



## **Risk Committee of the Barbican Centre Board**

**Date:** WEDNESDAY, 23 JANUARY 2019  
**Time:** 9.30 am  
**Venue:** COMMITTEE ROOMS, 2ND FLOOR, WEST WING, GUILDHALL

**Members:** Deputy Tom Sleigh (Chairman)  
Deputy Dr Giles Shilson (Deputy Chairman)  
Russ Carr (External Member)  
Alderman David Graves  
Deputy Wendy Hyde  
Alisdair Nisbett (External Member)  
Judith Pleasance  
Deputy John Tomlinson

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**N.B. Part of this meeting could be the subject of audio or visual recording**

**John Barradell**  
**Town Clerk and Chief Executive**

## **AGENDA**

1. **APOLOGIES**

2. **DECLARATIONS BY MEMBERS OF ANY PERSONAL AND PREJUDICIAL INTERESTS IN RESPECT OF ITEMS ON THIS AGENDA**

3. **MINUTES**

To agree the public minutes of the meeting held on 5 November 2018.

**For Decision**  
(Pages 1 - 4)

4. **OUTSTANDING ACTIONS**

Report of the Town Clerk.

**For Information**  
(Pages 5 - 6)

5. **INTERNAL AUDIT UPDATE**

Report of the Head of Internal Audit & Risk Management.

**For Information**  
(Pages 7 - 22)

6. **HEALTH AND SAFETY UPDATE**

Report of the Director of Operations and Buildings.

**For Information**  
(Pages 23 - 30)

7. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

8. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

9. **EXCLUSION OF THE PUBLIC**

MOTION – That under Section 100A of the Local Government Act 1972, the public be excluded from the meeting for the following items, on the grounds that they involve the likely disclosure of Exempt Information, as defined in Part 1, of Schedule 12A of the Local Government Act

**For Decision**

10. **NON-PUBLIC MINUTES**

To agree the non-public minutes of the meeting held on 5 November 2018.

**For Decision**  
(Pages 31 - 32)

11. **RISK UPDATE REPORT AND RISK REGISTER**

Report of the Director of Operations and Buildings.

**For Information**  
(Pages 33 - 90)

12. **PROGRAMMING RISK REGISTER**  
Report of the Artistic Director.

**For Information**  
(Pages 91 - 98)

13. **NON-PUBLIC QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**
14. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

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## RISK COMMITTEE OF THE BARBICAN CENTRE BOARD

**Monday, 5 November 2018**

Minutes of the meeting of the Risk Committee of the Barbican Centre Board held at Committee Rooms, 2nd Floor, West Wing, Guildhall on Monday, 5 November 2018 at 3.00 pm

### **Present**

#### **Members:**

Deputy Tom Sleigh (Chairman)  
Russ Carr (External Member)

Deputy Wendy Hyde  
Alisdair Nisbett (External Member)

#### **Officers:**

Sir Nicholas Kenyon	- Managing Director,
Sandeep Dwesar	- Chief Operating & Financial Officer, Barbican Centre
Pat Stothard	- Head of Internal Audit and Risk Management
Jonathon Poyner	- Director of Operations & Buildings, Barbican Centre
Sarah Wall	- Interim Head of Finance, Barbican Centre
Adrian Morgan	- Head of Commercial Development, Barbican Centre
Jackie Boughton	- Head of Business Events, Barbican Centre
Jo Davis	- Head of Retail, Barbican Centre
Neil McConnon	- Head of BIE
Leanne Murphy	- Town Clerk's Department

### **1. APOLOGIES**

Apologies were received from Deputy Dr Giles Shilson, Alderman David Graves, Judith Pleasance and Deputy John Tomlinson.

### **2. DECLARATIONS BY MEMBERS OF ANY PERSONAL AND PREJUDICIAL INTERESTS IN RESPECT OF ITEMS ON THIS AGENDA**

Alisdair Nesbitt declared that he was a Trustee of the Barbican Centre.

### **3. MINUTES**

The public minutes of the meeting held on 4 July 2018 were approved.

### **Matters arising**

With regards to the Internal Audit update, the Head of Internal Audit advised that there was no strategy document but a two-year plan listing strategic objectives had been developed and went to the Audit & Risk Committee for approval.

A Member requested a document that reflected how this had been developed highlighting the need for the Committee (and others) to understand the reasoning behind priorities. The Head of Internal Audit advised that this could not be provided until an audit plan was set identifying the terms of reference but

offered to put together a document concerning the process used. He confirmed that all decisions were approved by the Audit & Risk (A&R) Committee.

The Chairman queried who decided what is looked at and when. Members were advised that the planning process began in January with Officers looking at objectives, concerns and previous findings and identify risks feeding the risk register into the process. This was then agreed by the A&R Committee. Members argued that the Committee should feed into the process before plans went to the A&R Committee for approval.

Members agreed transparency around the reasoning of priorities and decisions was needed in the process.

4. **OUTSTANDING ACTIONS**

The schedule of outstanding actions was received and the various updates noted.

RECEIVED.

