and chart presentation. An established 'Oil' reporting process is used to record contract progress and performance.</li> </ul>
IA_14_741	Tata Steel	06/11/2014 WC	To provide TfL assurance that Tata Steel has implemented and is maintaining a satisfactory quality management regime and production controls that can consistently deliver a high quality product and service support.	<p>This audit was requested by the COO Commercial Maintenance Services management team in response to concerns raised by LU regarding Tata's quality management regime. The warehouse stocking of finished rail product and its status identification was given special attention as LU had received incorrectly branded rail in error during early 2014 and subsequent deliveries of rail with a poor surface finish.</p> <p>The audit verified that the system improvements implemented since the incidents of incorrect supply have resulted in new robust control that will prevent a repeat incident.</p> <p>Areas of Effective Control:</p> <p>Comprehensive rail production quality records are held in a software system TWillite and video image recording. The system assures that material quality records are held with full production process traceability.</p> <p>The production and quality management process included:</p> <ul style="list-style-type: none"> <li>Automatic laser measurements of rolled rail at multiple locations around the rail periphery are made each 100mm over the full length (nominal 108m long).</li> <li>Real time visual inspection of rail product during hot rolling using camera and display screen.</li> <li>Rolling team 'hot inspection' involving test sampling, length control and dimensional inspection using a comprehensive set of Go and Not-Go gauges.</li> <li>Production stage bar code identification post hot rolling, is used at each subsequent process stage and ensures full traceability. The bar code labels match the hot stamped rail ID.</li> <li>Final inspection post NDT and cutting to finished length involved further Go and Not-Go gauging and a thorough visual inspection before release into the stock area.</li> <li>The new warehouse stock 'Abeyance' procedure will ensure rail for delivery or rail returned back to Tata is subject to quality release authorization. All LU rail is now subject to the Abeyance procedure.</li> </ul>
IA_14_777	Inspection and Maintenance of Station Premises	06/11/2014 AC	To assess whether LU station premises are being inspected and maintained in accordance with the requirements of the LU Management System and that maintenance is managed effectively	<p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>Inspections, surveys and maintenance activities are being effectively planned, resourced and completed</li> <li>Key asset records (Ellipse/Maximo) are being updated following the completion of works</li> <li>Surveys are used to identify required maintenance and this is programmed</li> <li>Planned and corrective maintenance quality is being monitored and assured in accordance with the management system documents</li> <li>Contractors are subject to KPIs which are reviewed at contract review meetings</li> <li>Interface with other assets is being effectively managed</li> </ul>

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
			through to completion	<p>Issues:</p> <ul style="list-style-type: none"> <li>Assurance Plans are not annually reviewed and updated.</li> <li>The management system document used in BCV/SSL (R0106) is not as comprehensive and adequately defined as those in JNP and also does not reflect all the current management practices.</li> <li>Whilst competence matrices are used for in house and contractor staff and competence assessments undertaken, the overall competence framework is not adequately defined, particularly in BCV/SSL. This includes defining the competence of those assessing staff .</li> <li>Whilst surveyors hold relevant degree qualifications, the requirements for professional memberships and the competency of those assessing the competence of Surveyors are not defined.</li> <li>The results of visual surveys are not stored in a central database.</li> </ul>
<b>Delivery of Capital Investment Portfolio</b>				
IA_14_705	Bond Street Station Upgrade (BSSU) "One Team" Organisation Change	05/12/2014 RI	To determine whether the project's key Project Management Framework (PMF) Products took into account the Bond Street Station Upgrade (BSSU) "One Team" organisation change, and to assess whether they are compliant with key Management System and PMF requirements, including those relating to the Construction, Design and Management (CDM) Regulations.	<p>The results of this audit demonstrate that the BSSU project has implemented the 'One Team' approach, whilst ensuring key functions that require independence from the project team continue to do so.</p> <p>However, the project has not complied with a number of Management System and PMF requirements, including some that relate to demonstrating compliance with the CDM Regulations.</p> <p>Good Practice:</p> <ul style="list-style-type: none"> <li>The Supplemental Agreement requires, enables and facilitates the implementation of the 'One Team' approach.</li> <li>The Primavera programmes take less time to produce than before, are more reliable and more trusted, and look at details further ahead than previously.</li> <li>The BSSU project team is using Key Performance Indicators (KPIs) that have been well chosen and developed, and that provide useful information.</li> </ul> <p>High Priority Issues:</p> <ul style="list-style-type: none"> <li>The Change Assurance Plan for the BSSU One Team organisation change was not approved by the Change Owner prior to the change being implemented, it was not submitted to DRACCT and it relates to Engineering areas only.</li> </ul> <p>Other Issues:</p> <ul style="list-style-type: none"> <li>The current version of the LU Project Execution Plan was formally issued on 25 October 2012. It has not been updated to reflect the One Team organisational arrangements.</li> <li>Although some parts of the project have been delivered, a Gate Management Plan Product Matrix for Stage 5 (Delivery) has not been produced, and no PMF Stage Gate Reviews have been held to date.</li> <li>The current PEP does not contain or reference a detailed Allocation of CDM Duties document, and evidence was not provided during the audit to demonstrate that a detailed Allocation of CDM Duties document had been produced.</li> <li>The CDM Team Competency Matrix has not been formally issued since 2011. It does not include mapping of individual competencies against competency requirements for the project team, and it was</li> </ul>

