

INTERNAL AUDIT DIVISION

REPORT 2023/093

Audit of occupational health and safety in the United Nations Assistance Mission in Somalia and the United Nations Support Office in Somalia

There was a need to effectively implement the occupational health and safety programme in UNSOS and UNSOM and improve the functioning of the Occupational Health and Safety Oversight Committee

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Audit of occupational health and safety in the United Nations Assistance Mission in Somalia and the United Nations Support Office in Somalia

EXECUTIVE SUMMARY

The Office of Internal Oversight Services (OIOS) conducted an audit of occupational health and safety (OHS) in the United Nations Assistance Mission in Somalia (UNSOM) and the United Nations Support Office in Somalia (UNSOS). The objective of the audit was to assess whether UNSOS effectively implemented an OHS programme to prevent and minimize workplace health risks to personnel in UNSOM and UNSOS. The audit covered the period from January 2020 to June 2023, and included governance and OHS framework, implementation, monitoring and reporting of the OHS programme.

UNSOM and UNSOS had not effectively implemented the OHS programme, including finalizing the OHS policy statement and guidelines. The OHS Oversight Committee was not effective as its decisions were not followed up. Further, UNSOM and UNSOS had not implemented effective OHS risk management procedures. In addition, UNSOS had not put in place mechanisms for managing welfare-related complaints and adequately training all personnel on OHS.

OIOS made eight recommendations. To address issues identified in the audit, UNSOM and UNSOS needed to:

- Take measures to ensure the effective functioning of the occupational health and safety committee including updating the terms of reference, having adequate representation, establishing a mechanism to track and monitor the implementation of OHS recommendations, and holding quarterly meetings.
- Finalize the occupational health and safety policy statement and guidelines.
- Strengthen the risk management for occupational health and safety through enhanced coordination among sections in UNSOM and UNSOS and African Transition Mission in Somalia.
- Strengthen the mainstreaming of cross-cutting issues in the OHS programme by ensuring effective implementation of the joint action plan on disability inclusion; developing an action plan to implement recommendations arising out of the disability inclusiveness audit; and integrating gender, multilingualism, human rights and disability into OHS policies and guidelines.

UNSOS needed to:

- Conduct an occupational health and safety training needs assessment and develop a plan to provide effective training and awareness to all Mission personnel.
- Develop an occupational health and safety incidents reporting and management system to ensure the incidents are promptly recorded and investigated within stipulated time frames.
- Institute mechanisms for receiving and addressing occupational health and safety and welfare-related complaints.
- Establish key performance indicators to enhance monitoring, collection, and reporting of data on the implementation of the occupational health and safety programme.

UNSOM and UNSOS accepted all recommendations and have initiated action to implement them. Actions required to close the recommendations are indicated in Annex I.

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Audit of occupational health and safety in the United Nations Assistance Mission in Somalia and the United Nations Support Office in Somalia

I. BACKGROUND

1. The Office of Internal Oversight Services (OIOS) conducted an audit of occupational health and safety (OHS) in the United Nations Assistance Mission in Somalia (UNSOM) and the United Nations Support Office in Somalia (UNSOS).

2. UNSOS is responsible for implementing the OHS programme in UNSOM and UNSOS. The ability of UNSOS to deliver its mandate is linked to the health and safety of its workforce. The United Nations has a duty of care to manage workplace health and safety for its personnel and those affected by its work.

3. According to the United Nations Common System OHS Framework, OHS is defined as the discipline dealing with the prevention of work-related injuries and diseases as well as the protection and promotion of the health of workers. It aims at the improvement of working conditions and environment. At the 110th Session of the International Labor Conference from 27 May to 11 June 2022, health and safety was added to Fundamental Principles and Rights at Work.

4. OHS activities are governed by the United Nations Common System OHS Framework; the United Nations OHS Framework Implementation Guide; Secretary-General's bulletin on the introduction of an OHS management system (ST/SGB/2018/5); Field Occupational Safety Risk Management Policy; Field Occupational Safety Incident reporting standard operating procedures; and UNSOM and UNSOS policy statement on OHS.

5. As of 1 July 2023, UNSOM and UNSOS had 304 and 480 staff members, respectively. Also, UNSOM and UNSOS had 13 and 17 United Nations volunteers and 17 and 6 Government-provided personnel, respectively. In addition, UNSOM had 13 United Nations Police. The African Union Transition Mission (ATMIS) had 17,626 troops on the same date. Responsibility for the management of OHS rests with the Director of Mission Support at the D-2 level, who chairs the OHS Oversight Committee for UNSOM/UNSOS. The Committee provides strategic guidance on managing the OHS programme in the missions. The Director is assisted by an OHS Officer at the P-3 level through the Senior Administrative Officer at the P-5 level. The OHS Officer was onboarded in May 2021 and is responsible for developing the OHS Risk Management Programme and supporting its implementation throughout the Mission area.

6. Comments provided by UNSOM and UNSOS are incorporated in italics.

II. AUDIT OBJECTIVE, SCOPE AND METHODOLOGY

7. The objective of the audit was to assess whether UNSOS effectively implemented an OHS programme to prevent and minimize workplace health risks to personnel in UNSOM and UNSOS.

8. This audit was included in the 2022 risk-based work plan of OIOS due to operational, reputational and financial risks associated with occupational accidents, incidents and illnesses related to UNSOM and UNSOS operations.

