



Policy Title: Health & Safety Management
CCMT Sponsor: Director of Resources
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Section/Sector: Health & Safety

Contents

- [1.0 Rationale](#)
- [2.0 Intention](#)
- [3.0 General principles](#)
 - [3.1 Policy](#)
 - [3.2 Organisation](#)
 - [3.3 Planning & Implementation](#)
 - [3.4 Measuring Performance](#)
 - [3.5 Auditing](#)
- [4.0 Challenges & Representations](#)
- [5.0 Guidance, Procedures & Tactics](#)
 - [5.1 H&S Management](#)
 - [5.2 Consultation](#)
 - [5.3 Risk Assessment](#)
 - [5.4 Fire Safety](#)
 - [5.5 Manual Handling](#)
 - [5.6 Display Screen Equipment](#)
 - [5.7 Control of Substances Hazardous to Health \(COSHH\)](#)
 - [5.8 Vulnerable Persons](#)
 - [5.9 Noise](#)
 - [5.10 Workplace Safety Inspections](#)
 - [5.11 Accident Reporting](#)
 - [5.12 RIDDOR](#)
 - [5.13 Accident Investigation](#)
 - [5.14 First Aid](#)
 - [5.15 Health & Safety Training](#)
 - [5.16 Health & Safety Committees](#)
 - [5.17 Control of Contractors](#)
 - [5.18 Working Environment](#)
 - [5.19 Work Equipment](#)
 - [5.20 Working at Height/In a Confined Space](#)
 - [5.21 Lone Working](#)
 - [5.22 Electricity](#)
 - [5.23 Asbestos](#)
 - [5.24 Personal Protective Equipment \(PPE\)](#)
 - [5.25 Railway Safety](#)

- [5.26 Enforcement of H&S Law](#)
- [5.27 Investigation of Workplace Fatalities](#)
- [5.28 Road Safety](#)
- [5.29 Blood-Borne Viruses](#)
- [5.30 Working Time Management](#)
- [5.31 Health & Safety Forms](#)

[6.0 Communications](#)

- [6.1 Links](#)
- [6.2 Communications Strategy](#)

[7.0 Compliance & Certification](#)

- [7.1 Human Rights](#)
- [7.2 Race Equality Impact Assessment](#)
- [7.3 Diversity](#)
- [7.4 Data Protection](#)
- [7.5 Freedom of Information](#)
- [7.6 Protective Markings](#)
- [7.8 Health & Safety](#)

[8.0 Monitoring & Review](#)

- [8.1 Links to Best Value](#)
- [8.2 Review Process](#)

1.0 Rationale

In order for Thames Valley Police (TVP) to effectively control risks and prevent unnecessary and avoidable harm to our police officers, staff and those with whom we interact, the Force must manage health and safety with the same degree of expertise and to the same standard as other core business activities. Health and safety is everyone's responsibility and should be regarded as an essential part of good management rather than a separate entity.

2.0 Intention

The approach towards health and safety management will support Force aims through the promotion of a positive culture and application of a high standard in the management of health and safety, thereby reducing accidents, work-related injuries and sickness absence. This approach, which it is acknowledged will need to be balanced against available resources, will assist TVP to achieve maximum effort and output from well trained, motivated police officers and staff with a high level of morale and pride in the fact that they belong to an organisation demonstrating such clear commitment to their well being.

3.0 General Principles

- 3.1. **Policy.** The Chief Constable and Police Authority have published a joint health and safety policy statement outlining their commitment towards securing safe working practices and compliance with applicable health and safety legislation, which should be brought to the attention of all personnel. A copy ([see Appendix A](#)) should be displayed on the health and safety notice board at every police station and Force premises along with other mandatory notices including; the Health and Safety Executive (HSE) poster " Health and safety law - What you should know" and a current copy of the certificate of employer's liability insurance. The Force

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has adopted the HSE model 'Successful Health & Safety Management' contained within the publication - HS (G) 65 as the strategic framework for health and safety arrangements, which is reflected in this policy. Detailed guidance on all aspects of health and safety management is published on the intranet within the Health and Safety website.