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				<p>not clear during the audit session whether training needs have been satisfactorily met.</p> <ul style="list-style-type: none"> <li>The BSSU Project has two separate Verification Activity Plans (VAPs), one for all verification activities excluding HSE and another one for HSE activities. The Engineering part of the VAP has been reviewed on a monthly basis, but in some areas the VAP has not been reviewed and updated for two years.</li> </ul>
IA_14_802	Competency, Training and Licensing of Staff in LU Power Maintenance.	29/09/2014 AC	To determine whether appropriate management systems were in place to ensure adequate competency, training and licensing of staff in LU Power Maintenance	<p>Overall, the process of Competency, Training and Licensing of staff in LU Power Maintenance is adequately controlled with the exception of review and control processes for Competency Statements within the Control Systems Division.</p> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>Management system documents describe in depth roles, responsibilities and competency processes ensuring that staff are trained, competent and licensed to undertake the tasks allocated to them by their line managers</li> <li>Those planning and undertaking the work understand their roles, legislative requirements, the risks, and control measures identified and are adequately trained and possess the appropriate Competencies and Safety Critical Licences</li> <li>Effective arrangements are in place to ensure that competency of staff returning to work following absence is reviewed</li> <li>There are safeguards in place to ensure that personnel whose competency requirements have expired do not undertake any Safety Critical work</li> <li>The Substation Entry Permit dates and Safety critical licence dates are aligned such that if either of the dates has expired the licence holder will not have access to any of the substations</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>As an assurance activity, Managers are required by written procedures to perform an annual review of employees' competency assessments and record this in a Competency Statement. Since transfer of Powerlink to TfL this has continued with the exception of one area – Control Systems. These were due for completion in August 2014</li> <li>A backlog has developed with the undertaking of some non-safety critical training previously undertaken annually in Powerlink. This training interval is different to that commonly used across LU and would benefit from review to clarify the training requirement.</li> </ul>
IA_14_704	Bank Project Technical Team	26/09/2014 WC	To provide assurance over compliance of the Bank Project Technical Team with the Railways and Other Guided Transport Systems (Safety) Regulations (ROGS) and associated LU Standards and processes. Also to identify improvement opportunities that could be adopted by Bank Station Capacity Upgrade (BSCU) and other	<p>The results of this audit indicate that the BSCU Project Technical Team is meeting its obligations under the ROGS Regulations, and is compliant with the requirements of associated LU Standards and processes.</p> <p>The following good practices were demonstrated during the audit, and actions have been agreed to encourage other projects to adopt these good practices.</p> <ul style="list-style-type: none"> <li>The use of an Independent Safety Verification (ISV) Assessment Tool, developed following a request from the BSCU Team, provided objective evidence that a ROGS applicability assessment has been performed and documented by LU.</li> <li>A realistic, detailed and risk-based Verification Activity Schedule (VAS) has been developed, and is being used in an effective manner by the BSCU Team.</li> <li>The Core Design Team (CDT) process developed and used by the BSCU Project has been very</li> </ul>



