



LONDON FIRE BRIGADE

Report title

Environmental Management System (EMS) Update 2021

Report to

Corporate Services Directorate Board
Operational Delivery Directorate Board
Commissioner's Board

Date

08 November 2021
17 November 2021
14 December 2021

Report classification

For Information

The subject matter of this report deals with the following LFB strategic priorities

The Best People, The Best Place To Work

The Environmental Management System (EMS) has been working effectively over the three year certification cycle, and the management of environmental risk by London Fire Commissioner (LFC) is of a good standard. The knowledge of environmental issues and engagement by staff has improved, and this was noted by the British Standards Institute (BSI) auditor.

Report number

LFC-0650

Not for Publication

PART I - NON-CONFIDENTIAL FACTS AND ADVICE TO THE DECISION-MAKER

Executive Summary

This report forms the annual management review of the London Fire Commissioner's (LFC) Environmental Management System (EMS), as required by the International Standards Organisation (ISO) 14001 certification. The report provides an update on the progress of the London Fire Brigade's (Brigade's) wide EMS and recent external surveillance audit by the British Standards Institute (BSI), at which the Brigade's continued certification EMS to ISO 14001:2015 Standard was confirmed following the external audit by the BSI.

Recommended decision

That the Commissioner's Board notes the content of this report.

1. Introduction and background

- 1.1 The LFC has operated a Brigade wide certified EMS to the ISO 14001 Standard (an internationally recognised standard for the management of environmental impacts) since September 2014. The Brigade was successfully re-certified to the new ISO 14001:2015 Standard in 2020. The next certification review will take place in 2023.
- 1.2 The ISO 14001 Standard requires top management to review the EMS at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. The Management Review function for the EMS is to be completed annually by the Commissioners Board (CB).
- 1.3 This update report is structured to address the following requirements of the ISO 14001 Standard:
- Any requests for further resources if required.
 - An update on internal and external audit findings.
 - An overview of trends and root causes.
 - Status of actions from previous reports.
 - Status of environmental objectives.
 - Compliance obligation changes and actions to address them.
 - Changes in environmental aspects, risks and opportunities.
 - Any changes that have affected the performance and effectiveness of the EMS.
- 1.4 LFC's EMS covers all sites and functions, however, only the management functions of the Brigade (represented by Departments) and those locations that have been identified as posing the highest risk of adverse environmental impact are within the scope of the certified element of the EMS. The reduced scope is considered to provide better value and a more manageable approach to ISO 14001:2015 certification. This includes:
- All departments
 - Operational Support Centre (OSC)
 - 10 of the 14 'high risk' fire stations identified, which are:

Certified high risk Fire Stations	Feltham Kingston Kentish Town Poplar Finchley	Barking Northolt Harrow Croydon Sutton
Uncertified high risk Fire Stations*	Old Kent Road Wandsworth	Ealing Forest Hill

* Dates to be confirmed with BSI for the extent to scope audits for the additional four sites.

- 1.5 Having an EMS in place provides assurance that the Brigade is compliant with environmental legislation and other compliance requirements. It also helps to reduce the Brigade's impact on the environment by supporting increased efficiency of resource use and minimising consumption. Furthermore, the EMS assists the Brigade's implementation of the Mayor's London Environment Strategy.

External Surveillance Audit 2021

1.6 The external audit, conducted by BSI and facilitated by the Sustainable Development team, lasted for three days in July 2021. The audits covered various elements of the system and three sample sites listed on the certificate, as set out in the three-year plan at Appendix 1. The 2021 site audits covered are as follows:

- Kingston
- Sutton
- Croydon

1.7 The external auditor noted that: "The management system continues to meet its intended outcomes and a recommendation is made for continued certification to ISO14001:2015.." In particular:

- The environmental policy and objectives remain aligned with the Sustainable Development ambitions to reduce CO2 emissions by 60% by 2025 and achieving zero carbon by 2050.
- The lifecycle approach to deliver this ambition was demonstrated for various projects by the operational policy team.
- An excellent standard of housekeeping was noted across all stations. Operational controls were successfully verified for inspections, waste management, interceptor management, generator/fuel usage and maintenance and use of spill kits.
- Effective corrective actions have allowed the closure of one minor non-conformity identified in a previous assessment.

