



**RSM Tenon**



LEICESTERSHIRE POLICE AUTHORITY

Health & Safety Governance

Internal Audit Report 16.09/10  
8 February 2010

## CONTENTS

Section	Page
Executive Summary	1
Action Plan	4
Findings and Recommendations	6

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# 1 EXECUTIVE SUMMARY

## 1.1 INTRODUCTION

Protecting the health and safety of employees or members of the public who may be affected by your activities is an essential part of risk management and must be led by Executive Team and Police Authority. Failure to include health and safety as a key risk in Authority or Force decisions can have catastrophic results.

The Health and Safety at Work etc Act 1974 (HSWA) applies to all activities of the Police Service. The primary duties under HSWA are on employers. Since 1998, Chief Constables are deemed the employers of police officers. The Police Authority or Joint Police Board is the employer of all other staff. Health and safety law states that organisations must:

- Provide a written health and safety policy (if they employ five or more people);
- Assess risks to employees, customers, partners and any other people who could be affected by their activities;
- Arrange for the effective planning, organisation, control, monitoring and review of preventive and protective measures;
- Ensure they have access to competent health and safety advice;
- Consult employees about their risks at work and current preventive and protective measures.

Failure to comply with these requirements can have serious consequences. The application of health and safety law is challenging for the Police Service in relation to many of their operational activities and has been identified in the 'Striking the Balance' document issued by the Health and Safety Executive in October 2009. The document is intended to assist senior police officers in balancing risks, particularly in their wider duties to fight crime and protect the public, while meeting their health and safety at work obligations to the public as well as their staff.

At Leicestershire we noted that health and safety matters across the organisation are subject to discussion, monitoring locally within departments, Headquarters and the BCUs in consultation with the Unions, the federation, staff associations and to the Police Authority. The central Health and Safety department have recently gained additional resources in staffing which will also enable them to carry out more health and safety audits and to enhance the advisory role within the Force including coverage associated with environmental matters.

Within the Force there is now a move to transfer the locally stored hard copy risk assessments to the central Orchid risk management system which will assist the Force with monitoring that risk assessments are completed and recorded and to access real time data on health & safety risks/ existing computer records for risk assessments is likely to provide a good monitoring tool in ensuring risk assessments are available, accessible and reviewed in line with requirements.

From 2009/10, Bedfordshire, Derbyshire, Leicestershire, Northamptonshire and Nottinghamshire Police Authorities jointly procure internal audit services from RSM Tenon (formerly RSM Bentley Jennison). As part of this arrangement, a thematic review of health and safety governance has been completed with the following objectives:

- to review and evaluate how each Authority oversees health & safety; and
- to collate data and information to provide a comparative report to all five authorities. This will include gathering information on processes that work well, and on reporting and monitoring arrangements as well as numeric data.

This report is for the information and use of Leicestershire Police Authority and will not be shared with the other members of the police internal audit group. Subsequently a 'thematic' report will be prepared and shared with all of the participating authorities discussing arrangements, practices and including comparative data.

## 1.2 CONCLUSION

From the outcomes from our review the Force and Authority have generally adequate mechanism to monitor and communicate on health and safety matters, however, we have made a number of recommendations which are designed to enhance current controls and arrangements to provide greater assurances over the existing governance arrangements on health and safety in the future. In particular, our significant recommendation relates to the need to ensure that health and safety information, including near misses, are formally reported to the Authority.

It should be noted that recommendations classed as 'Significant' we consider need attention to ensure that the Authority is addressing core expectations of health and safety governance as set out in "*Leading Health and Safety at Work: Leadership Actions for Directors and Board Members*", a joint publication from the Health & Safety Commission and the Institute of Directors. A number of recommendations are classified as 'Merits Attention' and are intended to enhance existing arrangements or assist the organisation move towards best practice.

We will be publishing a separate 'thematic' report which will include good practice and innovation observed from all five authorities. With regards to Leicestershire Police, we have identified the following area as good practice or innovation compared to similar practice at other forces:

- The Force is progressing plans to add health and safety risks to a specific section of its Orchid Risk Management system alongside general risks. This will allow for the filing of evidence documents alongside health and safety risks and will facilitate reporting with real time data.