5. **INTERNAL AUDIT UPDATE**

The Committee received a report of the Head of Internal Audit providing an update on Internal Audit activity undertaken at the Barbican Centre since July 2018. The following comments were made:

- The Head of Audit and Risk Management advised the Committee that the Equalities & Inclusion audit had been finalised and an internal audit had been undertaken. It was noted that there was no direct impact on the Barbican from these audits.
- Members were advised that Appendix 5 set out the status of assignments of the 2018-19 Audit Plan implementing all management decisions and change in dates.
- A Member felt that an item regarding the Trust was needed as this was a different legal entity and therefore required a box of its own for review. It was noted that there was potentially a GDPR risk as the Trust can only operate if the Barbican gave indemnity. The Member therefore felt that this required auditing as there was a contractual arrangement giving the ability to share data. Members were advised that the Corporation's GDPR process was audited. The Head of Audit and Risk Management agreed to look at this offline.
- A Member voiced concern that the new catering contract started in October 2018 and was working without formal agreement being signed. Members were advised that the new contract was not yet signed but it did address all concerns voiced by the Committee. The Committee felt that this should have been dealt with before the contract began and needed to be resolved as soon as possible.

RESOLVED – That Members note the delivery position for the 2017-18 Internal Audit Plan, including audit review outcomes since the last Internal Audit Update report in July 2018, the number of outstanding high priority recommendations, and 2018-19 Audit Plan progress.

6. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

7. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

There were no urgent items.

8. **EXCLUSION OF THE PUBLIC**

RESOLVED – That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A of the Local Government Act.

Item No.  
9-14

Paragraph No.  
3

9. **NON-PUBLIC MINUTES**

The non-public minutes of the meeting held on 4 July 2018 were approved.

10. **STOCK MANAGEMENT FOR BARBICAN RETAIL AND BARS**

The Committee received a report of the Chief Operating & Financial Officer providing an update on the Internal Audit of the Barbican Retail and Bars operations, with specific reference to stock management issues.

11. **RISK UPDATE**

The Committee received a report of the Director of Operations and Buildings advising Members of the risk management system in place at the Barbican, updating on the significant risks that had been identified and outlining measures for mitigation of these risks.

12. **PROGRAMMING RISK UPDATE**

The Committee received a report of the Artistic Director concerning potential risks associated with forthcoming programmed activities at the Barbican Centre.

13. **NON-PUBLIC QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

14. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

There were no urgent items.

**The meeting ended at 3.45 pm**

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Chairman

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## Risk Committee of the Barbican Centre Board

### Outstanding actions

	<b>Action</b>	<b>Notes/Description</b>	<b>Officer responsible</b>	<b>Date added</b>	<b>Status</b>
<b>1.</b>	<b>Internal Audit update</b>	The Committee to be provided with a document outlining the process used in the audit.	Head of Audit and Risk Management	Nov 2018	Jan 2019
<b>2.</b>	<b>Programming Risk update</b>	Officers to reassess how the programming risks are set out, e.g. ordered by performance date.	Artistic Director	Nov 2018	Jan 2019
<b>3.</b>	<b>Programming Risk update</b>	The Managing Director to raise how the Barbican manages its relationships with others with Marts & Lundy.	Managing Director	Nov 2018	Jan 2019

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<b>Committee:</b>	<b>Date:</b>
Risk Committee of the Barbican Centre Board	23 <sup>rd</sup> January 2019
<b>Subject:</b> Internal Audit Update Report	<b>Public</b>
<b>Report of:</b> Head of Internal Audit and Risk Management	<b>For Information</b>
<p><b>Summary</b></p> <p>This report provides an update on Internal Audit activity undertaken at the Barbican Centre between November 2018 and January 2019, as well as a status update in respect of the schedule of planned work for 2018-19 (Appendix 1).</p> <p>Delivery of 2018-19 planned audits is in progress. Audit fieldwork has been completed in respect of the audit of Strategic Planning, Monitoring and Implementation, and the draft report is being prepared. Audit fieldwork is underway in respect of the audit of Barbican Events, for which the audit terms of reference have been finalised, and assignment planning is underway in respect of the remaining projects within the agreed plan.</p> <p>A recent corporate follow-up exercise has recently been completed in respect of all live red and amber priority recommendations due for implementation by 30th November 2018. This corporate exercise is undertaken approximately quarterly, in line with the City's Audit and Risk Management Committee reporting cycle, and there were 13 such Barbican recommendations which were within scope. The corporate follow-up outcome is detailed below.</p> <p>This Committee receives an update on the Barbican live high priority recommendation position at each meeting. Appendix 2 provides a breakdown of recommendation statuses, original target dates, revised target dates and Barbican Management comments in respect of progress, where supplied.</p> <p>There are two live (partially implemented) red priority recommendations as at the end of December 2018, both of which arose from the Guildhall School audit of the Baxter Storey catering contract which included services provided to the Barbican. A revised target date has been supplied for one of these recommendations and the remaining recommendation cannot be closed until such time as the new corporate contract is signed</p> <p>The Internal Audit Strategy 2018-19, as previously agreed by this Committee, is attached at Appendix 3. Internal Audit are liaising with Barbican Management to agree the scope and timing of audit coverage in 2019-20. Members' views are sought on proposed audit areas.</p> <p><b>Recommendation(s)</b></p> <p><b>Members are asked to note the status of planned audit work for 2018-19, the outcome of the recent corporate follow-up exercise, the live high priority recommendations position and proposed audit coverage in 2019-20 based on the previously agreed Internal Audit Strategy 2018-21.</b></p>	

## **Main Report**

### **Background**

1. This report provides an update on audit work progressed since the update to this Committee in November 2018 and includes a summary of the status of all 2019-19 audits reviews (Appendix 1). A recent corporate follow-up exercise, undertaken approximately quarterly in line with the City's Audit and Risk Management Committee reporting cycle, has examined implementation progress of Barbican high priority recommendations due for implementation by 30<sup>th</sup> November 2018 and the outcome is detailed below. Additionally, the live high priority recommendation position is reported to each meeting of this Committee and as at the end of December 2018 there are 19 such recommendations.
2. The Internal Audit Plan 2018-2021, as agreed previously by this Committee, is attached and includes proposed audit areas for 2019-29 for consideration and comment. Internal Audit are liaising with Barbican Management to agree audit coverage for 2019-20, including the scope and timing of audits.