1.8 Both external and internal audits categorise findings as per the definitions set out in Table 1.

Table 1: Findings Characterisation

Major Fault	Where there has been a pollution incident; a breach of regulations; or a Minor Fault that was escalated as it remained open for an extended period of time.
Minor Fault	A 'Minor Fault' occurs where there is the potential for a pollution incident or a near miss, breach of regulations or non-compliance with Brigade policy.
Opportunity for Improvement	An 'Opportunity for Improvement' is an opportunity to improve the system, repeated occurrence may lead the system to fail if preventive action is not taken, or a noted potential area to make a system improvement

1.9 No major faults and 3 minor faults were raised through the 2021 external audit:

Table 2: Findings Characterisation

Finding- Minor	Corrective Action
The compliance register has not identified the requirement for 5-yearly air conditioning inspections (TM-44), resulting in gaps in evaluation of compliance and expired TM-44 at Croydon Fire Station (legal noncompliance).	Property have already agreed to carry out a review of all air conditioning units and check against compliance on the government website Sustainable Development (SD) team to include TM-44 checks in the compliance audits going forward
Environmental policy located on Croydon and Kingston station noticeboards is not current (and signed by previous CEO).	SD team to arrange with Print Services, copies of the glossy Environment Policy to be printed and SC's to locate on the Environment noticeboards
All sampled Control of Substances Hazardous to Health (COSHH) assessments were not reviewed on their specified review dates: -COSHH Database Mr Muscle All Purpose Cleaner 300414 V2384 22 Feb 2010, review date Feb 2013; -COSHH Database Comma Silicone Spray 300414 SS500M 21 Mar 2011, review date Mar 2014	Health and Safety to carry out a review of COSHH assessments. They all have a review date on the form, it is not a legal requirement to have this, so in order for these not to become out of date, the review date should be removed or noted that the review is only required after any chemical composition changes to products.

- 1.10 Two 'Opportunities for Improvement' were observed regarding COSHH sheets having an out of date review date and the need for abnormal and emergency conditions to be considered for diesel generator aspect as these reflect the intended operating parameters.
- 1.11 Table 3 below, details the External audit findings since 2015. The figures demonstrate that most audit findings occur as part of the recertification process, in particular with regards to addressing the requirements of a new standard as was the case in 2017 and 2020. Performance identified at the interim validation audits continues to remain at a high standard.

Table 3: External Audit Findings

External Audits	2015	2016	2017 (recertification)	2018	2019	2020 (recertification)	2021
Major	0	0	0	0	0	0	0
Minor	1	1	6	0	1	3	3
Opportunity for Improvement	1	0	7	2	1	2	2
Total	2	1	13	2	2	5	5

Internal Audit Programme

- 1.12 Internal audits cover environmental legal compliance, contract tendering, contract management, environmental data verification, and the EMS compliance with the Standard. High risk stations and departments, as determined by the environmental aspects review, are audited annually. The outcome of these audits is captured in the sections below.
- 1.13 Environmental aspects are any element of the organisation's activities, products or services that interact or can interact with the environment e.g. storage of diesel fuel. Environmental aspects and impacts are scored for risk of potential pollution and are reviewed six monthly to account for any changes to activities. There were no significant changes to the environmental aspects in 2021, however the following the external auditor's recommendation, abnormal and emergency conditions were updated for the diesel generator aspect.
- 1.14 The risk score along with the 'Degree of Control' determined by the previous internal EMS audit forms the basis for setting subsequent audit programmes.

Station Audits and Trends

- 1.15 During the 2021 audit cycle one Major Fault was identified through the Croydon internal audit. The major fault relating to Babcock training using full old foam containers as ballast for forklift training. Additionally, 31 Minor Faults and 38 Opportunities for Improvement were raised from the eleven Station audits completed to date.
- 1.16 The auditor awards a 'Degree of Control' score over environmental risks, where five indicates the highest degree of control and one indicates the lowest as shown in table 4.
- 1.17 To ensure continual improvement of the EMS, an annual review is undertaken of station risks. The most recent reviews identified the management of petrol storage at Operational Support Unit locations, and changes to foam training Station locations; increasing the overall risk scores for Ealing, Wandsworth and Old Kent Road Fire Stations, moving them into the 'high risk' category. The Sustainable Development team are currently waiting on a response from BSI to confirm the addition of the above-named stations to the EMS.