9. OIOS conducted this audit from February to July 2023, covering the period from January 2020 to June 2023. Based on an activity-level risk assessment, the audit covered higher and medium-level risks,

including governance and OHS framework, implementation, monitoring and reporting of the OHS programme.

10. The audit methodology included: (a) interviews with key personnel, (b) review of relevant documentation, (c) analytical review of OHS-related data such as incident and accident data, and (d) analysis of online survey¹ results on OHS to UNSOM and UNSOS personnel.

11. The audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.

III. AUDIT RESULTS

A. Governance and occupational health and safety framework

12. The United Nations OHS Framework specifies that executive accountability for OHS is a core requirement for an effective OHS system. Organizational responsibility and accountability with an appropriately constituted health and safety oversight body is one of the core elements.

Need to enhance oversight over the occupational health and safety programme

13. UNSOM/UNSOS established in 2017 an OHS Oversight Committee. The Director for UNSOS and the UNSOM Chief of Staff were part of the Committee, with the former being the Chair. However, UNSOM and UNSOS had not ensured the effective functioning of the OHS Oversight Committee. OIOS noted the following internal control weaknesses:

(a) The Occupational Health and Safety Oversight Committee did not meet regularly

14. According to the OHS Policy framework, the OHS activities should be developed and reviewed through quarterly meetings every year. However, partly due to the COVID-19 pandemic, the Committee only met three times in the four years from January 2019 to January 2023 instead of the 17 scheduled meetings. The three meetings took place in 2022, and by August 2023, the OHS Committee had not held any meeting. UNSOS stated that OHS was integrated into the COVID-19 response through the Crisis Management Team and Task Force. The Division of Health Care Management and Occupational Health and Safety, in an email to UNSOS dated 18 April 2023, mentioned the need for the OHS Committee to meet quarterly, but no further action was taken.

(b) Inadequate representation on the Occupational Health and Safety Committee

15. A review of all three OHS Oversight Committee meeting minutes showed that all sectors were not always represented, even though the OHS Oversight Committee chair had mandated the attendance of all Regional Administration Officers in March 2019. Additionally, the United Nations Country Team, though required to be members as per the ToR, did not have any representation in these meetings. The National Staff Union was represented in one of the three meetings, but the Field Staff Union did not have representation. Further, while contractor representatives were part of the OHS Oversight Committee, their roles and responsibilities were not clearly defined in the ToR.

¹ The purpose of the online survey was to get feedback from staff, United Nations Volunteers, and Government-Provided-Personnel on their awareness, concerns, and suggestions on how best UNSOM and UNSOS could implement measures to ensure their occupational safety and health. The response rate to the survey was 193 out of 837 staff (23 per cent).

16. UNSOS had yet to establish an effective OHS focal point network which is responsible for implementing and supervising OHS in their respective sections/sectors/organizations and liaising with the OHS Officer. For example:

- Due to rotations, the personnel listed as the ATMIS focal point was no longer in the Mission and had not been replaced; and
- UNSOS had not established a ToR for the existing focal points, leaving their roles and responsibilities undefined.

17. Additionally, neither UNSOM nor UNSOS had representation outside Mogadishu to ensure effective implementation of the OHS programme at all mission locations. Also, section chiefs were not required to include OHS in their work plans.

(c) Recommendations from occupational health and safety audit were not followed up for effective implementation

18. Action points arising from the Committee's deliberations did not indicate implementation timelines, and there was no evidence of follow-up on action points. Consequently, issues affecting staff health did not have action points. Therefore, OIOS could not ascertain whether these were implemented, such as replacing dilapidated accommodation and ablution units for ATMIS, relocation of ablutions to peripherals of the United Nations Guard Unit facility, installing adequate firefighting equipment in Beletweyne, finding an alternate source of consistent water supply to the fire hydrants in the Mombasa Support Base, and replacing slippery tiles with anti-skid tape in bathrooms in UNSOS compounds in Mogadishu.

19. The former OHS Officer last conducted a mission-wide comprehensive self-assessment on OHS from 26 August to 5 September 2018. However, there was no evidence that the OHS Oversight Committee discussed the report to ensure the implementation of the recommendations. The report recommended several key actions to enhance safety, including conducting a risk assessment of the organization's activities, incorporating OHS in induction training, implementing the OHS policy and procedures, providing guidelines to new OHS Oversight Committee members, and performing monthly inspections of first aid boxes.

20. OIOS review showed that the control weaknesses noted in the audit would have been resolved had the recommendations in the Mission self-assessment on the OHS report been implemented and had action points arising from the Committee's deliberations been followed up. This is particularly evident considering the OHS Oversight Committee meeting of 26 April 2022 emphasized the need to specify timeframes for implementing recommendations arising from OHS inspections. Although the Committee tasked the OHS Officer to compile all the identified issues in one document, there was no evidence of follow-up to ascertain whether the recommendations had been effectively implemented.

21. The inadequate functioning of the OHS Committee was because UNSOM and UNSOS had not updated the ToR for the Committee, including clarification of roles and responsibilities among the participants. The subject ToR was last reviewed in 2018 and was not updated to include requirements in the OHS Framework Implementation Guide promulgated in February 2022. For example, the ToR did not have required functions, such as: (a) developing and implementing OHS policies, procedures, and strategies to facilitate the fulfillment of the organization's obligation to personnel; (b) holding a periodic review of the OHS Committee ToR to ensure fitness for purpose; and (c) monitoring trends in work-related illnesses, near misses, accidents, and dangerous occurrences and considering their implications for the organization. As a result, there was ineffective oversight over the implementation of the OHS programme.

