

## **Home Office Occupational Health Strategy Implementation Guidance**

### **Managing Health and Safety**

#### **Introduction.**

The following guidance is designed to support the implementation of the Home Office Strategy for a Healthy Police Service by providing advice for police managers in the area of health and safety management.

The strategy highlights the impact of sickness absence on the police service and aims to address this through the delivery of measures, which will:

- maintain the health of police officers and staff and,
- reduce injuries and ill health,

It reinforces existing legal responsibilities on :

- Chief Constables for the delivery of the strategy through meeting their legal obligations under health and safety legislation
- Line Managers for the promotion of health and safety of their staff
- All staff for maintaining their own health and safety

The Strategy for a Healthy Police Service is directly linked to the other related Government strategies of Revitalising Health and Safety and Securing Health Together.

Consequently all Forces are required to ensure that they manage health and safety in compliance with the law and seek to achieve reductions in the incidence of work related injury and ill health in accordance with nationally agreed targets.

The following guidance is divided in 8 sections and covers the areas of

- Section 1 – Strategies to Improve Occupational Health and Safety

The Strategy for a Healthy Police Service is significant in that it links directly to other governmental strategies for health and health and safety. Additionally that it commits the service to contributing to the achievement of targets for the reduction of work related ill health.

- Section 2 – Managing Health and Safety.

The strategic model for the effective management of health and safety is now well established. All forces must ensure that the model has become an integral aspect of all management activity.

- Section 3 – Risk Assessment

The assessment of risk has become a standard practice within the police service. All forces must ensure that it is completed systematically, thoroughly, reviewed appropriately and that it informs adequate control of risks.

- Section 4 – Controlling Risks

The risks faced by staff are varied and complex. Effective management must take into account the key aspects of people, equipment and premises.

- Section 5 – Training

The individual competence of staff is a crucial factor in ensuring safety. Competence can be achieved through a range of methods including training. Where training is used it is essential that needs are systematically identified, training developed and delivered in a way which maximises effective learning. A planned system of refresher training must also be in place to ensure that the competence of managers and staff is maintained

- Section 6 – Promoting Health and Safety

To be fully effective health and safety management must become ingrained in the culture of the organisation. To do so requires a commitment to the reinforcement of a positive health and safety culture by all levels of management. An example of good practice is through partnership with staff associations and trade unions.

- Section 7 – Accident Management and Investigation

Where accidents, ill health and near misses do occur it is essential that the apparent and underlying causes are identified so that improvements can be made and the risks of reoccurrence minimised, through control measures within the risk assessment process.

- Section 8 – Reporting to the Health and Safety Executive.

The reporting requirements of the Reporting of Injuries Disease and Dangerous Regulations 1995 are quite detailed and time-limited therefore the following detailed guidance is provided to assist, managers in complying with these legal requirements.

The following guidance supports previously published references including,

#### Home Office Circulars

50/1996	Guidance on the Management of Health and Safety in the Police Service
35/1997	The Police (Health and Safety) Act 1997: Training and other Implications

27/1998	The Police (Health and Safety) Act 1997, its commencement, senior officer training, inspection by HSE and related matters
36/1999	Generic Risk Assessments and good examples of risk assessments; Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR); Police Health and Safety – CD-ROM
52/1999	Home Office Health and Safety Standing Committee on Police Health and Safety; Police Health and Safety Regulations 1999; Role of a Safety Representative
17/2000	Agreement on the Inspection of Police Activities by the Health and Safety Executive; Visits by the Health and Safety Executive to Police Forces; Generic Risk Assessments – Scenes of Crime Officers; Home Office Health and Safety Information on the Internet
21/2002	The Application of the Working Time Regulations to the Police Service

Home Office Police Health and Safety Manuals:

Volume 1	A Guide for Senior Police Officers
Volume 2	A Guide for Police Managers
Volume 3	A Guide on Risk Assessment
Volume 4	A Guide on Training

Health and Safety Executive Publications including:

Successful Health and Safety Management (HSG 65)

Five Steps to Risk Assessment (HSG183)

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (L73)

## **Section 1 – Strategies to Improve Occupational Health and Safety**

The Revitalising Health and Safety strategy was launched jointly by the Government and Health and Safety Commission on 7 June 2000. This 10 year strategy seeks significant improvements in workplace health and safety by setting, for the first time, challenging targets aimed at reducing the incidence of work-related ill- health, the number of fatal and major injuries and working days lost caused by injuries and ill health.

The Revitalising Health and Safety targets to be achieved by 2010 are:

- A 30% reduction in the number of working days lost per 100,000 workers from work-related injury and ill health;
- A 10% reduction in the incidence rate of fatal and major injury accidents; and
- A 20% reduction in the incidence rate of cases of work-related ill Health

Additionally to achieve half of the above improvements by 2004

These are underpinned by a 10 point strategy, which sets the direction for Health and Safety over the next ten years, and emphasises the importance of promoting better working environments, motivating employers to improve health and safety performance and simplifying over-complicated regulations.

The Health and Safety Executive are also addressing the Revitalising Health and Safety strategy targets through a series of priority programmes focussing on sectors or hazards where improvements are vital if the targets are to be met. (sectors) construction, agriculture, and the Health services, and (hazards) falls from height, workplace transport, stress, musculoskeletal disorders and slips and trips.

The Revitalising Health and Safety strategy is underpinned by The Securing Health Together strategy, which takes a broad view of occupational health and is concerned with:

- Health risks arising from work affecting both workers and the public;
- The rehabilitation of people who have been ill or who have a disability and
- Helping people to retain or improve their Health through the work environment.