Table 4: Degree of Control over Environmental Risk

Degree of Control Score	Major	Minor	Other factors that may influence score
5 Excellent	0	0	Excellent management of risks
4 Good	0	1-3	Good management of risks
3 Minimum Acceptable	0	4-6	N/A
2 Poor	1-3	7-8	N/A
1 Unacceptable	4+	9+	N/A

1.18 A summary of findings and audit trends from station audits for 2021/22 (where completed), is given in Table 5 below. The data indicates a reduction in stations scoring excellent, this can be attributed to the amended degree of control scoring criteria which occurred in 2020. The general management of environmental risk identified by Stations is of a good standard.

Table 5: Station Audit Summary.

Station	Category of Finding									
	Major Faults		Minor Faults		Opportunity for Improvement		Noteworthy Efforts		Degree of Control	
	20/21	21/22	20/21	21/22	20/21	21/22	20/21	21/22	20/21	21/22
Barking	0	0	-	3	-	4	-	2	4	4
Croydon	0	1	-	2	-	7	-	1	4	2
Feltham	0	-	-	-	-	-	-	-	3	-
Finchley	0	0	3	3	2	1	1	2	4	4
Forest Hill	0	0	-	4	-	5	-	4	4	3
Harrow	0	-	2	-	1	-	1	-	4	-
Kentish Town	0	0	3	2	3	3	1	2	4	4
Kingston	0	0	-	3	-	2	-	1	4	4
Northolt	0	-	2	-	2	-	2	-	4	4
Poplar	0	0	5	3	5	2	1	1	3	4
Sutton	0	0	-	0	-	3	-	2	4	5
Wandsworth	-	0	4	4	3	2	2	2	3	3
Ealing	-	-	3	-	2	-	2	-	4	3
Old Kent Road	-	-	4	-	3	-	2	-	3	-
Total	0	1	26	24	21	29	12	17		

*2 audits for 2021/22 are due in quarter 4.

1.19 In 2021 the Minor Faults identified were for:

- Incorrect management of waste and recycling (9 instances at 7 stations)
 - Spill management of DERV tanks (4 instances at 4 stations)
 - Incorrect management of hazardous waste (5 instances at 5 stations)
- 1.20 One major fault was identified at Croydon and an out of scope major fault was identified at Twickenham.
- 1.21 The major fault at Croydon was due to old foam concentrate being stored in bulk and not stored correctly, in accordance to Brigade Policy and regulations. The foam concentrate was not banded, not contained away from weather and there were no spill skits available for foam on site. The foam was being used as ballast in forklift training by Babcock, raising it to heights without any regard for the contents of these containers. This has subsequently been closed off. Babcock arranged the correct disposal of foam containers as hazardous waste, and an investigation into forklift training at sites has confirmed that this practice was not occurring at any other sites and will not happen in the future.
- 1.22 The out of scope major fault identified at Twickenham was a diesel spill from the generator and has been reported to the Environment Agency and dealt with accordingly, including the clean up and remediation of the generator room, in line with the Environment Agency's recommendations.
- 1.23 Internal audit findings for 2021 indicate a continued trend of improved control over storage of chemicals (1 instance) and storage and spill management of foam, no minor faults were recorded for this.
- 1.24 In the previous external audit, a recommendation to include a physical spill test at each internal station audit was identified. The audit procedure now includes a spill drill exercise, in which the station auditee is presented with a spill scenario, they are requested to demonstrate the steps they would take to remediate the spill. The exercise is documented and photographed at the time of the audit. If the spill is not dealt with correctly in accordance with PN747 (Polluting material storage and spillage procedure), a minor fault would be raised. No minor faults have been raised for this during the 2021/22 audit cycle.

