



THE CHIEF CONSTABLE OF CLEVELAND

Health and Safety

Internal audit report 6.22/23

Final

19 October 2022

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1. EXECUTIVE SUMMARY

Why we completed this audit

We have undertaken a review of the Chief Constable of Cleveland's health and safety arrangements with the objective of ensuring that the Force has appropriate systems in place to mitigate risks relating to health and safety. Our audit has included a review of health and safety policies, injury reporting arrangements, annual premises inspections, training, and risk assessment processes.

The Operational Planning and Safety Manager is responsible for managing health and safety arrangements within the Force and their remit includes health and safety, operational planning and counter-terrorism. The Operational Planning and Safety Manager is supported by one full-time Health and Safety Officer and two part-time officers who work between the three remits, forming the Health and Safety Team.

The Force operate a health and safety policy, which is the overall responsibility of the Chief Constable of Cleveland and was last updated in November 2020, with a next scheduled review date of November 2022.

The Health and Safety Team are responsible for monitoring any reported injuries on duty and ensuring that the Health and Safety Executive's (HSE) RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences) Regulations 2013 are adhered to across the Force, including the submission of RIDDOR reports. In addition, the Health and Safety Team manage the annual premises inspections programme, which are carried out at each Force-owned and Force-used premises. These inspections include a health and safety and a fire risk assessment, the actions from which are formulated into an action plan. The Health and Safety Team are responsible for managing risk assessment reviews and ensuring adequate oversight from responsible individuals across the Force. Responsibility for training on health and safety is allocated between the Health and Safety Team and the Learning and Development Team.

In 2021 / 2022 the Force had 26 RIDDOR reportable injuries, from a total of 181 injuries reported throughout the year. Figures known to the Health and Safety Team are reported to the Joint Audit Committee as part of an annual health and safety report. The last report was presented in July 2022.

Conclusion

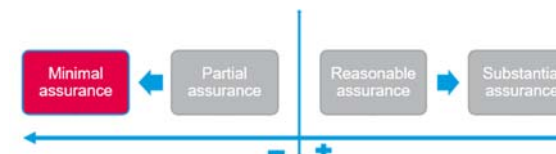
As a result of our review, we have agreed **five high, three medium and one low priority** management actions. We have identified significant weaknesses in areas such as risk assessment management, health and safety training and governance structures, which will need immediate action from the Force.

We have agreed actions, where applicable, which align to the resource restrictions within the Health and Safety Team, particularly given that the Operational Planning and Safety Manager's remit covers three distinct areas. We further noted the additional work required during the Covid-19 pandemic, which diverted from 'business as usual' activities.

Internal audit opinion:

Taking account of the issues identified, the Chief Constable can take **minimal assurance** that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied or effective.

Urgent action is needed to strengthen the control framework to manage the identified area.



Key findings

Our audit identified the following exceptions resulting in five high and three medium priority actions being agreed:



E-learning training

The Force use the College of Policing e-learning platform for online training. Through discussions with the Learning and Development Manager, we noted that health and safety courses are not currently marked as mandatory or desirable within the platform, meaning that any training completions would be carried out on a voluntary basis only. We reviewed the 'Health and Safety for Managers' course, which at the time of our review (23 September 2022), had only been completed on seven occasions.

Where health and safety modules are not included in the suite as either mandatory or desirable e-learning courses, there is a risk that health and safety training is not undertaken on a regular basis and could lead to inappropriate management of incidents, should individuals be unaware of their responsibilities. **(High)**



Line manager training

Discussions with the Operational Planning and Safety Manager established that the Force do not deliver any specific health and safety refresher training following the initial Health and Safety Guidance and Dynamic Management of Risk at Operational Incidents half-day course. This includes instances where Police Constables are later promoted into higher roles, which would include line management responsibilities; however, no additional training is delivered at this stage.

The Operational Planning and Safety Manager provided us with the National Police Chief Council's (NPCC) 'Police Health and Safety: A Guide for Chief Officers' guidance dated June 2019, which outlines the requirement for forces to provide health and safety training to management.

Where additional training is not delivered to management, there is a risk that managers are not adequately trained to execute their duties and the Force may not be compliant with the NPCC guidance. **(High)**



Premises reviews

The Health and Safety Team have an annual premises reviews programme in place, which includes a health and safety assessment and fire risk assessment at each Force-owned premises and each third-party premises used by the Force. Any actions raised in the assessments are formulated into an action plan. We selected a sample of five premises and obtained the inspections and action plans for each. However, we noted that the actions within the action plan were assigned to the responsible owners in each area, but these are not signed off or followed up by the Health and Safety Team due to resource constraints, therefore there was limited assurance that actions had been implemented by each area.