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			LU projects.	<p>effective in managing the design process, including systems integration and verification activities, and has contributed to the production of a good quality Concept Design that has been produced in good time.</p> <ul style="list-style-type: none"> <li>A BSCU Technical Team Resource Plan identifies the specific competencies required by each Bank Project Technical Team member, and each Team member has been assessed against these requirements.</li> </ul> <p>No issues or improvement opportunities were identified.</p>
IA_14_710	Configuration Management of Signalling and Control Systems	10/10/2014 AC	To provide assurance in relation to configuration management of signalling and control systems such that disruption to service is avoided and traceability of assets is maintained	<p>Areas of Effective Control were:</p> <ul style="list-style-type: none"> <li>Documented work instructions are in place for maintenance activities. In some cases these consist of manufacturer maintenance manuals whilst Work Instructions being produced as part of the TfL Management System are subject to review and agreement</li> <li>Arrangements are in place to ensure that software upgrades are undertaken in a controlled manner including appropriate checks and back ups</li> <li>Apart from USB drives, other external devices used on systems are subject to virus checks</li> <li>Processes are in place for the provision of spares including controls to ensure local inventory records are accurate. Fail safe controls are common to ensure that incorrect components cannot be installed and commissioned for use.</li> <li>Arrangements are in place to ensure only competent employees undertake specific activities.</li> </ul> <p>Issues identified were:</p> <ul style="list-style-type: none"> <li>LU Signalling standards establish the asset information that must be maintained via an asset register. This is to ensure visibility and availability of asset information and also traceability. Maximo in JNP was found to be compliant and plans are in place for an upgrade to include additional information such as software versions. Ellipse in BCV/SSL is much less mature and mandated information such as serial numbers and batch numbers are not recorded.</li> <li>The upgrade of software on the Central Line requires a laptop provided by the manufacturer. Over time a number have been lost or become defective with only three remaining. Replacement laptops or additional controls may be required to ensure the risk of a laptop not being available is controlled to tolerable levels.</li> <li>Portable USB drives are not subject to virus checks. A separate Information Management Audit has been undertaken with recommendations to minimise the associated risk.</li> </ul>
<b>Major Incident - External</b>				

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
IA_14_824	HSE Management in Asset Support Power Maintenance	02/10/2014 AC	To assess effectiveness of arrangements to ensure that HSE risks, including safety critical licensing, are adequately controlled by local procedures and systems.	<p><u>Areas of effective control</u></p> <ul style="list-style-type: none"> <li>• Safety Critical licensing is managed and controlled as per the Management System. An area of good practice was noted in the completion and recording of staff night worker assessments</li> <li>• Local work instructions were found to be of a high standard and readily available</li> <li>• Power Authority to Work Certificates are issued as required to implement a documented safe system of work</li> <li>• Staff on site were observed to have the correct PPE, calibrated meters and required competences to complete tasks</li> <li>• Planned General Inspections are being undertaken and completion to programme monitored</li> </ul> <p><u>Issues</u></p> <ul style="list-style-type: none"> <li>• Safety System Checks are not planned or undertaken and Safety Tours are not being undertaken by senior managers (Band 5) but by Band 4 and below. This weakens senior management visibility on HSE and management assurance that control systems are working as planned.</li> <li>• Manual handling assessments have not been reviewed in the last three years and not all DSE assessments have been completed by staff that use DSE.</li> <li>• Workplace Risk Assessments had been reviewed but had not been validated and submitted to the Workplace and Customer Risk Assessment (WoCRA) database.</li> <li>• The status of some items of plant had not been identified, as there were a number of legacy pieces of plant which were not accounted for.</li> </ul>
IA_14_827	SSL Fleet HSE Management and Safety Critical Licensing	07/10/2014 AC	<p>This audit was in two parts:</p> <p>Part 1: A follow up audit on previously agreed actions from audit 13 717 – Rolling Stock HSE Management and ORR intervention on Safety Critical Licensing</p> <p>Part 2: Environmental Control in compliance with ISO 14001 standards and the HSE management system with regards to Waste and Pollution control.</p>	<p>Significant progress had been made in undertaking the agreed management actions from the previous audit, with all but two having been suitably addressed.</p> <p><u>Areas of Effective Control:</u></p> <ul style="list-style-type: none"> <li>• The majority of workplace risk assessments are held in WoCRA and those that are not are tracked locally.</li> <li>• Adequate numbers of staff have received training in the use of WoCRA.</li> <li>• Traffic management plans and risk assessments were in place at all depots.</li> <li>• All Safety Critical Licences sampled were in date and training was planned where required.</li> <li>• An appropriate regime of safety hours was found to be in place.</li> <li>• Waste was seen to be suitably segregated within the depots.</li> <li>• Waste transfer notes were available at all depots for at least the three years required.</li> </ul> <p><u>Issues:</u></p> <ul style="list-style-type: none"> <li>• There was no evidence that management system checks were planned or undertaken</li> <li>• Not all DDMs and DTLs were able to access the competence and SCL information for all fleet maintenance staff at the depot.</li> </ul>