3.2. Organisation. The Force has a robust framework for the management of health and safety with clearly defined responsibilities and relationships, which will ensure continuous improvement. Sufficient competent persons, with the necessary knowledge and experience must always be readily available within this framework to assist managers and supervisors to realise and fulfil their health and safety duties. Commanders, managers and supervisors at all levels hold responsibility for the safety of their officers and/or staff and other persons who may be affected by their work activities. Every police officer and member of staff, including members of the Police Volunteer Support Team (PVST) holds responsibility for their own safety and that of their colleagues. All personnel have a duty to comply and co-operate with anything provided in the interests of their safety, including the correct use of personal protective equipment (PPE) and compliance with measures contained within Force risk assessments and recognised safe working practices. Also, personnel have an absolute duty to report, via their line management, any unsafe condition or defective equipment using the electronic PER 10 system. Ultimate responsibility for the health, safety and welfare of all personnel rests with the Chief Constable and Police Authority who delegate specific responsibilities as follows: -

a). Director of Resources - holds 'director level' responsibility for health and safety management on behalf of the Chief Constable and Police Authority and chairs the Force Health & Safety Committee (FoHSC), which meets periodically to develop strategy and provide advice and direction on any issues that cannot be resolved locally by BCU/OCU/Department H&S Committees.

b). Head of Health & Safety – is the appointed competent person with responsibility for provision of effective advice and guidance on compliance with all legislation impacting upon policing activities and the development/implementation of Force policies and procedures. This role is also responsible for provision of technical advice, guidance and practical support to BCU/OCU/Department Health & Safety Coordinators. Head of Health & Safety should hold and maintain, through participation in a recognised CPD scheme, Chartered Safety & Health Practitioner status. The Head of Health & Safety has an additional trained/qualified staff of 1 advisor, an auditor and an administrator.

c). BCU/OCU Commanders and Department Heads. – hold 'director level' responsibility for the effective management of risks to the health and safety of personnel under their command by ensuring compliance with applicable legislation and correct implementation of Force health and safety management procedures. All commanders and department heads should be certified on 'Peoplesoft' indicating qualification of at

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least IOSH Directing Safely Certificate, details for which may be accessed via Learning Opportunities Directory. Commanders and department heads should chair a BCU/OCU/department health & safety committee, which should meet periodically to consider, and where possible resolve, local issues and also review accident and injury data in order to identify and target any trends and/or common occurrences. Any issues that cannot be resolved locally, or which may have wider implications, should be elevated to FoHSC.

d). Business Managers (BM) – are responsible to their respective commander/department head for the functional day to day management of health and safety matters. All BM's should be certified on 'Peoplesoft' indicating qualification of at least IOSH 'Managing Safely' training, details for which may be accessed via Learning Opportunities Directory.

e). Operations Superintendents. – on BCU the Operations Superintendent holds responsibility for the day to day management of health and safety within the operational environment. All Operations Superintendents should be certified on 'Peoplesoft' indicating qualification of at least IOSH Directing Safely Certificate, details for which may be accessed via Learning Opportunities Directory

f). Health & Safety Coordinators – are the competent persons appointed to provide their respective commander/department head and business manager with information, advice and practical support in the effective management of health and safety throughout their area of responsibility. All H&S Coordinators should be certified on 'Peoplesoft' indicating qualification of at least NEBOSH General Certificate in Health & Safety Management, details for which may be accessed via Learning Opportunities Directory.

3.3. Planning & Implementation. Successful health and safety management involves the minimisation of potential for accidents, injury and ill health. Thames Valley Police will achieve this through the application of a robust system of risk assessment, which identifies foreseeable hazards police officers and staff may encounter during the course of their duties, evaluates the associated risks presented by those hazards and introduces effective control measures to reduce and manage the risks. The system contains the following elements: -

a). Force Risk Assessments. A library of Force risk assessments covering a variety of policing and work activity, all of which have been approved and quality assured by FoHSC, are published on the Health and Safety website. Force risk assessments aim to: - 1). identify reasonably foreseeable hazards associated with operational policing and support work activity, 2). assess the level of risk - and 3). list control measures, which should be regarded as the Force 'standard'. This is intended to cut down on duplication of effort and greatly reduce the amount of work required by managers and supervisors.

b). **BCU/OCU/Departmental Risk Assessments.** Force risk assessments must be 'localised' at BCU/OCU/Department level to take into account any specific hazards peculiar to local circumstances, which have not been covered. This may mean expansion/amendment of the risk assessments to include any newly identified hazards, but in many cases should simply be a 'topping' and 'tailing' exercise to apply them locally. All Force risk assessments can be accessed through the Health and Safety website, downloaded/saved locally and amended as necessary

c). **Local Risk Assessments.** Force risk assessments cannot be expected to cover all local circumstances and/or hazards peculiar to a particular operation or work activity. Commanders, line managers and supervisors, including PVST coordinators, hold responsibility for ensuring that a suitable and sufficient risk assessment is carried out in respect of the work/operational activities of officers and staff under their command/control. If these activities are not covered adequately within Force or BCU/OCU/Department risk assessments then a new Local risk assessment using the proforma and matrix published within the Health and Safety website must be carried out following the accompanying guidance. For help, advice and where necessary, practical support contact the BCU/OCU/Department H&S Coordinator or the Health & Safety Department.