Need to finalize the occupational health and safety policy and standard operating procedures

22. UNSOM and UNSOS had not finalized the OHS policy to commit the Mission to provide its personnel with a safe and healthy work environment. The draft OHS policy was initiated in 2017 and reviewed in 2021. However, it was not finalized pending the approval by the Director for UNSOS/UNSOM Director for Mission Support. The Mission also had not updated and finalized standard operating procedures for the OHS programme and the OHS strategic action implementation plan to consider the updated OHS Framework Implementation Guide of February 2022. Draft copies were available but were yet to be signed by senior management.

UNSOM and UNSOS should:

(1) take measures to ensure the effective functioning of the Occupational Health and Safety (OHS) Committee, including updating its terms of reference, having adequate representation, establishing a mechanism to track and monitor implementation of OHS recommendations, and holding quarterly meetings.

UNSOM and UNSOS accepted recommendation 1 and stated that the terms of reference and membership of the OHS Committee have been updated. A tracking mechanism for monitoring OHS recommendations has been developed and will be presented at the next OHS Committee for endorsement and subsequently brought into use. Going forward, meetings of the OHS Committee will be convened on a fixed day of each quarter, and the minutes will be shared with OIOS.

(2) finalize the occupational health and safety policy statement and guidelines.

UNSOM and UNSOS accepted recommendation 2 and stated that the OHS guidelines and policy statement were being finalized for approval by the UNSOS Director of Mission Support.

Need to improve occupational health and safety risk assessment

23. The OHS Implementation Framework requires UNSOM and UNSOS to establish a comprehensive and dynamic OHS risk management process, which is both strategic and operational and linked to the Mission's enterprise risk management system. In its budget documents for 2022/23, UNSOS indicated that it had achieved 100 per cent compliance with the OHS risk management in 2022/21, 2021/22 and 2022/23. However, a review of mission documents on OHS showed gaps, as indicated in the sections below.

24. The Secretariat-wide risk register rated the risk of failing to provide a safe and healthy working environment as critical/very high because it could negatively impact staff health and operational effectiveness. In June 2022, UNSOS lowered the risk to medium justifying this decision by stating that it had recruited an OHS Officer, made significant improvements and completed projects. However, UNSOS did not provide evidence of these improvements and projects completed.

25. A review of records showed that the UNSOS Medical Section conducted a Medical Services OHS risk assessment. The Section also conducted a gap analysis for Health Support Elements in all seven sector locations in 2017. However, these were not connected to the UNSOS risk register. For example, the Mission risk register did not refer to these documents nor annex them to ensure the implementation and tracking of mitigating measures. There was also a need to update the Medical Services OHS risk assessment and the Health Support Elements gap analysis. In addition, supervisors with areas critical for OHS-related matters, such as workshop heads, OHS focal points, fleet managers, and safety officers did not assess risks in their areas of operation. While the OHS Officer identified safety hazards related to activities such as warehousing and transport in inspection reports, these were not linked to the risk register.

26. Further, the OHS Officer did not coordinate with Section/Unit chiefs such as Warehousing, Medical, Risk Management, Staff Counselling, Security, and Transport/Fleet Management to jointly conduct risk assessments in their respective areas and for effective implementation of the OHS programme. Although UNSOM had included OHS in its risk register, it did not coordinate with the OHS Officer for UNSOS to include identified risks in its risk register. Since UNSOS has the overall responsibility for OHS in both Missions, UNSOM-related risks and mitigation measures should have been recorded in the UNSOS risk register. In addition, the UNSOM and UNSOS risk registers did not include dates for implementing mitigating measures, and therefore, key issues such as conducting a health and safety self-assessment for the Mission had not been implemented. There was also a need to involve ATMIS in risk assessments on OHS and implementing mitigating measures.

27. This happened because UNSOS had not implemented the guidelines on risk management as required by the OHS Framework. Implementing effective risk management would enable timely identification of undesirable factors and have them addressed to ensure staff health and safety. Coordination among sections and entities would ensure an integrated and effective approach to OHS.

(3) UNSOM and UNSOS should strengthen the risk management for occupational health and safety through enhanced coordination among sections in UNSOM and UNSOS and the African Transition Mission in Somalia.

UNSOM and UNSOS accepted recommendation 3 and stated that the UNSOS risk registers have been updated and risk treatment measures were being implemented. Going forward, with the support of OHS Officer, management will engage with ATMIS to agree on a joint framework and mechanism to implement OHS risk treatment measures across all areas.

B. Implementation of the occupational health and safety programme

Need to improve occupational health and safety training and awareness

28. The OHS Implementation Guide requires awareness and specific training for Mission personnel. OHS Oversight Committee members are required to undertake related training within three months of joining the Committee. The OHS framework requires a training needs analysis to determine specific training for the OHS Committee and Mission staff at all levels.

(a) Training was not provided to senior managers and staff

29. In its budget for 2022/2023, UNSOS stated that to promote occupational safety and health in the workplace, it conducted training for supervisors, staff and contractors on occupational safety and health awareness, hazard identification, and the development of control and mitigation measures.