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
IA_14_788	BCV Fleet HSE Management and Safety Critical Licence	10/10/2014 AC	<p>This audit was in two parts:</p> <p>Part 1: A follow up audit on previously agreed actions from audit 13 717 - Rolling Stock HSE Management and ORR intervention on Safety Critical Licensing</p> <p>Part 2: Assessing environmental control in compliance with ISO 14001 standard and the HSE management system (specifically management of waste and pollution)</p>	<p>There was a significant improvement in all areas following the previous audit, with the exception of HSE management system checks.</p> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>• The majority of workplace risk assessments are held in WoCRA and those that are not are tracked locally.</li> <li>• Adequate numbers of staff have received training in the use of WoCRA.</li> <li>• Traffic management plans and risk assessments are in place at all depots.</li> <li>• A suitable regime of safety hours was found to be in place and being delivered.</li> <li>• All Safety Critical Licences sampled were in date and training was planned where required.</li> <li>• Waste was seen to be suitably segregated within the depots.</li> <li>• Waste transfer notes were available at all depots for at least the three years required.</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>• A programme of management system checks had not been produced and system checks are not undertaken in accordance with the management system</li> <li>• Not all DDMs or DTLs were able to use SAP to run a holistic report for a member of staff, outside of their team, as required by the handbook.</li> </ul>
IA_14_794	Oval Station Group HSE Management	07/11/2014 AC	<p>To assess compliance with critical elements of the TfL HSE Management System, London Underground (LU) Managers Handbook, LU Rule Books and the effectiveness of local arrangements.</p>	<p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>• Workplace and Customer Risk Assessments are being undertaken and reviewed as required.</li> <li>• Emergency plans are current and control measures for foreseeable emergencies are in place, including checks and measures to maximise security</li> <li>• Competence including safety critical licensing is managed and monitored to ensure staff meet licensing requirements</li> <li>• The management team is undertaking pro-active monitoring effectively via systems checks, Planned General Inspections and station checks.</li> <li>• Incident trends are monitored and individual incidents investigated in line with corporate procedures</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>• Station tenants are not familiarised and are not signing in with the Station Supervisor as required by the LU Rule Book. This is designed to ensure they can be accounted for in the event of an evacuation</li> <li>• Assessments of the first aid arrangements are not being completed as per the Rule Book requirements</li> <li>• DSE assessments are only 24% completed. The Safety Improvement Plan has a target date of 31/12/14 to have all DSE assessments completed</li> <li>• Pro-active checks of emergency equipment, including public help points, OLBI checks and first aid</li> </ul>