Department Audits

- 1.25 All high risk rated departments have been audited in the 2021/22 audit cycle, this is ahead of schedule. The low risk rated department audits including Communications, and Strategy and Risk are scheduled to be completed in Quarter 4, between January and March 2022.
- 1.26 The Property department were audited in October 2021, one Opportunity for Improvement and two Minor Faults were raised. The Opportunity for Improvement was due to the department not currently having a representative attending the Sustainable Development Working Group meetings. The Minor faults were raised because the Property department do not currently have a system in place for ensuring new starters complete the Environment Matters online training and the department does not currently have any Green Champions.
- 1.27 The audit of the Technical and Commercial department took place in October 2021. The audit found two Opportunities for Improvement and two Minor Faults. The Opportunities for Improvement were raised because environment updates are not currently communicated across the department on a regular basis, and the department do not currently have an action log for the Sustainable Development Working Group meeting. The Minor Faults were raised

due to new starters not currently being asked to complete the Environment Matters Training and the second was due to the Sustainable Development Strategy target of incorporating Responsible Procurement into contract management database still being outstanding.

- 1.28 The Operational Policy department audit was completed in March 2021 and raised six Opportunities for Improvement and two Minor Faults. The first Minor Fault was raised due to two policies having been updated and not have had Sustainable Development Impact Assessments completed, and the second Minor Fault was due to the Environment Agency Local Working Agreement having not been amended since the 2013 version. Work is currently taking place to update this and a decision with the Environment Agency will be taken to what template to use.
- 1.29 The Fire Stations department audit was completed in November 2021 and raised three Minor Faults. The first Minor Fault was raised due to there not being a specific procedure in place for the handover of ownership of the EMS at each high-risk station when station commanders change. The second Minor Fault was for not having a Green Champion within the South East area team. The final Minor Fault was for not having a system in place for ensuring new starters complete the Environment Matters online training.
- 1.30 Across all the department audits, the most common finding was that there were no strategies in place to ensure that all new starters are required to complete the online Environment Matters training course.

Internal Compliance Audit

- 1.31 A Compliance audit took place in September 2021 and the audit was finalised in October 2021. This audit found there to be a good level of environmental control. Two minor faults were identified, as detailed in appendix 2.
- 1.32 Since the previous compliance audit, improvements in compliance tracking has taken place and the work being undertaken to move over to the Bellrock system. This meant the audit was completed within the appropriate timeframe.

Contract Audits

- 1.33 One contract audit for Bristol Uniforms is currently in progress and a contract audit for Babcock Training is due in Quarter 4.
- 1.34 Previously, there have been separate contract and contract management audits, the SD team are currently reviewing this process to amalgamate the processes. This is due to the restructure of Technical Service Support and the move to category management.

MOPAC Audits

- 1.35 MOPAC completed an internal data and system audit in July 2021, this was previously two separate audits but going forward this will be a combined process. MOPAC audits provide a degree of independence for the activities managed by the Sustainable Development team, who also manage the EMS. This review focused on the achievement of clause 9 (Performance Evaluation) of the EMS framework, and the use of data in relation to energy use by LFB's vehicle fleet.

- 1.36 The draft report was issued in July 2021 and found LFB's assurance rating to be Substantial. The control framework is sound and operating effectively to mitigate key system risks. However, there were found to be some administrative areas where the control environment could be improved.
- 1.37 A follow up review is conducted within 12 months after the issue of the final report to give an updated assurance on the control framework. In addition, the findings are monitored by MOPAC quarterly.
- 1.38 The report has received a substantial assurance rating with three medium priority actions. One minor was raised for an outdated reference to Policy 628 in the Environmental Management System (EMS) manual, one for not having updated the version control tab adequately on the Report Fleet spreadsheet, and one for a discrepancy between a figure in the 2018/19 report and the equivalent historical figure quoted in the 2019/20 report. Further detail of the minor faults and required actions are listed in appendix 2. All actions have already been implemented.