Securing Health Together shares with Revitalising Health and Safety, health targets for workers. That is to reduce the incidence of ill- health by 20% and working days lost by 30%. In addition it sets targets for 2010 to achieve;

- The reduction in the incidence of ill health arising from work activity in the public sector by 20%;

- Everyone who has been ill is given opportunities to return to work, if appropriate; and
- Everyone who is out of work due to ill- health or disability is given access to opportunities to prepare for or take up work.

Within the Police Service there has been considerable focus on health and safety management since the introduction of the Police (Health and Safety) Act 1997. Forces have built on existing management practice to achieve a model of health and safety management, which matches the published guidance of the Health and Safety Executive, as far as is reasonably practicable.

The implementation of The Strategy for a Healthy Police Service and the linkage to Revitalising Health and Safety, and Securing Health Together strategies, provide an opportunity for the police service to seek further improvement in occupational health and safety.

This will be achieved by raising the profile of health and safety, involving all staff and partner organisations in improving skills and reducing risks. Additionally by providing occupational health support for staff, including fast track treatment and rehabilitation.

## **Section 2 – Managing Health and Safety.**

Experience has shown that the most effective way in which to comply with health and safety legislation and to achieve a lasting improvement in health and safety at work is to:

- integrate the management of health and safety within the general management system of the force; and
- change attitudes towards health and safety so that they become ingrained into the safety culture of the force.
- Encourage and work with trade union and Federation safety representatives.

In practice Chief Constables and other Senior Managers must lead this process through the demonstration of a clear commitment to the safety of their staff and others effected by the work of their organisations.

The guidance issued by the Health and Safety Executive (HSG65) on this subject identifies five elements, which are essential to successful systems of health and safety management,

- a clear and effective health and safety policy.

All forces must have in place a policy setting out the commitment of the organisation to the management of health and safety, identifying those officers and staff with specific responsibilities, and detailing the management arrangements for the implementation and operation of the policy.

- the organisation of resources to implement the policy

for any health and safety policy to be effective it is essential that officers and staff are involved and committed. This requires, control, through the allocation of responsibilities and establishment of commitment, co-operation between individuals and groups, communication of the policy and management arrangements to all, and ensuring that all staff have an appropriate level of competence to complete their duties safely and effectively.

- the planning and establishment of appropriate standards for health and safety

planning is the key to ensuring that force health and safety really works. This requires setting measurable and achievable objectives, identifying hazards, assessing risks and developing a positive approach to the achievement of safe and healthy working practices. A key element of this is effective consultation with trade union and Staff Association Health and Safety Representatives.