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				<p>boxes, is happening but not to the frequency required by the LU Rule Book</p> <ul style="list-style-type: none"> <li>• Health and Safety boards contained some out of date information and were poorly maintained.</li> </ul>
IA_14_784	Temporary Works on the Vauxhall Station Upgrade Project	18/11/2014 AC	<p>To provide assurance in relation to the compliance and overall effectiveness of the processes for temporary works on the Vauxhall station upgrade project and to ensure that temporary works are being completed by competent people. Bechtel, as the Principal Contractor for the Vauxhall station upgrade, is responsible for the temporary works.</p>	<p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>• Identification of temporary works, including the submission of Conceptual Design Statements and Design Risk Assessments prior to commencement of works.</li> <li>• Assurance of temporary works, including the submission of Design Check Certificates prior to commencement of works.</li> <li>• Consideration of the health, safety and environmental aspects.</li> <li>• The procurement of designers and contractors, including the monitoring of competences.</li> <li>• Implementation of the works, including method statements, permits and inspections.</li> <li>• Compliance with BS5975:2008 Section 2: Procedural control of temporary works.</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>• Changes to the walkway and ladder temporary works were completed before design approval was given.</li> <li>• Cutting, Grinding, Drilling and Fixing Log (CDFL) part 2s are not being submitted on time. Bechtel are reviewing CDFL part 2s for completion and communicating the CDFL timing requirements to their staff and contractors.</li> </ul>
IA_14_826	JNP Fleet HSE Management and Safety Critical Licensing	21/11/2014 AC	<p>This audit was in two parts:</p> <p>Part 1: A follow up audit on previously agreed actions from audit 13 717 - Rolling Stock HSE Management and ORR intervention on Safety Critical Licensing</p> <p>Part 2: Assessing environmental control in compliance with ISO 14001 standard and the HSE management system (specifically management of waste and pollution)</p>	<p>There was a significant improvement in all areas following the previous audit.</p> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>• All workplace risk assessments (WRAs) are tracked locally and were evidenced to be in date and a review date in place. There is a plan to store WRAs in Maximo within the next 6 months.</li> <li>• Adequate numbers of staff have received training to complete WRA.</li> <li>• Traffic management plans and risk assessments are in place at all depots.</li> <li>• A suitable regime of safety hours was found to be in place and being delivered.</li> <li>• All Safety Critical Licences sampled were in date and training was planned where required.</li> <li>• Managers on duty have access to local databases, which are kept current, so can provide the competence of any individual within 1 hour as required.</li> <li>• Waste was seen to be suitably segregated within the depots.</li> </ul>

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
				<ul style="list-style-type: none"> <li>Waste transfer notes were available at all depots for at least the three years required.</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>The review period of WRA is managed locally by the HSE advisor. There is no system for an automated reminder every three years.</li> <li>There is no centrally managed system in place for safety critical licences and training to be reported and updated. This has been a finding from previous PAS 55 audits. The local databases are managed by fleet trainers in each depot.</li> </ul>
IA_14_801 A	Signal Competence (IRSE Licensing) – SSL and BCV	24/11/2014 AC	To assess the processes, capabilities and competencies for the delivery of IRSE Licenses and review closure of previous findings.	<p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>With the exception detailed below, the procedures and processes of the Assessing Agency met the requirements of the IRSE Licensing Standard and Procedures.</li> <li>All records observed were accurate, detailed and correctly completed.</li> <li>Licensing assessments were thorough and contained detailed applicable evidence which supported the assessment decisions.</li> <li>Recent changes to the IRSE's requirements had been identified and communicated to Assessing Agency personnel.</li> <li>Internal Verification plans were in place and being undertaken, including observed assessments, with suitable reports produced and communicated.</li> </ul> <p>Issues:</p> <ul style="list-style-type: none"> <li>The controlling Work Instruction W0092 did not make specific reference to the requirement for impartiality of assessment personnel.</li> <li>The Management Review report did not formally record all the areas detailed by the IRSE Licensing procedures.</li> </ul>
IA_14_801 B	Signal Competence (IRSE Licensing) – JNP	24/11/14 AC	To assess the processes, capabilities and competencies for the delivery of IRSE Licenses and review closure of previous findings.	<p>Good Practice:</p> <ul style="list-style-type: none"> <li>AAM maintained a spreadsheet that detailed Licence Holders' Logbook reviews by Management to ensure this was undertaken at the required frequency.</li> </ul> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>With the exception detailed below, the procedures and processes of the Assessing Agency met the requirements of the IRSE Licensing Standard and Procedures.</li> <li>All records observed were accurate, detailed and correctly completed.</li> <li>Licensing assessments were thorough and contained detailed applicable evidence which supported the assessment decisions.</li> <li>Recent changes to the IRSE's requirements had been identified and communicated to Assessing Agency personnel.</li> <li>Internal Verification plans were in place and being undertaken, including observed assessments, with suitable reports produced and communicated.</li> </ul> <p>Issues:</p>