Table 6: MOPAC Data and System Audits

MOPAC Audits	2015	2016	2017	2018	2019	2020	2021
Assurance Rating	Substantial	Substantial	Adequate	Adequate	Adequate	Substantial	Substantial
High Priority Findings	0	0	0	0	0	0	0
Medium Priority Findings	1	1	2	3	3	0	3
Low Priority Findings	2	0	0	0	0	0	0
Total	3	1	2	3	3	0	3

Training and Awareness

- 1.39 The Middle Manager Environment Protection training provides premises managers information on the environmental risks and responsibilities at Stations. Due to COVID restrictions, no courses were able to take place.
- 1.40 Guidance has been developed for both stations and departments on EMS audits and support is provided prior to external audit for those involved.
- 1.41 The bespoke LFC Environmental guidance tool, 'Environment Matters' has had 1023 people complete it to date. The module covers awareness of good practice in:
- managing and recycling waste
 - energy efficiency

- chemical use and storage
- water use and conservation
- hazardous waste management and disposal
- biodiversity
- foam and fuel use
- low emission vehicles
- environmental protection at stations

1.42 The Sustainable Development team engaged with the Training and Personal Development Department and 'Environment Matters' has been added to Big Learning and included in the Firefighter development pre-course learning.

2. Objectives and expected outcomes

2.1 The ISO 14001 Standard requires top management to review the EMS at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. The Management Review function for the EMS is to be completed annually by the Commissioners Board (CB).

2.2 Objectives and targets for the EMS are drawn from the Sustainable Development Strategy 2016-2021 (FEP 2580) and the Single Environment Plan as approved on 31st July 2019, which details 5 aims and 13 actions relating to: air quality; green infrastructure; climate change mitigation and energy; waste; and adapting to climate change. Progress against these aims is underway, with no actions overdue. Performance against the targets and highlights of progress on actions is included in the Sustainable Development Annual Report.

3. Equality comments

3.1 The LFC and the Deputy Mayor for Fire and Resilience are required to have due regard to the Public Sector Equality Duty (section 149 of the Equality Act 2010) when taking decisions. This in broad terms involves understanding the potential impact of policy and decisions on different people, taking this into account and then evidencing how decisions were reached.

3.2 It is important to note that consideration of the Public Sector Equality Duty is not a one-off task. The duty must be fulfilled before taking a decision, at the time of taking a decision, and after the decision has been taken.

3.3 The protected characteristics are: age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership (but only in respect of the requirements to have due regard to the need to eliminate discrimination), race (ethnic or national origins, colour or nationality), religion or belief (including lack of belief), sex, and sexual orientation.

3.4 The Public Sector Equality Duty requires decision-takers in the exercise of all their functions, to have due regard to the need to:

- eliminate discrimination, harassment and victimisation and other prohibited conduct
- advance equality of opportunity between people who share a relevant protected characteristic and persons who do not share it
- foster good relations between people who share a relevant protected characteristic and persons who do not share it.

3.5 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- remove or minimise disadvantages suffered by persons who share a relevant protected characteristic where those disadvantages are connected to that characteristic
 - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it
 - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- 3.6 The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.
- 3.7 Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
- tackle prejudice
 - promote understanding.
- 3.8 An Equality Impact Assessment (EIA) was undertaken on 25/10/2021. The impact assessment identified the EMS would indirectly have a positive impact for equalities, ensuring sound management practices of environmental risks will benefit all members of staff and the broader community equally. The ISO 14001 Standard is applied equally to all sites and departments according to the relevant environmental risks.

4. Other Considerations

Workforce comments

- 4.1 This report outlines progress in delivering on an EMS according to the ISO standard. There are no significant changes proposed to the implementation of the Environmental Management System, and there are no direct implications associated with this report requiring staff side consultation

Sustainability comments

- 4.2 The intended outcomes of the EMS are to enhance LFC's environmental performance, protect the environment, meet its compliance obligations and other requirements, and fulfil its environmental objectives. The EMS provides assurance that environmental compliance requirements are met, and continual improvement options are identified and taken forward as appropriate.

Procurement comments

- 4.3 This report outlines progress in delivering on an EMS according to the ISO standard. There are no significant changes proposed to the implementation of the Environmental Management System, and there are no direct implications associated with this report regarding procurement.

5. Financial comments

- 5.1 The Chief Finance Officer has reviewed this report and has no comments.