d). **Dynamic Risk Assessment.** As operational incidents unfold and develop there will be new hazards encountered and revised/additional control measures needed. Under these circumstances the risk assessment process must be a continuous appreciation of changing circumstances. This normally involves identification and consideration of all potential hazards associated with an incident, a mental assessment of the level of risk and selection of an appropriate course of action, which minimises the potential for harm/injury. Dynamic risk assessments are not usually recorded but it is important that any lessons are learnt and feedback is provided where appropriate. Further guidance on dynamic risk assessment is published in the Force H&S Manual Section 4-6-0

e). **Risk Assessment Training.** Access to details of risk assessment training courses is available via the Learning Opportunities Directory.

3.4 **Measuring and Reviewing Performance.** Measurement is a key step in any management process, which forms the basis for continual improvement. If measurement is not carried out correctly, the effectiveness of health and safety management systems and procedures is undermined and there is no reliable information for managers to gauge how well health and safety risks are being controlled. A common feature in other areas of performance measurement is that it is usually positive, reflecting achievement, whereas with health and safety it frequently comes down to one negative measure – that of injury and ill-health statistics, which is an indication of failure. Health and safety differs from many areas measured by managers because success results in the *absence* of an outcome (injuries or ill health) rather than a presence.

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Rather than rely solely on accident statistics as a performance indicator, TVP will carry out both proactive and reactive monitoring as follows: -

a). Pro-active Monitoring. Procedures for pro-active monitoring will provide an indication of how effectively risks are being controlled and will consist of: -

i. Buildings. Managers who have control of buildings are to continually monitor levels of workplace safety, particularly precautionary arrangements for control of any fire risk present, storage of hazardous substances and means of emergency access and egress. Any unsafe condition identified should be rectified and remedial action taken must be recorded and made available for auditing.

ii. Personnel. All supervisors are to maintain close liaison with the police officers and staff including volunteers, who come under their control/influence, making sure they are provided with appropriate information, instruction and training in respect of all foreseeable hazards, which they may encounter. Supervisors must also ensure that items of personal protective equipment (PPE) provided, are used/worn correctly.

iii. Inspections. Periodic inspections of all places of work are to be carried out by the local H&S Coordinator in conjunction with management and staff associations. Frequency of these inspections will be determined by the significance of hazards present but will be carried out at least annually (3-monthly in custody). Inspection reports should be filed and made available for auditing.

b). Reactive Monitoring. All accidents, injuries, assaults and 'near miss' incidents will be reported using Force Form PER 10a and PER 10c. Reports must be investigated at an appropriate level by managers using Force Form PER 10b to establish the immediate and underlying causes. Details reported are to be recorded by BCU/OCU/department personnel staff on Peoplesoft. This will enable trends to be clearly identified and measures implemented which will improve risk control and prevent unnecessary future recurrences. Statistical information in respect of accidents, injuries and near misses will be presented to and considered by BCU/OCU/Department health and safety committees, highlighting any common causes/trends in order that resources may be effectively targeted to make improvements to training, equipment and/or working practices. Any issues identified that may have Force-wide implications should be elevated to the Force Health & Safety Committee (FoHSC).

AUDITING

3.5 Auditing. All organisations are subject to audit, (e.g. for finance, quality etc.). This business discipline must also be applied to health and safety. Through this application we can improve our ability to manage and control risks by learning from experience gained through the regular use of audits and performance reviews. The objective of an audit is to

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measure performance against standards set by legislation, ACPO, HO and TVP policy. A health and safety management audit of each BCU/OCU/Department will be carried out periodically as part of the Force Inspection Process, resulting in a report to CCMT (*Director of Resources*). Any significant issues identified will be flagged up for inclusion within the subsequent CCMT Inspection.

4.0 Challenges & Representations

- 4.1. Any person directly affected by this policy may make representations in relation to its contents and/or any decision in consequence of it to: -

Head of Health & Safety
Thames Valley Police Headquarters
Oxford Road
Kidlington
Oxfordshire
OX5 2NX

- 4.2. Any complaint against the conduct of an individual police officer or staff member should be progressed through the 'Complaints Against Police Procedures'.
- 4.3. The areas covered by this policy are open to scrutiny by HM Inspector of Constabulary, the Health & Safety Executive (HSE) and other enforcement agencies during official inspections

