



Final Report

2010-710

Audit of the PWGSC Management Accountability Framework for the Occupational Health and Safety Program

May 10, 2012

Office of Audit and Evaluation



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MAIN POINTS

What we examined

- i. The *Canada Labour Code, Part II (CLC-II)* establishes the legislative framework and outlines the duties and responsibilities of the employer and employees pertaining to health and safety. The *CLC-II* requires that every employer ensure that the health and safety at work of every person employed by the employer is protected.
- ii. In Public Works and Government Services Canada (PWGSC), health and safety is the responsibility of all employees. Management at all levels is accountable for the health, safety and well-being of each employee.
- iii. The Occupational Health and Safety (OHS) Directorate is responsible for planning, developing, coordinating, communicating, and monitoring health and safety activities; and providing functional direction and guidance on all matters affecting health and safety in the Department. The OHS Directorate is also responsible for providing strategic direction, guidance and support to regional health and safety operations.
- iv. Initial audit work was conducted from May 2010 to November 2010, and included the examination of the structure; policy framework development; committees; training; performance management; monitoring; and risk management associated with the PWGSC OHS Program. The audit focused on the corporate governance structure and the OHS accountability framework managed within the OHS Directorate of the Human Resources Branch and the Department's six regional health and safety operations. Branch OHS activities were sampled and examined to the extent that they could provide information to assess the overall Departmental corporate governance structure and accountability framework for OHS. The audit did not examine branch specific OHS practices nor was it intended to provide an assessment on the state of the health and safety of work locations within PWGSC.
- v. With the transfer of the OHS Program in April 2010 from the Corporate Service and Strategic Policy Branch to the Human Resources Branch, and the establishment of a new management team, a renewed enthusiasm and commitment to improving the OHS Program has been evident. Early in the transition phase, management responsible for the OHS Program conducted consultations with stakeholders and developed a three-year strategic action plan that was designed to address gaps and opportunities for improvement. The strategic action plan identified initiatives that would address many of the areas for improvement that were found during the initial audit work.

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- vi. As a result of the initial audit work, an audit report was presented at the September 2011 Audit and Evaluation Committee meeting. The committee suggested that the report be enhanced, through the validation of the implementation of the strategic action plan and re-examination of the initial findings in light of changes made to the OHS Program. The committee also requested that the audit team examine the relationship between the regional health and safety operations and OHS Directorate. This would allow the Office of Audit and Evaluation to be in a better position to assess: the effectiveness of the OHS Program in line with the audit objective; the status of the implementation of the strategic action plan; and whether the desired results are being achieved.
- vii. To achieve the audit goal mentioned above, the audit team extended the examination phase of the audit from its original timeframe of May 2010 to November 2010 to November 2011. The audit team focused on Departmental OHS activities and those actions undertaken in the implementation of the strategic action plan.

Why it is important

- viii. Occupational health and safety impacts the whole Department. As the employer, PWGSC is responsible for establishing an OHS Program that fosters a safe work environment and addresses occupational issues such as the prevention, investigation, and reduction of hazardous occurrences.
- ix. PWGSC employs nearly 14,000 employees in a wide range of work locations across the country. Work is a central part of these employees' lives because of the considerable hours they spend each day in the workplace. Work-related incidents can be costly and can have serious direct and indirect effects on the lives of workers and their families.
- x. Under the federal legislative framework that includes the *Canada Labour Code, Part-II, the Canada Occupational Health and Safety Regulations*, and various policies, the Department is required to ensure that the health and safety of every person employed is protected at work.
- xi. For these reasons, it is important that Departmental management and its employees are committed to having a healthy and safe work environment, which can have a positive impact on worker morale and productivity. Moreover, a well-established OHS Program can enhance the reputation of an organization as a quality place to work.

What we found

- xii. We found that there have been improvements in strategic direction and monitoring within the Program since we conducted the initial audit work. A three-year strategic action plan was developed and is being implemented by OHS Program management. One of the major initiatives identified in the strategic action plan was the development and implementation of a Hazard Prevention Program, which is designed to prevent hazards and manage risks within the workplace. The development and implementation of the strategic action plan and the Hazard Prevention Program signifies a move toward a more proactive and risk based approach for the OHS Program, while setting strategic direction for the Program as a whole.
- xiii. We found that there have also been improvements in the governance of the Program since we conducted the initial audit work. In particular, coordination with the regions has improved. In terms of OHS committees, at the national level, attendance and mandatory training for members has slightly improved, but further improvements are still required. At the workplace level, there has been an increase in the number of required committees established and representatives appointed. The suite of OHS policies which guides the OHS Program is also being renewed to reduce the number of policies and overlap of roles and responsibilities.
- xiv. While the initial audit findings found weaknesses relating to OHS training and coordination, the extension of the audit work found that there have been improvements in this area. A National Training Coordinator was hired by the OHS Directorate to manage several training related initiatives. A number of resources have also been hired to support the Directorate's national and regional roles for providing support, guidance and coordination.
- xv. While OHS Program management has made significant improvements to the Program, and has moved toward a more proactive and consistent approach, challenges remain in moving forward with the Program. The extension of the audit work has identified opportunities for improvement to the Program, and the need to regularly assess the challenges facing the Program.

Recommendations and Management Response

Management accepts the findings and recommendations of the audit report. The Human Resources Branch will act on the two recommendations identified in the audit report by implementing the below Management Action Plan.

Recommendation 1: The Assistant Deputy Minister, Human Resources Branch, should continue to improve the Occupational Health and Safety Program by fully implementing and rigorously monitoring its three-year strategic action plan, according to established timelines outlined in the Plan.

Strategic Direction & Monitoring:

- 1.1 Initiatives remaining on the plan have been assigned to the Occupational Health and Safety Directorate program managers on a yearly basis, as part of their performance agreements, and will be completed by March 2013.
- 1.2 Continuous consultations with the National Health and Safety Policy Committee for input on ways to improve the strategic plan and its implementation have taken place as required by the *Canada Labour Code, Part-II*.
- 1.3 Phases II and III of the Hazard Prevention Program will be implemented and completed in compliance with the requirements of the *Canada Labour Code*.