Where actions assigned as part of premises reviews are not followed up, there is a risk that actions have not been completed by responsible owners and therefore health and safety issues may still exist. **(Medium)**



Risk assessments

The Health and Safety Team do not maintain a list of risk assessments; therefore, we were limited in our ability to select a sample. We undertook a walkthrough of the server folder where risk assessments were stored and selected a random 10 risk assessments. Review of the risk assessments identified that five were out of date; however, not all of these risk assessments are classified as business as usual and therefore may be no longer needed unless certain situations re-occur, for example, youth visits to the Force. We also noted that risk assessments were largely outdated on the Force intranet, with the most recent update noted as 2019.

Where the Health and Safety Team do not have a clear process in place to track and manage risk assessments, there is a risk that assessments are not reviewed in line with the two-yearly cycle. There is a further risk that outdated assessments are assessed where the intranet platform is not updated with revised versions, which could lead to incorrect risk mitigations being followed. **(High)**



Injuries on duty – RIDDOR reportable

We selected a sample of 10 RIDDOR reportable incidents from the injury on duty register maintained by the Health and Safety Team. Nine of the cases were supported by a completed RIDDOR report. In the final case, it was determined that the case was not RIDDOR reportable as this related to an accidental road traffic collision, and therefore is exempt under HSE definitions. From the nine cases, we noted that two RIDDOR reports (totalling 22%) were submitted after 10 days of the incident occurring (reporting within 10 days is a legislative requirement under RIDDOR 2013). We understand is due to late submissions of the injury on duty report; however, this is not clearly identifiable from the injury on duty register.

Where the register does not outline when injury on duty reports were received, there is a risk that the regularly late submissions are not identified and raised, and the Health and Safety Team do not receive reports in a timely manner to ensure prompt action is taken and injuries may be reported late, risking non-compliance with RIDDOR. **(High)**



Near miss reporting

Officers or staff should contact the Force's service desk to report a 'near miss' and the service desk then contact the relevant department to address the near miss report, for example, the Estates Department. These reports may also be submitted to the Health and Safety Team to ensure adequate action is taken; however, no register is retained to record all near miss reporting received by the Health and Safety Team therefore we were unable to select a sample. We obtained one recent example of a near miss investigation and risk assessment update completed by the Health and Safety Team.

Where near misses are not recorded centrally by the Health and Safety Team, there is a risk that trends or themes are not identified, which could lead to further health and safety incidents if not addressed. **(Medium)**



Lessons learnt

There is currently no formal mechanism in place to disseminate lessons learnt across the Force, relating to H+S incidents. The Operational Health and Safety Manager outlined that quarterly health and safety meetings use to occur with all departments; however, these meetings have not occurred since approximately 2018 as the Force structures changed. The meetings were used to discuss any health and safety issues in each area and ensure there was accountability for actions arising from incidents or lessons learnt.

Where the Force does not have a formal mechanism in place to manage lessons learnt from incidents, there is a risk that further health and safety incidents could occur and result in injury. **(Medium)**




Health and Safety reporting

An annual health and safety report is presented to the Joint Audit Committee; however, there is no additional reporting on health and safety across the Force in year. In addition, the Operational Planning and Safety Manager informed us that there is currently no clear committee with health and safety within its remit. However, it was outlined that should any serious incidents occur, issues would be escalated where applicable and ad-hoc reports produced.


Where regular reporting and governance arrangements are not in place for health and safety matters, there is a risk that issues are not regularly communicated or known across the Force, which could lead to further health and safety incidents. **(High)**


For details of the one low priority action raised, please see section two of this report.


Our audit review identified that the following controls are suitably designed, consistently applied, and are operating effectively:

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All new starters attend a Health and Safety Guidance and Dynamic Management of Risk at Operational Incidents course as part of the initial induction process, which is delivered by the Operational Planning and Safety Manager. We obtained the PowerPoint presentation delivered as part of the training, which included content on statutory health and safety responsibilities placed on a Police Force, managers and individual officers, and the process of dynamic risk assessments.