5.0 Guidance, Procedures & Tactics

- 5.1. **Health & Safety Management.** Ultimate responsibility for the health, safety and welfare of TVP personnel rests with the Chief Constable and Police Authority. Specific responsibilities are delegated to certain appointment holders as outlined at 3.2 Organisation above. Managers and supervisors including PVST coordinators at all levels hold responsibility for the safety of their staff and other persons who may be affected by their work activities. All police officers and staff are responsible for their own safety and that of their colleagues and have a legal obligation to comply and cooperate with safe working practices and guidance provided within Force risk assessments. More detailed information about responsibility for health and safety is published in the Force H&S Manual Section 2. Failure to comply with this policy could result in criminal or disciplinary proceedings.
- 5.2. **Consultation.** There is strong evidence that organisations that implement robust procedures for consultation with employees on health and safety matters have fewer accidents and enjoy a more positive attitude towards effective safety measures. Whilst legislation does not specify any precise ratio to numbers employed, staff associations have a legal right to appoint safety representatives, in accordance with the scale published in their respective conditions of service manual. Employers must permit appointed safety representatives time off during working hours to perform

recognised functions and undergo any health and safety training considered reasonable. Full details of the role and responsibilities of appointed safety representatives can be found within the Force H&S Manual Section 3.

5.3 Risk Assessment. The Health and Safety at Work Act 1974, the Management of Health and Safety Regulations 1999 and the Police Health and Safety Act 1997 require that: -

- a). A suitable and sufficient assessment is made of the risks to the health and safety of employees whilst at work, and other persons who could be affected by their work activities.
- b). Significant findings of the risk assessment are recorded.
- c). Risk assessments are reviewed following any significant change, when there is reason to suspect that they are no longer valid and in any case – every 12-months

Procedures for the conduct of risk assessments are outlined at [paragraph 3.3](#) above and more detailed guidance is published within the Force H&S Manual Section 4-1-0 and Force H&S Manual Section 4-6-0. A library of Force generic risk assessments can be accessed via Health and Safety. Legislation dictates that specific risk assessments are also required in respect of fire, hazardous substances, manual handling and display screen equipment. This requirement will be explained in the following paragraphs (5.4 to 5.7).

5.4 Fire Safety. Fire kills – in an average year fire and rescue services attend approximately 36,000 fires, which kill 30 people and injure in excess of 2,600. Fire costs money – a serious fire can result in devastating damage. Legal requirements for fire precautionary measures have recently changed, moving away from a prescriptive regime of fire certification of buildings towards one of employer risk assessment. Managers who hold responsibility for police stations and other premises (e.g. station inspectors or senior managers) already have a legal duty to ensure that a suitable and sufficient fire risk assessment is carried out. This assessment should take account of sources of combustion/ignition, means of escape and fire safety equipment/signage. There is also a requirement placed on those who have managerial control of buildings to ensure an appropriate number of trained and competent people (i.e. fire wardens) are nominated to assist with fire prevention and precautions. Detailed guidance on Force fire safety measures and responsibilities are published in the Force H&S Manual Section 4-2-0.

5.5 Manual Handling. Most back injuries are caused by incorrect lifting and poor posture. Injuries are most commonly cumulative rather than being truly attributable to any single lift or handling accident. Those injured do not always make a full recovery and many suffer permanent physical impairment or disability. It is recognised in the Manual Handling Operations Regulations 1992 that the work of the emergency services can, at times, make it difficult for personnel to avoid hazardous lifting operations without inhibiting the ability to provide a service to the general public.

However, all reasonable steps must be taken to reduce the foreseeable risk of injury as far as possible. All police officers are provided with manual handling awareness training as part of the IPLDP and a brief refresher input should also be included within annual officer safety re-qualification training. Other training courses are also available to all police officers and staff including volunteers, as published within the Learning Opportunities Directory. In routine situations, hazardous lifting should be avoided by the use of mechanical equipment, where applicable/available. In more dynamic situations team lifts should be considered wherever possible. There is a specific legal requirement for managers to carry out a manual handling risk assessment of hazardous lifting tasks which cannot be avoided. A free [HSE Leaflet](#) provides further advice.

Further guidance on manual handling are published within the Force H&S Manual Section 4-3-0 and for the conduct of a manual handling risk assessment Force H&S Manual Section 4-3-1.

- 5.6 Display Screen Equipment (DSE).** Health problems relating to working with computers can be due to poor posture and/or poor ergonomic layout. Managers holding responsibility for staff who work with computers must ensure that a DSE risk assessment is carried out in respect of all workstations. Correct reference to Force procedure for DSE risk assessment will guide managers and supervisors on the adequate provision of furniture, equipment and workstation adjustment. Careful consideration must be given in attempting to fit the work environment to the person. The following equipment may be considered; foot rests, anti-glare screens, document holders and screen height adjusters. Arm/wrist rests are not always essential but may be considered necessary in certain cases. In the vast majority of cases furniture provided through Procurement Department will satisfy all requirements. The advice of the Occupational Health Unit (OHU) must be sought before consideration is given to procuring specialist furniture/equipment.