## 1.3 RECOMMENDATIONS SUMMARY

The following table highlights the number and categories of recommendations made. The Action Plan at Section 2 details the specific recommendations made as well as agreed management actions to implement them.

### Recommendations made during this audit:

Area	Fundamental	Significant	Merits Attention
Health and Safety	0	3	4

#### 1.4 SCOPE OF THE REVIEW

Our review does not provide guarantee that the Authority or Force have fulfilled all of their Health and Safety duties. The review will not form an opinion on:

- The outcome of any cases pending against the Authority or Force;
- Whether the Authority or Force are in breach of any health, safety and welfare legislation or regulation;
- Whether the Authority or Force will be prosecuted under the Corporate Manslaughter Act

The data gathered during this review will not be made available to any of our clients outside of this group of police authorities.

In order to understand the health and safety arrangements in place we interviewed the following:

- The Principal Health and Safety Advisor
- The Chief Executive of the Police Authority
- MSO for Protective Services
- Procurement Officer (HQ)
- Authority Administration staff
- Reception personnel (externally contracted)
- Authority Lead for Health and Safety
- Various HR Officers/administration staff

## 2 ACTION PLAN

The priority of the recommendations made is as follows:

Fundamental	Significant	Merits Attention
Action is imperative to ensure that the objective for the area under review is met	Requires action to avoid exposure to significant risk in achieving the objective for the area under review.	Action is advised to enhance control or improve operational efficiency

Ref	Recommendation	Categorisation	Accepted (Y/N)	Management Comment	Implementation Date	Manager Responsible
6	Determine what information needs to be reported upon (based on HSE requirements) to the Police Authority or F&GPC (as required) and ensure that an annual report is submitted each year. The Authority may wish to receive a retrospective report for 2008/09 to ensure that it has a complete reporting overview of health & safety outcomes.	Significant	Y	<p>Agreed</p> <p>To be discussed, confirmed and communicated and To be reported to the next F&amp;GPC 22.12.09 and thereafter in June annually.</p> <p>Report was submitted in similar format to previous years. The attendance of two members of the Police Authority at H&amp;S Executive Committee meetings is a key strength for us compared to other Forces.</p> <p>Consideration could be given to reporting the key h&amp;s strategic risks detailed on Orchid – these are already beginning to be reported to the Exec committee.</p>	Implemented	Principal H&S Advisor

Ref	Recommendation	Categorisation	Accepted (Y/N)	Management Comment	Implementation Date	Manager Responsible
8	To identify and agree the targets that will be reported to the Performance Delivery Group in the future and carry this through to the Health & Safety Policy.	Merits Attention	Y	Agreed To be reported to the next F&GPC 22.12.09 and thereafter in June annually.	End of March 2010 for 2010/11.  Report to H&S Executive Committee, 26/2/10.	Principal H&S Advisor
12	Carry out a review to ensure risk assessments are transferred over to the Orchid system and to provide assurances they are being updated in accordance with requirements. At the same time, a reminder should be issued that all risk assessments must be kept up to date.	Merits Attention	Y	Agreed	Immediate	Principal H&S Advisor
19	HR should clarify controls required to be followed in connection with the procedure on the Induction Checklist and ensure the correct procedures are followed. We would suggest the following controls. <ul style="list-style-type: none"> <li>▪ to require induction checklist to be completed</li> <li>▪ ensure HR follows up instances where the induction checklist is not returned in a reasonable timescale</li> </ul> Failure to return these should provide a mechanism to seek assurances all have been adequately completed.	Significant	Y	To be communicated to HR for actioning.	Implemented	Ali Coulton – HR Workforce Planning  Steve Smith – HR Business Solutions

