



Meeting	SPA People Committee
Date	29 May 2025
Location	Videoconference
Title of Paper	Health & Safety 2024/25 Year End Report
Presented By	Dawn Maclean, Health and Safety Manager
Recommendation to Members	For Discussion
Appendix Attached	Appendix A: Manager Report 2024/25 Appendix B: Workplan 2025/26

PURPOSE

The purpose of this report is to provide a strategic overview in relation to health & safety within the Scottish Police Authority (SPA) and Police Scotland.

The SPA and Police Scotland have joint responsibility as “duty holders” in relation to health and safety, with corporate governance duties discharged through the Police Scotland Health and Safety Board. Relevant matters are thereafter escalated via executive members to the Police Scotland Strategic Leadership Board, the SPA People Committee and the SPA Board.

Members are invited to discuss the content of this report and the attached appendix.

1. BACKGROUND

- 1.1 Decisions in relation to Health & Safety are made through a network of local Health & Safety committees/forums within SPA and Police Scotland, with national decisions made at the quarterly Health & Safety Board.

2. FURTHER DETAIL IN RELATION TO THE REPORT

- 2.1 The Health & Safety Q3 report, attached at Appendix A, details matters such as enforcement activity, proactive preventative work and accident statistics, which include assaults and incidents during arrest/custody. The report also provides updates on current and emerging health & safety issues and updates regarding the development of policy and practice.
- 2.2 Members are invited to discuss this report.

3. FINANCIAL IMPLICATIONS

- 3.1 While there are no financial implication arising directly from this report, there are financial implications from ongoing health and safety related estates works including fire safety actions. A significant number of actions have been identified from the Fire Risk Assessments and from the ongoing Custody Audits.

4. PERSONNEL IMPLICATIONS

- 4.1 There may be issues in relation to Human Resources such as the link between RIDDORs and the number of lost working days. Having a robust Health and Safety Management System in place with appropriate resources can help the organisation in terms of challenges around physical resources and cost savings.

5. LEGAL IMPLICATIONS

- 5.1 There are legal implications associated with this paper. Police Scotland requires to be compliant with the Health & Safety at Work etc. Act 1974 and Fire (Scotland) Act 2005.

6. REPUTATIONAL IMPLICATIONS

- 6.1 There are reputational implications associated with this paper in relation to failures to comply with legislative requirements, health and safety guidance and established safe systems of work.

7. SOCIAL IMPLICATIONS

7.1 There are no currently social implications.

8. COMMUNITY IMPACT

8.1 There are no current implications for community impact.

9. EQUALITIES IMPLICATIONS

9.1 There are no current implications for equalities.

10. ENVIRONMENT IMPLICATIONS

10.1 There are no current implications for environmental impact.

RECOMMENDATIONS

Members are invited to discuss the content of this report and the attached appendix.



HEALTH & SAFETY

Health & Safety Board

Manager Report – Yearly report
2024/2025

OFFICIAL

Accident/Incident/ Near Miss



SCOTTISH POLICE
AUTHORITY

Health & Safety Dashboard

Report monitoring – Year end 2024-2025

Statutory enforcement

H&S enforcement notices

✓ No reportable incidents



Fire safety enforcement notices

✓ No reportable incidents



Total Reports

8624

23/24 - 8545

Total RIDDOR

230

23/24 - 203

Breakdown of figures – *assault figures*

Total ASSAULT

5775

23/24 - 5567

Total RIDDOR

51

23/24 - 33

Total INJURY

1432

23/24 - 1409

Breakdown of figures – *exc assault figures*

Total ACCIDENT

2129

23/24 - 2055

Total RIDDOR

178

23/24 - 169

Total NEAR MISS

720

23/24 - 923

1. Report Monitoring

RIDDOR Reporting

The number of RIDDORs have **increased** by 55% on assaults in comparison to last years figures despite there only being 3.7% overall increase in reports of assault

Reporting figures

The highest number of accident reports are within the category ***During Arrest/Custody*** (see slide 9 for further breakdown)

Near Miss reporting

The number of near miss reports has **fallen by 22%** from last year. Near miss reporting is imperative to allow for continuous improvement and to prevent accidents from happening in future.