### **Delivery of Planned Internal Audit Work**

3. An analysis of the status of reviews within the 2018-19 audit plan is attached at Appendix 1. The terms of reference for one audit – Barbican Events - have been finalised since the last report to this Committee and fieldwork is in progress; the report is being drafted in respect of the audit of Strategic Planning, Monitoring and Implementation, and assignment planning is in progress in respect of the remaining audits related to Financial Monitoring and Income Generation, IT Projects, and Fraud Risk Management. Delivery of the audit plan for 2018-19 to draft report stage is anticipated by 31<sup>st</sup> March 2019.
4. The audit of Barbican Events is focused on decision-making processes, contract management and cancellation arrangements, as follows:
  - Decision-making processes related to event programming, including risk assessment, approval arrangements and demonstration of alignment with the strategic vision and associated goals.
  - Established contractual arrangements for every event type setting out the responsibilities of each party, financial terms and cancellation procedures.
  - Defined roles, responsibilities and procedures for event contract management and processes in operation to ensure that contractual requirements are met.
  - Monitoring and reporting of event activity to senior management to enable evaluation of outcomes, including financial performance, against the Barbican's strategic goals.
5. Audit fieldwork is in progress and has focused initially on the decision-making for Artistic Events. Commercial Events are within the scope of audit and will form the basis of the next phase of audit fieldwork.

## Corporate Follow-Up Exercise

6. The corporate high priority (red and amber) recommendation monitoring process is operating on an approximately quarterly basis. Recommendations are assessed as “implemented” only where suitable evidence has been provided to Internal Audit, rather than advised by management / recommendation owners. Where evidence is not provided, recommendations are assessed as either partially or not implemented and a revised target is agreed, recognising the Audit and Risk Management Committee view that there should be only one extension to implementation deadlines.
7. The corporate follow-up exercise has recently been completed in respect of all live red and amber priority recommendations due for implementation by 30<sup>th</sup> November 2018 and there were 13 such recommendations related to the Barbican. Status updates were sought from recommendation owners and evidence was requested of progress in implementation. The Barbican follow-up outcome will be reported to the January 2019 meeting of the City’s Audit and Risk Management Committee, as follows:

Implementation Evidenced	Partially Implemented	Not Implemented	Total
9	1	3	13
Internal Audit comment: Revised target timescales have been supplied in respect of the four outstanding high priority recommendations. Explanations for implementation slippage have been supplied in respect of the outstanding recommendations.			

8. Details of these four live high priority recommendations (i.e. not implemented or only partially implemented) are summarised below. The analysis for the January 2019 meeting of the City’s Audit and Risk Management Committee will include a comparison of revised target dates for recommendation implementation against original target dates. The City’s Audit and Risk Management Committee has previously stated its position that revised timescales should be set only in exceptional circumstances and this was reiterated at the September meeting.

Recommendation Area	Status	Original Date	New Target Date
Visitor Experience Strategic Delivery: Definitions	Not Implemented	31/08/18	31/12/19
Visitor Experience Strategic Delivery: SMART Objectives	Not Implemented	30/11/18	31/12/19
Visitor Experience Strategic Delivery: Business Plan Monitoring	Not Implemented	30/11/18	31/12/19
Audit of Equality & Inclusion: Reporting to Management	Partially Implemented	30/09/18	30/06/19

9. Barbican Management have provided the following explanation for the slippage in implementation of the recommendations arising from the Visitor Experience (Strategic Delivery) audit:

*“As agreed with Members, our aim is to create an environment that enables and inspires others to achieve their best. It was agreed that this is to be achieved through the delivery of the following prioritised areas: 1) Compliant, 2) Efficient, 3) Appropriate. We have been delivering a ground-up review and much resultant change and this has meant that people have had to prioritise their finite time on areas of compliance including fire safety and terrorism for example. The Barbican’s Strategic Plan defines the goals, one of which is Visitor Experience, (which, unfortunately, shares its name with one of our teams, causing confusion during the audit). Within that goal are contained the objectives all of which have a direct and indirect impact on audience experience. Within these are projects which deliver change in the areas of audience experience. Our prioritised plan means that we will focus on the points raised in the audit and bring together the projects under the ‘appropriate’ priority. In the meantime, the works under ‘compliant’ and ‘efficient’ have all contributed to the Visitor Experience.”*

10. An assessment of partial implementation has been made in respect of the above recommendation which arose from the audit of Equality and Inclusion; a revised target date of June 2019 has been supplied for the implementation action, when the necessary report is timetabled to go to Barbican Senior Management Team.

### **Live High Priority Recommendations Position**

11. At the time of the last update to this Committee (November 2018), there were 28 live high priority recommendations; nine have since been closed down following the corporate follow-up exercise. As at the end of December 2018 there are two live red priority recommendations related to the Barbican Centre and 17 live amber priority recommendations. A breakdown of these recommendations is shown at Appendix 2 and reflects where revised target dates have been supplied since the last meeting of this Committee; there are eight such recommendations.
12. There are two live (partially implemented) red priority recommendations, both of which arose from the audit, requested by the Audit and Risk Management Committee of the Guildhall School, of the Baxter Storey catering contract. This contract also included services provided to the Barbican and as such is relevant to both entities.
13. One of these recommendations cannot be assessed as ‘implementation evidenced’ until such time as the corporate catering contract, which replaced the one subject to audit, has been signed. Internal Audit acknowledge that progress of signing the contract is outside the control of both the Guildhall School and Barbican Centre.
14. There has been implementation progress in respect of the remaining red priority recommendation and a revised target date of 30<sup>th</sup> April 2019 has been supplied in order to demonstrate that the necessary control is operating consistently over a period of several months.
15. Revised target dates have been supplied to Internal Audit in eight cases since the last report to this Committee and these relate to three audits: Baxter Storey Contract (two recommendations), Visitor Experience Strategic Delivery (five recommendations) and Equality and Inclusion (one recommendation).