The course is delivered in a one half-day session as part of initial training and registers are retained by both the Operational Planning and Safety Manager and the Learning and Development Team. We reviewed the training records available and obtained the registers to support the last session completed in July 2022 to newly appointed Police Constables (PC).
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The Health and Safety Officer has recently completed the NEBOSH (National Examination Board in Occupational Safety and Health) General Certificate in Occupational Health and Safety training. The Occupational Planning and Safety Manager has NEBOSH and IOSH (Institution of Occupational Safety and Health) training certification.
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The injury on duty tracker is thoroughly maintained by the Health and Safety Team, with adequate detail in place to support injury reporting and actions taken. The Health and Safety Team use a dedicated inbox, into which injury on duty forms are sent to ensure these are addressed in a timely manner.
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To ensure all injuries have been captured and reported to the Health and Safety Team, the Operational Planning and Safety Manager reviews the daily Executive report, which documents any incidents across the Force within the previous 24 hours. Should it be evident that any injuries have not been reported, these are picked up directly with the individual areas.

2. DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Area: Health and Safety				
Control	There is an approved health and safety policy in place, which is regularly reviewed and available to all officers and staff on the Force intranet.		Assessment:	
			Design	✓
			Compliance	×
Findings / Implications	<p>The Force operate a health and safety policy, which is available on the Force's intranet system and is accessible by all officers and staff. The policy was last reviewed in November 2020 and is due for its next review in November 2022. We obtained evidence of policy approval, which is retained centrally within the Force.</p> <p>The policy is owned by the Chief Constable and Police and Crime Commissioner. The policy is reviewed every two years, unless there is a change in leadership, in which case, the policy will be reviewed at an earlier date. The Operational Planning and Safety Manager outlined that the policy had been reviewed by the previous Chief Constable; however, the current Chief Constable who joined the Force in April 2022 has not yet reviewed the policy. This will be picked up as part of the next annual review scheduled for November 2022.</p> <p>Where the policy has not been reviewed by the current Chief Constable, there is a risk that the requirements outlined within the policy do not align to the Chief Constable's overarching strategy.</p> <p>The policy includes statements from the Chief Constable and the Police and Crime Commissioner and outlines the commitment of the Force to meet its health and safety obligations, such as, compliance with the requirements of the Health and Safety at Work Act 1974. In addition, the policy outlines the roles and responsibilities and health and safety procedures to be followed across the Force.</p>			
Management Action 1	The health and safety policy will be reviewed and presented to the Chief Constable for approval.	Responsible Owner:	Date:	Priority:
		Operational Planning and Safety Manager	31 December 2022	Low

Area: Health and Safety

Control	<p>Missing control</p> <p>The Force do not have any health and safety courses on the College of Policing e-learning system marked as mandatory or desirable training.</p> <p>Any health and safety e-learning training is completed on a voluntary basis only.</p>	<p>Assessment:</p> <p>Design ×</p> <p>Compliance -</p>
Findings / Implications	<p>We met with the Learning and Development Manager to discuss the e-learning modules available through the College of Policing learning management system across the Force.</p> <p>We were provided an overview of one course available titled 'Health and Safety for Managers'; the content of which includes the importance of health and safety, the responsibilities of employers, managers, and employees in the workplace, and performing risk assessments. Whilst the content of the course appeared appropriate, it was noted through our discussions that this course is available through the College of Policing platform; however, it has not been categorised as either a 'mandatory' or 'advised/desirable' training course, meaning at the time of our discussion (23 September 2022), only seven individuals had completed the course (two of these records pertained to the Learning and Development Manager as a test run).</p> <p>There are numerous health and safety modules available on the learning management system, such as, 'Officer Safety'; however, at present, none of these modules are mandated or advised. The modules can be accessed if desired by officers or staff across the Force.</p> <p>Where health and safety modules are not included in the suite of mandatory or desirable e-learning courses, there is a risk that health and safety training is not undertaken on a regular basis and could lead to inappropriate management of incidents, should individuals be unaware of their responsibilities.</p>	
Management Action 2	<p>The Health and Safety Team will review the courses available through the College of Policing e-learning platform and submit a request to the Learning and Development Team to make relevant health and safety courses either mandatory or desirable within the platform.</p>	<p>Responsible Owner: Health and Safety Manager</p> <p>Date: 31 July 2023</p> <p>Priority: High</p>