Reporting & Monitoring:

- 1.4 Monitor changes to applicable laws, regulations and standards to revise and update the strategic plan and Occupational Health and Safety policy framework to ensure continuous improvement of the Program and compliance with emerging legal or regulatory requirements.
- 1.5 Quarterly updates have been provided to the Deputy Minister on the progress of the implementation of the strategic plan.
- 1.6 Ensure periodic review of the employee information contained in OHSQuest for the purpose of data integrity and reliability. Discussions with PWGSC branches will continue to establish a proper mechanism that evergreens the list of our workplaces and employee information in these workplaces.
- 1.7 Conduct monitoring activities through the different Occupational Health and Safety Directorate programs (Construction Safety and Fire Protection) to ensure consistent implementation of the programs in the Regions, in accordance with approved policies and directives:

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- 1.7.1 Monitoring of PWGSC compliance to Treasury Board Secretariat *Chapter 3-1*; and
- 1.7.2 Develop, in consultation with Real Property Branch and Parliamentary Precinct Branch, a reporting mechanism for fires to the Departmental Fire Protection Coordinator and Human Resources and Skills Development Canada.

Recommendation 2: The Assistant Deputy Minister, Human Resources Branch, should regularly assess the challenges facing the Occupational Health and Safety Program, and develop strategies to address them.

- 2.1 Monitor changes to applicable laws, regulations and standards to revise and update the strategic plan and Occupational Health and Safety policy framework to ensure continuous improvement of the program and compliance with emerging legal or regulatory requirements.

Governance:

- 2.2 Conduct monthly meetings with the Regional Directors, Human Resources, to discuss national and regional initiatives and challenges, as well as solutions.
- 2.3 Conduct monthly meetings with the Regional Managers, Occupational Health and Safety, to discuss national and regional operational challenges, as well as solutions to give functional direction regarding the implementation of the Occupational Health and Safety Program.
- 2.4 Improve the effectiveness and efficiency of the National Health and Safety Policy Committee through training and improved attendance.
- 2.5 Attendance at National Health and Safety Policy Committee will continue to be assessed for quorum at each meeting. Where there are repeated absences of a committee member, without replacement by the alternate, the management or employee co-chair will follow-up with the member depending on whether it is a management or employee representative.
- 2.6 Continue the work on the policy revision as per approved timelines. All eighteen existing policies are being revised by a working group reporting to the National Health and Safety Policy Committee. The objective of the review is to simplify and improve accessibility to all employees, managers and health and safety committees and representatives. By December 2012, the desired outcome is to have one policy and three directives (General Safety, Technical and Health and Safety Directives), which will be submitted to the National Health and Safety

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Committee for review and approval. (Reference action item 1.4).

- 2.7 Develop a matrix of federal, provincial and territorial standards, laws and regulations which may impact departmental operations.

Training & Coordination:

- 2.8 Training programs will continue to be reviewed in collaboration with the Regions for a coordinated approach.

INTRODUCTION

1. The audit of the management accountability framework for the Occupational Health and Safety (OHS) Program was identified in the *2010-2015 Multi-Year Risk Based Internal Audit and Evaluation Plan*. A previous audit relating to the OHS Program was conducted in 2009. It focused on assessing compliance with the First Aid policies and regulations.
2. The duties and responsibilities of the employer and employees pertaining to occupational health and safety in the workplace are outlined in the *Canada Labour Code, Part II (CLC-II)* which establishes the legislative framework requirements. The *CLC-II* requires that all employers develop, implement and monitor a prescribed program for the prevention of hazards in the workplace, appropriate to its size and the nature of the hazards. It also requires that employers provide for the education of employees in health and safety matters. The establishment of workplace health and safety committees is also a fundamental requirement.
3. The Treasury Board *Policy on Occupational Safety and Health* aims to complement OHS programs in the public service. The *Policy* contains enhancements to the *CLC-II*. Like the legislation, it requires departments to establish OHS programs relative to the size, risk, and complexity of its operations.
4. PWGSC currently has a suite of 18 different OHS policies that guide the OHS Program. Departmental Policy 007, *Policy on Health and Safety* provides the main accountability framework for the Program, and outlines the roles and responsibilities of all employees and PWGSC as the employer. It specifies the responsibilities of the Deputy Minister, the designated Assistant Deputy Minister, and the Director General of the OHS Program. The *Policy* also defines the role of the OHS Directorate as the centre of OHS expertise responsible for planning, developing and coordinating Departmental health and safety activities. The National Health and Safety Policy Committee's role, which is described in Departmental Policy 023, *Policy on Safety and Health Committees and Representatives*, is to assist in the overall administration of the Departmental OHS Program.
5. In April 2010, the OHS Directorate was moved from the Corporate Services Sector of the Corporate Service and Strategic Policy Branch to the Human Resources Branch. This reporting relationship was designed to match the model of the Office of the Chief Human Resources Officer, where advice on Occupational Health and Safety falls under the Labour Relations and Compensation Services Sector. At the same time, a new Director was hired to head the Directorate. In May 2011, the regions aligned to the model adopted by the national office. Regional health and safety operations now report to regional Human Resources Directors.

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6. With the transfer of the OHS Program in April 2010 to the Human Resources Branch, management responsible for the OHS Program conducted consultations with stakeholders, including regions, and developed a three-year strategic action plan (2010-2013) that was designed to address gaps and opportunities for improvement for the OHS Program. The strategic action plan was developed in parallel with the initial audit work and identified initiatives that would address many of the areas for improvement for the Program that were found during the initial audit work. Audit fieldwork was extended to enhance the audit report by reflecting the implementation of the strategic action plan. Please refer to “Appendix A” for an outline of key dates relating to the OHS Directorate and audit activities.

FOCUS OF THE AUDIT

7. The objective of this internal audit was to determine if selected elements of the management accountability framework for the PWGSC OHS Program allow the Department to manage its responsibilities with respect to OHS, as stated in Departmental and Treasury Board policies, and as required under the *CLC-II*.
8. Initial audit work was conducted from May 2010 to November 2010 and included the examination of the structure; policy framework development; committees; training; performance management; monitoring; and risk management associated with the PWGSC OHS Program. The audit focused on the corporate governance structure and the OHS accountability framework managed within the OHS Directorate of the Human Resources Branch and the Department’s six regional health and safety operations. As a result of the initial audit work, an audit report was presented at the September 2011 Audit and Evaluation Committee meeting. The committee suggested that the report be enhanced through the validation of the implementation of the strategic action plan, and re-examination of the initial findings in light of changes made to the OHS Program. The committee also requested that the audit team examine the relationship between the regional health and safety operations and the OHS Directorate.
9. In order for the Office of Audit and Evaluation to be in a better position to assess the effectiveness of the Program in line with the audit objective, the status of the implementation of the strategic action plan, and whether the desired results were being achieved, the audit team extended the examination phase from May 2010 to November 30, 2011. The team focused on Departmental OHS activities and those actions undertaken in the implementation of the strategic action plan.
10. The Treasury Board Secretariat sets out key elements in the management accountability framework that collectively define “management” and establishes the expectations for good management of a department. This audit focused on selected elements of the framework that impact on the OHS Program within the OHS

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Directorate and regional OHS operations. Three regions – the National Capital Area, Québec and Western were examined in detail during the initial audit work to ensure national coverage of the Program. Officials from the remaining regions (Pacific, Ontario and Atlantic) were interviewed by teleconference and asked to complete a survey questionnaire. During the extension of the audit work, all regions completed a follow up questionnaire and follow up interviews were conducted by teleconference.