Ref	Recommendation	Categorisation	Accepted (Y/N)	Management Comment	Implementation Date	Manager Responsible
20	Ensure that accident and incident data are reported both to the Force Executive Group and to the Authority at appropriate intervals.	Significant	Y	To be confirmed Accident and incident data can now be reported to the H&S Exec due to admin staff being available. Accident stats reported to PA in previous formal report to F&GP in December	Report to H&S Executive Committee, 26/2/10.	Principal H&S Advisor
21	Draw up a new risk and establish the mechanisms required to identify and deal with any gaps in the management structure for health and safety within the organisation as a whole.	Merits Attention	Y	Agreed	Implemented. H&S compliance risk established	Principal H&S Advisor
25	Ensure that DSE assessments are supported with paper records so there is evidence of the assessment for officers and staff of both the Authority and the Force.	Merits Attention	Y	Agreed This is already in place as people complete the HS9 DSE assessment – I would question whether this recommendation is necessary as current practice is not deficient	Immediate	Chief Executive

### 3 FINDINGS AND RECOMMENDATIONS

	Consideration (adapted from Institute of Directors' guidance)	Comments, Findings & Implications	Recommendations
1	The Authority is aware of the significant health and safety risks faced by the organisation.	<p>The Authority is kept aware of the health and safety matters of the Force through the Finance &amp; General Purposes Committee or via the Full Authority as confirmed by the Chief Executive.</p> <p>The Chief Executive and the Lead Member for health and safety also attend the Force Executive Health &amp; Safety Committee which is chaired by the Deputy Chief Constable. At these meetings they receive updates on the activity on health and safety matters from the various Areas/Department Committees and coverage may include issues arising from identification of health and safety risks.</p> <p>Both the Force and Authority maintain risk registers that may include high level risks for health and safety (e.g. sickness and Pandemic Flu), but in the main these are kept separately by the Departments and Areas, though depending on the risk scores could be moved across onto the main Force Risk Register (Orchid). The Force is now adding health and safety risks to a specific section of its Orchid Risk Management system alongside general risk. This will allow for the filing of evidence documents alongside risks and will facilitate reporting with real time data.</p> <p>The main Force Risk Register is monitored through the Force Risk Management Group quarterly and then to the Audit Committee of the Authority.</p> <p>In our comparative report we will provide some information on the nature of risks captured by Forces and Authorities relating to health and safety.</p>	
2	A documented Health and Safety Policy is in place.	<p>The Force has in place a Health and Safety Policy supported by a Procedure document and consultation procedure. The Authority has also signed up to this.</p> <p>The documents set out the policy statement, the aims, legal basis, scope and monitoring requirements. The Procedure sets out responsibilities of the various roles for Health &amp; Safety.</p> <p>There is no specific reference to specific key performance indicators / measures within these documents. In discussion with the Principal Health &amp; Safety Officer we confirmed they do not have specific performance indicators / targets set other</p>	KPIs have now been developed through the monthly compliance inspections that the risk management unit undertakes. These have been reported through to PDG.

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
		than a Health & Safety Strategy, but do have an annual action plan and progress on this is monitored by the Force Executive Committee through the year (as set out in the Policy document).	
3	The Health and Safety Policy evolves over time, in response to organisational changes like restructuring or a significant acquisition.	The Health & Safety Policy was last reviewed in January 2009 and will be reviewed annually. The Principal Health & Safety Officer confirmed it is anticipated both the policy and procedure will be reviewed at the same time for consistency. The Policy review in January 2009 was completed to reflect guidance based around the Corporate Manslaughter Act.	
4	The Authority demonstrates its commitment to health and safety governance by communicating, promoting and championing best practice.	The role of the Police Authority for Health and Safety is detailed in the Health & Safety Procedure. Delegations to the Force are also outlined and the Policy Statement within the Policy and this sets out the proper provision for health, safety and welfare at work for all staff and others affected by the Force's activities. The Executive Health and Safety Committee is designated to oversee the implementation of the policy. After each Force Executive Group meeting the Chief Executive and the lead Member meet to discuss the outcomes of the meetings which involves completion of a checklist document. For the meeting of 28 September 2009 the Chief Executive had commented that no Chief Officer was present and six department heads were not present. This matter was to be raised at the following meeting.	
5	A Health & Safety Champion has been named and has responsibility for giving clear visibility of leadership.	The Chief Executive has overall responsibility for health & safety for the Authority and Force. The various delegations to the Chief Constable, the Director of Health and Safety through to staff and volunteers are set out in the Policy / Procedures. However, the job description for the Chief Executive does not specifically cover this responsibility though it is outlined in the Policy / Procedures in place. There is a designated Authority Member assigned as Lead Member or 'champion' for health and safety matters.	