30. However, a review of OHS documents showed that UNSOS had not included OHS as part of the mandatory mission induction training and did not conduct OHS training for section chiefs and staff. OIOS survey results showed that 136 out of 193 respondents (or 70 per cent), suggested awareness and training on OHS as one of the areas in which UNSOS could improve. The OHS Committee members and senior management had not undertaken the required training, which included online training, senior leaders' awareness of OHS, and a module on risk assessments. Although the OHS Officer had undertaken training on Field Occupational Safety and Health Training, the Officer was yet to complete all the training as per OHS Policy.

31. UNSOS, in its OHS self-assessment reports, indicated that training had been undertaken; however, a review of records showed that UNSOS had not trained key strategic risk managers in sections such as Engineering, Field Technology Section, Transport, Warehousing, and Aviation. Instead, the training reported by UNSOS was provided to contractors, such as those for catering and facilities maintenance services and their personnel.

(b) There was a need for effective sensitization of occupational health and safety

32. In the budget for 2022/2023, UNSOS stated that it had published customized health and safety guidance to advise UNSOS personnel on health and safety standards in the workplace. However, UNSOS did not have evidence to support this.

33. UNSOS provided psychosocial support in the immediate aftermath of critical incidents in the Mission, as stated by 136 out of 193 (70 per cent) respondents to the survey. In March 2022, the OHS Officer facilitated a meeting with contract managers to brief them on their roles and responsibilities at OHS. The OHS Officer presented 10 posters to sensitize staff on OHS and stated that virtual sensitization was conducted. However, a review of Mission broadcasts did not show sensitization, except for a broadcast on 10 January 2022 that cautioned staff about the presence of dangerous animals in the UN Compound in Mogadishu. During a physical inspection in Baidoa, the acting Head of Officer further mentioned that a Mission-wide campaign to observe the 2021 World Day for Health and Safety was conducted but did not provide supporting documentation.

34. Further, the survey showed that 107 out of 193 (55 per cent) respondents had not attended any training nor sensitization on OHS in the last two years. i.e., 2021-22 and 2022-23. Also, 58 per cent stated that they were not aware of ways in which the Mission could assist them in occupational health and safety-related issues at the workplace.

35. UNSOS did not avail OHS-related awareness-raising campaign messages to ATMIS contingents. There was also inadequate vendor sensitization and training on OHS. The OHS Officer held four briefing sessions on food safety and hygiene with the catering contractor in Baidoa, Beletweyne, Jowhar, and Kismayo in May 2023. During the COVID-19 pandemic, the OHS Officer facilitated round table discussions with seven contractors on OHS. Issues discussed included the effects of the pandemic, incident reporting, employee welfare, and compliance with OHS practices. However, while UNSOS had 137 contract companies as of June 2023, only 10 had evidence of having held sensitization meetings/training for their personnel on OHS.

36. The above shortcomings were because UNSOS had not conducted an assessment to understand the Mission personnel's specific OHS-related training needs. In addition, UNSOS had not developed a plan to enable systematic sensitization of vendors on OHS. The absence of training and inadequate sensitization impacted the ability of all Mission staff, including OHS focal points and Committee members to effectively incorporate and consider OHS-related perspectives in their areas of responsibility.

(4) UNSOS should conduct an occupational health and safety (OHS) training needs assessment and develop a plan to provide effective training and awareness to Mission personnel, contractors, and contingent personnel, including on reporting OHS incidents.

UNSOS accepted recommendation 4 and stated that OHS has now been included in the schedule of Mission induction training for incoming staff members. UNSOS will conduct an OHS training needs assessment and will ensure that all contractors receive the required sensitization and training on OHS-related matters.

Need for an improved incident management process

37. Missions and respective entities such as ATMIS, contractors and their personnel are required to report all hazards and incidents (including near misses) through defined incident reporting channels. The OHS policy framework requires all OHS incidents to be reported within 48 hours of occurrence. OHS accidents classified as fatal injury or major injury are to be reported within 24 hours, and investigations of major incidents should be completed within 20 days after occurrence.

38. UNSOS had not implemented an effective incident reporting and management system. The incident management process should include incident detection and reporting, immediate response and notification, incident investigation, review and action plan management, communication and lessons learnt. However, these were not established by UNSOS. The OHS Officer logged incidents in an online incident reporting system, which did not indicate how such issues were addressed. The OHS Officer was unable to provide all the incidents reports except for three incidents. Based on the staff survey results this situation suggests there are more incidents than the three provided, indicating potential under-reporting. During the audit, UNSOS availed the link to this online incident reporting system to staff. Nevertheless, there was a need to further sensitize staff on the operation of this system.

39. A review of the three incident reports availed by UNSOS showed that they were logged after more than 48 hours (time ranged between six days to one month). This could be attributed to the fact that staff members were not aware of the reporting mechanisms in place. For example, 107 out of 193 (55 per cent) respondents to the survey stated that their work exposed them to OHS risks, and 120 out of 193 (62 per cent) respondents stated that they did not know where to report incidents/ accidents related to OHS. A recommendation on awareness of OHS was made above.

40. In the absence of an effective incident reporting and management system, the Mission may not be able to properly identify, investigate, and analyze exposure to health and safety hazards at work and put measures in place to prevent their recurrence. For example, after the demise of an ATMIS personnel from electrocution on 12 September 2021, the OHS Officer investigated it, but there was no evidence that the report was presented to the OHS Committee and recommendations endorsed. UNSOS stated that ATMIS was not always cooperative in such incidents, and they were unable to compel them to conduct timely investigations.