11. The audit focused on the corporate governance structure and the OHS accountability framework managed within the OHS Directorate of the Human Resources Branch and the Department's six regional health and safety operations. Branch OHS activities were sampled and examined to the extent they could provide information to assess the overall Departmental corporate governance structure and accountability framework for OHS. The audit did not examine branch specific OHS practices nor was it intended to provide an assessment of the health and safety of work locations within PWGSC.
12. More information on the audit objective, scope, approach and criteria can be found in the "About the Audit" section at the end of the report.

STATEMENT OF ASSURANCE

13. The audit was conducted in accordance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*.
14. Sufficient and appropriate audit procedures were conducted, and evidence gathered, to support the accuracy of the findings and conclusions in this report and to provide an audit level of assurance. The findings and conclusions are based on a comparison of the conditions, as they existed at the time, against pre-established audit criteria that were agreed upon with management. The findings and conclusions are only applicable to the entity examined and for the scope and time period covered by the audit.

OBSERVATIONS

STRATEGIC DIRECTION AND MONITORING

15. The management accountability framework, as defined by the Treasury Board Secretariat, identifies the need for effective strategic direction to support the Minister and deliver results. Strategic direction is the course of action and work planning that leads to the achievement of the goals and objectives of the organization.
16. Strategic direction allows management to be proactive and risk-based in managing the Program toward the achievement of its objectives. Monitoring and reporting on

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the progress against the planned objectives are key components for assurance that the strategic direction is established and adhered to.

17. We expected to find that the OHS Directorate had established clear strategic direction, while taking into consideration Program-related risks. We also expected to find regular monitoring and reporting on the implementation of strategic plans to ensure that planned objectives are met.

A three-year strategic action plan was developed and is being implemented

18. In 2010, in parallel with the initial audit work, the new management team responsible for the OHS Program conducted town hall meetings with employees, regional representatives, and bargaining agents to identify challenges and areas for improvement for the OHS Program. As a result, a three-year strategic action plan (2010-2013) was developed and approved by senior management. The objective of the strategic action plan was to address the gaps and areas for improvement within the Program, while taking into consideration risks relating to the specific initiatives within the strategic action plan. Through the implementation of the strategic action plan, management has established strategic direction for the Program.
19. Initial audit work found that the strategic action plan was scheduled to be formally discussed and approved by the National Health and Safety Policy Committee at its October 2010 meeting. Through the extension of the audit work, we found that the strategic action plan was discussed and approved by the National Health and Safety Policy Committee on October 12, 2010 as scheduled. Through the development and implementation of the strategic action plan, strategic direction for the OHS Program was established. We found that the strategic action plan identified initiatives related to Program areas such as; the Hazard Prevention Program; policy suite renewal; training activities; and the establishment of workplace level committees and representatives. Through the development and implementation of the strategic action plan, management responsible for the OHS Program has established strategic direction for the Program. The successful implementation of the strategic action plan will address many of the areas for improvement initially identified in the audit.
20. The status of the implementation of the strategic action plan was reported on a quarterly basis to the Deputy Minister and to the National Health and Safety Policy Committee. These quarterly updates provided the opportunity for management responsible for the OHS Program to be accountable for timely implementation of the strategic action plan initiatives. We also found improvements in the area of performance reporting for the OHS Program since the initial audit work. Performance indicators for the OHS Program are included in the Human Resources Branch scorecard (which identifies and monitors performance indicators for Branch activities), some of which relate to initiatives within the strategic action plan. For

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example, the number of required workplace committees established and representatives appointed is monitored through the scorecard and reported on a quarterly basis.

21. The establishment of strategic direction supports a proactive and risk based approach for managing organizational activities toward the achievement of its objectives, and provides the necessary guidance for management and employees to fulfill their duties. Monitoring and reporting are key components of strategic direction and assist management in having assurance that the strategic direction is established and adhered to.

A Hazard Prevention Program was developed and is being implemented

22. A Hazard Prevention Program is designed to prevent hazards and manage risks through the identification and recording of workplace hazards and the effective control of the risks posed by those hazards. The establishment of a Hazard Prevention Program is a requirement of the *CLC-II* that came into effect in November 2005.
23. A Hazard Prevention Program is an essential element in establishing a proactive and risk based OHS Program for the Department. It provides Program management with the necessary information regarding positions and related risks throughout the whole Department.
24. We expected to find that the Department had developed and implemented a Hazard Prevention Program, demonstrating that the OHS Program is managed using a risk based approach. Initial audit findings found that one of the most notable elements missing from the OHS Program at that time was a Hazard Prevention Program. Through the extension of the audit work, we found that the OHS Directorate had developed the methodology for a Hazard Prevention Program, and had started to implement it as planned.
25. Implementation of the Hazard Prevention Program involves three phases. Phase I involved the identification and assessment of the highest risk positions within the Department. The approach for Phase I involved two steps: for each identified high risk position, the employee was provided training on the Hazard Prevention Program methodology; and once training was completed, the employee signed a Hazard Identification Assessment form which outlined the risks related to the position they occupy. The deadline for the completion of Phase I was June 2011. Phase II involves the identification and assessment of all other positions. Phase III is the reporting phase which involves reporting on the progress of the program. Phase III will be ongoing until complete implementation of the program. Both Phase II and III are scheduled to be completed by May 2012. The audit examined the implementation of

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Phase I of the Hazard Prevention Program, as the scheduled deadlines for completion of Phase II and III were outside the timelines of the audit.

26. We found that while the OHS Directorate had not met all of the deadlines for completion of Phase I of the Hazard Prevention Program, significant progress was made. According to statistics prepared by the OHS Directorate, as of November 18, 2011, there were 358 positions within PWGSC that were identified as being high risk positions by the OHS Directorate. The statistics also indicated that within the National Capital Area, 99% of the employees identified as occupying a high risk position had received the mandatory training and 99% of the employees had signed the Hazard Identification Assessment form. For the other four regions, two had achieved 100% for both employees trained and signing the forms. The remaining two regions had achieved completion rates between 70%-100% for training completed, and 87%-89% for signing the forms. The outstanding training and signing of the forms is planned to be completed in Phase II of the program. One region was not included as part of the statistics prepared, as they already had a regional Hazard Prevention Program, and were being gradually integrated into the national program.
27. We found that the OHS Directorate was actively following up with the regions regarding any outstanding actions to be completed for Phase I. Progress on the development and implementation of the Hazard Prevention Program was reported on a quarterly basis to the Deputy Minister and the National Health and Safety Policy Committee as part of the updates provided on the strategic action plan.
28. A Departmental Hazard Prevention Program contributes to a proactive and risk based approach for the OHS Program; provides Program management with the necessary information regarding hazards in the workplace; and demonstrates compliance with OHS related requirements including the *CLC-II*.