16. Internal Audit continues to liaise with recommendation owners to determine the implementation status, closing down recommendations upon receipt of sufficient evidence.

### **Draft Internal Audit Plan 2018-21**

12. The Internal Audit Plan for 2018-21, as agreed previously by this Committee, is attached at Appendix 3. The Plan was prepared using a risk-focused approach and in consultation with the Barbican's Chief Operating and Financial Officer Chamberlain's Department. Internal Audit are liaising with Barbican Management to agree the scope of timing of audit coverage for 2019-20 and an updated three-year plan will be presented to the June 2019 meeting of this Committee. Comment and suggestions for consideration in future internal audit plans are sought from your Committee Members.

### **Conclusion**

13. Delivery of the 2018-19 audit plan is on-going and completion of audit assignments to draft report stage is anticipated by 31<sup>st</sup> March 2019.
14. The scope of a recent corporate follow-up exercise included Barbican high priority recommendations due for implementation by 30th November 2018 and the outcome will be reported to the January 2019 meeting of the City's Audit and Risk Management Committee.
15. Appendix 2 sets out the live high priority recommendations position. There are two live red priority recommendations at as 31st December 2018 and there are seventeen live amber priority recommendations related to the Barbican Centre. Internal Audit follow-up activity will continue to confirm the status of recommendations implementation, closing down recommendations upon receipt of sufficient evidence.
16. Internal Audit are liaising with Barbican Management to agree the scope and timing of audit coverage in 2018-19. Members' views are sought on audit areas proposed within the Internal Audit Plan 2018-21 (Appendix 3) which was agreed previously by this Committee.

### **Appendices**

- Appendix 1 Internal Audit Plan Schedule of Projects 2018-19  
Appendix 2 Barbican Live High Priority Recommendations  
Appendix 3 Internal Audit Plan 2018-2021

Pat Stothard, Head of Audit and Risk Management  
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## Corporate Follow-Up Exercise Outcomes – Recommendations due by 30/11/18

## High Priority (Red &amp; Amber) Recommendations

Department	Implementation Evidenced	Partially Implemented	Not Implemented	Total	Comments
Barbican	9	1	3	13	Revised target timescales have been supplied in respect of the four outstanding high priority recommendations. Explanations for implementation slippage have been supplied in respect of the outstanding recommendations.
Chamberlain's	7	0	9	16	Revised target timescales have been supplied in respect of the nine outstanding high priority recommendations.
Chamberlain's IT	5	1	0	6	A revised target timescale has been supplied in respect of the outstanding high priority recommendation.
City of London Freemen's School	4	1	0	5	An explanation for slippage in implementation and a revised target timescale have been supplied for the outstanding high priority recommendation.
City of London Police	15	0	10	25	Revised target timescales have been supplied in respect of five outstanding high priority recommendations. The risk has been accepted in respect of one outstanding recommendation, evidence of implementation is awaited by Internal Audit in respect of three recommendations and a revised target timescale for implementation is required in respect of the remaining recommendation.
City of London School	1	1	0	2	An explanation for slippage in implementation and a revised target timescale have been

Department	Implementation Evidenced	Partially Implemented	Not Implemented	Total	Comments
					supplied for the outstanding high priority recommendation.
City of London School for Girls	0	3	0	3	Revised target dates for full implementation have been supplied in respect of two of the outstanding high priority recommendations. The remaining recommendation relates to inventory maintenance and is within the scope of a current audit. An updated management response and revised target implementation date will be requested in response to the findings of this audit exercise.
City Surveyor	2	2	0	4	A revised target date has been supplied for full implementation of one of the outstanding (partially implemented) high priority recommendations. A revised target date is required for full implementation of the remaining recommendation.
Community & Children's Services	6	4	6	16	<p>Revised target dates have been supplied for full implementation of eight of the outstanding (2 partially implemented and 6 not implemented) high priority recommendations.</p> <p>Implementation of one of the partially implemented recommendations cannot be confirmed until a particular set of circumstances arises. Revised target date to be confirmed.</p> <p>An update is required in respect of the remaining partially implemented recommendation.</p>

Department	Implementation Evidenced	Partially Implemented	Not Implemented	Total	Comments
Guildhall School of Music & Drama	3	6	2	11	<p>Four of the partially implemented recommendations relate to the new corporate catering contract and cannot be closed down until such time as the contract is signed; this is outside of the control of the Guildhall School and the timescale for full implementation is unknown.</p> <p>A revised target timescale has been supplied for full implementation of one of the partially implemented recommendations.</p> <p>A revised target timescale is awaited in respect of the remaining partially implemented recommendation.</p> <p>Revised target timescales have been supplied for the two 'not implemented' recommendations.</p>
Mansion House	0	0	5	5	Revised target timescales have been supplied for all five outstanding high priority recommendations.
Markets & Consumer Protection	7	2	1	10	<p>A revised target dates has been supplied for full implementation of one of the outstanding (not implemented) high priority recommendations.</p> <p>Members of M&amp;CP management are liaising with Internal Audit and Corporate HR in respect of one remaining partially implemented recommendation and a revised target date for full implementation will be confirmed at the earliest opportunity.</p>