All new police officers and staff including volunteers should receive training on computer safety as part of their induction. Further guidance on procedures for DSE safety can be found within the Force H&S Manual Section 4-4-0. A DSE risk assessor training course is available – details are published within the Learning Opportunities Directory. A free [HSE Leaflet](#) provides more advice.

- 5.7 Control of Substances Hazardous to Health (COSHH).** The Control of Substances Hazardous to Health (COSHH) Regulations 2002 impose specific duties on employers where work activities are liable to expose employees to any hazardous substance. A key provision of the Regulations is the requirement for a specific risk assessment to be conducted in respect of all such work processes so that valid decisions about necessary control measures can be made. Important safety information should be displayed on labels of chemicals and other substances used by police officers and staff and our suppliers have a legal duty to provide more detailed safety guidance with their products in the form of a safety data sheet. All of this information should be brought to the

attention of personnel using or coming into contact with hazardous substances as part of their work. More detailed information on procedures for safe working practices and COSHH risk assessment can be found within the Force H&S Manual Section 4-5-0 and Force H&S Manual 4-5-1.

- 5.8 Vulnerable Persons.** Certain persons are considered to be more vulnerable to hazards than others. Where young persons are engaged on work experience activities for example, it will be necessary for managers to review their risk assessments as risk levels may be higher due to a lack of maturity/experience and the young person's perception of risk and attitude towards risk taking. Members of the PVST may include elderly persons who could be considered vulnerable and therefore at a higher level of risk. Expectant mothers are generally considered to be at a higher risk due to the biological changes taking place as pregnancy develops. Information on Force procedure for the additional controls necessary to manage the risks associated with young persons are published within the Force H&S Manual Section 4.7 and for new/expectant mothers Force H&S Manual Section 4-8-0 and Force H&S Manual Section 4-8-1.
- 5.9 Noise.** The Control of Noise at Work Regulations 2005, are concerned with the protection of the hearing of people, from the effects of excessive noise generated in the workplace. Hearing can be damaged irreparably by prolonged exposure to excessive noise. The Regulations specify maximum noise levels which, when reached, require managers and supervisors to take action necessary to reduce the risk of hearing damage to a minimum. Controlling the noise at source is usually the most effective means of reduction; however, adequate hearing protection must be provided and correctly used in certain circumstances. Police operations and work activity can often expose officers and staff to excessive noise (*e.g. Air Operations, Firearms, Dog Handlers etc.*). These and other specialist groups are required to undergo periodic hearing tests to provide early warning of any developing problem. Advice from the Occupational Health Unit (OHU) should be sought. The Health and Safety Department has the facility to carry out noise assessments/measurements as and when required. For full details on Force procedure for the management of noise at work refer to the Force H&S Manual Section 4.9.
- 5.10 Workplace Safety Inspections.** Periodic workplace safety inspections are a method of monitoring effectiveness of and level of compliance with Force health and safety policies and procedures. The frequency of workplace inspections should be determined by the hazards and level of risk present but should not be less than annually. The most efficient inspection is one carried out with the full and active involvement of management, the local H&S Coordinator and staff association safety representatives. Further detail on the procedure for workplace safety inspections is published within the Force H&S Manual Section 5.
- 5.11 Accident/Incident Reporting.** The importance of the reporting of all accidents, assaults, injuries and 'near miss' incidents cannot be overstated. This is the main method of bringing to the attention of management any unsafe condition such as inadequate or defective

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equipment, lack of training, inappropriate staffing levels etc. It is only by flagging up these important issues that unnecessary recurrences can be avoided and potential for harm, loss and damage can be minimised. There are robust reporting procedures in place using Force Forms PER 10a and PER 10c. These should be completed distributed as per the automated address list (*contained at the end of the forms*) and line management for follow-up action. Further guidance on accident reporting can be found in the Force H&S Manual Section 6.