6. Legal comments

- 6.1 Under section 9 of the Policing and Crime Act 2017, the London Fire Commissioner (the "Commissioner") is established as a corporation sole with the Mayor appointing the occupant of that office. Under section 327D of the Greater London Authority Act 1999 (GLA Act 1999), as amended by the Policing and Crime Act 2017, the Mayor may issue to the Commissioner specific or general directions as to the manner in which the holder of that office is to exercise his or her functions.
- 6.2 Under section 351A of the GLA Act 1999 the Mayor is required to prepare and publish a London Environment Strategy. Under s373 of the GLA Act 1999 the Commissioner must have regard to the London Environment Strategy while exercising any function.
- 6.3 One of the core principles of the London Environment Strategy is that the Mayor and the GLA Group, including LFC, should lead by example in tackling environmental challenges.
- 6.4 Additionally, the Commissioner has adopted the CIPFA/SOLACE Framework Delivering Good Governance in Local Government which sets out the core principles on which effective governance should be built, including defining outcomes in terms of sustainable economic, social, and environmental benefits. The subject of this report evidences how the Commissioner reviews the effectiveness of the organisation in following the core good governance principles in this regard.
- 6.5 International Standards Organisation (ISO) 14001 certification is an internationally agreed standard that sets out the requirements for an environmental management system. Its design assists the Commissioner improve its environmental performance through more efficient use of resources and reduction of waste.
- 6.6 Having had regard to the London Environment Strategy and the Commissioner's own scheme of governance the use of ISO 14001 along with the audits referenced in this report are consistent with the duties set out therein.
- 6.7 Furthermore, the actions referenced above fall within Section 5A Fire and Rescue Services Act 2004 (FRSA 2004), under which the London Fire Commissioner may do 'anything it considers appropriate for the purposes of the carrying out of any of its functions...'

List of Appendices

Appendix	Title	Open or confidential
1.	External Certification Assessment Plan	Open
2.	Audit Findings	Open

Part 2 Confidentiality: Only the facts or advice considered to be exempt from disclosure under the FOI Act should be in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form – YES/NO

ORIGINATING OFFICER DECLARATION:

Drafting
officer to
confirm the
following
(✓)

Drafting officer

Milly Osborne has drafted this report and confirms the following:

Assistant Director/Head of Service

Jonathan Reid has reviewed the documentation and is satisfied for it to be referred to Board for consideration.

Advice

The Finance and Legal teams have commented on this proposal:

Natasha Singh Legal Advisor, on behalf of General Counsel (Head of Law and Monitoring Officer)

Omolayo Sokoya Financial Advisor, on behalf of the Chief Finance Officer

Appendix 1

External Certification Assessment Plan		Audit 2	Audit 3	Audit 4
Business Area/Location	Date (mm/yy)	7/22	7/23	7/24
	Duration (days)	3	3	3
Opening Meeting - review of previous report, changes, incidents, complaints and regulatory communications		X	X	X
Context of the Organisation - context, interested parties, scope and general EMS requirements			X	X
Leadership and Commitment - Policy, Commitment, Roles and Responsibilities			X	X
Top Management Interview			X	X
Planning for Risks and Opportunities			X	X
Aspects and Impacts		X		X
Compliance Obligations and Evaluation of Compliance - legal requirements, needs and expectations of interested parties		X	X	X
Objectives and Targets		X	X	X
Management Review		X	X	X
Support Functions		X	X	X
Communication - internal and external			X	X
Training and Competence			X	X
Control of Documented Information		X	X	X
Resources		X		X
Operational Control and Change Management			X	
Monitoring and Measuring, Performance Evaluation		X	X	
Internal audits, nonconformity, corrective and preventive actions		X	X	X
General Improvement			X	X
Technical Specialist		X		
Strategic Review			X	
Site tour of Stations/Sites: training, operational controls, communication, emergency response				
Union Street		X		
Operational Support Centre (OSC)				
Barking		X		
Croydon				
Feltham			X	
Finchley				X
Harrow				X
Kentish Town		X		
Kingston				
Northolt				X
Poplar		X		
Sutton				
Old Kent Road				X
Wandsworth			X	
Ealing			X	
Departmental Review (1 High Risk detailed below and 1-2 Low Risk)				
Operational Policy				