Department	Implementation Evidenced	Partially Implemented	Not Implemented	Total	Comments
					Demonstration of full implementation of the remaining recommendation cannot take place until a particular set of circumstances arises.
Town Clerk's	4	0	2	6	Revised target timescales have been supplied for both outstanding high priority recommendations.
Town Clerk's – Corporate HR	2	0	1	3	A revised target timescale has been supplied by Corporate HR in respect of the outstanding high priority recommendation.
<b>TOTAL</b>	<b>65</b>	<b>21</b>	<b>39</b>	<b>125</b>	
<b>Percentage of total recommendations</b>	<b>52%</b>	<b>17%</b>	<b>31%</b>		

## Schedule of Barbican Centre Live Red and Amber Priority Recommendations – January 2019

Recommendation Area	Priority	Status	Original Target Date	Revised Target Date	Comment
Catering: Use of objective and SMART key performance requirements within similar type contracts to facilitate effective measurement of contractor performance.	Amber	Not Yet Due	01/04/17	31/03/19	Barbican management: this is to be implemented for the next contract as it would be difficult to get any contractually binding agreement in respect of the current arrangement. The current contract is for 5 years from Sept 2015 and the recommendation will be incorporated in the new contract from September 2020. The target implementation date of March 2019 relates to contract specification stage for the new arrangements.
Visitor Experience: Common understanding of 'visitor experience'.	Amber	Not Yet Due	31/08/18	31/12/19*	As agreed with Members, our aim is to create an environment that enables and inspires others to achieve their best. It was agreed that this is to be achieved through the delivery of the following prioritised areas: 1) Compliant, 2) Efficient, 3) Appropriate. We have been delivering a ground-up review and much resultant change and this has meant that people have had to prioritise their finite time on areas of compliance including fire safety and terrorism for example. The Barbican's Strategic Plan defines the goals, one of which is Visitor Experience, (which, unfortunately, shares its name with one of our teams, causing confusion during the audit). Within that goal are contained the objectives all of which have a direct and indirect impact on audience experience. Within these are projects which deliver change in the areas of audience experience.
Visitor Experience: Improved 'Line of sight' between strategic aims and operational activities to embed 'visitor experience' within the organisational culture.	Amber	Not Yet Due	31/01/19	31/12/19*	
Visitor Experience: Business Plan content update to reflect SMART objectives supporting delivery of strategic goals.	Amber	Not Yet Due	30/11/18	31/12/19*	
Visitor Experience: Data measurement, analysis and dissemination to interested parties to facilitate monitoring of delivery against the Strategic Goal.	Amber	Not Yet Due	31/05/19	31/12/19*	

Recommendation Area	Priority	Status	Original Target Date	Revised Target Date	Comment
Visitor Experience: Business Plan progress monitoring to obtain assurance that all the projects / activities relating to the Visitor Experience Strategic Goal are being delivered as anticipated, and performance measures achieved.	Amber	Not Yet Due	30/11/18	31/12/19*	Our prioritised plan means that we will focus on the points raised in the audit and bring together the projects under the 'appropriate' priority. In the meantime, the works under 'compliant' and 'efficient' have all contributed to the Visitor Experience.
Barbican Retail and Bars: Retail stock ordering – increased automation.	Amber	Not Yet Due	31/07/18	31/03/19	Management comment: Numerous talks to work with Revel to solve our issues have taken place but it doesn't look like it will deliver what we need. Retail are working with IT on requirements for a new system and we are going to the market in the next few months. Some system testing on what is out there has already been done and we feel comfortable a new system will meet all our needs. Revised timescale for a procurement decision is 31/03/19.
Barbican Retail and Bars: Retail - online sale system interface with the EPOS system.	Amber	Not Yet Due	31/07/18	31/03/19	
Barbican Retail and Bars: Retail – streamlining of stocktake arrangements.	Amber	Not Yet Due	31/07/18	31/03/19	
Barbican Retail and Bars: Retail – information capture in respect of internal sales.	Amber	Not Yet Due	31/07/18	31/03/19	
Barbican Retail and Bars: Bars – accurate capture of stock cost information on the EPOS system.	Amber	Not Yet Due	30/04/18	31/03/19	
Barbican Retail and Bars: Bars – inclusion of till points within CCTV coverage.	Amber	Not Yet Due	31/05/18	31/12/19	This is being tied in to the larger Barbican wide CCTV project. As this is being procured centrally for all City departments this project has seen a delay to 2019. New deadline - 31st December 2019.

Recommendation Area	Priority	Status	Original Target Date	Revised Target Date	Comment
<u>Baxter Storey (Guildhall School / Barbican)</u> : Contract Documentation	Red	Not Yet Due	03/09/18	TBC	Internal Audit comment: the new corporate catering service is in operation and signing of the contract has been delayed. The Comptroller and City Solicitor's Department is working with City Procurement and client departments to resolve the issues with the contractor but the timescale for signing the contract is unknown.
<u>Baxter Storey (Guildhall School / Barbican)</u> : Formalisation of Service Subsidy and Profit Share Arrangements	Amber	Overdue	03/09/18	TBC	
<u>Baxter Storey (Guildhall School / Barbican)</u> : Introduction of Sanctions for Poor Contractual Performance	Amber	Overdue	03/09/18	TBC	
<u>Baxter Storey (Guildhall School / Barbican)</u> : Contractual KPI Monitoring and Reporting	Amber	Not Yet Due	03/09/18	31/03/19*	The new contract specifies KPIs and arrangements for monitoring. The first KPI review took place in December 2018 and the Team are meeting with other departments/City Procurement to go through their experience and scoring in January 2019. A revised target date supplied for full implementation to enable 3 months of monitoring activity to be demonstrated.
<u>Baxter Storey (Guildhall School / Barbican)</u> : Management of External Health & Safety Inspection Reports	Red	Not Yet Due	22/05/18	30/04/19*	Internal Audit comment: Disagreement over the H&S inspection report examined at the time of audit fieldwork has been resolved. Management comment: The audit took place in December 2018 but monthly reporting won't start until mid-January 2019. A revised target date for full implementation has been set to enable examination of three months' of meeting minutes to demonstrate progress.
<u>Equality &amp; Inclusion</u> : Reporting to Management	Amber	Not Yet Due	30/09/18	30/06/19*	Partially implemented as the arrangements for provision of updates on the strategy to Management Team / Directorate have been agreed. Revised target date supplied for when the report is timetabled to go to SMT.