- 5.12 RIDDOR.** The Reporting of Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 require that certain incidents, which result in major injury, more than 3-days sickness absence and/or hospitalisation, work-related illness and certain dangerous occurrences, must also be reported externally to the HSE National Incident Centre. All external reporting under RIDDOR is now carried out centrally by the H&S Department, (guidance is published within Force H&S Manual Section 6).
- 5.13 Accident/Incident Investigation.** All accidents and safety incidents must be investigated by management in order to establish the immediate and underlying causes. There are 3 different levels of investigation depending on the seriousness of the incident. An investigation report using Force Form PER 10b should be compiled and any significant implications considered by the BCU/OCU/Department H&S Committee. Full guidance on the investigation of accidents/safety incidents is contained within the Force H&S Manual Section 6.
- 5.14 First Aid.** All organisations are required to ensure the provision of an appropriate number of trained/qualified first aiders and sufficient first aid kit to deal with hazards and associated risks present within the workplace. The Force has a system of 'nominated' first aiders who are trained and suitably qualified in accordance with the First Aid at Work Regulations 1981. All 'nominated' first aiders receive an allowance for undertaking certain duties, which include provision of first aid treatment and the replenishment of any first aid kit used within their place of work. All police vehicles must carry an appropriate first aid kit, the contents of which should be replenished as/when used. Full details on Force procedures for the provision of first aid are contained within the Force H&S Manual Section 7. All police officers and staff holding current first aid trained qualifications should be recorded on 'Peoplesoft'.
- 5.15 Health and Safety Training.** A range of training courses covering topics specifically designed and tailored to suit the needs of Force personnel is available. Details can be accessed via the Learning Opportunities Directory. Further guidance on health and safety training is also available within the Force H&S Manual Section 8.
- 5.16 Health and Safety Committees.** Health and Safety Committees provide a forum for regular consideration and discussion of all issues arising from the risk assessment process, accident/incident reports, workplace safety inspections and the correct implementation of applicable legislation. A

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structure for meetings includes an established Force Health and Safety Committee (FoHSC) and BCU/OCU/Department Committees. All Committees should include appropriate representation from management and staff associations. The minutes of all meetings should be used as a means to communicate health and safety information to Force personnel. Details of Force responsibilities and requirements for the running of health and safety committees are published within the Force H&S Manual Section 9 and methods of communication of information at Section 10. Minutes of FoHSC Meetings are published on the H&S Website.

- 5.17 Control of Contractors.** Thames Valley Police owe a 'duty of care' towards all contractors working on Force premises and should expect full compliance with Force health and safety policies and procedures. The work of contractors should be supervised and monitored by local management unless falling within the requirements of the Construction Design and Management Regulations (CDM), which applies to most major works monitored by Property Services Department. Details of management responsibility for the control of contractors, is published within the Force H&S Manual Section 13. A Control of Contractors Committee, consisting of representative managers, personnel and staff associations meets periodically under the chair of the Head of Health & Safety to deal with any significant health and safety issues. A series of Force Forms are available for use in the monitoring of contractor work activities in Force premises.
- 5.18 Working Environment.** Thames Valley Police has a legal duty under the Workplace Health Safety and Welfare Regulations 1992 to ensure that workplaces under their control comply with recognised standards in respect of the management of issues such as; property maintenance, ventilation, temperature/humidity, room dimensions/space, lighting and cleanliness/housekeeping. Managers who have control of buildings are delegated responsibility for the maintenance of a clean, healthy and comfortable working environment, with adequate means of access and emergency egress. Further details are published within the Force H&S Manual Section 14. Advice on working in heat during the summer months is also available.
- 5.19 Work Equipment.** All items of equipment provided for use at work, (*ranging from small items such as handcuffs to large items such as vehicles*) must be suitable for the purpose for which they are to be used. In the selection and procurement of new equipment, commanders and managers will carefully consider the associated potential risks in order to ensure that only equipment, which can be used safely with minimal personal risk, is provided to officers and staff. Adequate information instruction and training will also be provided in order to ensure correct use, maintenance and storage of all equipment. Detailed guidance on the procurement, use and storage of work equipment is published within the Force H&S Manual Section 15.
- 5.20 Working at Height and/or Within Confined Spaces.** There are times when it may be necessary for police officers and staff including volunteers,

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to work under extremely hazardous conditions such as at height or within a confined space. Both situations demand adherence to strict control measures in order to minimise the risk of serious injury. Further details and guidance can be found within the Force H&S Manual Section 16-1-0 and Section 16-1-1.