Data Scrutiny

There have been no obvious trends or patterns over the last 5 years

1a. Report Monitoring: *RIDDOR Reporting*

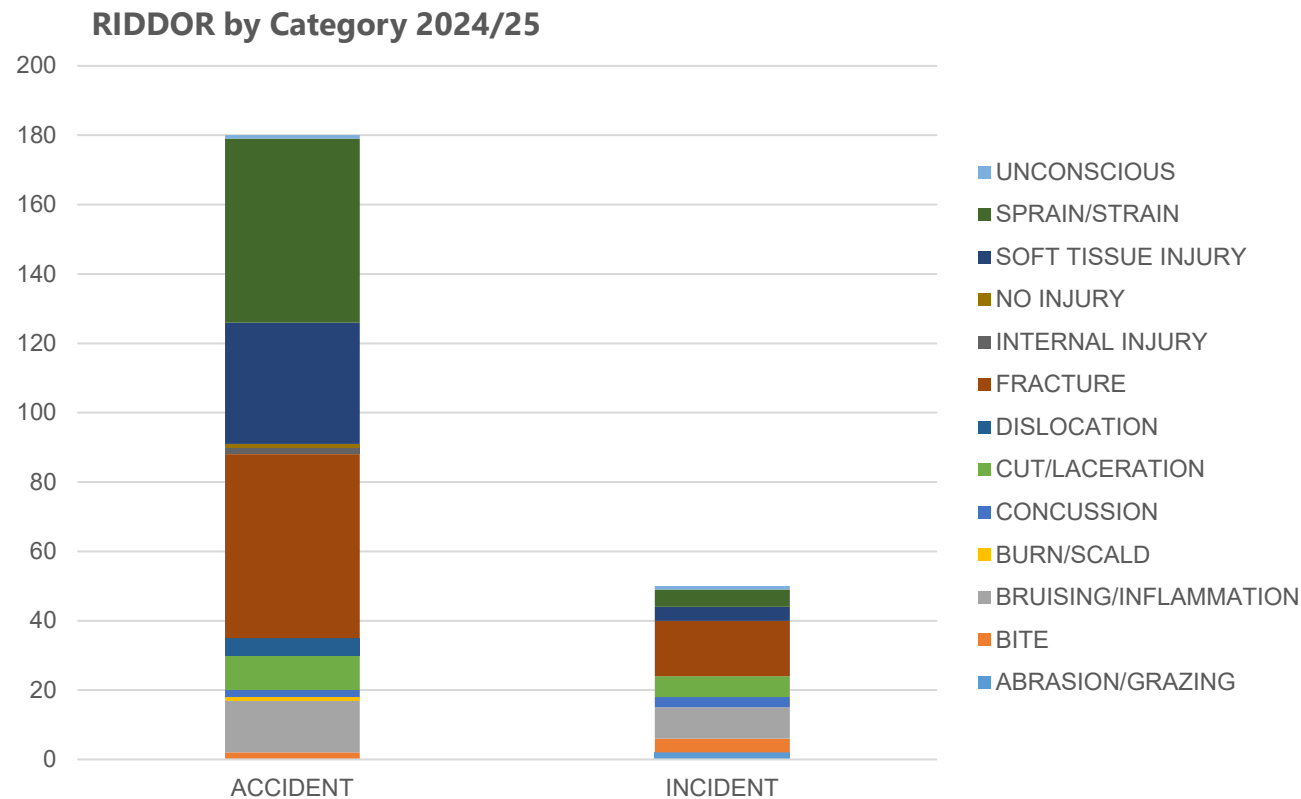


Fig 1

Fig 1 - gives an overview of the number of Accidents in comparison to Incident/Assaults over the last year.

Fig 2 and Fig 3 show the comparison of the number of assaults that result in an over 7-day absence and are reported to RIDDOR as such. This would suggest that the physical injury has been minor and did not meet the criteria for Specified Injury.

The yellow highlighted sections on the charts note the number that were significantly over the 7-day absence by over 21 days (**15 and 16**), despite there being only mention of a minor injury. This raises concern that these incidents may have culminated in psychological harm.

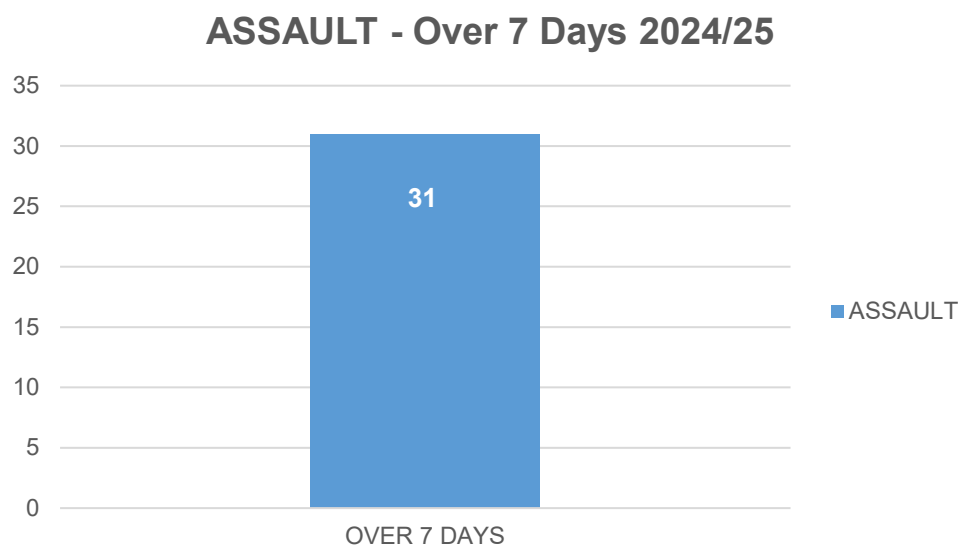


Fig 2

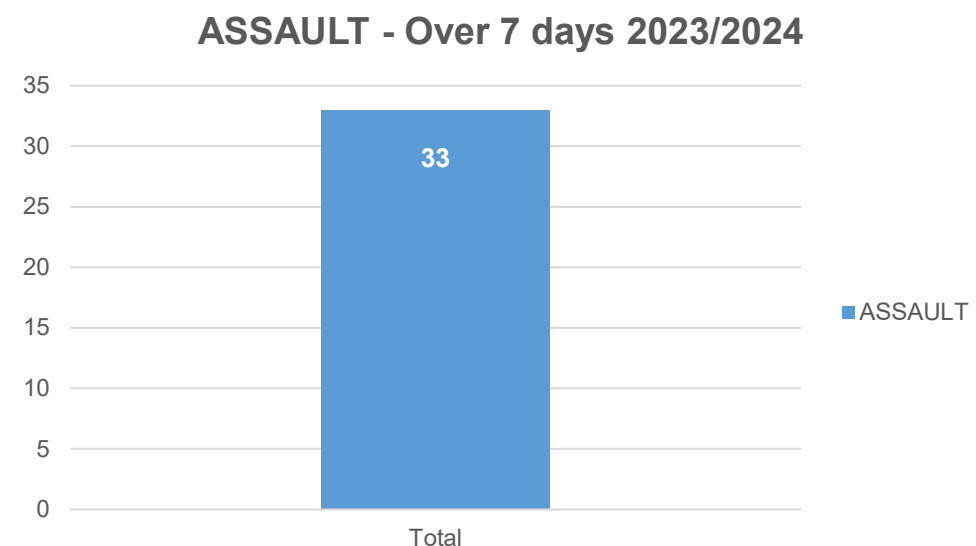
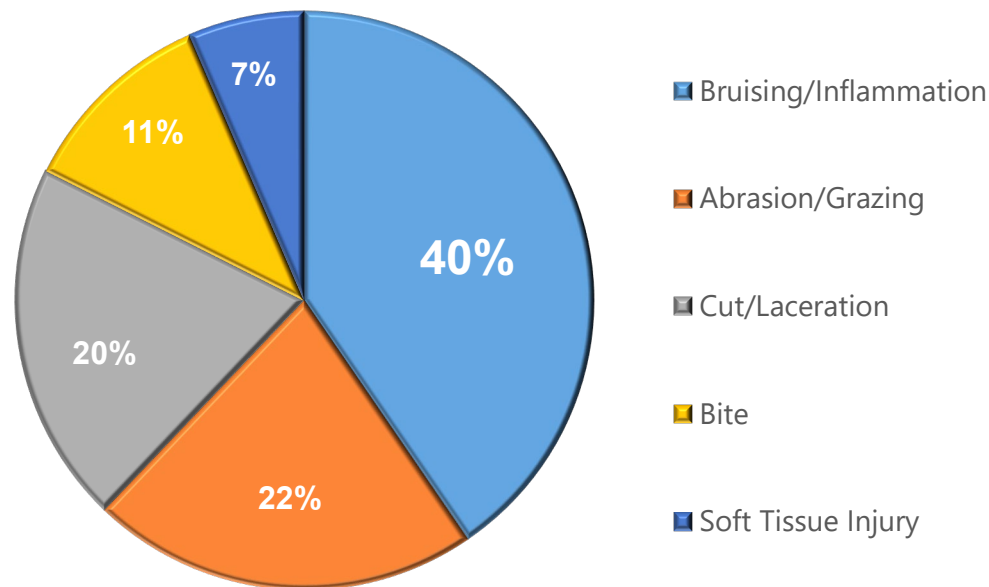