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
6	Health and safety matters appear regularly on the agenda for Authority meetings.	<p>One of the referred functions of the Finance &amp; General Purposes Committee (F&amp;GPC) from the full Authority is for Health and Safety.</p> <p>The Force Executive Health &amp; Safety Committee is the key reporting mechanism for health and safety matters which both the Authority Chief Executive and the Lead Member attend to keep informed on health and safety matters; if it were considered necessary reports would be forwarded to the F&amp;GPC or the Authority.</p> <p>We confirmed the Police Authority received the report on the changes to the Health and Safety Policy in January 2009.</p> <p>The Authority's arrangements for monitoring health and safety include a requirement to receive an annual report of the ramifications for health and safety within the organisation over the year, and this should be done in May / June each year. However, we highlighted that the overall outcomes for the full year 2008/09 have not yet been formally reported upon to the Authority to fulfil this requirement.</p> <p>Performance across the year should be reported formally to feed into the annual reports to provide assurances that health and safety arrangements are being adequately controlled, monitored and compared to previous year's outcomes.</p> <p>Within our comparative report we will provide information on how each Authority oversees health and safety through its governance and committee structure.</p>	<p>Determine what information needs to be reported upon (based on HSE requirements) to the Police Authority or F&amp;GPC (as required) and ensure that an annual report is submitted each year. The Authority may wish to receive a retrospective report for 2008/09 to ensure that it has a complete reporting overview of health &amp; safety outcomes.</p> <p>(Significant)</p>
7	A Health and Safety director or equivalent is present at Authority meetings, signalling that the issue is being taken seriously and that its strategic importance is understood.	<p>The Deputy Chief Constable is designated as the 'Director' of health and safety. However, this role has been temporarily re-assigned to the Acting DCC until March 2010 as the DCC is presently covering for the vacant Chief Constable post.</p> <p>The DCC is the Chair of the Force Executive Health and Safety Committee and we confirmed he attended the meeting of 29 June 2009, but was not in attendance at the meeting in September 2009.</p>	

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
8	Targets are set to help define what the Authority is seeking to achieve in terms of health and safety governance.	<p>The Force has a health &amp; safety policy, adopted by the Authority. There is no reference to specific key performance indicators / measures within these documents. In discussion with the Principal Health &amp; Safety Officer we confirmed they do not have specific performance indicators / targets set other than a Health &amp; Safety Strategy, but do have an annual action plan and progress on this is monitored by the Force Executive Committee through the year (as set out in the Policy document).</p> <p>We advised the Principal Health and Safety Advisor that the government has outlined targets for revitalising health and safety and referred also to the Strategy for a Healthy Police Service, which should be considered in setting targets, but we were advised the Force does not hold the data going back to 2002/03 to measure the various categories set out.</p> <p>However, we were advised the Force is to consider what targets (potentially including elements relating to sickness levels linked to accidents etc.) they should report upon in future and how they can collect supporting data. Once this is determined the data will be passed to the Performance Delivery Group and also discussed and progressed through to the Force Executive Health &amp; Safety Committee.</p>	<p>To identify and agree the targets that will be reported to the Performance Delivery Group in the future and carry this through to the Health &amp; Safety Policy.</p> <p>(Merits Attention)</p> <p>See comment above</p>
9	There is a nominated Authority Member scrutinising health and safety plans and actions, ensuring that robust processes are in place to support the Authority in the face of significant health and safety risks.	The Authority has designated a Lead Member to this role. The lead member (from the Authority) also has membership of the Force Executive Health and Safety Committee, which helps ongoing communication with the Authority on related matters.	