GOVERNANCE

29. Governance is the combination of processes and structures implemented by management to direct, manage and monitor the activities of an organization toward the achievement of its objectives. A solid governance structure is fundamental to having a well-established OHS Program that meets the requirements of the *CLC-II*, and related regulations and policies. This includes an oversight body and a set of cohesive policies that define roles and responsibilities.
30. We expected the Department to have a well-established and functioning governance structure for the OHS Program. The *CLC-II*, and related regulations and policies, require that the OHS Program be governed by a functioning network of committees, and an organizational body that develops, directs, and coordinates health and safety activities across the Department. The policy framework should define roles and

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responsibilities and promote a healthy and safe work environment consistent with the *CLC-II*, and related regulations and policies.

31. The oversight structure in PWGSC includes the Assistant Deputy Minister of Human Resources Branch; the National Health and Safety Policy Committee which is composed of Assistant Deputy Ministers, and representatives of the bargaining agents; OHS committees at the regional and workplace levels; and, the OHS Directorate and regional OHS operations. This structure is supported by a suite of Departmental OHS policies which the National Health and Safety Policy Committee was involved in developing.

Coordination with regions has improved

32. Regional health and safety offices manage the OHS Program activities in the regions, and are an essential component for effective and comprehensive OHS governance across the Department. Guidance, direction and coordination provided by the national office to the regions contribute to the effectiveness and success of regional health and safety operations. Regular and consistent communication and consultation between the national office and regional health and safety operations is essential to have a consistent and uniform OHS Program throughout the Department.
33. We expected that there be ongoing communication between regional health and safety operations and the OHS Directorate, and that regions be consulted during the development and implementation of the strategic action plan. We also expected that the OHS Directorate would fulfill its responsibility to provide national direction and guidance to the regions.
34. The initial audit work found that the regions viewed the OHS Directorate as being highly focused on the National Capital Area. Regional officials indicated that many of the policies, activities, training and tools produced by the OHS Directorate did not always take into account regional differences and challenges. For example, the diversity of regional geography presents a challenge when coordinating training and activities across the country. Some regions felt that these challenges were not taken into consideration by the OHS Directorate. The regions had also indicated a need for improved national direction; coordination and guidance from the OHS Directorate that would ensure greater consistency and help standardize Program elements nationally. Through the extension of the audit work and validation of the implementation of the strategic action plan, we found that the regions were consulted on a number of initiatives outlined in the strategic action plan such as those relating to policy renewal, training, and the Hazard Prevention Program; that there were regular scheduled teleconferences between the OHS Directorate and regional counterparts to discuss matters relating to the Program; and that the regions felt they have a voice in OHS Program matters. The results of the questionnaire stated that the

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regions viewed the relationship with the OHS Directorate as positive and they felt communication with the national office had improved.

35. We found that ongoing formally scheduled communication between the OHS Directorate and the regions has been occurring. There are scheduled monthly teleconference calls between the OHS Directorate and the regions, which provide a forum for discussion and consultation. As well, the OHS Directorate has sent delegates to regional workshops.
36. Initial audit findings indicated that regional best practices were not always taken into consideration when developing initiatives. Through the extension of the audit work, we found that the OHS Directorate had considered best practices from the regions when developing initiatives such as the Hazard Prevention Program. We also found that the OHS Directorate has taken steps to reduce overlap in one particular region where a regional Hazard Prevention Program had already been underway at the time the OHS Directorate began implementing the program nationally.
37. In May 2011, the decision was made to transfer the reporting relationship of regional health and safety operations to the Human Resources Directors within the regions. This change has aligned the regional reporting relationships with that which exists within the national office as a result of the April 2010 decision to have the OHS Directorate transferred to the Human Resources Branch. The follow up questionnaire conducted with the regions stated that this transition is a positive move and has been seamless thus far.
38. Initial audit work found that there were 15 worksites, involving approximately 324 employees, which were physically located in other regions but under the jurisdiction of the National Capital Area. These were deemed “orphan” sites, as there was confusion as to whether the nearby regional office or the National Capital Area office should be providing OHS services to these employees. Through the extension of the audit work, we found that in June 2011, a Generic Services Agreement was signed with Regional Directors General and Assistant Deputy Ministers (acting as employer representatives for each branch) that determined responsibility for the “orphan” sites and eliminated the confusion. The Generic Services Agreement states that regional offices in which the “orphan” sites reside will be responsible for providing them support and guidance on OHS matters.
39. A solid relationship between the OHS Directorate and the regional health and safety operations supports the foundation of well established and consistent OHS governance structure within the Department. Coordination and direction provided by the OHS Directorate contributes to the effectiveness and success of regional health and safety operations.

Attendance and mandatory training for the National Health and Safety Committee has improved slightly

40. The *CLC-II*, supplemented by Treasury Board and Departmental policies and directives, requires the establishment of a “Policy Health and Safety Committee” to assist in the overall administration of the departmental OHS Program.
41. The PWGSC National Health and Safety Policy Committee was established and is responsible for reviewing the progress of the Program, addressing specific issues, and making appropriate recommendations. Its Terms of Reference requires that its composition include employer and employee representatives with the Assistant Deputy Ministers from each branch representing the employer. We expected that Committee members would meet regularly, and would receive the mandatory committee training in order to fulfill their duties.
42. Initial audit work found that the National Health and Safety Policy Committee generally met regularly as required. The attendance of Assistant Deputy Ministers at committee meetings has historically been uneven, but branches are almost always represented through the participation of replacements at the Director General or Director level. In August 2010, the Assistant Deputy Minister, Human Resources Branch who is the management co-chair for the Committee, sent a memo to the senior management members of the Committee, calling for full attendance at these meetings to ensure Committee work progresses well and is seen as a priority as the Deputy Minister intends. Through the extension of the audit work, we found that the attendance of Assistant Deputy Minister’s has improved since the initial audit work. Meeting minutes for the National Health and Safety Policy Committee dated October, 2011 indicated that there was an increase in attendance by Assistant Deputy Minister’s, and all those who were absent sent a replacement on their behalf.
43. Initial audit work had also found that only 12% of National Health and Safety Policy Committee members had received the mandatory committee training, which advises them of their roles and responsibilities as Committee members. Through the extension of the audit work we found that according to statistics prepared by the OHS Directorate, as of October 2011, 46% of National Health and Safety Policy Committee members had received the mandatory training; resulting in a 34% increase since the initial audit findings. While this is an improvement, still less than half of the National Health and Safety Policy Committee members had attended the mandatory training. The OHS Directorate has demonstrated a commitment to ensuring that the outstanding training is provided by hiring a consultant to provide further sessions. Training for the National Health and Safety Policy Committee members is also actively tracked by the OHS Directorate.