Reference	Report Title	Report Issued	Original Objective	Summary of Findings
				<ul style="list-style-type: none"> <li>The process for the identification and accommodation of any specific candidate requirements for a licence assessment was not detailed within the controlling procedure or assessment plan.</li> <li>One licence assessment pack out of six reviewed contained information with regards Work Experience that was more than six months old.</li> </ul>
<b>Surface Transport</b>				
<b>Major Incident - External</b>				
IA_14_821	Surface Transport HSE Implications of Organisational Change	21/10/2014 RI	To review the extent to which Health, Safety and Environmental (HSE) implications resulting from the Surface Integration Programme (SIP) have been identified, assessed and mitigated	<p>The HSE implications of SIP had not been considered as part of the SIP process.</p> <p>Areas of Effective Control:</p> <ul style="list-style-type: none"> <li>Post SIP, the strategic and local risks that existed prior to SIP were re-assigned to reflect the organisational changes within the Directorates.</li> <li>Safety Delivery Plans have been produced, post SIP, by the Surface Safety Team. These outline each Directorate's arrangements for managing health and safety post SIP.</li> </ul> <p>Issues:</p> <p>The following could not be evidenced for HSE implications of SIP:</p> <ul style="list-style-type: none"> <li>A change assurance plan, or inclusion of HSE implications in the Directorate's SIP business plans.</li> <li>Assigning of responsibility for managing the HSE implications arising from SIP.</li> <li>The identification and monitoring of HSE risks arising from SIP.</li> <li>Implementation of the Safety Change Management Plan.</li> <li>A review of lessons learned from other TfL divisions regarding the management of HSE risks during change (Prior to SIP).</li> <li>A lessons learned exercise addressing the HSE implications (Post SIP).</li> </ul>

<b>Interim</b>
AC= Adequately Controlled
RI= Requires Improvement
PC= Poorly Controlled
WC= Well Controlled and Audit Closed
AC/ACL = Adequately Controlled and Audit Closed

Reference	Responsible Director	Report Title	Interim Report Issued	Original Objective	Follow-up Audit	Summary of Findings
<b>Pan TfL</b>						
<b>Environmental Impact of Delivering a Transport Service</b>						
IA_14_102	Director of Transport Strategy and Policy	Implementation of Environmental Strategic Objectives	27/10/2014 AC	To determine the effectiveness of the processes for developing and implementing plans aimed at achieving TfL's strategic environmental goals and targets	27/02/2015	<p>In the development of the annual TfL Business Plan, which determines the spend for the year's activity, the environmental strategic objectives are used to determine what environmental schemes and projects to propose for inclusion. This aims to ensure that the TfL Business Plan and the environmental activity undertaken by TfL are in accordance with the Mayor's environmental strategic objectives.</p> <p>Any environmental activity proposed for inclusion in the TfL Business Plan is assessed against TfL's needs, in order to ensure the efficient and effective utilisation of funds. Only those that meet certain criteria are selected. Consequently, not all proposed environmental activity will be included in the Plan.</p> <p>The Business Plan describes the environmental schemes and projects at a high level. This is underpinned by the Surface Transport, and Rail &amp; Underground business plans and more detailed environment plans, produced by their environment teams.</p> <p>In order to ensure the environment is considered in project delivery, there is a Sustainability Assessment requirement in the TfL Pathway project management process. This requires projects and programmes with an estimated final cost above £1m that have an approved business case and funding to assess their key sustainability issues and to plan for improvements to maximise the benefits.</p> <p>The audit confirmed that in accordance with these plans, various schemes and projects are underway or being developed for implementing the environmental objectives.</p>

Reference	Responsible Director	Report Title	Interim Report Issued	Original Objective	Follow-up Audit	Summary of Findings
						<p>The audit did not identify any Priority 1 issue but identified three Priority 2 issues, and one Priority 3 issue.</p> <p>The Priority 2 issues are:</p> <ul style="list-style-type: none"> <li>• The coordination of the activities of the various TfL teams involved in environmental activity is not as fully effective as it should be.</li> <li>• Occasionally, the boundaries between certain parts of the environmental responsibilities of Planning and Surface Transport can be unclear, resulting in uncertainty and confusion.</li> <li>• There is an absence of a procedure by which Planning formally and promptly notifies the Surface Transport Board of any major schemes or initiatives developed by Planning, for Surface Transport implementation.</li> </ul>