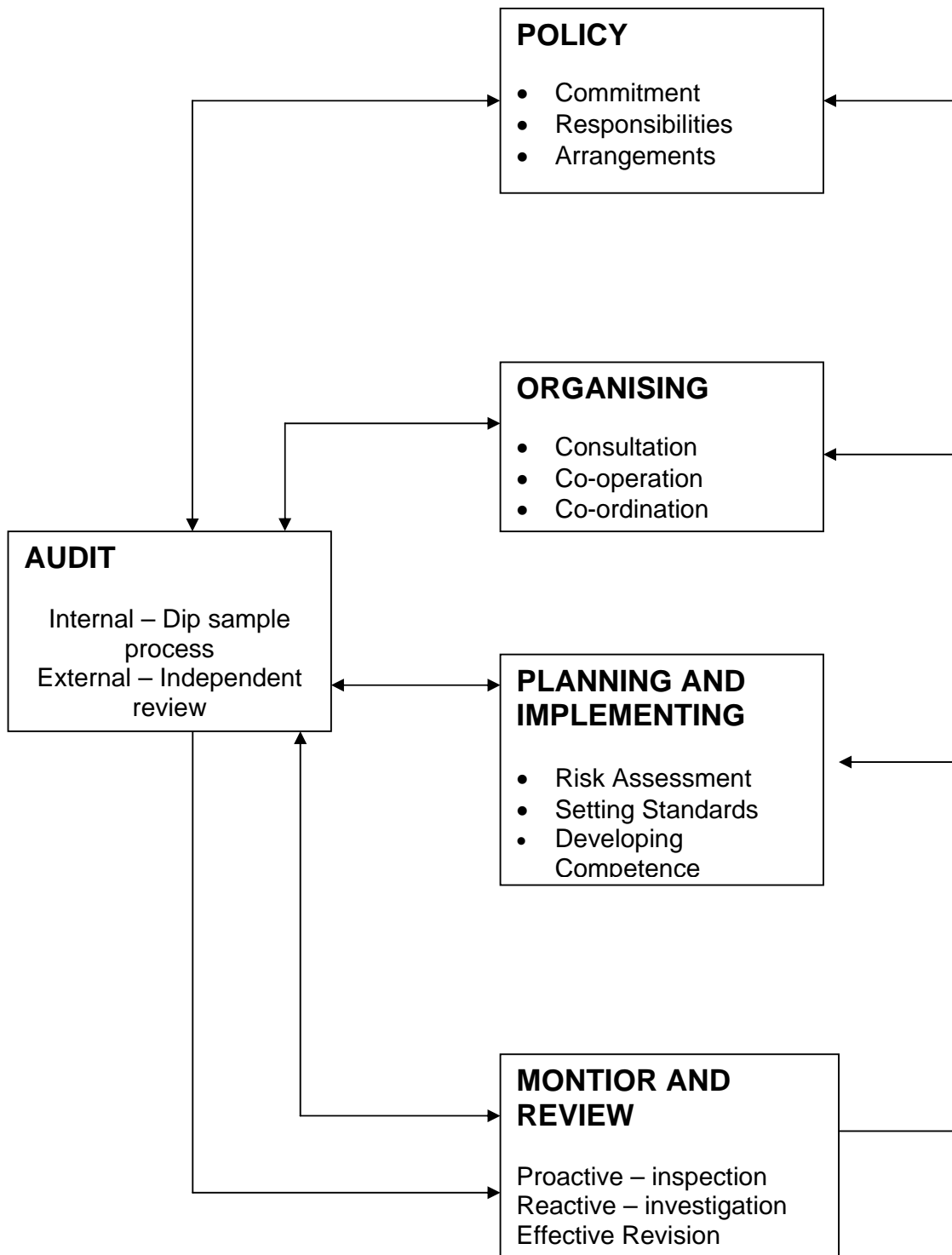
- the routine monitoring of performance

The performance of health and safety systems must be monitored in a similar manner to any other area of management in order to ensure that it is effective. This involves both active monitoring, e.g. the routine inspections of working practices, workplaces etc to ensure that standards are being maintained. Also reactive e.g. learning from mistakes when things go wrong. This will include the effective reporting, recording and investigation of accidents and ill health, review of civil claims against the force, enforcement action by the HSE and the costs of the above.

- regular audit and review of performance

No health and safety policy arrangements will be successful unless they are routinely reviewed and amended in the light of experience. This can be achieved through independent auditing, sampling a cross section of activities and examining proactive and reactive data. All above activities may be assessed by statutory health and safety committees which may be department, BCU, or otherwise.

## The Management of Health and Safety



### Section 3 Risk Assessment

The effective management of health and safety is dependant on the use of techniques for the identification of hazards, assessment of risk and the implementation of control measures to eliminate, control or reduce these hazards and risks.

Therefore the process of risk assessment has been made a legal requirement under general and specific health and safety legislation, including the Health and Safety at Work Etc Act 1974 and the Management of Health and Safety Regulations 1999.

It is essential that any staff who are given the responsibility of completing risk assessments are competent to do so. Competence is broadly defined as the knowledge skills and ability to identify what in a particular activity could cause harm, whom to, to assess the likelihood that harm may occur, the possible impact if it did, and what measures could be taken to prevent or reduce these events.

It therefore follows that those completing risk assessments will be familiar with the activity for assessment, have received suitable training to undertake the process, have access to specialist advice where necessary and are adequately supervised.

Within the risk assessment process a hazard is defined as something which can cause harm and risk is a measure of the likelihood that the harm may occur and the severity of the outcome if it did.

The following methodology has been developed from guidance published by the Health and Safety Executive in a leaflet "5 Steps to Risk Assessment".

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- Identify the hazards

A methodical examination must be made of all areas of activity in order to identify any process, equipment or environment, which could cause harm. This should take into account any relevant previous risk assessments, which have been completed, and involve consultation with those conducting the activity

Consideration should be given to whether specific health and safety regulations apply to the work activities, e.g. COSHH, Manual Handling Regulations.

- Decide who may be harmed and how

Identify both police staff and others e.g., visitors, contractors, members of the public who might be affected by police activities, premises, equipment and materials. What is the chance that those people might be hurt or suffer ill health?

- Evaluate the risks

Once the preliminary analysis has been carried out a number of steps need to be taken to evaluate the identified risks, and decide whether any existing precautions or control measures are adequate.

Assess whether the risk is high, medium or low

Criteria for estimating risks have previously been published by the Home Office, ( Home Office Manual – A Guide to Risk Assessment ) however Managers will need to apply these and their professional experience and knowledge of local circumstances in estimating the risk potential for each hazard.

Decide which precautions need to be taken in order to either remove the hazard and risks altogether, or control or reduce them to a more acceptable level.

- Record the findings

To comply with the law managers should keep copies of the risk assessment and the related documentation in a place where it is readily available for those undertaking the work and for inspection, if required, by force safety representatives and inspectors of the Health and Safety Executive.

It is essential that the results of risk assessments and in particular the necessary risk control measures, working practices etc are communicated effectively to those officers and staff effected by them.

- Review

Risk assessments must be reviewed periodically to ensure that they are still appropriate in view of any changes, which may have occurred to the area, activity, or personnel that they cover. Reviews should also take place after any significant events e.g. accidents or work related ill health.

The police service is unique in that officers undertaking operational duties are often required to act independently and quickly in a wide variety of situations, often without recourse or access to conventional protective measures. However, whilst the nature of operational policing is often unpredictable, there are many situations which may be planned for or rehearsed where risks may be quantified and safe systems of work developed.

Therefore a system has been developed for risk assessment within the police service. This contains the following three elements.

- Generic Risk Assessment.

Generic assessments are designed as a template to cover a range of activities where a number of common hazards may be encountered and therefore control measures universally applied, e.g. custody duties. These must then be tailored to suit the particular activity or workplace

- Specific Risk Assessments.

Specific assessments are used for activities where the hazards and risks are particular to that activity, e.g. searching, or for activities where local factors are sufficiently different to make the use of a generic assessment inappropriate.