41. In addition, UNSOS did not adopt thorough and rigorous investigation models indicated in the OHS policy, such as the Root Cause Analysis model, to investigate major incidents. In the case of the electrocution of contingent personnel, the incident investigation was carried out solely by the OHS Officer instead of a team headed by a senior manager. The investigation team should have included an independent subject matter expert. OIOS noted that after the incident, an inspection/ risk assessment was conducted from 2 to 3 November 2021 by a team comprising the OHS Officer, Electrical and Facilities Management Units and contractor personnel. However, the report did not indicate that it was in response to the electrocution incident; instead, it was logged as a routine exercise. Moreover, the exercise was done more than the prescribed 20 days after the incident.

(5) UNSOS should develop an occupational health and safety incidents reporting and management system to ensure the incidents are promptly recorded and investigated within stipulated time frames.

UNSOS accepted recommendation 5 and stated that it launched the global electronic reporting platform for OHS reporting and follow-up, which is monitored by the Mission OHS Officer and counterparts at headquarters. Management continually sends broadcasts to remind Mission personnel

that incidents should be reported within the stipulated timeframes. Investigations shall be initiated as required under the stipulated conditions and timeframes.

Need for improved integration of gender, disability, human rights and multilingualism perspectives in the occupational health and safety programme

(a) UNSOM and UNSOS implemented actions to enable disability inclusion, but it could be further improved

42. The OHS Framework requires UNSOS to prioritize disability inclusion and to effectively communicate OHS policies and guidelines to all staff. For example, UNSOM and UNSOS are required to report on their implementation of the Disability Inclusion Strategy launched by the Secretary-General in June 2019.

43. In November 2021, UNSOM and UNSOS signed a joint action plan for January 2021-2022 on the implementation of the United Nations disability inclusion strategy. The action plan aimed to integrate disability inclusion across strategic planning, policy and programming and corporate communications. For example, within the action-plan framework, specific initiatives included: providing reasonable accommodation to staff with disability; establishing a UNSOM-UNSOS disability-inclusive work group to oversee the implementation of the strategy; and incorporating the human rights of persons with disabilities in strategic Mission planning documents. However, UNSOM and UNSOS were yet to implement actions in the joint action plan on implementing the disability inclusion strategy. For example, a working group was yet to be formed. UNSOM and UNSOS were in the process of updating the action plan for 2023.

44. UNSOM and UNSOS reported annually as required on the implementation of the disability inclusion strategy and had disability focal points. UNSOS also hired a consultant in 2021 to undertake an accessibility audit to determine the extent to which the Mission services and facilities are accessible to persons with disabilities. However, UNSOM and UNSOS were yet to develop an action plan to implement the accessibility audit recommendations made by the consultant in June 2023. Examples of recommendations included the need to champion the mainstreaming of disability inclusion and the provision of specific interventions across programmes, including in OHS programme.

45. Discussions with the UNSOM and UNSOS disability focal points also showed that UNSOS could further integrate disability into OHS by including specific procedures in emergency response plans to assist employees with disabilities. This could involve assigning designated personnel to assist in evacuations and ensuring that emergency communications are accessible (e.g., visual alarms for persons with hearing impediments).

(b) Need to mainstream other cross-cutting issues in occupational health and safety programme

46. UNSOM and UNSOS have a Gender Advisor and a Gender Affairs Officer, respectively; and implemented gender-related initiatives such as a female wellness center and streamlined gender in accommodation-related spaces. However, OIOS review noted areas for improvement. For example, UNSOM and UNSOS needed to capture/integrate gender, human rights, and multilingualism, initiatives in the OHS programme, including developing OHS policies and formally appointing multilingualism focal points.

47. In addition, UNSOS needed to ensure that once finalized, the OHS policy and guidelines are communicated to contractor personnel in a language and format that could be understood to enable their effective participation in the OHS programme.

48. The above occurred because UNSOM and UNSOS had not integrated cross-cutting issues into OHS policies and procedures.

(6) UNSOM and UNSOS should strengthen the mainstreaming of cross-cutting issues in the occupational health and safety (OHS) programme by: (a) ensuring effective implementation of the joint action plan on disability inclusion; (b) developing an action plan to implement recommendations arising out of the disability inclusiveness review; and (c) integrating gender, multilingualism, human rights and disability into OHS policies and guidelines.

UNSOM and UNSOS accepted recommendation 6 and stated that: (a) the updated Joint Action Plan has been submitted to the Heads of UNSOM and UNSOS for approval; (b) measures have been outlined to implement the relevant parts of the framework, including those flowing from the disability inclusiveness audit; and (c) UNSOS and UNSOM would ensure that mainstreaming of gender, multilingualism, human rights and disability are included in the Mission OHS policies and guidelines.

Need for effective mechanisms for addressing staff occupational health and safety and welfare-related complaints

49. The UNSOS Rations Unit had established a dedicated email and mechanism for receiving and addressing food and commissary-related complaints, and between January and June 2023, they received 93 complaints. However, UNSOS did not have a mechanism for receiving and handling other OHS-related complaints. The Welfare Committee was responsible for facilitating recreational activities and promoting improvement in the overall working and living conditions in the missions. However, it did not keep minutes of meetings and did not have evidence of meetings since the COVID-19 aftermath. Moreover, the Committee's ToR was not specific as to whether it was responsible for receiving complaints on staff welfare.