Fig 3

1c. Report Monitoring: *Assault Reporting*

Data & trend analysis – 2024/25 report

Injury - Assault 2024/25



Total INCIDENTS

5775

2024/25

5567 - 23/24

Total RIDDOR

51

2024/25

33 – 23/24

Management response

The data shows that the number of RIDDOR reports has seen a significant increase following what looked like they had stabilised over the past 2 years. The number of reports have only increased by 3.7% on last year.

In spite of a 1.6% increase in assaults resulting in injury, the injury rate has decreased by 0.5%.

A Total of

1432

resulted in injury

2024/25

1409 – 23/24

1d. Report Monitoring: *Assault Reporting 2024/25*

Div Desc	2024/25 REPORTING RATE	2023/24 REPORTING RATE	% POINT CHANGE
Ayrshire	96.2%	97.5%	-1.3
Lanarkshire	89.4%	83.9%	5.6
Argyll and West Dunbartonshire	87.7%	80.7%	7.0
Fife	86.8%	91.7%	-4.9
Highland and Islands	84.4%	62.3%	22.1
The Lothians and Scottish Borders	80.5%	86.2%	-5.8
Renfrewshire and Inverclyde	79.8%	70.9%	8.9
North East	75.9%	81.2%	-5.3
Dumfries and Galloway	75.6%	92.8%	-17.2
Tayside	73.9%	69.4%	4.5
Forth Valley	73.3%	90.9%	-17.6
Edinburgh	70.8%	106.7%	-35.9
Greater Glasgow	64.4%	67.8%	-3.4
Total	78.0%	80.6%	-2.6

Management response

The data shows that reporting has seen a slight decrease overall, associated with the number of crime reports.

Whilst it is encouraging to see an improvement in some divisions, others have unfortunately seen a downturn. This has been reported at divisional and area command level through the local committees.

The Health & Safety team will continue to monitor and support divisions to ensure better reporting in line with crime data.