- Dynamic Risk Assessment

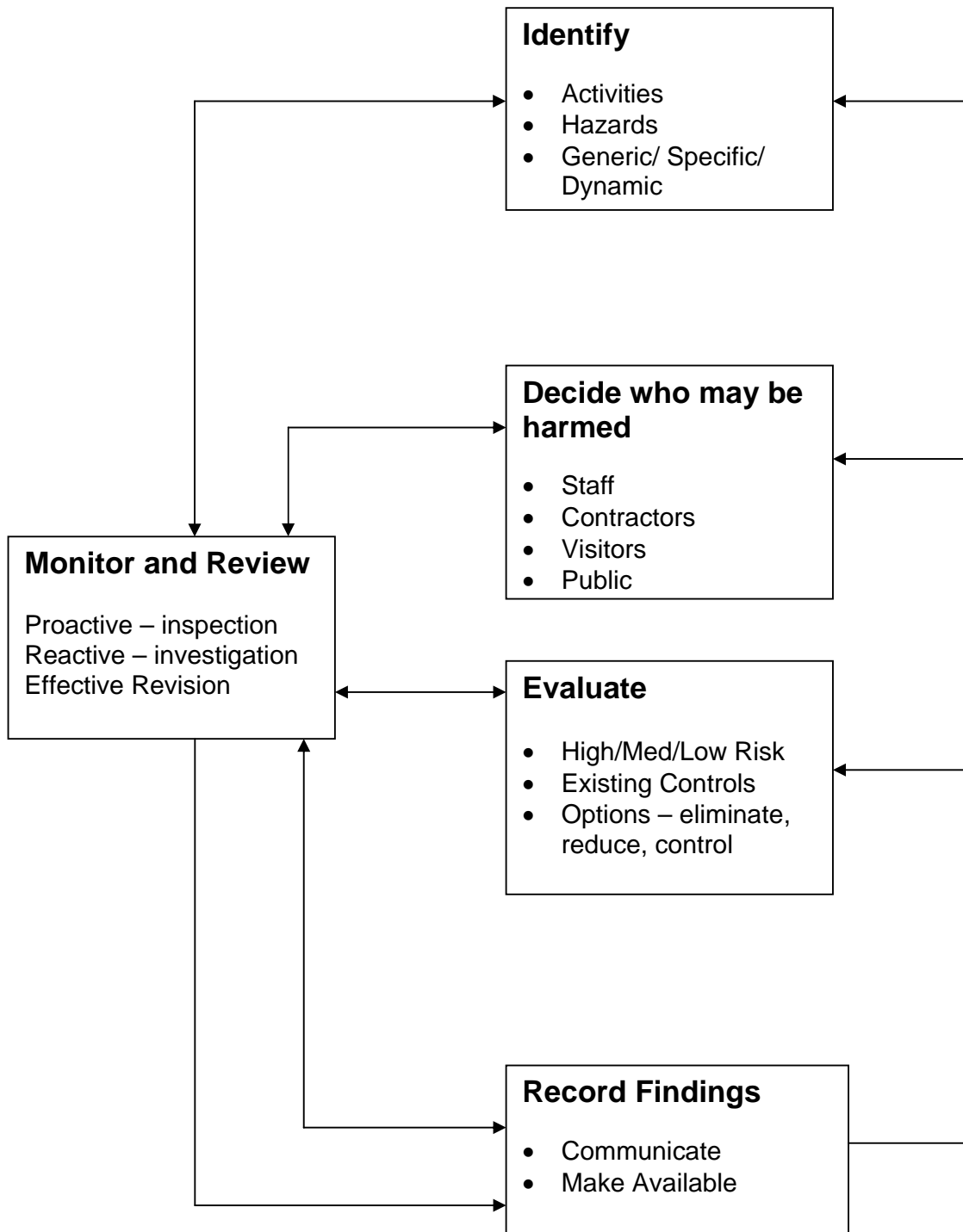
Dynamic risk assessment is a process that takes into account changing circumstances during an activity where the generic or specific assessment may become ineffective e.g. public order situations.

While overall responsibility lies with managers the fact that officers are often working alone or in small autonomous teams means that dynamic risk assessment is undertaken by all personnel at operational incidents. Individuals must identify hazards, assess the risk and then make judgements that achieve an acceptable level of safety.

In order to ensure safety through dynamic risk assessment and management it is essential that the organisation has taken responsibility for the selection, training, equipping and supervision of staff. Thereby enabling individual officers to make professional judgements through being

- Competent to perform the tasks required,
- An effective member of a team,
- Self discipline to work within accepted systems of work
- Adaptable to changing circumstances
- Vigilant for their own safety and that of others
- Able to recognise their own personal abilities and limitations.

## Risk Assessment



## Section 4 Controlling Risks

The risk assessment process provides information on the significant hazards and risks that can reasonably be predicted in any area of work. Reference to existing working practices, guidance published by the Health and Safety Executive, ACPO and others will define what measures need to be taken to comply with the law, and eliminate, control or reduce risks to an acceptable level.

Control of risks faced within the police service is most effective when focussed on the following areas;

- People

The officers and staff of every force are the primary means of providing policing services and as such are best placed to maintain their own safety, that of their colleagues and the public in general.

However, to achieve this they must be aware of the risks they face, be properly equipped, trained and competent in the tasks in hand. It is therefore essential that; the staff, or their representatives, are consulted in the risk assessment process, that they are fully informed of the risk assessments that have been completed, are organised effectively so that they are all confident in their role and understand how their actions may effect the safety of others.

Through this process managers must ensure that all staff are committed to complying with the arrangements which have been made to control risks.

- Equipment

The equipment used by officers and staff plays an increasing role in the control of risks. All equipment must be selected and maintained so as to be suitable and sufficient for the purpose, which it is to be put. Officers and staff must be trained and competent to use the equipment though adequate instruction, which is refreshed where necessary. Managers must ensure that equipment is not abused.