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44. Regular attendance of senior management at the National Health and Safety Policy Committee assists in promoting a culture of commitment and awareness of health and safety in the Department. It demonstrates and reinforces that the OHS Program is a priority for the Department. As well, mandatory committee training is a critical tool for providing committee members with information regarding their roles and responsibilities.

Number of required workplace committees established and representatives appointed has increased

45. It is a key requirement in the overall administration of the OHS Program for PWGSC to implement a network of national, regional and workplace safety and health committees and representatives. An OHS workplace committee is required at all worksites where 20 or more staff are employed. When there are fewer than 20 employees, an OHS representative is appointed by the bargaining agent(s). In some cases, management makes the appointment if the bargaining agent(s) does not propose a representative, to act as the focal point for addressing and reporting OHS issues to management. Consequently, we expected to find a network of workplace committees and representatives established according to the *CLC-II*, Treasury Board and Departmental policies requirements.
46. Initial audit work had found that not all required workplace committees and representatives had been established or appointed. This was particularly evident in the National Capital Area. The strategic action plan identified the establishment and appointment of required workplace committees and representatives as an important initiative.
47. Through the extension of the audit work, statistics prepared by the OHS Directorate indicate that as of November 18, 2011, 88% of committees were established and 92% of representatives appointed across Canada. For the National Capital Area specifically, as of November 18, 2011, 81% of committees were established and 86% of representatives appointed. In other regions, statistics indicated that as of this same date they were either at 100% compliance, or very close. These statistics are reported to the National Health and Safety Policy Committee on a quarterly basis, and as part of the Human Resources Branch scorecard.
48. Given the large number of employees and worksites across the Department, it is important that all required workplace committees and representatives are established and appointed so that the health and safety of every employee is considered, and compliance with the *CLC-II* and related policies and regulations is ensured. Workplace level committees and representatives are a fundamental part of the overall OHS governance structure, and help to ensure the Department provides a safe and healthy environment for employees.

Suite of Departmental health and safety policies is being renewed

49. A cohesive set of OHS policies that provides clear guidelines and procedures is an essential element to support a solid governance structure for the OHS Program. These policies also need to be consistent with applicable federal government legislation and regulatory requirements.
50. PWGSC currently has a suite of 18 Departmental policies related to health and safety. These policies are designed to identify what should be done to create a safe working environment as well the roles, responsibilities and accountabilities for health and safety in PWGSC. We expected that OHS policies would be comprehensive, regularly updated, and clearly define roles and responsibilities.
51. Through the initial audit work, we found that, while OHS policies had been developed consistently with the *CLC-II*, and related regulations and policies, many of the policies were outdated. Of the 18 OHS related Departmental policies, 13 were developed in the 1990's and had not been updated. Following the 2009 First Aid Audit, the Audit and Evaluation Committee requested that the PWGSC health and safety policies be reviewed with a view to streamlining them. The National Health and Safety Policy Committee had taken steps to address this recommendation. The notion of consolidating and reducing the number of Departmental OHS policies was the subject of discussion at the March 2010 National Health and Safety Policy Committee meeting. As a result, a working group composed of union and management representatives had been developed to update, review and consolidate policies, where possible.
52. Through the extension of the audit work, we found that renewal of the policy suite was identified as an initiative within the strategic action plan. The deadline for completion of the policy suite renewal is December 2012. The audit examined activities relating to this initiative up to November 30, 2011. We found that a policy blueprint was developed by the OHS Directorate and was discussed and tabled at the National Health and Safety Policy Committee. Approval of the blueprint by the National Health and Safety Policy Committee was being sought at the December 2011 committee meeting. The new policy suite is expected to include one overarching health and safety policy and three sub directives. During the development of the blueprint, the OHS Directorate consulted with the regions and stakeholders to seek their input.
53. Policies that are comprehensive, regularly updated, and with clearly defined roles and responsibilities assist managers and employees in their duties to implement and comply with Departmental policies, procedures and guidelines on health and safety.

TRAINING AND COORDINATION

54. Continuous learning is one of the Treasury Board Secretariat management accountability framework requirements. The *CLC-II*, Treasury Board Policy, and Departmental Policy 024, *Policy on Safety and Health Training* require that PWGSC provide employees with the necessary information, instruction and training to ensure the safety and health of employees at work.
55. Effective and systematic health and safety training supports organizational objectives and plays an important role in safety management. A systematic coordination of OHS training for the Department would involve the identification of job training needs, the development of appropriate material, the provision of required training to all identified recipients, and the maintenance of training records to demonstrate that all employees had received the required training.

Coordination of health and safety training activities across the Department has improved

56. Training is essential for employees, supervisors, and executives to acquire the necessary knowledge and skills to understand their roles and responsibilities regarding health and safety. A coordinated approach to health and safety training for the Department is required, given the large number of employees and geographical span of PWGSC.
57. We expected that the Department would have a structured, systematic and coordinated approach to OHS training to ensure all employees are receiving the meaningful information, instruction and training as set out in the *CLC-II*, and related regulations and policies.
58. We initially found that it was difficult to identify training requirements for employees, training material was inconsistent and training records were not adequately maintained. The extension of the audit work found that the methodology for the Hazard Prevention Program included the identification of job specific training needs in a systematic manner, which assists the Department in providing the necessary information and knowledge for employees to fulfill their roles and responsibilities relating to their positions.
59. We also found that a National Training Coordinator has been hired to manage OHS training activities across the Department. The National Training Coordinator has worked with stakeholders and regions on mandatory OHS training material to ensure consistency. As well, the Coordinator is preparing and reporting on OHS training statistics across the Department, and has been in consultations with the regions and Human Resources learning group to ensure that training records are maintained

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consistently. Statistics relating to OHS mandatory training are reported on the Human Resources Branch scorecard on a quarterly basis.

60. Due to the number, size and varying locations of employees within the Department, a coordinated approach to OHS training is an essential factor to ensuring that every employee receives the necessary information and tools for a healthy and safe work environment.