Area: Health and Safety

Control	Missing control	Assessment:	
	<p>There is no dedicated training provided to line management on health and safety responsibilities.</p> <p>In addition, officers and staff do not receive refresher training on the initial Health and Safety Guidance and Dynamic Management of Risk at Operational Incidents course in line with role progression.</p>	<p>Design ×</p> <p>Compliance -</p>	
<p>Findings / Implications</p>	<p>From discussions with the Operational Planning and Safety Manager, we noted that the Force do not deliver refresher health and safety training once the initial session (Health and Safety Guidance and Dynamic Management of Risk) has been attended as part of the induction and initial assessment process. In addition, there is no further training on health and safety delivered in instances when individuals are promoted within their roles, for example, should an individual start as a PC and progress to higher roles within the Force, which could include line management responsibilities, there is no additional training provided on health and safety and the additional roles and responsibilities involved. We also note that no specific guidance exists to outline line management responsibility in respect of health and safety.</p> <p>As line manager risk assessment is a key control in the injury on duty reporting process to ensure that incidents are managed appropriately and any actions taken, we would consider the lack of training and guidance a key issue to the Force's health and safety controls and processes.</p> <p>Although we do note that the Force delivers an array of training which interlink with health and safety, such as, training on operational risk assessments, control room major incident training and general health and safety training for force control room staff. However, none of these courses focus solely on health and safety responsibilities within the workplace and how managers should ensure compliance with Force procedures.</p> <p>Where regular health and safety training is not delivered to those with line management responsibilities or those who have been promoted into new job roles following the initial training session, there is a risk that training may be outdated and management could be unaware of their roles and responsibilities in respect of health and safety, which risks non-compliance with the Health and Safety at Work Act 1974.</p> <p>The Operational Planning and Safety Manager provided us with the National Police Chief Council's (NPCC) 'Police Health and Safety: A Guide for Chief Officers' guidance dated June 2019, which outlines the requirement for Forces to provide health and safety training to management. It specifically states that:</p> <p>'Forces will need to provide health and safety training for their executive and senior personnel, supervisors and line managers, especially those who:</p> <ul style="list-style-type: none"> • Are given specific responsibilities under the force health and safety policy document; • Will be responsible for preparing risk assessments; and • Address occupational health and safety implications of people management, accidents and sickness'. <p>Where adequate training is not provided to management in relation to health and safety, there is a further risk the Force is not complying with the requirements of the NPCC guidance.</p>		

Area: Health and Safety

Management Action 3	(In addition to management action 2 above) The Health and Safety Manager will raise the issue of health and safety training for management with Force Chief Officers and highlight the requirements in the NPCC Guidance, or other relevant guidance. As a minimum, guidance regarding line management responsibilities in respect of health and safety will be developed and disseminated across the Force.	Responsible Owner: Health and Safety Manager	Date: 31 July 2023	Priority: High
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Area: Health and Safety

Control	<p>The Health and Safety Team operate a rolling programme of premises reviews, whereby each Force premises (whether owned or used) is subject to an annual review, which includes a health and safety inspection and a fire risk assessment.</p> <p>Any actions identified within the premises reviews are incorporated into action plans and provided to those responsible for carrying out these duties.</p>	Assessment:
		Design ✓
		Compliance ×
Findings / Implications	<p>Discussions with the Operational Planning and Safety Manager established that each Force premise, including those owned by third parties and used by the Force, are subject to an annual premises review. The review includes a health and safety inspection and a fire risk assessment; the results of which are formulated into an action plan for the relevant persons to address.</p> <p>Estates management is carried out by the Estates Team, therefore a lot of actions are assigned to the members of the Estates Team who are responsible for the maintenance of buildings, should those buildings belong to Cleveland Police. However, where the building belongs to a third party, it is agreed that the third party is responsible for maintaining the site. Where actions do not relate to the upkeep of buildings or technical issues, then actions will likely be assigned to the operational lead for the respective area or building.</p> <p>We reviewed the annual programme of premises reviews on 20 September 2022 and noted all reviews up to August 2022 had been completed by the Health and Safety Team. These reviews excluded the ‘drop-in’ locations which were still to be completed; however, were unused during 2021 due to Covid-19. The Operational Planning and Safety Manager outlined that ‘drop-in’ locations are usually rooms in community locations, such as, libraries, where police officers would attend to meet with members of the public. The health and safety arrangements for these locations are the responsibility of the local authority or venue owner, where applicable, although the Force do their own check to ensure safety standards are adhered to. These locations are low risk and will be picked up as resource allows. As for the three premises allocated to September 2022, two had been completed and one remained outstanding. The Operational Planning and Safety Manager, whose remit includes operational planning, was unable to complete all reviews in September 2022 due to arrangements as a result of the Queen’s death. The remaining review will be picked up as capacity allows.</p> <p>We selected a sample of five premises and obtained the supporting health and safety inspections, fire risk assessments and action plans. From review of the documents, we noted that:</p> <ul style="list-style-type: none">• All five premises' reviews had been completed and documentation was on file to support all aspects of the assessments;• In all cases, assessments had been signed off as complete by the Operational Planning and Safety Manager and photographic evidence was on file to support completion;• In all cases, actions were raised from both the health and safety assessments and the fire risk assessments; and• In all five cases, an overall fire risk was assigned which correlated to the results on the annual inspection programme. <p>From review of the documentation, it was noted that action plans are formulated and provided to those responsible for maintaining the site; however, the Health and Safety Team do not have the capacity to ensure and verify that actions arising from the inspections have been carried out, therefore in all five cases, there were actions left as outstanding.</p>	