1e. Report Monitoring: *RIDDOR* Reporting by Accidents

RIDDORS BY TYPE

● 2024/25 ● 2023/24 ● 5 YR MEAN

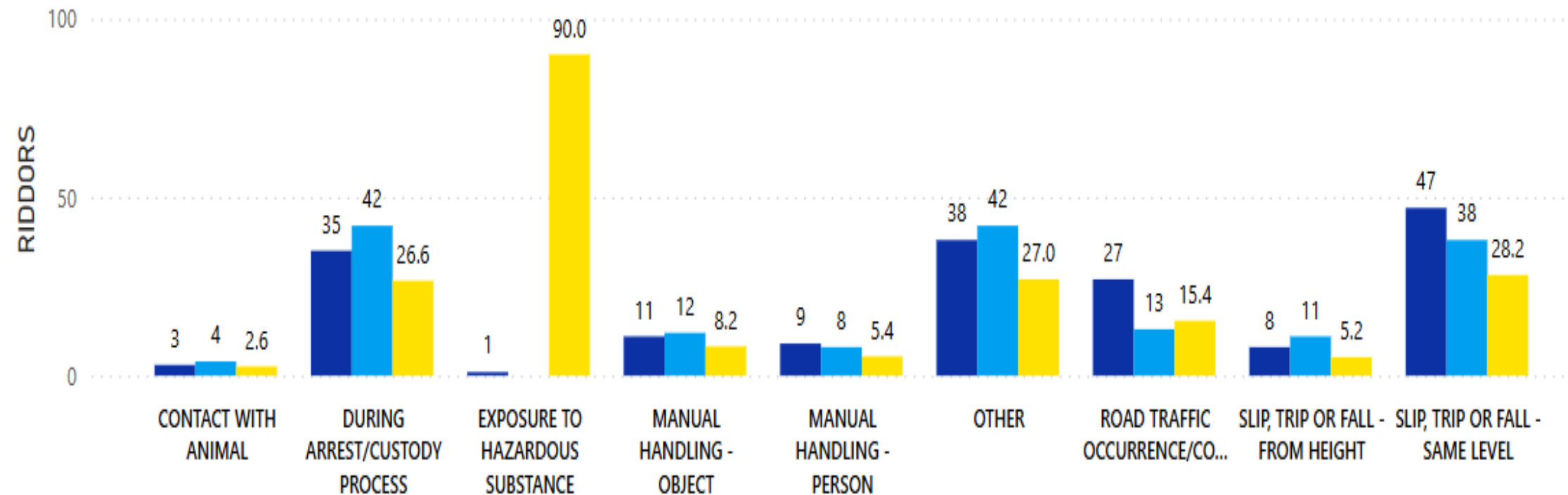


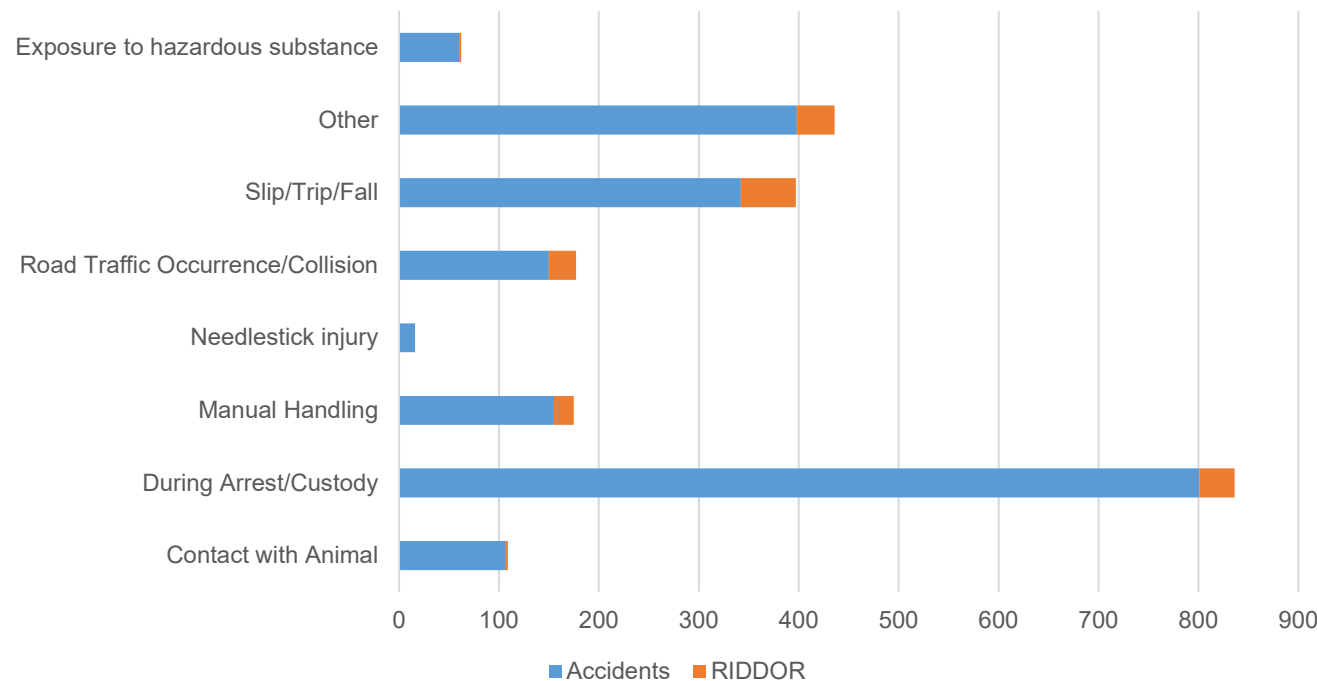
Fig 1

The chart shows the breakdown, and comparison of 2023/24 and 2024/25 data, of **ACCIDENTS** and the hazards by which they occurred.

Slip/trip/falls comprised (30%) of accidents in 2024/25, which is comparable to the HSE statistics on most industries.

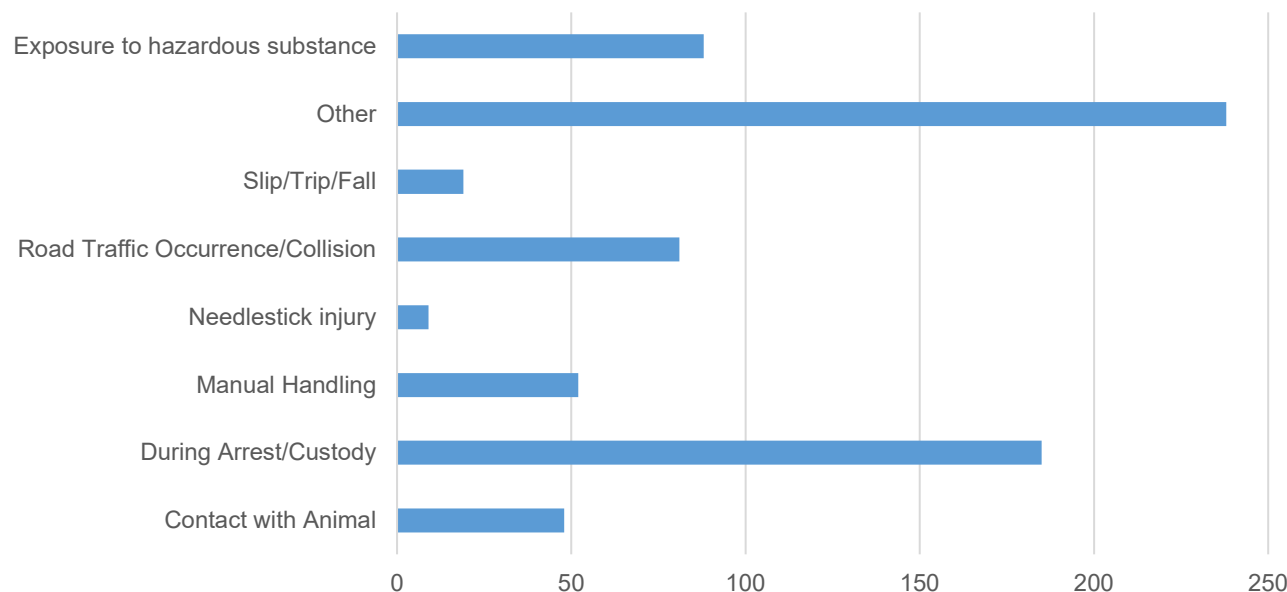
1e. Report Monitoring: *Accident Reporting*

Accidents/RIDDORS – 2024/2025



The most accidents and near miss reports continue to be highest within the category ***During Arrest/Custody***, however, there has been a decrease of 11% in comparison to last year.

Near Miss Reports 2024/2025



The '**Other**' Near Miss category includes:

- Physical Exertion
- Airwave Issues
- Equipment Failure
- PPE Issues

The category 'Other' has been scrutinised by the team and additional categories (as above) will be incorporated into 2025/26 reports.

1f. Report Monitoring – Command areas

North Command

A recent incident, in which a letter was thought to contain an unknown harmful substance in Inverness, will require a further debrief involving health and safety, CBRN, Productions and LP. The matter was not dealt with through the proper processes and needs further scrutiny to establish why this occurred.

East Command

C Division brought to our attention that the kit list suggests officers can only order 1 spit hood at a time. I raised this at the Clothing and Equipment WG and was given the assurance that, where it says quantity 1, this is only for starter kits and therefore the Divisions DCU or custody centres can store as many as they need. The Health and Safety Advisors have been asked to share this with their divisions

West Command

The Health and Safety team are running a pilot in Q1, within G Div, whereby an email is being sent in acknowledgement that there has been receipt of an accident/incident report. It highlights next steps, as well as what the data is used for within the force. If the pilot is successful in showing an increase in reporting as a result, then further investigations will take place to pursue automation of the process nationally.