- 5.21 Lone Working.** There are times when it will be necessary for police officers and staff including volunteers, to work alone and in isolation. Force policy is contained within Safe Crewing. Commanders, managers and supervisors including PVST coordinators must take account of this in their risk assessments and introduce additional control measures such as the monitoring of movements, provision and correct use of personal protective equipment (PPE) and an appropriate means of raising the alarm and summoning help if required. Further guidance is contained within the Force H&S Manual Section 17.
- 5.22 Electricity.** Portable electrical equipment accounts for a large proportion of fires in the UK each year, due to either faulty leads or appliances. Several thousand accidents involving electricity are reported under the Reportable Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). A major cause of such accidents is the failure to properly maintain portable electrical appliances. Managers and supervisors including PVST coordinators must ensure that all electrical appliances used on Force premises are subject to periodic inspection and testing normally carried out under contractual arrangements managed by Property Services Department. Full details of Force procedures for the management of portable electrical appliances and electrical installations, is contained within the Force H&S Manual Section 18.
- 5.23 Asbestos.** Many buildings contain asbestos in a variety of forms including insulating boards, panels and sheeting, lagging of pipe work, jointing of pipes in flues, floor tiles and asbestos based cement products etc. Provided asbestos products are sealed and/or encapsulated and free from damage they are regarded as safe. Those most at risk from asbestos products are repair and maintenance workers, such as electricians, plumbers and builders who may cause disturbance or damage whilst carrying out building or services alterations and any other individuals who happen to be working in the vicinity of this type of activity. The Force has a duty of care to all personnel either at work in or visiting its premises. This includes police officers, police staff, volunteers, special constables, contractors and visiting members of the public. All TVP buildings have been surveyed and the presence of asbestos, where found, has been registered and is currently subject to a robust management regime overseen by Property Services Department. For further details on asbestos management see Force H&S Manual Section 19.
- 5.24 Personal Protective Equipment (PPE).** Items of Personal Protective Equipment (PPE) are usually issued, at no cost to the employee, for individual use. All personnel must ensure that any items of PPE provided are used or worn correctly. Any defective or worn PPE must be exchanged or submitted for repair without delay. Some PPE such as

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respiratory protective equipment has a 'shelf life' and must be exchanged prior to this date. PPE includes; protective clothing such as overalls, disposable white paper suits, clothing for adverse weather conditions, gloves, safety footwear, safety helmets, baton, handcuffs, incapacitant spray, high visibility clothing, eye protection, ear protection, life jackets, body armour and respiratory protective equipment. Provision and correct use of PPE must be made, following a risk assessment, as a method of risk reduction when all other available control measures, such as elimination, use of alternative less hazardous working practices and 'safe systems of work', have first been considered. Managers and supervisors at all levels are responsible for ensuring their staff are provided with, and correctly use appropriate PPE commensurate with duties being undertaken. For reasons of hygiene most items of PPE should be provided on an individual basis and should not be shared. Further guidance on the provision and correct use of PPE is contained within the Force H&S Manual Section 20.

5.25 Railway Safety. Operational circumstances may require police officers to occasionally enter the rail-track area. This is obviously an extremely high-risk environment, which must not be undertaken without strict adherence to Force procedures. Advice and guidance for personal safety has been provided by Network Rail.

5.26 Enforcement of Health & Safety Law. The enforcement of health and safety legislation is normally undertaken by the Health & Safety Executive (HSE) whose inspectors have a wide range of powers available to them including the serving of: -

- a) Words of advice
- b) Improvement notice
- c) Prohibition order; and in serious breaches,
- d) Prosecution

The HSE have stated their intention to inspect approximately 12 police forces each year. An inspection protocol has been drawn up and approved by ACPO. Close links between HSE and HMIC have been developed and this will undoubtedly lead to collaboration in the inspection process. Further details on enforcement, is contained within the Force H&S Manual Section 21.

5.27 Workplace Fatalities. In the event a work-related death a joint investigation involving police and HSE will take place. A protocol and investigator's guide has been drawn up and approved by ACPO. For further advice contact the Health and Safety Department.

5.28 Road Safety. Guidance on many aspects of road safety including journey planning, fatigue and airbag/seat-belt tensioner safety is published on the H&S Website .

5.29 Blood-Borne Viruses. There may be occasions when police officers and front-line staff are exposed to infectious diseases through the handling of carriers and/or contact with infected body fluids. Although this presents a

NOT PROTECTIVELY MARKED

significant risk, it is one which can be easily and effectively controlled, provided simple preventative measures are taken, as follows: -

- a) Cover any cut/wound or other break in the skin with a water-proof dressing prior to and for the duration of the duty shift.
- b) Wear gloves and other PPE when dealing with incidents involving body fluids.
- c) Wash blood and/or body fluids splashed onto the skin with hot soapy water.
- d) Splashes of blood/body fluids into the eyes, nose or mouth should be rinsed immediately with water.
- e) Immunisation against Hepatitis B is available. For details contact your GP or the OHU.
- f) Following any significant exposure seek urgent medical attention/advice from the nearest A&E Department or the OHU if during working hours.

For further information refer to TVP policy Blood-Borne Viruses. A free [HSE leaflet](#) also provides advice.

5.30 Working Time Management. The Working Time Regulations 1998 require organisations to monitor the hours worked by employees ensuring that maximum limits are not exceeded, periodic rest-breaks are taken and leave entitlement is honoured. Further information and guidance is available in Force Policy and the Force position on Opt-Out Agreements.