Resources exist to better support Program coordination at national level, and within the National Capital Area

61. In collaboration with management, unions and employees, the OHS Directorate develops and implements the Departmental OHS Program. The OHS Directorate is the Departmental safety advisor and is responsible for managing six business lines at the national level. These are: Occupational Health; Occupational Safety; Fire Protection and Prevention; Construction Health and Safety; Environmental Protection and Claims/Case Management. The OHS Directorate is also responsible for managing regional operations for the National Capital Area. At the regional level, Occupational Safety is primarily delivered through OHS coordinators, who support and help committees and representatives in the workplace. These coordinators are managed by a Regional Manager.
62. We expected that the OHS Directorate would establish the necessary resources to support their corporate role of providing national direction, coordination, and guidance; and their regional role of providing coordination and support to National Capital OHS operations.
63. Initial audit work found that the OHS Directorate had been experiencing staff shortages for several years. At the time of the initial audit work, 11 of 40 substantive positions in the OHS Directorate were vacant, including four of six national coordinator positions. These management position vacancies may have impacted the level of national direction, coordination and guidance provided by the OHS Directorate for these particular disciplines.
64. Through the extension of the audit work, we found that the OHS Directorate had staffed a number of positions, including the previously vacant national coordinator positions, and had stated that their business lines are now functional. The regional questionnaire indicated that the regions felt they were receiving support and guidance from the OHS Directorate. We also found that the OHS Directorate had hired additional OHS Coordinators to provide support to National Capital Area workplaces. A listing of OHS Coordinators and their assigned workplaces dated November 17, 2011 indicated that all National Capital Area workplaces, with the exception of international sites, were assigned to an OHS Coordinator.

65. Having the necessary resources is fundamental to ensuring successful coordination and provision of essential health and safety advice, guidance and direction to employees, as well as supporting an effective OHS Program.

CHALLENGES IN MOVING FORWARD

66. OHS Program management has made improvements to the Program since the initial audit work. Delivery of the Program has moved toward a more proactive and consistent approach through the implementation of the actions identified in the strategic action plan.
67. Challenges remain in moving forward with the Program. Given the size, scope and complexity of the OHS Program within the Department, it is essential that Program management has accurate and reliable data from which to report on. Additionally, while statistics prepared by the OHS Directorate stated the number of required workplace committees and representatives established and appointed has increased significantly, it is important to ensure these committees and representatives work effectively. This will help them to fulfill their roles and responsibilities to support a strong Departmental OHS Program and ensure Departmental compliance with the *CLC-II* and related regulations and policies. Finally, the establishment of an ongoing planning process which includes continuous monitoring against planned objectives is a key factor to ensuring a successful and effective OHS Program for the Department.
68. We expected that OHS Program management would compile and maintain an accurate and reliable listing of Departmental workplaces and employees. We also expected that the OHS Directorate would ensure that workplace committees and representatives are aware of their roles and responsibilities to effectively fulfill their duties. Furthermore, we expected management of the Program would continue implementing the strategic action plan and ensure that all timelines are respected and the planned objectives are met.

Actions taken to improve the accuracy and reliability of data used for reporting

69. As part of their OHS Program responsibilities, the OHS Directorate compiles and manages a listing of Departmental workplaces and employees. This source data is fundamental for OHS Program management, as it identifies employees and assists them in developing programs to protect employees from workplace-related hazards. It also provides a basis for reporting on a number of Program-related activities. We expected that an accurate and complete listing of workplaces and employees was developed and maintained to ensure that all employees have been covered by the Program, and that reliable data has been used for reporting on in order to provide an accurate picture of the Program.

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70. Initial audit work found that there was no mechanism to ensure an accurate and reliable listing of workplaces and employees within the Department. Through the extension of the audit work, we found that the OHS Directorate had developed a database (“OHSQuest”) that will house workplace and employee data as well as other employee and position related information (such as information obtained as part of the Hazard Prevention Program). The main source of data used to populate the system was previously developed listings of Departmental employees and workplaces. Initial audit work found that the accuracy of these listings was questioned by Program management, who indicated that the various existing listings did not match, and were taken from different sources. We found that there was no single reference listing all Departmental employees and workplaces. To address these concerns and increase the accuracy of the information, the following process was undertaken to populate the newly developed database: the existing listings of Departmental employees and workplaces were reviewed; this information was then confirmed with Departmental managers through a call letter sent by the OHS Directorate; and finally, information within the Human Resources Management System was reviewed. As mentioned, the accuracy and reliability of the data taken from previous listings of Departmental employees and workplaces, and the information within the Human Resources Management System has been questioned by Program management. As well, the OHS Directorate has indicated that they have not received all responses from the call letters. This has created a challenge for Program management. To address this, the OHS Directorate has developed a plan to have the database updated every three months. The expectation is that through regular updates, the information will be reviewed on a regular basis so that the accuracy of data would be increased. This recommended plan has been presented to the Assistant Deputy Minister, Human Resources Branch by the OHS Directorate, and at the time of the audit, was scheduled to be presented at the December 2011 National Health and Safety Policy Committee meeting.
71. Given that the source data for the listing of Departmental employees and workplaces may not be completely accurate and reliable; there could be an impact on other reporting done by the OHS Directorate, which uses this information as its basis. For example, if the OHS Directorate cannot be completely assured that it has identified all PWGSC workplaces, then it also cannot be assured that all required workplace committees have been established or representatives appointed. As well, not having an accurate and reliable listing of employees and workplaces impacts the successful implementation of the Hazard Prevention Program across the Department, and the reliability of statistics prepared on employee training. These are both important elements of the OHS Program as they impact Departmental compliance with the *CLC-II*, related regulations and policies.
72. Accurate and reliable information on Departmental workplaces and employees is one of the most important elements of a proactive, risk based and effective OHS

Program. This information is fundamental for assisting management with developing the OHS Program; identifying workplace hazards to protect employees; and is the basis for reliable and accurate reporting.

Ensuring workplace committees are effective and fulfilling their responsibilities remains a challenge

73. The *CLC-II* and Departmental policies require that PWGSC establish and maintain a network of Health and Safety committees and representatives at the workplace, regional and national levels. Workplace level Health and Safety committees are responsible for managing OHS activities at the workplace level; providing OHS support to employees; and are the focal point for addressing and reporting OHS issues to management.
74. As previously noted, through the extension of the audit work, we found that statistics indicated an improvement in the number of workplace committees established and representatives appointed. However, we found there remains a challenge to ensuring they are aware of their roles and responsibilities and are working effectively.
75. Mandatory committee training is an essential component for workplace committees and representatives to understand their roles and responsibilities. Initial audit work indicated that there were concerns over the effectiveness of workplace committees since not all had attended mandatory committee training. According to statistics prepared by the National Training Coordinator for training taken between April 1, 2011 and October 26, 2011, not all committee members had received the mandatory training. There remains a concern, therefore, that not all committee members and representatives fully understand their roles and responsibilities. We found the OHS Directorate had sent out a communication to National Capital Area workplace committee co-chairs and representatives reminding them of their responsibilities. However, there is a risk that this email did not go to all National Capital Area committee co-chairs and representatives given the concerns over the accuracy of the listing.
76. Ensuring that committee members receive the mandatory committee training at both the workplace and National levels is an essential component to committee members understanding their roles and responsibilities. Workplace committees provide the foundation for an effective network of functioning OHS committees and help support a successful OHS Program. Workplace level committees are privy to workplace specific issues and concerns from employees. The OHS Directorate is responsible for providing the necessary support to ensure that these committees are functioning as required by the *CLC-II* and related policies and regulations.