Procurement			X
TSS	X		
Fire Stations		X	

Appendix 2

Audit findings

Finding- Minor	Corrective Action
External Surveillance Audit	
The compliance register has not identified the requirement for 5-yearly air conditioning inspections (TM-44), resulting in gaps in evaluation of compliance and expired TM-44 at Croydon Fire Station (legal noncompliance).	Property have already agreed to carry out a review of all air conditioning units and check against compliance on the government website SD team to include TM-44 checks in the compliance audits going forward
Environmental policy located on Croydon and Kingston station noticeboards is not current (and signed by previous CEO).	SD team to arrange with Print Services, copies of the glossy Environment Policy to be printed and SC's to locate on the Environment noticeboards
All sampled COSHH assessments were not reviewed on their specified review dates: - COSHH Database Mr Muscle All Purpose Cleaner 300414 V2384 22 Feb 2010, review date Feb 2013; -COSHH Database Comma Silicone Spray 300414 SS500M 21 Mar 2011, review date Mar 2012,	Health and Safety to carry out a review of COSHH assessments. They all have a review date on the form, it is not a legal requirement to have this, so in order for these not to become out of date, the review date should be removed or noted that the review is only require after any chemical composition changes to products.
MOPAC Audit	
One outdated reference to Policy 628 in the Environmental Management System (EMS) manual which needs to be updated or removed.	The EMS Manual should be reviewed and updated to ensure that the reference to Policy 628 is either removed or updated as appropriate.
The Report Fleet spreadsheet includes version control, but that this had not been completed and MOPAC were unable to confirm the date of the latest revision or that the document is being regularly reviewed and updated to ensure calculations are correct.	The existing version control table in the spreadsheet should be updated with immediate effect both in the current spreadsheet and in subsequent versions relating to future years.
One fleet data point in Appendix A of the Sustainability Development Report (Frontline fleet CO2 Emissions (t)) for which there was a discrepancy between the figure in the 2018/19 report and the equivalent historical figure quoted in the 2019/20 report. Upon investigation, MOPAC noted that this apparent discrepancy resulted from the inclusion of electric charging emissions but	An appropriate footnote will be added to the identified data point in the 2020/21 report which is currently being drafted.

that there had been no explanatory footnote in the report.	
Compliance Audit	
Walthamstow had solar panels removed and replaced in July 2021. Waste transfer not evidenced for the project	Waste consignment notes to be located and evidence provided to SD team
Croydon TM44 overdue but order has been placed for survey to be delivered.	Property have already agreed to carry out a review of all air conditioning units and check against compliance on the government website

Major faults	
Old foam concentrate being stored in bulk and not stored correctly, in accordance to Brigade Policy and regulations- the foam concentrate was not banded, not contained away from weather and there were no spill skits available for foam on site. The foam was being used as ballast in forklift training by Babcock, raising it to heights without any regard for the contents of these containers.	<p>At the time of the audit a hazardous waste collection was arranged with property to remove the foam containers that were visible</p> <p>SD team to contact training and development and the Babcock contracts manager to identify whether additional foam containers were stored in the boxes higher in the racking. Completed</p> <p>Investigate Babcock locations that carry out forklift training. Completed</p> <p>If more containers are identified, these will need to be removed via hazardous waste disposal</p>
It was confirmed that there was a fuel leak from the diesel generator. The generator was checked and found a glass bowl at the bottom of the fuel filter was smashed, causing fuel tank contents to completely drain.	<p>The contractors cleaned up the spillage using 10 absorbent pads and isolated the generator. On 25/05/2021 the contractor returned and replaced the fuel filter assembly, re-filled with fuel and carried out a test run which was all okay.</p> <p>Generators to be added to Station Information and Risk Completed</p> <p>The concrete floor cleaned by contractors on 04/06/2021</p>

	<p>It is being investigated how the glass bowl came to be smashed and the possibility of building a small bund wall around the generator to prevent a situation like this happening again</p> <p>Completed</p>
--	---