2. 2024-2025 Workplan Overview

Health and Safety Workplan 2024/2025 - Outcomes

Objective	Outcomes
Key Area 1.3 – Improve assurances to SPA/PS that health and safety is embedded	The success of the Certificate of Assurance has yet to be fully scrutinised, however early indication would suggest that the newer process has been welcome, and divisions and support areas have been able to identify, along with support from the Health and Safety Advisors, areas for improvement. A full report will be submitted to the Board and SPA People Committee at the meetings scheduled for May 2025. The change in process will also mean that, and pending successful outcome, will allow an Internal Assurance recommendation to be recommended for closure
Key Area 2.3 - Develop new policies, SOPs and national guidance where relevant	The team have managed to exceed expectation in terms of the number of new policy and guidance documents written this year. These documents will influence the needs analysis going forward for the learning and development work within the team that is required to share with the wider force; AZET
Key area 3.2 - Improve Health and Safety Intranet site	The team were able to take ownership to administer the pages themselves which has allowed the health and safety Intranet page to become a wide and informative source of information. This continues to evolve as new and emerging risks, information and needs are defined.
Key area 4.1 & 5.3 – Investigate the use software to improve compliance	Whilst there has not been any purchase of specific software, compliance has been improved by utilising internal options such as 4Risk/4Action, Citizen Space and significant efforts to address the user interface on the intranet. Also, some of the team achieved their ISO 45001 Lead Auditor certificate which will help to articulate the type of systems we could look to invest in that would best support delivery of the Strategic Plan and Vision 2030 outcomes.
Key area 6.1 - Continue to identify ways to reduce RIDDORS across the organisation	The Learning and Development Working Group have been utilising data to produce training packages pertinent to the types of incidents being reported and prioritising needs. The group have achieved a lot over the past 12 months, namely adapting training for virtual delivery, that can be effectively disseminated over shorter, more manageable durations to accommodate busy work environments, whilst meeting compliance
Key area 7 - Maintain strong connections internally and externally, collaborating on future initiatives to affect positive change.	<p>The Health and Safety team have maintained strong connections internally, being involved in approximately 30 operations, some of which are ongoing. Each HSA has developed working relationships with officers and staff within their areas of responsibility, continuing to offer support and advice where needed.</p> <p>Some of the team have been part of wider external conferences, table-top exercises and development opportunities that have all served to bring new knowledge and skills to the assist in the delivery of the workplan moving forward.</p>

Timescales on the Workplan are on track as outlined in the 2024-2027 Strategic Plan

3. Certificate of Assurance - Outcome

2024-2025 – Risk Assessment and Implementation of Controls

The Health & Safety Assurance process for 2024/25 has concluded. The audit theme was Risk Assessment and Implementation of Controls. Most areas have submitted responses which have now been gathered, reviewed and outcomes communicated via 4Action. This will provide an audit trail on improvements arising from recommendations.

The process produced 27 recommendations over 26 business areas and Divisions. A postponement was granted to CJSD - Productions due to the number of assurance processes they were undergoing at the time. D and N Division were also provided some lenience for responses due to there being a break in Advisory support due to retirement in the Health and Safety team. These areas will be revisited as part of the upcoming 2025/2026 iteration, which will focus on leadership.

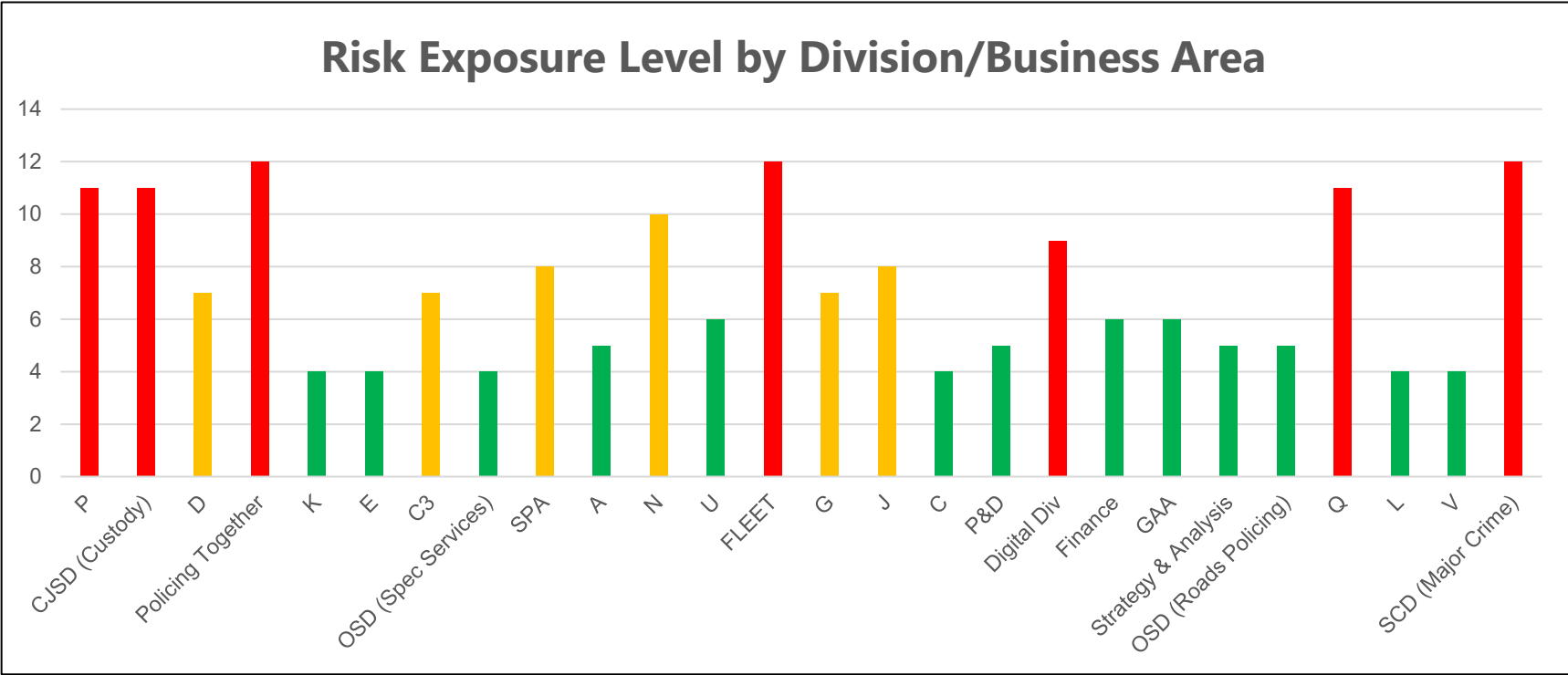
No responses to the assurance process were received from the following:

- 6 sub-divisions of SCD (exception of Major Crime)
- Corporate Communications
- Estates

Statistical data on the outcomes of the process can be found on slides 13 and 14.