- Premises

An increasing amount of police work is conducted within buildings and premises with an emphasis on office, administrative and IT functions. While the hazards found within these areas are not as immediate or often as apparent as those faced by officers and staff working in public places they may still be significant. For example Asbestos materials within buildings are considered a major risk particularly to maintenance staff and contractors involved in repair or removal work. Injury and ill health can be avoided or reduced through the allocation of sufficient working space, with suitable facilities management e.g. heating lighting ventilation etc. Health and safety legislation requires such premises to be supplied, maintained and operated with due regard to safety including adequate arrangements for the management of fire risks and provision of First Aid.

## Section 5 Training

The management of health and safety within policing activities is largely dependent on the knowledge and skills of officers and staff. This is particularly evident in the dynamic area of front line policing where officers and operational staff often face hazardous situations alone. It is therefore essential that all Forces make adequate provision for effective training and development in health and safety.

Legally Forces must ensure that;

- The demands of the job do not exceed the employees ability to a carry out the work without risk to themselves or others
- That employees are provided with adequate health and safety training at the time they are employed and when they are exposed to new or increased risks
- Those responsible for the management of health and safety are appropriately trained, and that
- The training is repeated when appropriate, and adapted to take account of new risks to health and safety.

The requirement for health and safety training within the police service includes the following 4 key areas.

### All Personnel

Regardless of role, rank or grade, all police personnel should be made aware of specific issues:

- the force health and safety policy, the organisational structure and systems for management of health and safety;
- the expectations made of them, and
- the risks to which they are exposed with the controls put in place for their protection.

Such information should be given at the commencement of employment to all **new personnel** and should form part of the **induction** training in health and safety that is legally required. Other information to be given should detail specific requirements for safe working procedures.

All **existing personnel** have an integral role to play in the development of the safety culture. They therefore require a basic level of health and safety awareness training to appreciate the extent of their duties and responsibilities. The topics that should be covered in such training are:

- details of the organisational structure for health and safety management;

- details of individual personal responsibilities to themselves and to others who may be affected by their work activities;
- the role of safety representatives;
- the role of safety committees;
- hazard identification;
- the concept of dynamic risk assessment;
- measures put in place to ensure safe working practices;
- measures for accident, incident and use of force reporting; and
- emergency procedures that have been established.

### **Senior Managers**

All senior management teams should receive safety leadership training, which should focus upon:

- legislative requirements;
- corporate responsibilities;
- strategic implications;
- the consequences of decision making; and
- the impact of external influences (for example, terrorism).

### **Managers and Supervisors**

As specific duties have been placed on all supervisors to ensure compliance with health and safety policies, etc, knowledge of what is expected and how this can be achieved is a basic requirement for both police and support staff managers. This includes knowledge of:

- their own personal responsibility for the health, safety and welfare of all the staff under their control;
- The need to keep risk assessments up to date and relevant
- the need to ensure their staff have sufficient instruction, information and training to enable them to perform their tasks effectively and safely;
- the need to investigate accidents, injuries and dangerous occurrences in order to establish the cause so that action can be taken to prevent recurrence;
- the reporting of accidents, injuries and dangerous occurrences;
- the need to carry out workplace inspections;
- the need to keep records of all health and safety arrangements;
- the need to lead by example;

- the skills and knowledge to enable them to complete appropriate risk assessments for all work activities under their control.

### **Those with specific health and safety responsibilities**

Where managers delegate specific health and safety tasks, they must ensure that the individuals to whom they delegate have received adequate information, instruction and training and have appropriate resources made available to them. The responsibility remains with the delegating manager to ensure that the necessary training and resource allocation takes place.

Some examples of health and safety tasks that may be delegated to trained, competent supervisors (following receipt of the training detailed at 5.2) include:

- risk assessment;
- C.O.S.H.H. assessments;
- manual handling assessments;
- display screen work station assessments;
- maintenance of numbers of qualified first aiders;
- nomination and training of fire marshals;
- installation, etc of electrical equipment; and
- safe maintenance of plant and premises

The development and delivery of training in order to comply with the law and to ensure competence should be undertaken in a systematic manner and include the following steps,

Decide if training is necessary.

Training should not be used to compensate for inadequacies in other aspects of the safe system, such as poorly designed working practices. Identifying whether training is necessary demands an understanding of the job requirements and the abilities of the individual.

#### **Identify Training Needs**

There are three main types of training needs, organisational, job related and individual

#### **Develop and Deliver Training**

All training should be developed to meet clear and specific training objectives. These will typically be the key or most significant issues identified within the training needs process and having been prioritised by reference to the relevant risk assessments, job analysis etc. Training delivery should be tailored to the subject

and participants. The abstraction of officers and staff to undertake training has significant consequences for all Forces and it is therefore essential that the method of delivery seeks to minimise the amount of time away from the work place while ensuring that the subject matter is effectively communicated and learning achieved.

Evaluation.

The systematic evaluation of training should be completed to ensure that learning has been achieved and that participants can translate this into safe working practices. Evaluation can be completed through a variety of methods including,

- Questionnaires

Seeking feedback from participants on the key learning objectives from the course.