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
10	Health and safety arrangements are adequately resourced.	<p>There are centrally three posts covering Health &amp; Safety within the Force led by the Principal Health and Safety Advisor. Health and safety is also managed by delegated staff / officers within each Area / department across the Force and the Authority.</p> <p>The Chief Executive advised the level of resources available has to be linked to resource budgets and costs; if the Force or Authority were to identify any particular issues on the level of resources these would need to be considered in the event any concerns are raised or identified.</p> <p>It is noted the central Health and Safety Team has recently been increased by one post, although some of this resource is linked to environmental work.</p>	
11	Competent health and safety advice has been obtained.	<p>The Principal Health and Safety Officer hold health and safety qualifications and the team continue to undertake additional training and development on health and safety matters including IOSH and corporate membership IOSH Chartered Safety and Health Practitioners. One member of the team is scheduled to undertake NEBOSH training in November 2009.</p> <p>The Principal Health and Safety Officer confirmed they have a number of options to get health and safety advice and these would be through the nationally recognised organisations (e.g. HSE) as well as through the Association of Police Health and Safety Advisors, the East Midlands Regional Group (covering five forces in the region, and for advice/networking), use of Barbour Index and ACPO as well as through professional memberships.</p>	
12	Health and safety risk assessments are carried out and regularly revisited.	<p>There are paper-based risk assessment proforma documents available to be completed for all risk assessments. However, this is due to change and documentation will be transferred over electronically to a health and safety section within the Orchid Risk Management System. The current paper risk assessment document requires details of the work activity, hazard and likelihood (to include existing / mitigating controls) for a risk score to be determined.</p> <p>Through discussions in two departments in Force (Protective Services and Procurement) as well as the Authority's Secretariat we confirmed that they have health and safety risk assessments in place and Protective Services have been working with the NPIA on major risk assessments specific to their area of work.</p> <p>However, in Operational Support we were advised that the scheduled annual</p>	<p>Carry out a review to ensure risk assessments are transferred over to the Orchid system and to provide assurances they are being updated in accordance with requirements. At the same time, a reminder should be issued that all risk assessments must be kept up to date.</p> <p>(Merits Attention)</p>

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
		<p>review is done as far as possible, but the MSO cannot guarantee these are / have all been completed on time, although they confirmed they will be reviewed in event of accident in the interim period.</p> <p>In August 2009 the Health and Safety Team carried out an audit on risk assessments to gain an overview of the process to identify where improvements in the processes could be made and to confirm the level of risk assessors in Force for each Area / Department. The review highlighted a number of weaknesses and some of these are set out below:</p> <ul style="list-style-type: none"> <li>▪ Poor quality of some of the risk assessments (including further control measures)</li> <li>▪ Poor communication of the risk assessments to relevant staff /officers on reviewing risk assessments in place.</li> <li>▪ Lack of evidence of review of some risk assessments.</li> <li>▪ Little evidence of review after accidents or near misses.</li> </ul> <p>We also noted the report mentions that the more recent risk assessments are of better quality than in the past and that the Health and Safety Team considers there are an adequate number of risk assessors available.</p> <p>At the time of our review of this report, it was in draft and was due to be reported to the Force Executive Health &amp; Safety Committee to agree how the issues will be addressed.</p> <p>Once the risk assessments are set up / transferred over to the Orchid system this can be monitored more closely in departments / Areas as well as via the Health and Safety Team and management locally. The new system will also enable the Health and Safety Team to access all risk assessments centrally to review them as required and to provide confirmation the risk assessments are of adequate quality. The system will also automatically generate reminders to prompt the scheduled reviews required.</p>	
13	The health and safety implications of introducing new processes, working practices, personnel or other	<p>Within the Areas, MSOs are required to ensure risks are assessed. Within departments designated personnel deal with health and safety on a day to day basis.</p> <p>Where a new policy is being considered / set up there is a standard procedure in</p>	Refer to Para. 19