3a. Certificate of Assurance - Statistics

2024-2025 – Risk Assessment and Implementation of Controls



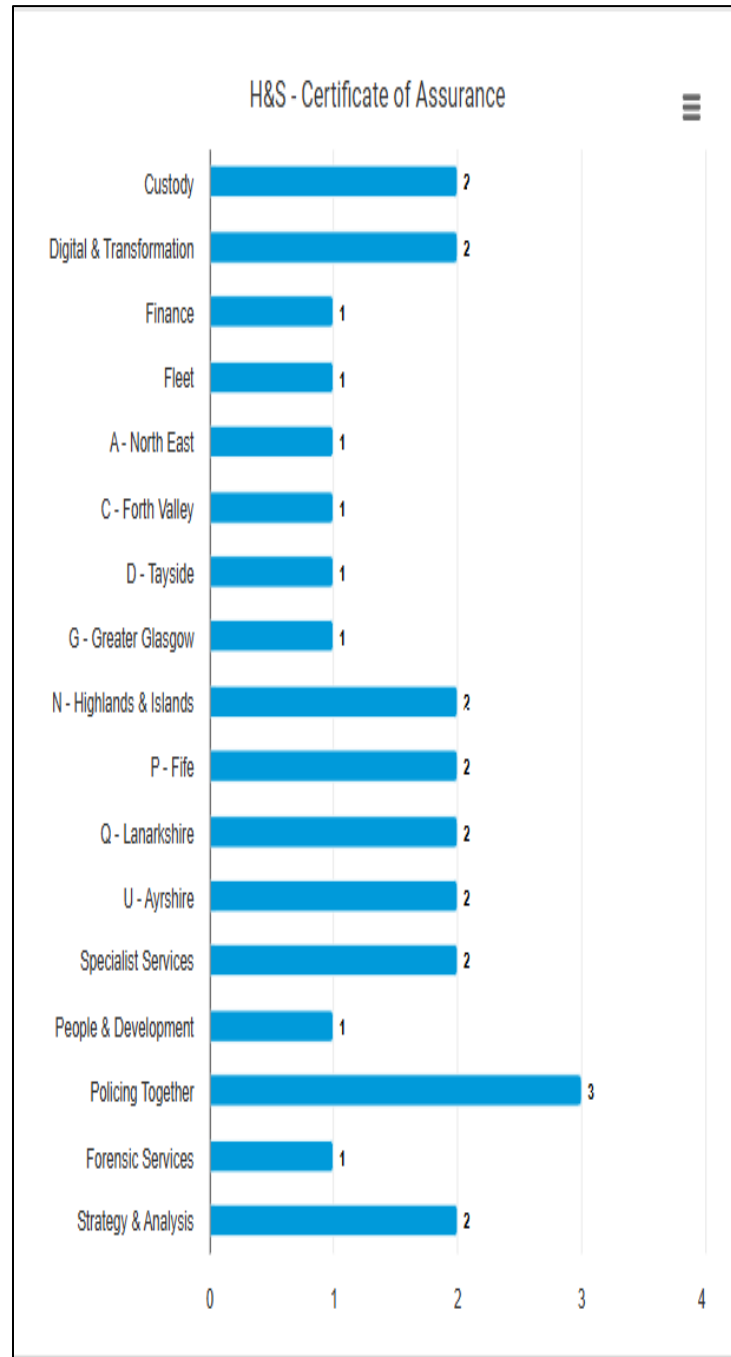
Risk Exposure Level

- **High – 7**
- **Moderate – 6**
- **Limited - 13**

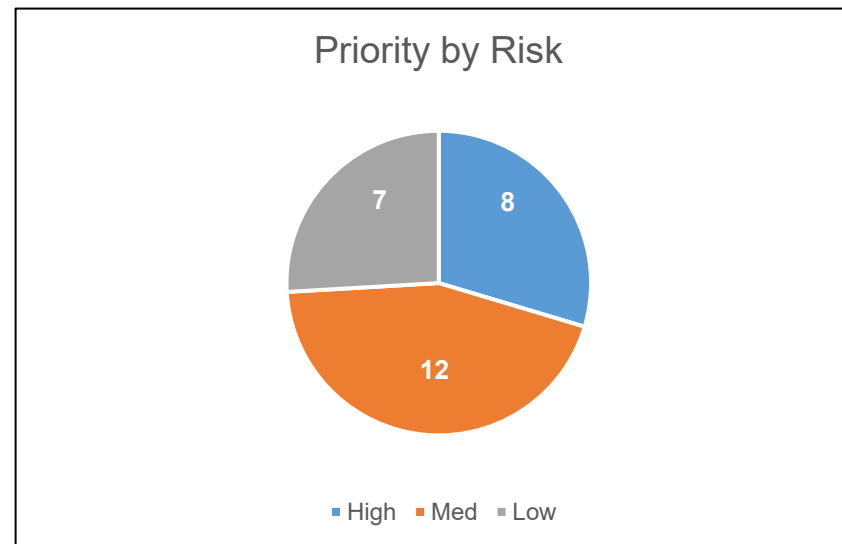
Scoring: Limited risk column = 1 point. Moderate risk column = 2 points. High risk column = 3 points

Total Scores	Description
4-6	Limited risk exposure – Controls adequate, effective, and working effectively but could be strengthened to prevent risks being created. Use ideas or working practices as best practice
7-9	Moderate Risk exposure - Evidence that controls are inadequate or ineffective and may increase risk if process improvements not made. Recommendations required
10-12	High Risk Exposure - Concerns regarding the absence or failure of controls which may require SMT attention due to the fundamental risk to organisation. Recommendations and support required