50. During the audit in July 2023, UNSOS disseminated an email address to all staff to report OHSrelated concerns, through a broadcast. In OIOS view, this was not sufficient to resolve complaints related to OHS and to indicate action taken including follow-up. Moreover, staff were still unaware of this development.

51. As a result, respondents to the survey on OHS stated that they did not know where to report some complaints related to welfare and OHS. For example, while 123 out of 193 (63 per cent) respondents stated that they were provided with adequate welfare facilities such as gyms, internet, and leisure facilities; there were suggestions of having functional gym equipment to further improve welfare. OIOS review also showed that gym equipment needed replacement, for example: in Baledogle, 98 per cent of gym equipment was nonfunctional, and in Baidoa, three of four treadmills were beyond repair. In June 2023, UNSOS issued purchase orders for gym equipment worth \$116,000. As of the end of July 2023, procurement of additional gym equipment under the UNSOM budget was at the solicitation stage. Therefore, OIOS did not make a recommendation.

52. OIOS field visits to Mogadishu and Baidoa also noted non-functional and un-serviced fire extinguishers, and an absence of first aid boxes. In the UNSOS warehouse, first-aid boxes had expired items. These complaints were expressed in the survey results. Other complaints included:

- Poor hygiene in communal kitchens;
- Non-adherence to non-smoking policy in the Tukul in Mogadishu and need for support to enable reduction of alcohol consumption;

- Inadequate disposal of damaged cartridges and tonners;
- Pollution from the waste incinerator in the Mogadishu Logistics Base and sewer line near Phase Five posing health risks to staff;
- Need for ergonometric office equipment such as orthopedic chairs and standing desks in Somalia, and effects of computer screen lights on eyes;
- Inadequate lighting of pathways, especially in Mogadishu;
- Need for a hotline for seeking emotional and mental support in Somalia;
- Absence of sanitary pads in the Commissary in Mogadishu; and
- Inadequate visits of staff counsellors to sector locations.

53. The above happened because UNSOM and UNSOS had not ensured the effective implementation of cross-cutting issues in the OHS programme. In addition to ensuring a healthy work environment, staff welfare and well-being are essential in increasing productivity and morale.

(7) UNSOS should institute mechanisms for receiving and addressing welfare-related complaints.

UNSOS accepted recommendation 7 and stated that Management has been periodically broadcasting the established mechanisms for reporting welfare-related complaints to all personnel. UNSOS will ensure that monthly reminders are sent and will follow up with concerned units to address complaints received.

C. Monitoring and reporting on occupational health and safety

Need for effective monitoring and reporting on occupational health and safety

54. The OHS framework requires UNSOS to develop procedures for monitoring, measuring, and recording OHS performance regularly using key performance indicators (KPIs).

55. A review of OHS documents showed that UNSOS was reporting yearly in its self-assessment reports and its monthly reports on the implementation of its OHS programme. However, the reports did not include KPIs for tracking all relevant information, such as: the number of supervisors trained to conduct occupational health and safety risk assessments; the number of OHS Committee decisions implemented; the number of work activities halted due to unsafe work conditions; safety self-assessments completed; attitude surveys undertaken; training courses rolled out; risk, working days lost to accidents, work-related sickness absence data, and property damage.

56. While the Mission completed monthly reports and self-assessment templates established by the Department of Operational Support for 2021 and 2022, these were compliance-based assessments against the minimum operational OHS standards. The templates included information such as the establishment of the OHS Committee, appointment, and training of the OHS Officer, number of OHS Committee meetings held, and number of reported occupational safety incidents, serious accidents, and near misses recorded. These did not provide an adequate basis for evaluating the Mission's performance in implementing the OHS programme. Moreover, there was no supporting documentation for the reported activities. Also, there was repetitive reporting of items in the monthly reports; for example, the inspection of Mombasa Support Base, alerts on the presence of wildlife in the UNSOS camp, an incident of a near miss involving a vehicle were recorded in January and February 2022 monthly reports.

57. There was no evidence that key stakeholders such as UNSOM and ATMIS were involved in the monitoring and reporting process, such as disseminating reports to them to assess key areas of non-compliance with OHS requirements.

58. Predefined KPIs are critical to effective OHS performance monitoring and evaluation and help determine the extent to which the Mission's OHS objectives and targets are being met. In the absence of KPIs and related targets, UNSOS did not have a mechanism to effectively measure and monitor its safety performance.

(8) UNSOS should establish key performance indicators to enhance monitoring, collection, and reporting of data on the implementation of the occupational health and safety programme.

UNSOS accepted recommendation 8 and stated that key performance indicators have been included in the revised Mission OHS guidelines. Key stakeholders will be involved in monitoring and reporting on the implementation of OHS Committee decisions, and the overall OHS programme.

IV. ACKNOWLEDGEMENT

59. OIOS wishes to express its appreciation to the management and staff of UNSOM and UNSOS for the assistance and cooperation extended to the auditors during this assignment.