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
	changes are considered by the Authority and health and safety is designed in when implementing changes.	<p>place which requires health and safety matters to be taken into account to ensure that any existing risk assessments /new ones need to be drawn up etc.</p> <p>With regard to any new builds the Principal Health and Safety Advisor is involved during the process and has an input during the processes when they do work on the tendering process etc.</p> <p>Within operational services we were advised they have specific risk assessments in place for training and there are specific requirements to be followed to ensure adequate health and safety measures are maintained.</p> <p>Health and safety induction training is provided for new staff joining the Force / Authority. However, we understand there is an induction checklist to be completed for new staff. (This is covered further at point 19).</p>	
14	Employees or their representatives are involved in decisions that affect their health and safety.	<p>Through discussions with Operations and Procurement health and safety personnel we were advised that the Unions are involved in risk assessments/ walk-through reviews on health and safety within their departments.</p> <p>The departmental representatives and the Union representatives attend the various Area/ department Health and Safety meetings. The Union's representatives are also invited to the quarterly Force Executive Group meetings (which also involve the Chief Executive and the Lead Member for Health and Safety).</p>	

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
15	<p>Authority members reinforce the Health and Safety Policy by being seen on the 'shop floor', following all safety measures themselves and addressing any breaches immediately.</p>	<p>The designated Lead for the Authority attends the Force Executive Health and Safety Committee and is involved in dealing with Force health and safety matters. This role provides an insight into the health and safety issues which arise and provides the opportunity to be closely involved in the decision making process.</p> <p>The Chair of the Authority also holds Liaison Panel meetings with the unions and the Federation to discuss general issues from their perspective, which may include health and safety matters.</p> <p>The Principal Health and Safety Advisor confirmed that evacuation tests are carried out on a twice yearly basis; the assigned Fire Marshalls are involved in these tests. Fire Marshalls confirm that all personnel have evacuated the buildings when completing the checks required. This has not highlighted specific incidents needing action / resolution.</p> <p>NB: Access to the main Force building is via swipe card only to ensure security is maintained.</p>	
16	<p>There are procurement standards for goods, equipment and services to help prevent the introduction of expensive health and safety hazards.</p>	<p>The Procurement Policy and the Standard Code of Conduct for suppliers and contractors set out requirements relating to health and safety.</p> <p>Contractors will be issued with a copy of the Health and Safety Policy 'Control of Contractors work on Constabulary Premises' and within contract monitoring arrangements requiring specifications to include quality standards, health and safety and environmental factors.</p> <p>The Code sets out the minimum standards required to be complied with and this includes matters on health and safety including accidents, working at height regulations, and risk assessments.</p>	
17	<p>The health and safety arrangements of partners, key suppliers and contractors are assessed.</p>	<p>Through review of one of the process for the award of a recent cleaning contract we confirmed the requirements for completion of tasks, risk assessments, method statements, the type of cleaning supplies and chemicals were set out. Through the panel review process the presentations for this contract did include a health and safety representative from the Force and they had asked that matters over the health and safety of their staff be covered in the questions to be covered in the tender exercise.</p>	

