



Report to: Audit & Risk Assurance Committee
Agenda item: 9
Date: 3 June 2015
Subject: BTP Annual Health & Safety Report
Sponsor: Simon Downey, Director of Capability & Resources
Author: Nisa G Carey, Head of Safety and Wellbeing
For: Information

1. PURPOSE OF PAPER

1.1 The purpose of the Annual Health and Safety (H&S) report is to provide the Audit and Risk Assurance Committee with assurance that this activity has been carried out in a way to meet compliance requirements for a safe and healthy workplace. A particular focus of this report is the work which has been progressing to embed H&S as part of everyday business in a sensible and proportionate manner and to ensure compliance based upon an assessment of risk. It also provides an overview of the key highlights of H&S performance over the period from the last report dated 30 May 2014 to 22 May 2015.

2. BACKGROUND

2.1 Following last year's extensive H&S review in BTP, the H&S Policy was launched in June 2014. The launch engaged the workforce with a Policy Statement which provided the Policy and general direction for the management and governance of H&S. Shortly after launch the post of Head of Safety and Wellbeing became vacant for approximately six months. This was filled by Nisa Carey in January 2015. To establish the current H&S status in BTP, an H&S gap analysis audit was commissioned in March 2015. This was conducted by external auditors and was based on an assurance based approach, establishing risk and key H&S issues. The findings of this audit are reflected in this report.

3. GOVERNANCE

3.1 BTP has created the Central H&S Committee to discharge its legal obligations. Its function is to keep under review measures taken by BTP to ensure the health, safety



and wellbeing of all BTP employees and others in its undertakings. The Committee is chaired by the Director of Capability and Resources and receives Minutes from its sub-committees. These sub-committees are FHQ and Division H&S Committees.

3.2 The Committees' frequencies are to be held on a quarterly basis. However, to drive through necessary improvements, Central H&S Committee meetings are currently held on a three weekly basis. This committee structure is supported by Divisional governance, OICs, and OIC inspections. The format of the latter is being revised in the light of the audit findings.

4. HIGHLIGHTED H&S ISSUES

4.1 **Safety and Wellbeing Team:** The structure of the H&S team was reviewed demographically and against the levels of risks. It was assessed that the team was deficient in overall HSA capacity and a trainer given the national footprint of the Force. Additional recruitment is ongoing to bring the team up to an appropriate complement.

4.2 **BTP H&S Risk Register:** A BTP H&S Risk Register has been developed, informed by Divisional H&S risks, which captures the 'high level' and significant H&S risks across the Force that could inhibit achievement of the Force key objectives. It sets out information to provide assurance from all Divisions on how H&S risks are properly managed, to review H&S policy and monitor performance and identified significant H&S risks from Divisions to inform business planning. It also includes a summary to mitigate these leading H&S risks. The following are the identified key H&S risks, some of which are enduring:

- Exposure to fire in BTP establishments;
- H&S Risk Assessments. Risk assessments are in place across BTP but best practice requires them to be drafted by the owner of the activity to be mitigated;
- Trauma. This arises from the distressing nature of some policing work, for example fatalities;
- Stress;
- Officers sustaining injuries from assaults.

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- 4.3 **Fire Safety risks:** BTP OICs deliver a routine inspection programme which considers the principal risks to each establishment. The audit identified the need to conduct additional specialist fire inspections. These inspections have now been completed for all high priority sites. The full programme of inspections, and the management of any work arising, is being overseen by the Director of Capability & Resources.
- 4.4 **Risk Assessments:** Advice has been sought from HSE in regard to best practice for risk assessments. This suggests that risk assessments must be drafted, to a common format, by the owner of an activity who can best understand and mitigate the risk. The H&S team are revising the risk template and will then lead a Force wide programme to amend the paperwork. The template and action plan will be complete by July 2015; the follow on work is significant and BTPA will be updated on the detailed timeline for completion.
- 4.5 **Wellbeing Agenda:** The value of Wellbeing was identified as a need through the People Survey. A strategic action plan is under development aims to draw together various wellbeing initiatives as part of a strategic approach. This includes deepening Force procedures in regard to Trauma Risk Management and Stress Management Standards.
- 4.5.1 **TRiM:** Previously the Force dealt with the potential effects of traumatic incidents and the risk of Post-Traumatic Stress Disorder through Critical Incident Stress Debriefing sessions. These were found to lack effectiveness and in 2014 BTP implemented the TRiM program by March on Stress; this is a trauma-focused peer support system. This system has provided many benefits. It now requires to be 'deepened' across the Force; example improvements are – increasing the number of TRiM practioners; ensuring that best practice is cascaded across the Force; revising the process by which those at risk can be contacted or encouraged to utilize the system; improving the training of line managers to understand the nature and signs of trauma; removing any wider cultural barriers to seeking help where required. The working group to address this has met and will report its action plan to the Central Health and Safety Committee in June 2015.



4.5.2 **Stress Management Standards:** Stress and related illnesses are the main cause of sickness absence within the Force – between 1 April to 31 December 2014 it was responsible for approximately 25% of all staff absence. An H&S Note on Stress Management is currently being drafted. Measures to address stress will be an important element of the overall well-being strategic plan with clear interdependencies with the sickness policy, currently being revised.

4.6 **Reportable accidents:** Accident reporting continues to be collated to reflect the numbers of reported accidents across BTP. The accident procedure changed from 1 January 2015 with all reports being transferred to the Accident Management System (AMS), at present reports are uploaded by the H&S Team. This will become a user requirement once the system is launched across the Force. Accident data is used to ensure proactive monitoring is improved so that the accident data plays a significant role in the prevention of accidents and ill-health. Appendix 1 contains further information on reportable accident data. The principal cause of injuries is assaults and the data shows the range of incidents that contribute to this overarching category. The issue of assaults is currently under review by the DCC looking at trends and reporting through to training.

5. H&S STRATEGIC PLAN

5.1 A BTP H&S Strategic Plan 2015 – 2016 has been designed to align to BTP Strategic Plan. It additionally incorporates the HSE strategy which was also developed in consultation with key stakeholders, such as the Police, Fire and Prison Unit. This document will provide context to the development of H&S objectives and targets that will underpin priorities, provide targeted resources to ensure value for money and support BTP to achieve its goals and ensure culture, coherence and compliance. It is also underpinned by the H&S Policy and management system. Most of the set H&S objective in the plan reflects the findings from the H&S Gap Analysis. Actions are being taken through the Central Committee. Appendix 2 provides the Strategic Plan.

6. RECOMMENDATIONS

6.1 That members note the content of this report and progress made towards the agreed plan.