5.31 Force H&S Forms. Copies of all Force H&S Forms are available on the intranet.

6.0 Communication

6.1 Links to Other Policies

This policy has links to the following other policies: -

- Asbestos Management
- Blood-Borne Viruses
- Safe Crewing
- Smoking
- Sickness Management
- Stress Management
- Management of Vehicles & Emergency Equipment
- Personal Protection
- Environmental Management
- Working Time Management

6.2 Communications Strategy

6.1 A communication strategy will be managed by Head of Health & Safety. Target audience will include all TVP personnel, and interested partner agencies.

6.2 This policy will be published on the Policy Management Unit intranet and internet site and will be advertised in Manager's Briefing and Weekly Orders.

7.0 Compliance and Certification

7.1 Human Rights Certification

(i) Legal Basis

The legal basis for this policy includes: -

- The Health & Safety at Work etc Act 1974
- The Police Health & Safety Act 1997
- The Management of Health and Safety at Work regulations 1999

(ii) Prohibition of Discrimination

The policy has been subject to a diversity impact assessment and no significant issues have been identified.

(iii) There is a potential interference with both article 2 (the right to life) and article 8 (the right to privacy).

Article 2 - provides that: "Everyone's right to life shall be protected by law....." Article 2 imposes two duties on the state and its officials:

- (1) Not to deprive anyone of his/her life save in the limited circumstances prescribed by article 2(2).
- (2) To take reasonable measure to protect life.

This positive obligation to take reasonable measures to protect life includes: "a positive obligation on the authorities to take preventative operational measures to protect an individual whose life is at risk from the criminal acts of another individual."

Article 8 - provides that everyone has: "The right to privacy, family life, home and correspondence."

The collection and retention of personal data from the investigation and reporting process infringes employee's rights to privacy.

7.2 Diversity Impact Assessment

The policy has been subject to a diversity impact assessment and no significant issues have been identified.

7.3 Diversity (Human Resources)

The policy has been subject to a diversity impact assessment and no significant issues have been identified. In the application of this policy, the Force will not discriminate against any persons regardless of their gender, sexual orientation, race or ethnic origin, religion, age or disability.

7.4 Data Protection

The policy is open and does not contain any personal data or information.

7.5 Freedom of Information Act

The policy is not protectively marked and is considered open/available to the public and without risk of a breach of security or impedance to the course of a criminal investigation.

7.6 Protective Markings

This policy document is NOT PROTECTIVELY MARKED.

7.7 Health & Safety at Work

The main aim of this policy is to ensure TVP compliance with all applicable health and safety legislation.

8.0 Monitoring and Review

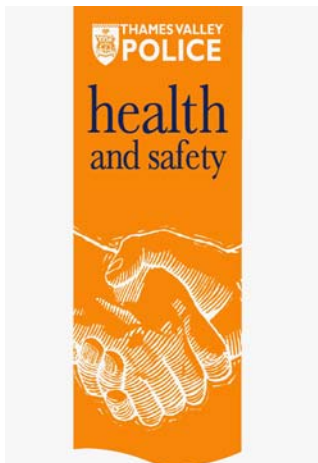
The level of compliance with this policy will be monitored annually as part of the Force Inspection Process.

8.1 Links to Best Value/PPAF/Priorities/Performance Indicators

This policy relates to Domain B – Resource Usage of the Policing Performance Assessment Framework.

8.2 Review Process

This policy will be reviewed and updated annually by Head of Health and Safety, or sooner if new legislation is implemented or existing legislation changes and following any accident or incident which casts doubt on its continued relevance and effectiveness.



Policy Statement

Health and Safety

Thames Valley Police commits, so far as is reasonably practicable, to the provision and maintenance of:

- **safe and healthy work activities for all Force staff and for anyone else who may be affected by our policing**
- **resources, information, instruction, training and supervision**

We will comply with the requirements of the Health and Safety at Work Act 1974, the Police Health and Safety Act 1997 and relevant statutory provisions. The Chief Constable's Management Team, in partnership with the Police Authority, will promote the continual improvement of our health and safety management system.

Force standards and arrangements under this Policy are set out in the Health & Safety Manual. BCU/OCU Commanders and Heads of Department are responsible for local implementation of procedures described in the Manual.

As Chief Constable, I expect all staff, volunteers and others working on behalf of the Force, to co-operate in the achievement of our objectives.

A handwritten signature in black ink that reads 'Sara Thornton'.

Sara Thornton
Chief Constable

A handwritten signature in black ink that reads 'Jim Booth'.

Jim Booth
(co-signatory)
Executive
Director Police
Authority

Date 25th February 2008