Area: Health and Safety

The Operational Planning and Safety Manager explained that their role is across three areas: operational planning, counter-terrorism, and health and safety, therefore there is not capacity to follow up on actions raised as part of annual inspections. Instead, previous actions are considered within the next annual inspection. Should any issues be deemed significant or high risk, these issues will be followed up through ad-hoc communications with a shorter implementation date added; however, this is not part of formal action tracking.

Where health and safety and fire risk assessment actions are not subject to adequate follow up, there is a risk that actions are not taken and could lead to a health and safety or fire-related incident.

Management Action 4	<p>The Health and Safety Manager will raise a request to reinstate quarterly health and safety meetings in line with the current Force structure.</p> <p>Within these meetings, actions arising from annual inspections will be assigned responsible officers and tracked to ensure adequate actions are taken.</p>	Responsible Owner: Health and Safety Manager	Date: 31 July 2023	Priority: Medium
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Area: Health and Safety

Control	All risk assessments are reviewed and updated every two years to ensure assessments remain up to date and reflect current practises.	Assessment: Design ✓ Compliance ×
Findings / Implications	<p>We undertook a walkthrough of the Health and Safety drive to understand how the process for monitoring and reviewing risk assessments is managed within the Health and Safety Team. However, we noted that there is not a clear process in place to manage the review of risk assessments, for example, the Health and Safety Team do not maintain a list to track which risk assessments require revision and this is carried out on an ad-hoc or as required basis. We typically see organisations using a central tracking system to ensure that any out-of-date risk assessments are considered and addressed, and if no longer relevant, are archived and a comment stating why the assessment is no longer applicable is recorded to confirm why reviews are no longer applicable.</p> <p>However, we noted that risk assessments are stored sporadically in folders on the Health and Safety Team's central drive and there is no clear process to ensure that risk assessment reviews are completed in a timely manner. Our ability to pick a random sample was therefore impacted as the team do not maintain an overarching list.</p> <p>We therefore selected 10 risk assessments within the folders evidenced by the Operational Planning and Safety Manager. From our review, we noted that five of the 10 risk assessments had not been reviewed in line with the two-yearly review requirement. These risk assessments were for crime scene investigation, policing football, visit to Force HQ, transporting prisoners and custody duties.</p> <p>We noted that not all risk assessments are considered key assessments, for example, the visit to Force HQ relates to young persons visiting the Force, which has not occurred since Covid-19 and would therefore not require regular updating.</p> <p>The Operational Planning and Safety Manager outlined key supporting processes for other risk assessments, for example, the policing football risk assessment is supported by individual operational plans, which include bespoke risk assessments for each match. However, where risk assessments are not regularly monitored, there is a risk that key risk assessments may go out of date and not reflect current practises, which could lead to ineffective risk mitigations.</p> <p>In addition, we noted through review of the intranet system that risk assessments published on the site are largely out of date, with the last noted date being 2019. The Operational Planning and Safety Manager outlined that there is currently limited capacity within the Health and Safety Team to update the intranet system and it would be preferred that officers and staff contact the Health and Safety Team to request the most up to date versions of risk assessments. However, where up to date risk assessments are not accessible, there is a risk that appropriate mitigating actions will not be taken, which could lead to health and safety incidents.</p> <p>The Operational Planning and Safety Manager informed us that risk assessments rarely include any further actions as control measures identified and documented within the risk assessments as being in place reduce the risk of harm as so far as reasonably possible. Should any additional actions be required, actions would be assigned to the relevant business area, although these are not followed up by the Health and Safety Team. The risk assessments reviewed within our audit did not include any further actions.</p>	