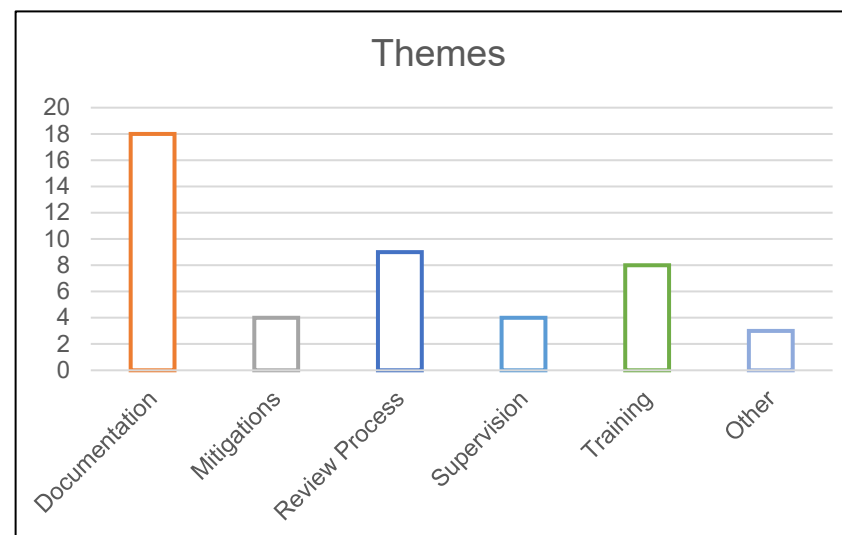
3b. Certificate of Assurance - Statistics



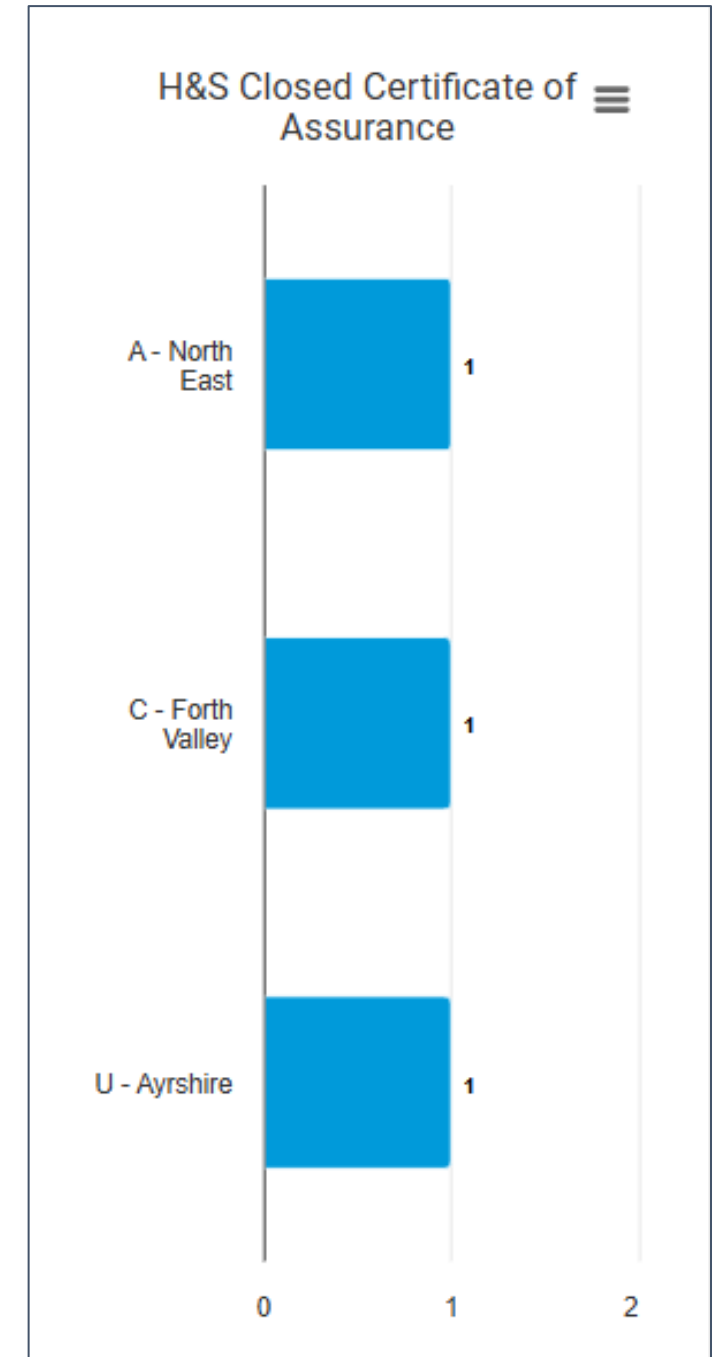
No. of recommendations - 27



Recommendations by risk level



Recommendations by theme



No. closed - 3

4. Areas of concern

Health and Safety Executive Intervention – Police Searches

In January 2025, the HSE visited a custody suite in Aberdeen. This was part of a UK wide initiative in response to recommendations that had been made in 2022 following the murder of Sgt Matt Ratana in the Met in 2020. A Notification of Contravention was received on 6th March 2025, which mentioned concerns with panic alarms and how searching is monitored. The letter has been considered and a response given. PS await further correspondence from HSE in reply.

Accident Incident Near Miss Reporting

With a view to improve reporting, the Health and Safety team has begun a pilot in G Division whereby we email a response to those who have submitted a form. It explains that the data is checked by the Advisors and, where applicable, there may be further action taken. It also describes the benefit of continuous improvement in a variety of ways such as training and equipment needs. If the pilot shows an increase in engagement with reporting, then we will seek to automate the process with assistance from the SCoPE Development Team.

Locus Protection

Work continues in LTD to establish what amendments are required within training for locus protection on roads for response policing. The formation of the Vehicle Equipment Working Group will also have a pivotal role in providing support from the above outcomes. Health and safety will continue to support in both areas to ensure compliance and protect the safety of officers.

5. In development

Certificate of Assurance 2025/26

The Health and Safety team are currently finalising the question set for next years theme which will be focussed on Leadership.

Recruitment

Due to funding agreed through RIG, we have a new Risk Assessor starting on 12th May 2025 (temporary Dec 2025) who will be looking to review all the current available risk assessment templates to bring them up to current standard and seek to identify any other areas of the force that could benefit from having a template to cover new or emerging risks.

Health and Safety Work Plan 2025/26

A copy has been submitted included in agenda.

6. Internal Audits

BDO Audit – Dangerous Goods

The SPA agreed to commission an audit pertaining to Dangerous Goods transported, stored, retained and disposed of by PS. The closing meeting took place on 22nd April 2025.