Internal Audit Division Office of Internal Oversight Services

STATUS OF AUDIT RECOMMENDATIONS

Audit of occupational health and safety in UNSOM and UNSOS

Rec. no.	Recommendation	Critical ² / Important ³	C/ O ⁴	Actions needed to close recommendation	Implementation date ⁵
1	UNSOM and UNSOS should take measures to ensure the effective functioning of the occupational health and safety (OHS) committee, including: updating its terms of reference; having adequate representation; establishing a mechanism to track and monitor implementation of OHS recommendations; and holding quarterly meetings.	Important	0	Receipt of evidence of effective functioning of the Occupational Health and Safety (OHS) Committee, including updated terms of reference, adequate representation on the OHS Committee, a mechanism to track and monitor implementation of OHS recommendations, and quarterly meetings of the OHS Committee.	30 June 2024
2	UNSOM and UNSOM should finalize the occupational health and safety policy statement and guidelines.	Important	0	Receipt of finalized occupational health and safety policy statement and guidelines.	30 March 2024
3	UNSOM and UNSOS should strengthen the risk management for occupational health and safety through enhanced coordination among sections in UNSOM and UNSOS and the African Transition Mission in Somalia.	Important	0	Receipt of evidence of strengthened risk management for occupational health and safety, for example; (a) implementation of the risk management as per the Occupational Health and Safety Framework; (b) assessment of risks in Mission-critical areas and updating of the risk register with the same, including evidence of implementation of mitigation measures; (c) coordination among sections in UNSOM and UNSOS and African Transition Mission in Somalia on risk assessments.	30 June 2024
4	UNSOS should conduct an occupational health and safety (OHS) training needs assessment and develop a plan to provide effective training and awareness to Mission personnel, contractors, and contingent personnel, including on reporting OHS incidents.	Important	0	Receipt of occupational health and safety training needs assessment and a training plan, together with evidence of training to Mission personnel, contractors, and contingent personnel, including on reporting OHS incidents.	31 October 2024

² Critical recommendations address those risk issues that require immediate management attention. Failure to take action could have a critical or significant adverse impact on the Organization.

³ Important recommendations address those risk issues that require timely management attention. Failure to take action could have a high or moderate adverse impact on the Organization.

 ⁴ Please note the value C denotes closed recommendations whereas O refers to open recommendations.
⁵ Date provided by UNSOM and UNSOS in response to recommendations.

STATUS OF AUDIT RECOMMENDATIONS

Audit of occupational health and safety in UNSOM and UNSOS

Rec. no.	Recommendation	Critical ² / Important ³	C/ O ⁴	Actions needed to close recommendation	Implementation date ⁵
5	UNSOS should develop an occupational health and safety incidents reporting and management system to ensure the incidents are promptly recorded and investigated within stipulated time frames.	Important	0	Receipt of evidence showing that incidents are promptly recorded and investigated within stipulated time frames.	30 June 2024
6	UNSOM and UNSOS should strengthen the mainstreaming of cross-cutting issues in the occupational health and safety (OHS) programme by: (a) ensuring effective implementation of the joint action plan on disability inclusion; (b) developing an action plan to implement recommendations arising out of the disability inclusiveness review; and (c) integrating gender, multilingualism, human rights and disability into OHS policies and guidelines.	Important	0	Receipt of evidence of: (a) an updated and approved Joint Action Plan on disability inclusion; (b) implementation of recommendations arising out of the disability inclusiveness review; and (c) integration of gender, multilingualism, human rights and disability into OHS policies and guidelines.	31 October 2024
7	UNSOS should institute mechanisms for receiving and addressing welfare-related complaints.	Important	0	Receipt of evidence of mechanisms for receiving and addressing welfare-related complaints.	31 October 2024
8	UNSOS should establish key performance indicators to enhance monitoring, collection, and reporting of data on the implementation of the occupational health and safety programme.	Important	0	Receipt of evidence of key performance indicators for monitoring, collection, and reporting of data on the implementation of the occupational health and safety programme.	30 June 2024

APPENDIX I

Management Response

UNITED NATIONS SUPPORT OFFICE IN SOMALIA



BUREAU D'APPUI DES NATIONS UNIES EN SOMALIE

Interoffice Memorandum

To: Mr. Byung-Kun Min, Director Internal Audit Division OIOS

Catriona Laing

From:

Date: 19 December 2023

Ref: UNSOS/1223/M.053

Ewehen

Special Representative of the Secretary-General for Somalia

Aisa Kirabo Kacyira Configuration Support Office in Somalia

Subject: UNSOM/UNSOS response to the draft report of an audit of occupational health and safety in the United Nations Assistance Mission in Somalia (UNSOM) and the United Nations Support Office in Somalia (UNSOS) (Assignment No. AP2022-639-03)

 Further to your memorandum reference OIOS-2023-02181 of 30 November 2023, please find attached the UNSOM/UNSOS response to the subject audit.