Area: Health and Safety

Management Action 5	<p>The Health and Safety Team will develop a register of all risk assessments and include the following information to support tracking:</p> <ul style="list-style-type: none">• Responsible owner;• Last review date;• Who has carried out and reviewed the risk assessment;• Next scheduled review date;• Whether the risk assessment is still relevant at next review;• Comments, where applicable, if risk assessments are no longer relevant and therefore archived;• Risk assessment ratings;• Whether any actions are documented on the risk assessment; and• Confirmation the risk assessment has been updated on the intranet. <p>In addition, the team will review the risk assessments currently available on the intranet to ensure these are in date and remove any that are outdated.</p>	Responsible Owner: Health and Safety Manager	Date: 31 March 2023	Priority: High
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Area: Health and Safety

Control	<p>Injuries on duty are reported as soon as practicably possible using an 'injuries on duty form', which includes a risk assessment completed by the relevant line manager.</p> <p>All injuries on duty are submitted to the Health and Safety Team for review and inclusion on the injuries on duty log to ensure adequate action is taken.</p>	<p>Assessment:</p> <p>Design ✓</p> <p>Compliance ×</p>
Findings / Implications	<p>The Health and Safety Team maintain an 'injuries on duty' register, which records all injuries reported across the Force to ensure adequate action is taken, such as, RIDDOR reporting. We undertook a walkthrough of the register with the Operational Planning and Safety Manager and confirmed that records were well maintained, with clear detail recorded to outline the details of the incident. Accident reporting forms part of the annual health and safety reports.</p> <p>We selected a sample of 20 incidents from the register, which included 10 incidents marked as RIDDOR reportable. We noted the following from our testing:</p> <ul style="list-style-type: none"> • In all cases, an injury on duty form was saved on file, which had been completed by the individual (if possible) and assessed by the relevant line manager; and • In all the cases the forms were clearly filled out and reconciled to the information recorded on the register. <p>However, we noted the following discrepancies:</p> <ul style="list-style-type: none"> • From the 10 RIDDOR reportable incidents, nine incidents were supported by a completed RIDDOR report form. In the final case, the Operational Planning and Safety Manager explained that a RIDDOR report was not actually applicable as the case was a road traffic collision and therefore is excluded from RIDDOR reporting. At the time of the incident, it was unclear whether the injury was sustained from a deliberate attack (which would require RIDDOR reporting) or whether it was an accidental collision (which would not require RIDDOR reporting). Following investigation, it was deemed the collision was accidental and therefore RIDDOR reporting was not applicable; however, this was not clearly recorded on the register. • In two of the nine cases with RIDDOR reporting, we noted that RIDDOR reports had not been made within 10 days of the incident, in line with the requirements of RIDDOR 2013. Reports were made within 23 and 38 days. The Operational Planning and Safety Manager outlined that RIDDOR reports are submitted at the earliest opportunity once injury on duty forms have been issued to the team. • From the 10 non-RIDDOR reportable incidents, we identified one instance where the incident was an assault on a police officer and the seven-point plan (an initiative to ensure all steps are taken to support assaulted officers) was not followed. <p>Where injury on duty reports are not made in a timely manner, there is a risk adequate action is not taken timely and RIDDOR reporting could be impacted, which could lead to non-compliance with RIDDOR.</p> <p>Where seven-point plans are not initiated for police assaults, there is a risk that officers do not receive adequate support.</p>	
Management Action 6	<p>The Health and Safety Team will record the dates that incidents occur and the dates that injury on duty forms are completed and</p>	<p>Responsible Owner: Health and Safety Manager</p> <p>Date: 31 March 2023</p> <p>Priority: High</p>

Area: Health and Safety

issued on the injuries on duty tracker to ensure adequate audit trail should RIDDOR reporting be late and ensure RIDDOR reportable incidents are accurately recorded.

Any instances of late reporting will be followed up with relevant areas, in accordance with management action 4.

Management Action 7

The Health and Safety Team will monitor any cases where seven-point plans are not initiated if an officer has been assaulted and ensure any non-compliance with this requirement is raised to the appropriate teams. This will be carried out in conjunction with management action 4.