Recommendation Area	Priority	Status	Original Target Date	Revised Target Date	Comment
Equality & Inclusion: Performing Artists – Use of Third Parties	Amber	Not Yet Due	31/01/19	-	

‘\*’ Denotes revised target date supplied since the November 2018 meeting of the Barbican Risk Committee

Recommendation Status		Partially Implemented	Not Implemented	Revised Target Date To Be Confirmed	Target Date Revised Since November 2018 Committee
Live red priority recommendations	2	2	0	1	1
Live amber priority recommendations	17	8	9	2	7
<b>TOTAL</b>	<b>19</b>	<b>10</b>	<b>9</b>	<b>3</b>	<b>8</b>



**Internal Audit 3 Year Strategy 2018 - 2021**

1. The Internal Audit 3 Year Strategy was developed using a risk-focused approach as set out below. Internal audit identified potential areas of coverage from departmental audits to thematic audit reviews across the City of London Corporation through:
  - Examination of the Corporate Plan and Barbican strategic objectives.
  - Examination of the Barbican risk register, risk mitigation actions, and regular risk updates to the Barbican Risk Committee.
  - Examination of Business Plans to identify priorities, key projects and change programmes.
  - Consideration of key themes identified by the Internal Audit partner, Mazars, the London Audit Group, and from discussion with the Heads of a number of corporate functions.
  - Consultation with Chief Officers or nominated senior managers to identify any particular assurance requirements (for example funding / grant verification work), areas of concern, and operational risks.
  - Consideration of previous audit work and assurance outcomes, including any instances of fraud and irregularity.
  - Consideration of feedback received in respect of audit coverage from the Audit and Risk Management Committee, the Barbican Risk Committee and, where appropriate, the Audit and Risk Management Committee of the Guildhall School of Music and Drama.
2. The indicative Plan is discussed annually with the Barbican's Chief Operating and Financial Officer and the Head of Finance or nominated officer, in their capacity as Audit Liaison. It is Internal Audit's expectation that the draft plan be discussed internally by Barbican senior management and feedback is requested on the potential areas of focus, priorities, potential timing and key contacts for audit assignment planning purposes.
3. Each audit assignment is allocated a sponsor and one or more key contacts. The terms of reference for each audit will be developed following discussion with these parties and the Barbican's Audit Liaison to confirm background information, the overall audit objective and areas within scope, operational and fraud related risks, exclusions to audit, and the resources required (i.e. access to people, systems, and information). Audit terms of reference are finalised prior to fieldwork initiation.
4. There is an annual allocation of contingency days which is available for audits that arise through the year, and the annual Plan remains sufficiently fluid to ensure that the City Corporation's key risks are addressed.

5. Members of this Committee are requested to consider the proposed audit coverage in 2019-20 based on the previously agreed Internal Audit Strategy 2018-21:

<b>Audit Title</b>	<b>2018-19</b>	<b>2019-20</b>	<b>2020-21</b>
Strategic Planning, Monitoring and Implementation	✓		
IT Projects (CRM, Agile Working, Ticketing System)	✓		
Event Contracts (including cancellation arrangements)	✓		
Financial Monitoring and Income Generation	✓		
Fraud Risk Management	✓		
Repairs and Maintenance		✓	
Progression and Professional Development (Artistic Offering/Supporting Artists)			✓
Target Setting and Performance Monitoring		✓	
Sponsorship and Donations		✓	
Safeguarding		✓	
Health and Safety			✓
Security			✓

<b>Committee(s):</b>	<b>Date(s):</b>
Risk Committee of the Barbican Centre Board	23 January 2019
<b>Subject:</b> Health and Safety Update	<b>Public</b>
<b>Report of:</b> Director of Operations and Buildings <b>Report Author:</b> Jonathon Poyner, Director of Operations and Buildings	<b>For Information</b>
<p style="text-align: center;"><b><u>Summary</u></b></p> <p>This report provides an update on the Centre's Health and Safety activities and provision over the last year and agenda items for 2019.</p> <p>For ease of reference, as per previous years, the paper is divided into the following sections, with accompanying information:</p> <ul style="list-style-type: none"><li>• Background/Current Position</li><li>• Certificate of Assurance</li><li>• Audit</li><li>• Health and Safety Committee Meetings</li><li>• Accident Reporting Procedures</li><li>• DSE</li><li>• Top X –Covalent System</li><li>• Health, Safety and Wellbeing Plan and Policy</li><li>• Asbestos Management</li><li>• Water Systems Management</li></ul> <p><b>Recommendation(s)</b> It is recommended that Members note the contents of this report</p> <p>.</p>	

## **Main Report**

### **Background**

1. The purpose of this paper is to advise Members of all Health and Safety (H&S) processes, audits and actions during 2018 and progress items for 2019.