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
18	There is a separate Risk Management or Health and Safety Committee as a subset of the Authority, chaired by a senior executive, to ensure key health and safety issues are addressed and to prevent the Authority's time and effort being used to consider operational risks and avoid unnecessary bureaucracy.	<p>The F&amp;GPC has referred responsibility for health and safety matters, though the Chief Executive advised reports on associated matters may be passed directly to the Authority. The Committee meet quarterly though no reports on health and safety have been reported this in 2009/10 at the time of our fieldwork.</p> <p>We were also advised that the Force Executive Group (attended by the Chief Executive and the Lead member for the Police Authority) is deemed the key reporting mechanism for health and safety matters, and if they were to consider that matters raised through this process needed to be referred up through to the Authority this would be actioned accordingly.</p>	
19	Health and safety training is provided to all staff upon appointment to promote understanding of the key issues in the organisation.	<p>We selected a sample of five employees who commenced employment this financial year to date and confirmed that the records showed that the induction training session had been attended which included a section on health and safety.</p> <p>Staff are also required to sign a Confidentiality and Health and Safety Agreement as part of their contractual agreements and receive a copy of the Staff Handbook prior to starting with the Force.</p> <p>The Force has a system that an Induction Checklist must be completed and returned to HR after a period of six months to provide confirmation that key aspects of the post have been covered (including health and safety). However, we were not able to confirm this is being closely monitored or followed up. We would recommend the process is checked to ensure that the correct procedures are being followed and where required followed up to provide the assurances over coverage required in the first six months of the appointment. Where this process is not checked there is an increased risk that new staff may not be made fully aware of key requirements on general Force arrangements including fire exits, fire extinguishers, fire alarm points and first aid provision etc., or those elements which are specific to their role.</p> <p>Fire awareness training is part of the standard induction process for new staff through their assigned Line Manager, the Fire Marshalls receive additional training to cover their role and receive refresher training. Their role also includes responsibility for checking and maintenance of fire safety equipment and during</p>	<p>HR should clarify controls required to be followed in connection with the procedure on the Induction Checklist and ensure the correct procedures are followed.</p> <p>We would suggest the following controls.</p> <ul style="list-style-type: none"> <li>▪ to require induction checklist to be completed</li> <li>▪ ensure HR follows up instances where the induction checklist is not returned in a reasonable timescale</li> </ul> <p>Failure to return these should provide a mechanism to seek assurances all have been adequately completed.</p> <p>(Significant)</p> <p>Recruiting will send out the induction check list to line managers and Learning and Development will record the returns onto the system. Steve</p>

	Consideration (adapted from Institute of Directors' guidance)	Comments, Findings & Implications	Recommendations
		<p>evacuations ensuring buildings are clear of personnel when the alarms are activated.</p>	<p>Smith, L&amp;D and Joanna Siwek are to have a meeting to discuss how best to follow up non returns.</p>
20	<p>Appropriate weight is given to reporting both preventative information and incident data.</p>	<p>The Areas / departments hold quarterly Health and Safety meetings where accident and near miss statistics are provided. We noted that the North Health &amp; Safety meeting of 10 September 2009 discussed that 'near misses' were still not being reported upon. Details of these were to be communicated at the Force Executive Health and Safety Committee meetings.</p> <p>At the Force HQ meeting of 14 September 2009, plans for future reporting of KPIs were discussed, and this was to also be discussed at the Executive meeting.</p> <p>We were advised the accident / incident statistics have not been reported at Force Executive this year due to staff shortages. It is important that this data is reported upon regularly to inform the Committee on outcomes across the year and we have been advised this data is to be reported to the Force Executive meeting now that the team is adequately staffed.</p> <p>Sickness absence is a key line of reporting across the Force and is reported through HR Apex, Performance Delivery Group and up to the Authority. HR produces the data.</p> <p>The Principal Health and Safety Advisor advised they are presently looking into issues over sickness and how to link this to the accident data and are to consider how best to progress this going forward.</p>	<p>Ensure that Accident and incident data are reported both to the Force Executive Group and to the Authority at appropriate intervals.</p> <p>(Significant)</p>
21	<p>Periodic reviews of the effectiveness of management structures and controls over health and safety are carried out.</p>	<p>A recent audit carried out by the Health and Safety Team checked on the level of risk assessors and the Health &amp; Safety Team is satisfied the number of risk assessors in the Force is adequate.</p> <p>However, in discussions we were unable to identify specific mechanisms which would highlight potential weaknesses to ensure adequate/ effective management is maintained in event of changes in departmental structures etc.</p> <p>In light of this management have suggested that the Force identifies a new risk to cover this eventuality and determines the mechanisms required to ensure the risk is adequately mitigated in future.</p>	<p>Draw up a new risk and establish the mechanisms required to identify and deal with any gaps in the management structure for health and safety within the organisation as a whole.</p> <p>(Merits Attention)</p>