Responsible Owner:

Health and Safety Manager

Date:

30 September
2023

Priority:

Low

Area: Health and Safety

Control	<p>Partially missing control</p> <p>The Health and Safety Team do not retain records of near misses.</p> <p>Near misses are dealt with on an ad-hoc basis and reports are produced by the Health and Safety Team where investigations are undertaken.</p>	<p>Assessment:</p> <p>Design ×</p> <p>Compliance -</p>
Findings / Implications	<p>Discussions with the Operational Planning and Safety Manager outlined that the Health and Safety Team do not receive many reports of near misses and records of near misses reported to the team are not maintained on the injuries on duty register.</p> <p>The Operational Planning and Safety Manager explained that the team respond to near misses, if reported, as they are reported to the Health and Safety Team and take action, as required. The Operational Planning and Safety Manager provided us with a recent example of a near miss reported into the Health and Safety Team, whereby a piece of equipment was reported as broken and the individual using the machine was almost hit by a piece of machinery. As a result, the Health and Safety Team inspected the equipment and produced a report on the investigation completed and actions to be taken. There were seven deficiencies identified as a result of the near miss review, which were documented on the report, and the respective risk assessment was updated. We discussed the actions on the report with the Operational Planning and Safety Manager and noted that the Health and Safety Team provide these actions to the operational area to address; however, do not do any follow up of these actions to ensure they are implemented. This is the responsibility of the operational area.</p> <p>Through discussions at the closing meeting with the Operational Planning and Safety Manager, it was outlined that the central service desk will track and record any near misses, which are only raised with the Health and Safety Team, where relevant. However, the Health and Safety Team do not record these instances in a central list.</p> <p>Where near misses are not centrally recorded, there is a risk that any common themes or issues cannot be identified and addressed.</p> <p>The Operational Planning and Safety Manager outlined that a process is in place whereby any near misses are reported to the Front Service Desk by ringing '1234', and these are directed to the most appropriate department, for example, the Estates Department. Any notification is also forwarded to the Health and Safety Team for review and if necessary, investigation. We understand this system is under-utilised despite several previous attempts to raise the profile and importance of near miss reporting across the organisation.</p>	
Management Action 8	<p>The Health and Safety Team will retain a central list of all near miss reports received across the Force to ensure any actions can be taken, as appropriate, and common themes and trends can be identified.</p> <p>In addition to management action 4, the Health and Safety Team will use quarterly meetings to raise the importance of near miss reporting.</p>	<p>Responsible Owner:</p> <p>Health and Safety Manager</p> <p>Date:</p> <p>30 September 2023</p> <p>Priority:</p> <p>Medium</p>

Area: Health and Safety

Control	Missing control There is no formal process in place to disseminate lessons learnt as a result of accidents, incidents and near misses.	Assessment: Design × Compliance -		
Findings / Implications	<p>The Operational Planning and Safety Manager outlined that there is currently no formal mechanism in place to disseminate or discuss lessons learnt as a result of accidents, incidents or near misses. Whilst the Health and Safety Team do monitor any reported injuries on duty and raise issues, where applicable, this is on an ad-hoc basis.</p> <p>The Operational Planning and Safety Manager outlined that quarterly health and safety meetings used to occur with each department and would be chaired by the relevant Chief Superintendent or their deputy. These meetings stopped occurring in approximately 2018 following a large restructure within the Force and have not started again. Minutes were taken at each meeting, actions agreed, and any lessons learnt within a particular area could be discussed and escalated to ensure appropriate action is taken.</p> <p>Where there is no formal mechanism in place to report and discuss lessons learnt as a result of trends and themes from reported injuries on duty, there is a risk that the Force are not addressing known issues in respect of health and safety, which could lead to an increase in incidents and a breach of health and safety regulations.</p>			
Management Action 9	In conjunction with management action 4, the Health and Safety Team will establish a formal process to discuss and report lessons learnt as part of quarterly meetings.	Responsible Owner: Health and Safety Manager	Date: 30 September 2023	Priority: Medium