We thank you for your continued support to the work of UNSOM and UNSOS.

cc: Ms. Anita Kiki Gbeho, UNSOM Ms. Qurat-ul-Ain Sadozai, UNSOS Ms. Judith Gotz, UNSOM Mr. Dolapo Kuteyi, UNSOS Ms. Yvette Langenhuizen, UNSOS Ms. Irene Luyiga, UNSOS Mr. Michael Ndaka, UNSOS Mr. Jeffrey Lin, OIOS

UNSOS - Mogadishu - Somalia

Management Response

Audit of occupational health and safety in UNSOM and UNSOS. (Assignment No. AP2022-639-03)

Clientconnénis	The Terms of Reference and the membership of the OHS Committee are being updated. A tracking mechanism for monitoring OHS recommendations has been developed and will be presented at the next OHS Committee for endorsement and subsequently brought into use. Meetings of the OHS Committee will converte out a fixed day of each quarter, and the minutes will be shared with the Auditors.	The OHS guidelines and the policy statement are being finalized for approval by the UNSOS Director.	Management steks to advise the auditors that the UNSOS risk register has been updated and risk treatment measures are being implemented. The approved risk matrix will be shared with the auditors. It should be noted that the Occupational Health and Safety function covers both UNSOS and UNSOM and that the OHS committee functions as a coordination structure for both missions and ATMIS The OHS Officer conducts inspections of ATMIS/UNGU locations and identifies OHS risks and makes	
Implementation date	30. Juite 2024	30 March 2024	30 June 204	
Tifle of responsible individual	OHS Officer	OHS. Officer	OHS Officer	
X	88 20	Yes	Yes	
Critical!/ Important	Important	Important	Important	
Recommendation	UNSOM and UNSOS should take measures to ensure the effective functioning of the occupational health and safety (OHS) committee, including; updating its terms of reference; having adequate representation; establishing a mechanism to track and monitor implementation of OHS recommendations; and holding quarterly meetings.	UNSOM and UNSOM should finaltize the occupational health and safety policy statement and guidelines.	UNSOM and UNSOS should strengthen the risk management for occupational health and safety through enhanced coordination among sections in UNSOM and UNSOS and African Transition Mission in Somalia.	
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adverse impact on the Organization. ² Important recommendations address those risk issues that require timely management attention. Failure to take action could have a high or moderate adverse impact on the Organization. ¹ Critical recommendations address those risk issues that require immediate management attention. Failure to take action could have a critical or significant

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Client connexts	recommendations on appropriate mitigating measures. (See annexes: of inspections of UNSOS, UNSOM and ATMIS facilities containing identified risks and recommendations). Going forward, with the support of the OSH Officet, management will engage with ATMIS to agree on a joint framework and mechanism to implement OHS risk treatment measures	across all areas. OHS has now been included in the schedule of Mission induction training for incoming UNSOM/UNSOS staff members. UNSOS will Conduct an OHS training needs assessment. UNSOS will also ensure that all contractors receive the required sensitization and training on OHS-related memory.	The mission has launched the global electronic. The mission has launched the global electronic. reporting platform for OSH reporting and follow-up, which is montfored by the OHS Officer and counterparts at UN Headquarters. (<i>The incident reports have been shared with the</i> <i>anditor</i>). Management continually sends broadcasts to remind UNSOM/UNSOS personnel that incidents should be reported within the stipulated as required inder the stipulated contributions and the inder the stipulated	The updated 2023-2025 Joint Action Plan has been submitted to the Heads of UNSOM and
Implementation Gate		-31 October 2024	30 June 2024	31 Ootober 2024
Title of responsible individual		OHS Officer /IMTC	OHS Officer.	OHS Officer/ UNSOS/UNSOM
Accepted? (Yes/No)	7	Yes	Ves	Yes
Critical// Important ²	· · · · · · · · · · · · · · · · · · ·	Intportant	in portaint	Important
Recommendation		UNSOS should conduct an occupational health and safety (OHS) training needs assessment and develop a plan to provide effective training and awareness to Mission personnel, contractors, and contingent personnel, including on reporting OHS incidents.	UNS/OS should develop an occupational health and safety incidents reporting and management system to ensure the incidents are promptly recorded and investigated within stipulated time frames.	UNSOM and UNSOS should strengthen the mainstreaming of cross-cutting issues
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fanagement Response	of occupational health and safety in UNSOM and UNSOS (Assignment No. AP2022-639-03)
Manageme	Audit of occupational health an (Assignment No.

UNSOS for approval, and measures outlined to implement the relevant parts of the framework including those flowing from the disability gender, multilingualism, human rights, and disability are included in the Mission OHS Management therefore requests that Part (a) of UNSOM and UNSOS should implement the The missions will ensure that mainstreaming of the recommendation be adjusted to read: remaining actions in the 2023-2025 joint action in the monitoring and reporting of the implementation of the OHS Committee's policies and guidelines for UNSOM and broadcasting the established mechanisms for personnel. UNSOS will ensure that monthly reminders are sent and will follow up with the concerned units to address any complaints in the revised OHS guidelines for UNSOM and UNSOS, and key stakeholders will be involved decisions, and the overall occupational safety periodically reporting welfare-related complaints to all Key performance indicators have been included **Client comments** Deen plan on disability inclusion. has inclusiveness audit. Management UNSOS. received Implementation 31 October 2024 30 June 2024 date Welfare Unit and OHS Officer working group responsible individual OHS Officer Disability inclusion Title of (Ves/No) Accepted? Yes Yes Important Critical) Important (OHS) programme by: (a) ensuring effective implementation of the joint developing an action plan to implement recommendations arising out of the monitoring, collection, and reporting of data on the implementation of the in the occupational health and safety action plan on disability inclusion, (b) disability inclusiveness review, and (c) initegrafing gender, multilingualism, human rights and disability into OHS UNSOS should institute mechanisms for key receiving and addressing welfare-related performance indicators to enhance safety establish. and Recommendation policies and guidelines. health should complaints. occupational programme UNSOS Rec. 10: 1 `00

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and health programme.

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