- Assessment

Observation of practical tasks,

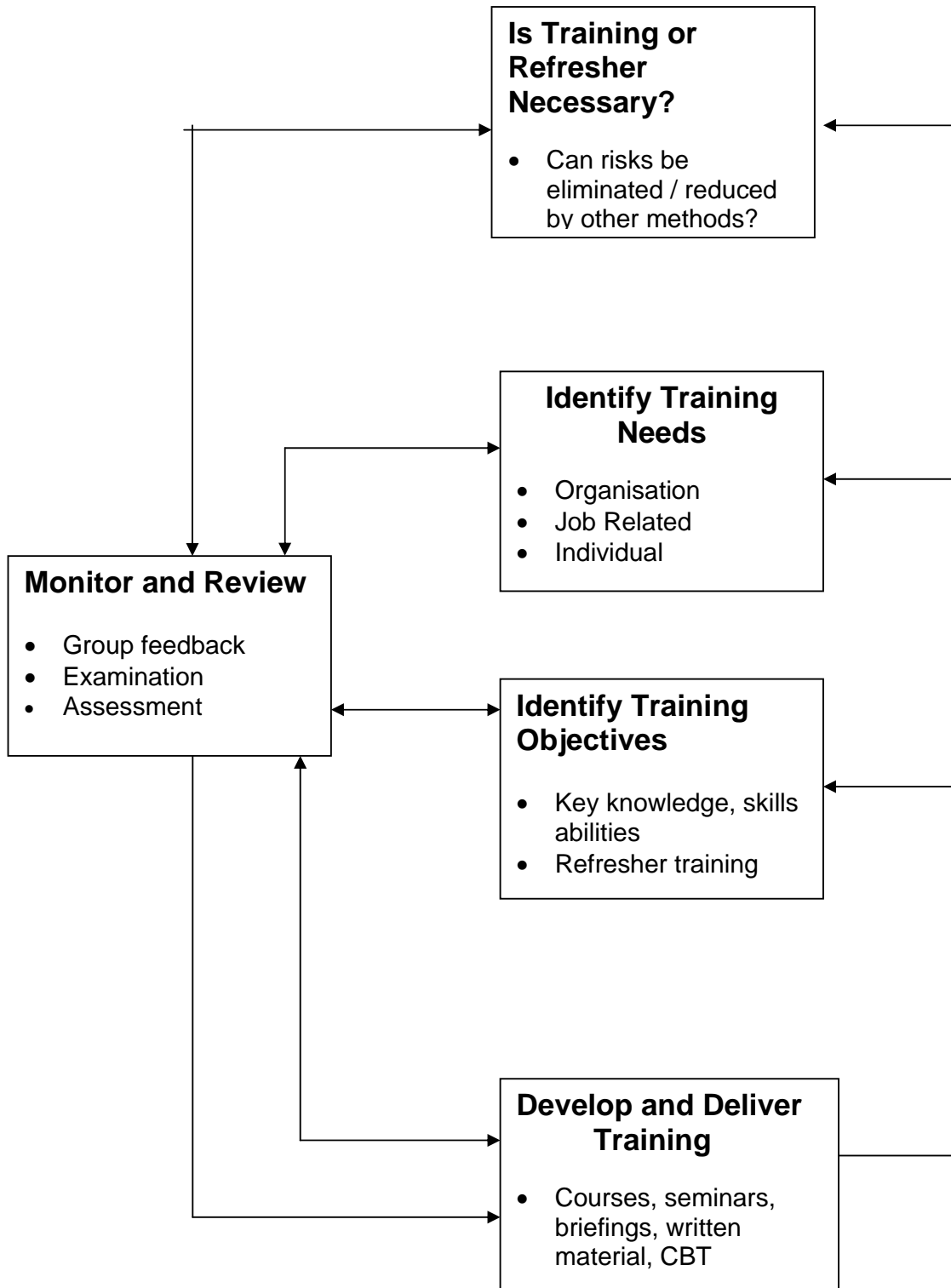
- Examination

The testing of theoretical knowledge

In practice training must include an appreciation of the basic principles of health and safety management, awareness of the hazards and risks which may be present in the roles performed by officers and staff and knowledge of how these risks are to be controlled.

Detailed training needs will be identified through risk assessment and should result in the provision of information, instruction, training and development that ensures the appropriate level of competence. Skills obtained through this process must be maintained and enhanced through the provision of refresher training.

## Health and Safety Training



## Section 6 Promoting Health and Safety

The Strategy for a Healthier Police Service requires Managers at all levels to take responsibility for promoting health and safety. The reasoning behind this is that the successful management of health and safety is critically dependent on the actions of officers and staff in following the policies, procedures and safe systems of work which have been created to manage the risks associated with the activity.

In turn the likelihood that officers and staff will act appropriately is reliant on their awareness of the risks involved, knowledge and understanding of the procedures, systems equipment etc, and critically their perception of the need for these measures. All of which is greatly influenced by the value, which the organisation places on safety as evidenced by the attitude and behaviour of its Senior and Line Managers.

Therefore Senior and Line Managers must at all times display a commitment to the management of health and safety. They should take control of the factors that could lead to ill health injury or loss, by providing clear direction and taking responsibility for the working environment in which accidents, ill health and incidents occur. This creates a positive atmosphere and encourages a creative and learning culture in which the emphasis is on a collective effort to develop and maintain systems of control before the event rather than blaming individuals for failures afterwards.

The promotion of health and safety should occur on a number of levels for example formally through the development and briefing of an operational order, or informally through seeking verbal feedback on the use of a new item of equipment. It should be regular and routine as opposed to reserved for particular safety related initiatives, as in reality health and safety issues exist in virtually every task performed. Therefore to be effective health and safety management should be an integral part of all management process.

Areas in which Senior and Line Managers can achieve the effective promotion of health and safety include,

### Planning

- Identifying hazards and assessing risks in consultation with staff
- Developing control measures which take account of staff competence
- Defining responsibilities for the completion of the task
- Setting clear objectives for staff to achieve

### Communication

- Ensuring that all staff know what is expected of them, why and how they are to achieve it
- Making health and safety a standing item on team briefings
- Create local safety initiatives on a range of subjects e.g. officer safety, manual handling
- Using a range of media to maintain interest, e.g. briefings, leaflets, posters etc

## Supervision

- Checking that staff are aware of the health and safety issues in their role/task
- Ensuring that procedures are being followed , equipment used properly
- Seeking feedback from staff on their experiences
- Encouraging safe behaviour

## Performance Review

- Measuring performance against objectives
- Identifying training and development needs
- Providing support and encouragement

## **Section 7 Accident Management and Investigation**

Each year a significant number of police officers and support staff may become unwell, injured, or possibly even lose their lives while performing police duties, it is therefore essential that the police service learns from this experience in order to prevent or reduce these incidents in the future.