Area: Health and Safety

Control	<p>Partially missing control</p> <p>An annual health and safety report is presented to the Joint Audit Committee.</p> <p>No further reporting is undertaken throughout the year and there is no committee assigned health and safety duties within their remit.</p>	<p>Assessment:</p> <table><tr><td>Design</td><td>×</td></tr><tr><td>Compliance</td><td>-</td></tr></table>			Design	×	Compliance	-
Design	×							
Compliance	-							
Findings / Implications	<p>The Operational Planning and Safety Manager produces an annual health and safety and fire safety report which is reported to the Joint Audit Committee by the Assistant Chief Constable. We obtained the last report dated 30 June 2022, which included the following:</p> <ul style="list-style-type: none">• Background and a roadmap out of Covid-19;• Fire safety, including premise inspections;• Health and safety training;• Tactical advice and operational support;• Health and safety inspections;• Injuries on duty; and• Risk assessments. <p>Statistics were provided in the report outlining the number of reported injuries on duty and injuries reportable to the HSE. It was reported that 25 injuries were RIDDOR reportable in 2021 / 2022 and that 179 injuries on duty were reported throughout the year. However, from our review of the injuries on duty register, we noted 26 injuries were marked as RIDDOR reportable and there was a total of 181 injuries on duty reported in 2021 / 2022. We established through discussions with the Operational Planning and Safety Manager that this was due to retrospective incident reporting, and we have agreed management action 6 to identify these instances.</p> <p>Through discussions with the Operational Planning and Safety Manager, we noted that there is no regular reporting on health and safety throughout the year. There is also no committee discharged with health and safety duties, which receives regular reporting.</p> <p>Where regular reporting is not carried out in relation to health and safety, there is a risk that key trends or causes for concern across the Force are not identified and addressed in a timely manner.</p>							
Management Action 10	<p>The Health and Safety Manager will raise the issue of health and safety reporting and governance arrangements within the Force with the intention of implementing regular Force reporting on health and safety matters to an appropriate committee or Group.</p>	<p>Responsible Owner:</p> <p>Health and Safety Manager</p>	<p>Date:</p> <p>30 September 2023</p>	<p>Priority:</p> <p>High</p>				

APPENDIX A: CATEGORISATION OF FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

The following table highlights the number and categories of management actions made as a result of this audit.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
					Low	Medium	High
Health and Safety	5	(10)	3**	(10)	1	3	5
Total					1	3	5

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

* More than one action raised against one control.

APPENDIX B: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following area:

Objective of the area under review

To ensure the Force has appropriate systems in place to mitigate risks relating to health and safety.

Our review will focus on the following areas:

- The Force has a health and safety policy and supporting procedures in place, which have been subject to regular review and are clearly communicated to staff and officers.
- The Force has established a programme of health and safety training to ensure all staff and officers have receive appropriate training in line with their roles and responsibilities, and how any non-completions of e-learning training are monitored and escalated, where applicable.
- In particular, we will consider the health and safety training delivered and guidance available to management to ensure they are adequately informed of their responsibilities in respect of health and safety.
- Processes in place for undertaking health and safety inspections / risk assessments / premises reviews, and whether the Force has carried these out in line with procedures.
- Whether weaknesses arising from inspections, risk assessments and premises reviews are documented in an action plan and are addressed accordingly.
- How the Force ensures the timely reporting of incidents and manages the investigation and RIDDOR reporting process.
- We will select a sample of accidents, incidents and near misses to review the processes in place and systems used to capture supporting information, including issue reporting and actions taken.
- We will consider how learning from accidents, incidents and near misses is analysed, addressed, and disseminated across the Force.
- The reporting arrangements within the Force, including whether an appropriate committee has been charged with health and safety matters, whether regular updates are provided to that committee and whether the content of the update is appropriate and fit for purpose.
- How information on health and safety incidents is reported across the Force, including through working groups and committee meetings.

The following limitations apply to the scope of our work:

- The scope of the work will be limited to those areas examined and reported upon in the areas for consideration in the context of the objectives set out for this review.
- We will not comment on the adequacy of risk assessments in place, only that actions arising from such assessments are being communicated and addressed.
- Our findings and opinions from this review will not replace any advice from external health and safety providers to the Force.
- We will not provide an opinion on the safety of sites or that staff are appropriately trained in reporting and managing health and safety incidents.
- We will not comment on the content or adequacy of health and safety training delivered.
- We will not comment on the effectiveness or appropriateness of actions taken to address health and safety incidents.
- We will not comment on the Force's compliance with health and safety legislation.
- Testing will be conducted on a sample basis only.
- Our work does not provide any guarantee against material errors, loss or fraud, or provide an absolute assurance that material error; loss or fraud does not exist.

Debrief held 27 September 2022
Draft report issued 6 October 2022
Responses received 19 October 2022

Final report issued 19 October 2022

Internal audit Contacts Robert Barnett, Head of Internal Audit
Philip Church, Senior Manager
Michael Gibson, Manager

Hollie Adams, Assistant Manager

Client sponsor Simon Hart, Chief Finance Officer

Steve Walton, Operational Planning and Safety Manager

Distribution Simon Hart, Chief Finance Officer

Steve Walton, Operational Planning and Safety Manager

Mark Webster, Chief Constable

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of **The Chief Constable of Cleveland**, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

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We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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