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
22	Procedures are in place to identify any new and/or changed legal requirements and develop strategies for compliance.	The Principal Health and Safety Advisor is responsible for identification of changes in health and safety and has access to the Barbour Index which provides updates on legislation changes and associated arrangements in addition to mechanisms through ACPO and the NPIA. The team also communicates on a regular basis with other forces in the region (through a regular quarterly meeting). This provides a good networking arrangement to discuss emerging issues and queries.	
23	Senior managers' objectives include contribution to health and safety performance.	<p>The job description of the Chief Executive does not specifically mention responsibility for Health and Safety. However, within the Health and Safety Procedure it does note the Police Authority and Chief Constable are responsible for Health and Safety though this could be included under the 'other' duties section of the job description.</p> <p>In discussion with the Chief Executive he considers that to list each and every one of his responsibilities individually is not necessary as the Health and Safety responsibilities are detailed in key health and safety policy/procedures.</p> <p>We confirmed the job descriptions for a sample of two of the staff in Health and Safety the roles and responsibilities for these posts are set out.</p>	
24	The health and safety performance of contractors and partners is reported to the Authority (or a project board) on a regular basis throughout the project.	<p>The Chief Executive advised that any such reports would be exception based. If this were to arise the matter would be raised via the Force Executive Health and Safety Committee (of which he and a named Lead attend) and they would be involved in making the decision to formally report such cases to the Authority.</p> <p>NB: The Force also receives capital updates on contracts/ project in progress throughout the course of completion.</p>	
25	All organisational staff are involved in monitoring health and safety.	<p>We confirmed that within the Health &amp; Safety section of the Agreement document staff are required to sign to confirm they understand their legal responsibility on health and safety and awareness of organisational responsibilities on health and safety matters. This is also referred to in the staff handbook.</p> <p>By discussion with two reception staff they confirmed they are aware of the Force's health and safety policy and procedures and requirements in reporting accidents and fire safety procedures. The Supervisor is also responsible for ensuring that the fire checks are carried out in line with the controls in place and would follow up any instances where the fire logs were not updated promptly.</p>	<p>Ensure that DSE assessments are supported with paper records so there is evidence of the assessment for officers and staff of both the Authority and the Force.</p> <p>(Merits Attention)</p>

	<b>Consideration</b> (adapted from Institute of Directors' guidance)	<b>Comments, Findings &amp; Implications</b>	<b>Recommendations</b>
		<p>The Chief Executive of the Authority holds periodic health and safety meetings with staff to discuss related matters and the content of the meetings is logged. In discussions with staff we were advised that over the last few months a new member of staff in the department has transferred over from another role in the Force and we confirmed they had completed a DSE check when he joined. However, this was not documented at the time of the check to evidence the process for their records, though this is now being actioned. Supporting evidence of these checks should be recorded and maintained to evidence the process in event of query or incident.</p>	
26	<p>Health and safety performance is reviewed at least once a year by the Authority.</p>	<p>An annual report is to be provided to the Authority. However, we highlighted at the time of our fieldwork that this had not yet been done for 2008/09 outcomes. It is important to ensure a formal report is made at least annually to contribute to the overall assurances that health and safety matters are appropriately managed and reported upon.</p> <p>This oversight has since been addressed and the Principal Health and Safety Officer will discuss with the Authority the information it wishes to receive in future.</p> <p>Note: subsequently a Health &amp; Safety Performance report for 2008/09 was on the agenda for the 22 December 2009 F&amp;GP Committee meeting.</p>	<p>See recommendation made at point 6.</p>
27	<p>Actions are taken to address health and safety shortcomings, near misses or incidents and reported to the Authority.</p>	<p>As covered previously in the checklist the Force Executive provides this main overview and will be reported back to the Police Authority if so required.</p> <p>The Force/ Authority definition of a near miss has been defined and is included in the Accident and Near Miss reporting and Investigation Procedure document. This is defined as:</p> <p>“An undesired event, which under slightly different circumstances could have resulted in harm to people or damage to property”.</p>	<p>See also recommendation made at point 20.</p>
28	<p>Performance on health and safety and wellbeing are recorded in the organisation's annual reports to investors and/or stakeholders.</p>	<p>In the last published Annual Report 2007/08 we confirmed the report confirmed that the Authority oversees the Constabulary's Health and Safety arrangements.</p> <p>The Authority's Lead member and the Chief Executive have throughout the year attended the Constabulary's strategic Health and Safety Committee.</p>	