The reporting of accidents and work related ill health to the Health and Safety Executive is subject to strict statutory duties under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

Staff Association Health and Safety Representatives have a statutory right to investigate accidents within the workplace. Their expertise in this area can be of great value to managers and should be sought proactively. Managers may wish to conduct dual investigations to make best use of available time and resources.

The effective investigation and analysis of accidents, ill health and even incidents which had the potential to cause such harm (near misses) should lead to the identification of the root and underlying causes of accidents and ill health and result in the following benefits

- **Damage Control**

It enables the organisation to ensure that any injuries are dealt with promptly, damage assessed and immediate action taken to prevent recurrence.

- **Management information**

It enables managers to consider:

- What preventative action needs to be taken to prevent further damage/injury;
- Implications for force health and safety policy
- Underlying failures in health and safety management systems

- **Statutory Obligations**

Reporting accidents and ill health at work is a legal requirement.

It provides the information forces require:

- To report certain accidents/incidents/cases of ill health to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 1995; and
- To comply with the Social Security (Claims and Payments) Regulations (1979), which requires the preservation of data about injured persons to enable claims for industrial disability to be processed.

## Management Action

It is important that managers should act promptly to **prevent the recurrence** of the accident or dangerous occurrence. This involves the following steps being taken:

- Investigative Action

Any accident, dangerous occurrence or near miss should be investigated to ascertain not only the specific direct cause of the accident, incident etc but also to identify the underlying systemic causes that contributed to the event.

Not all events need to be investigated to the same extent or depth, the greatest effort should concentrate on significant events where there has been serious injury, ill health or loss as well as those which had the potential to do so.

The purpose of the investigation is not to apportion blame but to prevent a reoccurrence. The investigation needs to consider the involvement of the organisation, the workplace environment and the person involved.

The investigation needs to be comprehensive and identify all possible contributory factors and their cause –effect relationship. The findings need to be acted upon promptly and the relevant risk assessments covering the activity amended to prevent reoccurrence. This then needs to be communicated to the workforce.

In most cases the investigation can be carried out by the supervisor in consultation with the officers or staff concerned. In more serious cases this will require a more formal investigation by either a local or a senior investigation team. However it will be necessary for the person carrying out the investigation to have knowledge of health and safety procedures and legislation, and the status to make authoritative recommendations

As noted above Staff Association Health and Safety Representatives should be involved and consulted, as in addition to their independent role on behalf of their members, they can assist greatly in the management investigation of accidents.

In some cases the Health and Safety Executive may wish to carry out an independent investigation.

- Immediate Action

Although it should go without saying, it is also essential that supervisors and managers should take steps to secure the site to prevent the recurrence of the accident. In many cases this is all the action that will be necessary.

- Further Action

Where further action is required, this needs to be identified at the outset and a path charted to ensure that the necessary steps are taken.

Sometimes this will be dependent on the result of a formal investigation. The important thing is to **ensure that the matter is not overlooked**.

Managers should be provided with sufficient authority to commission emergency repairs and other action needed to secure a site.

## **Investigation procedures**

The investigation needs to be undertaken as soon as practicable after the event. The level of investigation will depend upon the actual or potential seriousness of the situation or near miss.

The first supervisor made aware of the event needs to assess what level of investigation is necessary and who has the requisite competence to carry out the task.

For events of a relatively minor nature it may be possible for the immediate supervisor to undertake this task and submit their report to other division/department managers safety and occupational health departments, together with Federation and Unison safety representatives.

The person carrying out the investigation must ensure that any lessons learnt from the investigation are immediately acted upon.

In more serious incidents or events a more formal investigation must follow involving individuals with the necessary competence to undertake the function. Again relevant departmental/ divisional managers and force safety and occupational health staff need to be aware or involved in the investigation, as well as the safety representatives.