## **Current Position**

2. The Directorate of the Barbican Centre recognises that they have a responsibility to ensure that all reasonable precautions are taken to provide and maintain working conditions that are safe, healthy and comply with all statutory requirements and codes of practice.
3. The Barbican Centre (including its 'Alliance' work with the Guildhall School) has continued to work to ensure ever closer alignment and co-working with the City Surveyor's Department and other departments across the City as appropriate. Members have agreed that we will 'create an environment that enables and inspires others to achieve their best'. It was agreed that this would be achieved through the delivery of services that are prioritised as a) compliant, b) efficient and c) appropriate. It was also agreed that we would use a 'ground-up' review plus the 'Kaizen' approach to continual improvement to identify and prioritise our work load over the years until we reached standards that we felt were appropriate for one of the world's most iconic buildings in one of the most famous cities in the world.
4. This will be achieved by:
  - Adopting a Safety Management Strategy that includes the provision of safe working systems, the provision and maintenance of safe plant and equipment, and appropriate procedures to cater for all significant risks arising from our work activities.
  - A policy supported by the provision of documents outlining safety rules and general procedures for employees' information. These will be subjected to review by management, in conjunction with the Health and Safety Committee as necessary. The safety, organisation and arrangements for implementing the policy will be publicised to all employees.
  - Accepting that the responsibility for achieving and maintaining acceptable standards of safety rests not only with management but also with employees, contractors and suppliers of materials to be used at work.
  - This statement of policy being reviewed and revised as appropriate, to take into account future changes in 'circumstance or legal requirements'.
  - Provision of information, instruction, training and supervision to ensure the health and safety at work of employees and visitors to the Centre.
  - Consultation with our employees on matters affecting their Health and Safety.
  - Maintaining safe conditions in the workplace through risk management procedures.
  - The provision of a safe means of access to and egress from the place of work.
  - Providing a work environment which is appropriately maintained, safe and without risk to health, with adequate facilities and arrangements for welfare at work.

5. Following the findings of our Member agreed 'ground up' review and our Kaizen (continual improvement) approach, and further to our ever-closer working within the wider City corporate context, we have prioritised and delivered many works relating to areas of health and safety and also notably the fire and security risks. This has included much staff training (including for our contractors, where appropriate) and also much City and local resource investment in our assets, and a further review of our policies and procedures.
6. We have continued to review and improve how we work with our partners, including our City-wide contractors (e.g. catering, security and cleaning), visiting contractors (e.g. control of contractors before and during project related works on site) and others including tenants, Resident organisations and our neighbours. This work has included a review of alignment of FRAs (Fire Risk Assessments) for example and also joint fire and security and anti-terrorism training where appropriate.
7. Many fire and security related projects have been delivered, as summarised and prioritised in our many internal and external reviews and as reported to the Health, Safety and Wellbeing Committee and Risk Committee and others. In addition, following the introduction of our CAFM (Computer Aided Facilities Management) system, (provided by a system called 'Micad'), and the change to the BRM2 (Buildings Repairs and Maintenance 2<sup>nd</sup> generation) contract (changing Mitie for Skanska and a review of what key assets were included in the contract) and the restructuring of our teams, we have focussed our resource on reviewing and more-accurately reporting on what needs to be done and what has been done. We will continue to improve in this area and ultimately this will shape and influence our future prioritisation and investment.
8. Working with our industry and City colleagues, we have reviewed our processes and policies as required and have ensured that we deliver to industry best practice standards and that they are aligned with those of the City.

### **Certificate of Assurance**

In line with City of London procedures, the Centre will submit the Annual Certificate of Assurance signed off by the Managing Director in January 2019.

9. In 2018, along with all generic aspects for the Centre's compliance, the Projects team were duly audited and subject of the assurance programme.
10. Further to the significant change delivered over the past two years, the nominated department for the 2019 Certificate is the Engineering Department. The audit for the Certificate of Assurance process will be conducted by the Head of Engineering and our H & S specialist.

### **Audit**

11. The City's Fire experts and Health, Safety and Wellbeing Teams have continued to work closely with Centre colleagues over the year, with the FSMG (Fire Strategy Management Group) continuing its good work and having been extended in 2018

to include representatives from the Guildhall School, again working towards our 'Alliance' (formerly known as the 'Operational Alliance' and the 'Common Platform').

12. Joint training sessions in Fire, Health and Safety and Wellbeing, general Risk Management, BCP (Business Continuity Planning), Major Incident planning, and Security (anti-terrorism) have been held and more are planned for the coming year. This joint development is aimed to ensure shared best practice, consistent standards across our many buildings and diverse activities, the further reduction of risk and ensuring that we are more likely to avoid health and safety issues and recover more quickly from any serious and major incidents.

### **Health and Safety Committee Meetings**

13. The primary legislation covering occupational Health and Safety in the UK is the Health and Safety at Work Act 1974. It imposes general duties for health and safety on employers. The main responsibilities are:
  - Ensure the health, safety and welfare of all their employees
  - Produce a written policy statement explaining how they intend to do this
  - Consult with union reps
  - Protect others such as their contractors and visitors.
14. Employers have a duty to consult with their employees, or their representatives, on health and safety matters. There are two different regulations that require employers to consult with their work force about health and safety:
  - The Safety Representatives and Safety Committee Regulations 1977 (as amended); and
  - The Health and Safety (Consultation with Employees) Regulations 1996 (as amended).
15. The Centre has a fully active and functioning Health and Safety Committee that meets once a quarter and is chaired by the Director of Operations and Buildings. Representatives from all Departments, resident Contractor Organisations and Barbican Centre Directorate attend and participate in meetings.
16. These meetings allow information including any risks arising from employee work activities, the measures in place or proposals to control these risks, and what they should do if they are exposed to a risk, including emergency procedures. The last meeting was held on 9th January 2019 and the next meeting will be on 4th April 2019.