Occupational Health and Safety Program momentum needs to be maintained

77. As with any large Department-wide program, there remain challenges in moving forward with the Program. It is important that management responsible for the OHS Program continue to implement the strategic action plan initiatives, and that they regularly assess the challenges facing the Program and develop mechanisms to address them.
78. The OHS Directorate has made significant progress in the implementation of the strategic action plan since the initial audit work, and has demonstrated an awareness of the opportunities for improvement within the Program. We expected that there would be an ongoing process for identifying and addressing challenges in the achievement of planned objectives, and that mechanisms would be implemented to address these.
79. The extension of the audit fieldwork was substantially completed approximately midway through the implementation of the strategic action plan. As the OHS Directorate completes the implementation of the strategic action plan, it is important they ensure that the momentum gained in Phase I of the Hazard Prevention Program continues throughout Phase II and III; that they continue with policy renewal within the given deadlines; and they ensure that training initiatives are being carried forward to meet policies and legislation requirements.
80. Having a process to address ongoing challenges facing an organization assists with ensuring that planned objectives are relevant and achieved. The establishment of mechanisms to address the opportunities for improvement supports the successful achievement of planned objectives.

CONCLUSION

81. The PWGSC OHS Program has far-reaching responsibilities with wide-ranging impacts for various stakeholders. These stakeholders include the Department as the employer and all Departmental employees. Since compliance with the *CLC-II*, and related regulations and policies is a legal requirement, it is important that the management accountability framework governing the OHS Program is adequate to support an effective Program.
82. The audit initially identified weaknesses with the selected elements of the management accountability framework for the PWGSC OHS Program. The extension of the audit work noted that through the implementation of the strategic action plan and regular monitoring and reporting on its progress, the OHS Program is moving toward a more proactive and consistent approach. The initiatives outlined in the strategic action plan relate to many of the weaknesses initially identified with

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selected elements of the management accountability framework. Successful completion of the implementation of the strategic action plan should allow the Department to manage its responsibilities as stated in the Department and Treasury Board policies and as required under the *CLC-II*.

83. Challenges remain for the OHS Program moving forward, however. It is important for management responsible for the OHS Program to continue implementation of the strategic action plan to ensure that planned objectives are met, and to develop an approach to assess the continued relevance and effectiveness of the Program.

Recommendations and Management Response

Management accepts the findings and recommendations of the audit report. The Human Resources Branch will act on the two recommendations identified in the audit report by implementing the below Management Action Plan.

Recommendation 1: The Assistant Deputy Minister, Human Resources Branch, should continue to improve the Occupational Health and Safety Program by fully implementing and rigorously monitoring its three-year strategic action plan, according to established timelines outlined in the Plan.

Strategic Direction & Monitoring:

- 1.1 Initiatives remaining on the plan have been assigned to the Occupational Health and Safety Directorate program managers on a yearly basis, as part of their performance agreements, and will be completed by March 2013.
- 1.2 Continuous consultations with the National Health and Safety Policy Committee for input on ways to improve the strategic plan and its implementation have taken place as required by the *Canada Labour Code, Part-II*.
- 1.3 Phases II and III of the Hazard Prevention Program will be implemented and completed in compliance with the requirements of the *Canada Labour Code*.

Reporting & Monitoring:

- 1.4 Monitor changes to applicable laws, regulations and standards to revise and update the strategic plan and Occupational Health and Safety policy framework to ensure continuous improvement of the Program and compliance with emerging legal or regulatory requirements.
- 1.5 Quarterly updates have been provided to the Deputy Minister on the progress of the implementation of the strategic plan.
- 1.6 Ensure periodic review of the employee information contained in OHSQuest for the purpose of data integrity and reliability. Discussions with PWGSC branches will continue to establish a proper mechanism that evergreens the list of our workplaces and employee information in these workplaces.
- 1.7 Conduct monitoring activities through the different Occupational Health and Safety Directorate programs (Construction Safety and Fire Protection) to ensure

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consistent implementation of the programs in the Regions, in accordance with approved policies and directives:

- 1.7.1 Monitoring of PWGSC compliance to Treasury Board Secretariat *Chapter 3-1*; and
- 1.7.2 Develop, in consultation with Real Property Branch and Parliamentary Precinct Branch, a reporting mechanism for fires to the Departmental Fire Protection Coordinator and Human Resources and Skills Development Canada.

Recommendation 2: The Assistant Deputy Minister, Human Resources Branch, should regularly assess the challenges facing the Occupational Health and Safety Program, and develop strategies to address them.

- 2.1 Monitor changes to applicable laws, regulations and standards to revise and update the strategic plan and Occupational Health and Safety policy framework to ensure continuous improvement of the program and compliance with emerging legal or regulatory requirements.

Governance:

- 2.2 Conduct monthly meetings with the Regional Directors, Human Resources, to discuss national and regional initiatives and challenges, as well as solutions.
- 2.3 Conduct monthly meetings with the Regional Managers, Occupational Health and Safety, to discuss national and regional operational challenges, as well as solutions to give functional direction regarding the implementation of the Occupational Health and Safety Program.
- 2.4 Improve the effectiveness and efficiency of the National Health and Safety Policy Committee through training and improved attendance.
- 2.5 Attendance at National Health and Safety Policy Committee will continue to be assessed for quorum at each meeting. Where there are repeated absences of a committee member, without replacement by the alternate, the management or employee co-chair will follow-up with the member depending on whether it is a management or employee representative.
- 2.6 Continue the work on the policy revision as per approved timelines. All eighteen existing policies are being revised by a working group reporting to the National Health and Safety Policy Committee. The objective of the review is to simplify

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and improve accessibility to all employees, managers and health and safety committees and representatives. By December 2012, the desired outcome is to have one policy and three directives (General Safety, Technical and Health and Safety Directives), which will be submitted to the National Health and Safety Committee for review and approval. (Reference action item 1.4).