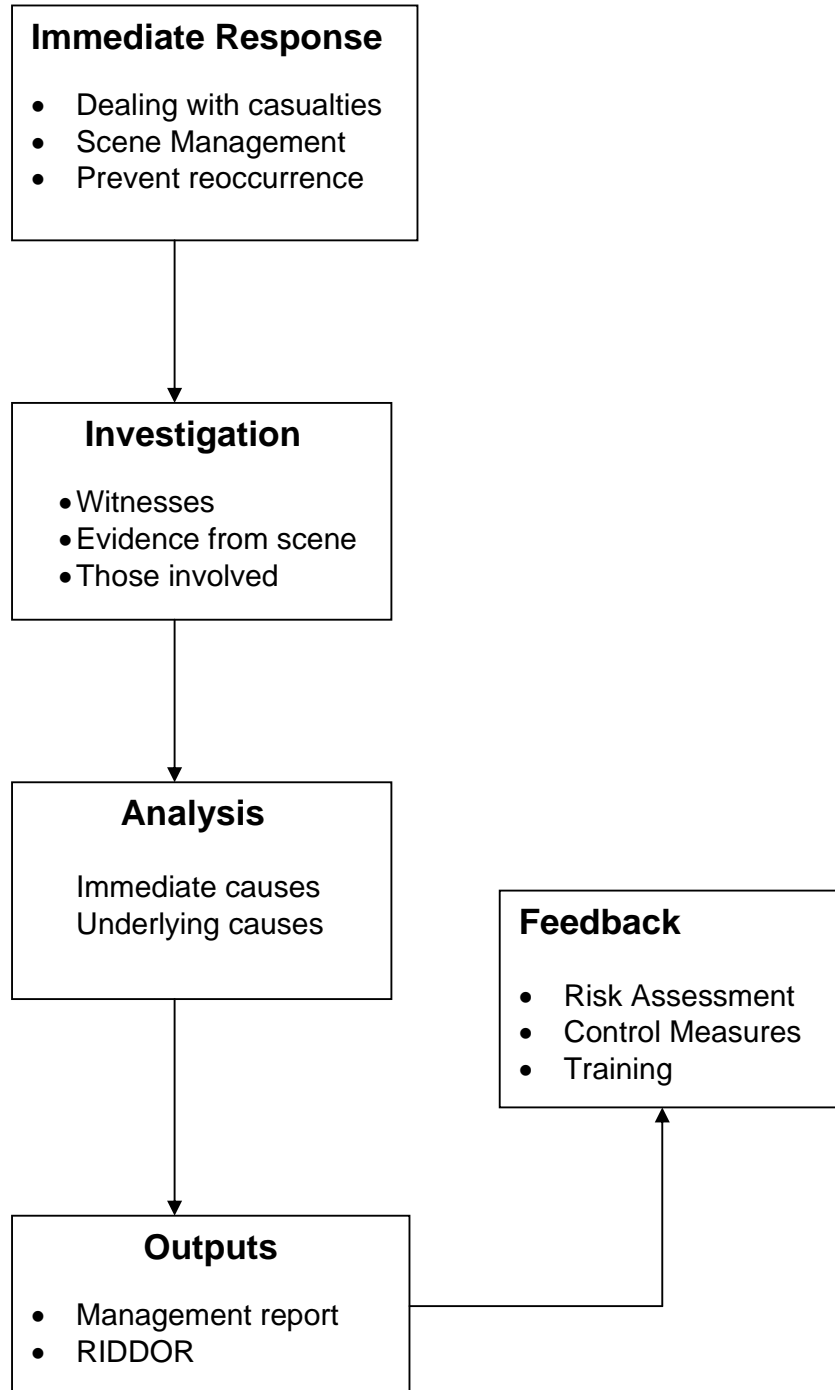
## **Conducting investigations**

In conducting investigations the key sources of information will normally be gathered:

- At the scene of the accident/incident
- From the person or persons involved; and
- From the statement of any witnesses
- From Supervisors and Managers
- From Force Risk Assessments, instructions or other relevant documentation.

When carrying out an investigation all these factors should be born in mind. It is also important to avoid the temptation to accept what appears to be obvious without question. Once the true causes and underlying factors of the accident have been identified, it should not be difficult to identify the appropriate action to prevent its recurrence.

# Accident Management



## Section 8 Reporting to the Health and Safety Executive ( RIDDOR)

The reporting requirements of the Reporting of Injuries Disease and Dangerous are quite detailed and time-limited therefore the following detailed guidance is designed to assist, managers in complying with these legal requirements.

The Health and Safety Executive must be notified in the following circumstances

- Death or major injury

If there is an accident connected with work and, as a result:

Your employee or a self-employed person working on your premises is killed or suffers a major injury (including as a result of physical violence); or

A member of the public is killed or taken to hospital: details of the circumstances in which such accidents to members of the public are reportable are given in Home Office Circular HOC 36/1999.

You must notify the enforcing authority without delay by contacting the Incident Contact Centre (ICC). You can report incidents in a variety of ways: by telephone (0845 300 9923), fax (0845 300 9924), via the Internet ([www.riddor.gov.uk](http://www.riddor.gov.uk)), or by post to ICC, Caerphilly Business Park, Caerphilly CF83 3GG. The ICC will ask for brief details about your business, the injured person and the accident.

- Over three day injury

If there is an accident connected with work (including an action of physical violence) and your employee, or a self-employed person working on your premises, suffers an over-three-day-injury you must notify the Incident Contact Centre. An over-three-day-injury is one which is not “major” but results in the injured person being away from work or unable to do the full range of their normal duties for more than three days (including non-work days such as weekends, rest days or holidays)

- Disease

If a doctor notifies you that your employee suffers from a reportable work-related disease then you must notify the Incident Contact Centre.. A full list is in the guide to the Regulations, or you can simply ring HSE to check whether a disease is reportable.

- Dangerous occurrence

These are incidents that have a high potential to cause death or serious injury. If an injury occurs and is reportable then the dangerous occurrence should not be reported separately. A full list is in the guide to the Regulations. As before, notification should be given to the Incident Contact Centre.

It should be noted that, under the current regulations, accidents involving vehicles moving on public roads are not reportable unless they involve or are connected with:

- Exposure to any substance being conveyed by road:
- Vehicle loading and unloading activities
- Activities concerned with the construction, repair and maintenance of roads;
- An accident involving a train where a person is killed or injured

However, HSE has an interest in accidents to police staff who are working on foot alongside the highway, eg on vehicle stops and has requested that such accidents should be notified in the normal way.

### **Keeping records**

You must keep a record of any reportable injury, disease or dangerous occurrence. This must include the date and method of reporting; the date, time and place of the event, personal details of those involved and a brief description of the nature of the event or disease. You can keep the record in any form you wish, for example by keeping copies of the completed report forms in a file or recording the details on a computer.

It is important to ensure that your record keeping is fully compliant with the Data Protection Act (1998).