### **Accident Reporting**

17. The Barbican Centre continues to use 'Reportline', (locally known as SANTIA), for the reporting and tracking accidents/incidents. *Feedback on our use of the system and performance has been encouraging.*

18. This system is an electronic web-based system supported by a contact centre, enabling reports to ring through incidents or report them on line. Centralised reporting and monitoring have been further enabled by this system.
19. The *Reportline* contact centre is operated by appropriately trained professionals. This ensures the Centre's Management that reportable events are immediately brought to the attention of the HSE Executive in the correct way.
20. The system went live for the Centre on 1 October 2015 with incident reporting added on 1st November 2017. This City system continues to operate as planned.

## **DSE**

21. There is a legal requirement to provide all users of Display Screen Equipment (DSE), i.e. staff who use computers on a regular basis, with appropriate training and to ensure they have a risk assessment of their computer workstations. The City of London Corporation hosts an E-Learning training and assessment software system called *WorkRite*. The overall administration of the software is by Corporate Health and Safety, and access to the software is through licensed agreement with the supplier.
22. We currently have 20 trained assessors for the WorkRite system. In addition, over 280 members of staff who regularly use DSE have been assessed. A small number of staff members have had or have ongoing issues which have been identified and are being managed as part of routine procedures.

## **Top X-Pentana Reporting System**

23. The City of London Corporation is required by law to have effective health and safety arrangements. To help achieve this, the Corporation utilises a health and safety management system. As part of this system the most significant (Top X) risks are prioritised and effectively controlled.
24. The aim of "Top X" is for significant risks, including health and safety risks, to be identified and escalated up through department structures, from the basic section level of each department to the Directors/Chief Officer, where risks can be acknowledged, and action plans put in place to minimise their impact on the department. Their impact can be manifested through injury, loss or damage to equipment or, in some circumstances, death.
25. X is simply a number. It is not a defined figure as it is dependent on the number of significant risks any department may have.
26. The City of London Corporation requires returns every October/November of any Red Risk/Threat.
27. During this past year, the Centre's Corporate Red Risk (Fire) was retired and replaced by a Departmental Red Risk (Failure to deliver the agreed fire-related

projects) in recognition of the works and training completed to date. The Centre's fire and other safety issues continue to be managed via the mitigation approach of:

- Reduce
- Transfer
- Avoid
- Accept

### **Health, Safety and Wellbeing Plan and Policy**

28. The Directorate of the Barbican Centre recognises that they have a responsibility to ensure that all reasonable precautions are taken to provide and maintain working conditions that are safe, healthy and comply with all statutory requirements and codes of practice. The Directorate recognise that the Centre's Health, Safety and Wellbeing Plan and Policy are critical in terms of the expectations set by the City Corporation on how it expects Health and Safety to be managed locally.
29. A copy of the Centre's Health, Safety and Wellbeing Plan and Policy is displayed on all departmental notice boards, sent out to all Directors and Heads of Department and can be accessed by all staff on the internal IT system.
30. The Barbican Centre's Policy clearly outlines the roles and responsibilities of all staff from the Managing Director down to departmental staff and the H&S Committee. It is reviewed as a minimum annually and whenever a change of legislation affects the Centre. The last annual review was conducted and signed off by the Managing Director on 1<sup>st</sup> February 2018.

### **Asbestos Management**

31. The Barbican was built at a time when asbestos was a widely used material in many elements of the building fabric. It is therefore not surprising that the management of asbestos is an import element of our Health and Safety at the Centre, not only to protect staff and the public, but also those who are likely to do work that intrudes upon the building fabric, where the dangers are most present.
32. The removal of asbestos prior to buildings works has been taking place on a regular basis. Asbestos Surveys of all areas are in place and updated annually. The information on the location of any asbestos containing material is now accessible to contractors, building surveyors and installation designers who are planning to carry out intrusive work to the building fabric, on a web-based database, using an outside specialist contractor.
33. Much additional work has been undertaken to review not only our existing asbestos register, but also to ensure that actions from previous audits have been completed and are checked and signed off. Our new Head of Engineering has continued to ensure that asbestos and other compliance register type issues remain a priority. The restructure of the Engineering and Projects teams and the introduction of our



CAFM system and the BRM2 contract will assist in ensuring that we are compliant and fit for purpose in the future.

### **Water Systems Management**

34. The monitoring of the Centre's water systems is being managed to meet both our statutory compliance obligations and to ensure that at all times we are providing safe drinking and domestic water supplies to our public, staff and catering contractors. The control of Legionella and other water-borne pathogens is a key element of this compliance and safety area. This programme is carried out in conjunction with the City of London H&S Manager, who has oversight of the project.
35. The periodic water hygiene monitoring is done through the BRM2 contract arrangements, with Skanska using Socotec to provide this service. We are currently managing a fixed test and inspection programme. Historically, all test results have been held in paper log books at our engineering office. In future, electronic copies of test results will be added and maintained on the centralised corporate database system.
36. All the water system risk assessments from our specialist water systems contractor are saved and accessible via the City Surveyor's shared building information software, (our 'Micad' CAFM System).
37. Working with the City Surveyor's Department, through our PFM, we have again reviewed our water systems management and ensured that actions are carried out.

#### **Jonathon Poyner**

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