- 2.7 Develop a matrix of federal, provincial and territorial standards, laws and regulations which may impact departmental operations.

Training & Coordination:

- 2.8 Training programs will continue to be reviewed in collaboration with the Regions for a coordinated approach.

ABOUT THE AUDIT

Authority

This audit was approved by the Audit and Evaluation Committee of Public Works and Government Services Canada as part of the *2010-2015 Risk-Based Multi-Year Audit and Evaluation Plan*.

Objective

The objective of this internal audit was to determine if selected elements of the management accountability framework for the PWGSC Occupational Health and Safety (OHS) Program allow the Department to manage its responsibilities as stated in the Department and Treasury Board policies and as required under the *Canada Labour Code Part II*.

Specifically, the audit examined the following selected elements of the management accountability framework related to the PWGSC OHS Program:

- **Governance and Strategic Direction:** accountability structure; roles and responsibilities; and, business strategic direction;
- **Policies and Programs:** policies and procedures; program delivery;
- **People:** resource management; OHS training; communication and awareness;
- **Risk Management:** risk management infrastructure and practices; and,
- **Results and Performance:** monitoring performance and activities; reporting.

Scope and Approach

Initial audit work was conducted from May 2010 to November 2010, and included the examination of the structure, policy framework development, committees, training, performance management, monitoring, and risk management associated with the PWGSC OHS Program. The audit focused on the corporate governance structure and the OHS accountability framework managed within the OHS Directorate of the Human Resources Branch and the Department's six regional health and safety operations. Branch OHS activities were sampled and examined to the extent that they could provide information to assess the overall Departmental corporate governance structure and accountability framework for OHS. The audit did not examine branch specific OHS practices nor was it intended to provide an assessment on the state of the health and safety of work locations within PWGSC.

As a result of the initial audit work, an audit report was presented at the September 2011 Audit and Evaluation Committee meeting. The committee suggested that the report be

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enhanced, through the validation of the implementation of the strategic action plan and re-examination of the initial findings in light of changes made to the OHS Program. The committee also requested that the audit team examine the relationship between the regional health and safety operations and the OHS Directorate. This allows the Office of Audit and Evaluation to be in a better position to assess the effectiveness of the Program in line with the audit objective; the status of the implementation of the strategic action plan; and whether the desired results are being achieved.

To achieve the audit goal mentioned above, the audit team extended the examination phase of the audit from May 2010 to November 2010 to May 2011 to November 2011. The team focused on Departmental OHS activities and those actions undertaken in the implementation of the strategic action plan.

The audit focused on the Departmental OHS Program activities during the period of May 2010 to November 2011.

The audit was conducted in accordance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*.

Criteria

The criteria for this audit were developed based on the *Canada Labour Code Part II (CLC-II)*, the *Canada Occupational Health and Safety Regulations*, the Treasury Board *Occupational Safety and Health Policy and Directive*, and the Department's suite of OHS policies. The following audit criteria were used:

1. **Governance and Strategic Direction:** the OHS Program has an oversight structure that clearly and effectively identifies the roles, responsibilities and accountability for the Program. Appropriate strategic direction is provided to ensure the OHS Program meets its objectives consistent with the requirements of the *CLC-II* and related regulations.
2. **Policies and Program:** PWGSC has a comprehensive OHS Program that includes a suite of policies, guidelines and procedures to promote a healthy and safe work environment, consistent with applicable federal government legislation and regulatory requirements.
3. **People:** the OHS Program is appropriately staffed with individuals to support the Program's objectives, consistent with the size, complexity and operating risks of the Department. The Department provides meaningful training and awareness activities, ensuring all stakeholders have the requisite knowledge and skills to promote a healthy and safe work environment.

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4. **Risk Management:** management identifies, mitigates and monitors the risks that may preclude the Department from achieving its objectives for the OHS Program.
5. **Results and Performance:** formal monitoring mechanisms are in place to link performance indicators to planned results and the Program objectives and to ensure that the OHS Program is managed with due diligence to meet the requirements of the *CLC-II* and related regulations.

Audit Work Completed

The initial fieldwork for this audit was substantially completed on November 1, 2010. The extension of the fieldwork for this audit was substantially completed on November 30, 2011.

Audit Team

The audit was conducted by members of the Office of Audit and Evaluation and an audit consultant, overseen by the Director of Internal Audit and under the overall direction of the Chief Audit and Evaluation Executive.

The audit was reviewed by the quality assessment function of the Office of Audit and Evaluation.

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APPENDIX A

Occupational Health and Safety Directorate Activities (April 2010 – November 2010)	Date
Transfer of the Occupational Health and Safety Directorate to the Human Resources Branch	April 26, 2010
Consultation with Unions to identify challenges and opportunities in the health and safety Program	May 20, 2010
Presentation to the Deputy Minister of the first diagnosis of the challenges and opportunities in health and safety*	May, 2010
Town Hall Meeting to discuss challenges and opportunities in health and safety with Departmental OSH employees and union representatives	June 3, 2010
Meeting of the National OHS Policy Committee where the creation of three-year strategic action plan to address identified challenges was discussed	June 15, 2010
Draft Occupational Health and Safety Directorate three-year strategic action plan	June 30, 2010
Presentation to the Deputy Minister of the status of the health and safety Program	July, 2010
Approval of three-year strategic action plan by the National Health and Safety Policy Committee	October 12, 2010
Implementation of actions identified in three-year strategic action plan	October 2010- Ongoing
Presentation of three-year strategic action plan to the Deputy Minister	November 16, 2010
* Note: Following the initial presentation to the Deputy Minister (DM) of the first diagnosis of the challenges and opportunities in health and safety, the DM has been provided, on a quarterly basis, with updates on the strategic action plan ensuring thorough monitoring of the actions and timelines. Updates have also been provided in November, 2010 and May, 2011 to the Audit and Evaluation Committee on the status of the implementation of the strategic action plan, and on a quarterly basis to the National Health and Safety Policy Committee as a standing item on the agenda.	
Key Audit Activities	Date
Initiation Letter	May 5, 2010
Terms of Reference	May 13, 2010
Completion of initial audit fieldwork**	November 1, 2010
Presentation of preliminary audit observations to OHS Management	November 25, 2010
Presentation of audit report at the Audit and Evaluation Committee (<i>recommendation to extend audit fieldwork</i>)	July 7, 2011
Completion of extension of audit fieldwork***	November 30, 2011
Presentation of updated audit report at the Audit and Evaluation Committee	May 10, 2012
** Note: The audit focused on the Departmental OHS Program activities during the period of May 2010 and November 2010.	
*** Note: The audit focused on the Departmental OHS Program activities during the period of May 2010 to November 2011, and included the validation of the implementation of the strategic action plan.	