Recommendations ahead of management responses should be received w/c 28th April 2025. There are early signs of good practice but there are noticeable gaps where improvement can be made, of which an action plan will be compiled and shared with the Board in due course.

High Risk Goods Working Group

In preparation for the impending outcomes of the above, the first meeting of this group was held on Mon 10th March 2025. The membership comprised of PS officers and staff, SPA Forensics and COPFS. The purpose of the group is to collate, review and assess all work being conducted throughout the relevant agencies, relating to the hazards and risks associated with retention, transportation and disposal of high-risk goods. It will also look to identify and address any knowledge gaps, and to develop suitable risk control measures and associated procedures/guidance to effectively manage all risks associated with the above.

BDO Audit – Health and Safety Management System

The Scoping meeting was held on the 10th April 2025. Draft scope is pending.

OFFICIAL

Fire Safety



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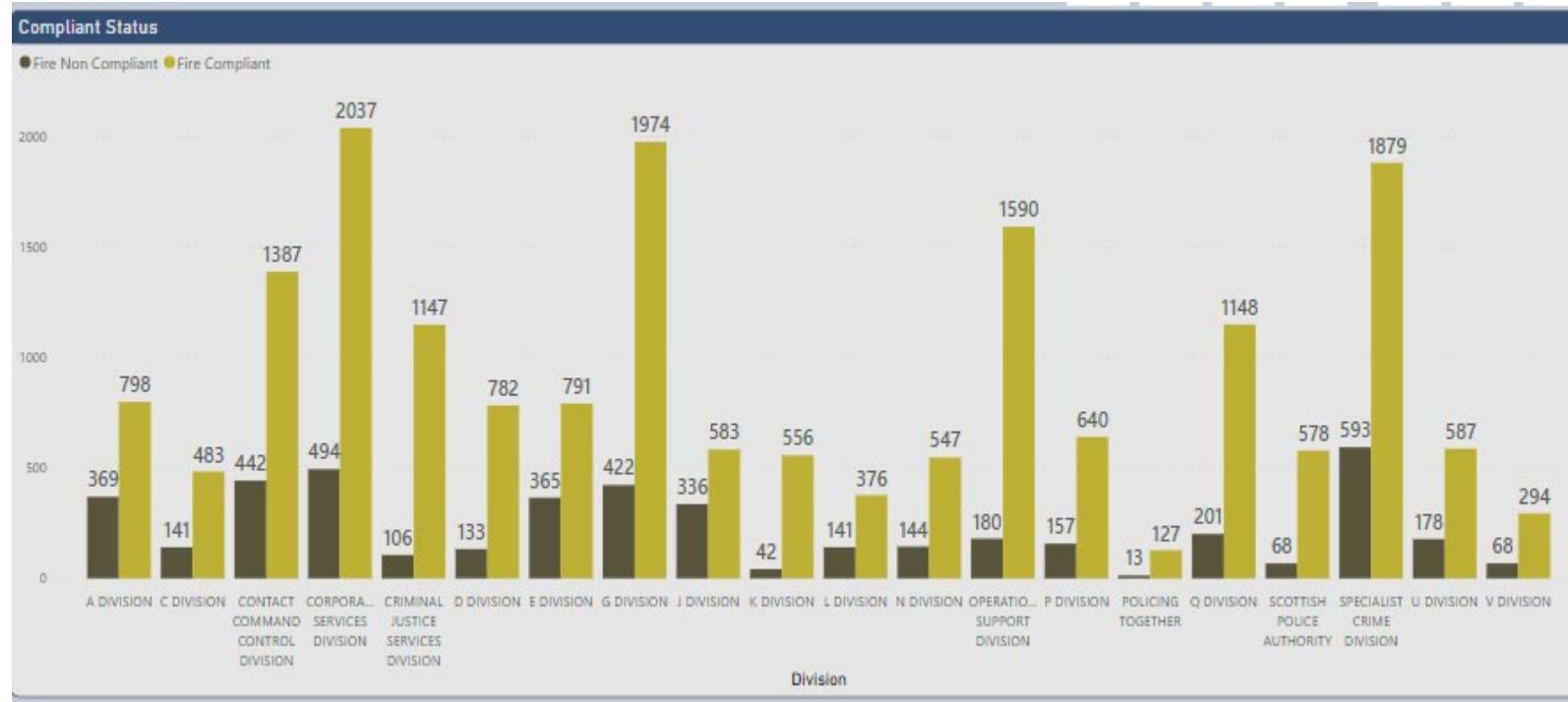
AUTHORITY

5. Fire Risk Assessment - Actions

Work continues to progress with the fire risk assessment actions review. Annual leave and absence has delayed the start date, which was 1st April 2025, however the team are confident that by the end of May, this process will be operational. A reminder of the process is bullet pointed below:

- For those buildings with overnight sleep risks i.e. our custody suites and training establishments with room provision these will have a full FRA carried out every 3 years with an intervening review every year. For the rest of our Estate, buildings will have a full FRA carried out every 4 years with an intervening review every year. These processes are caveated that, if there are any structural changes or issues arising that impact fire safety, a full FRA will be conducted.
- An action review group will be established comprising of the Estates and Compliance Lead, Asst Manager Health and Safety and the OCS Fire Risk Assessor, with assistance from Regional Facilities Management Leads. Prior to attending the review group, the RFML will gather updates on any actions, ensuring that where actions are reported as having been completed, they are appropriately updated on the recording system.
- It is anticipated that by introducing the above revised process, we will see a greatly improved picture both on outstanding Fire issues and Fire safety across the Estate.

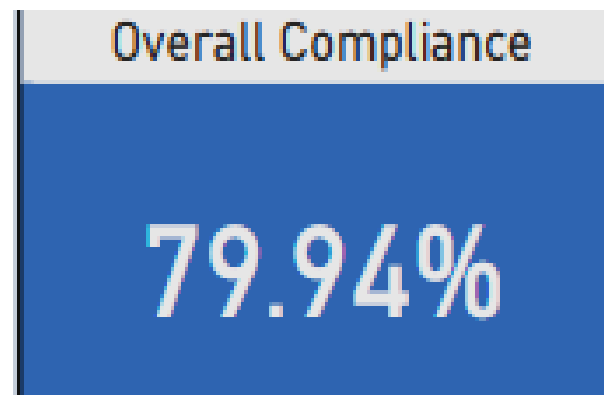
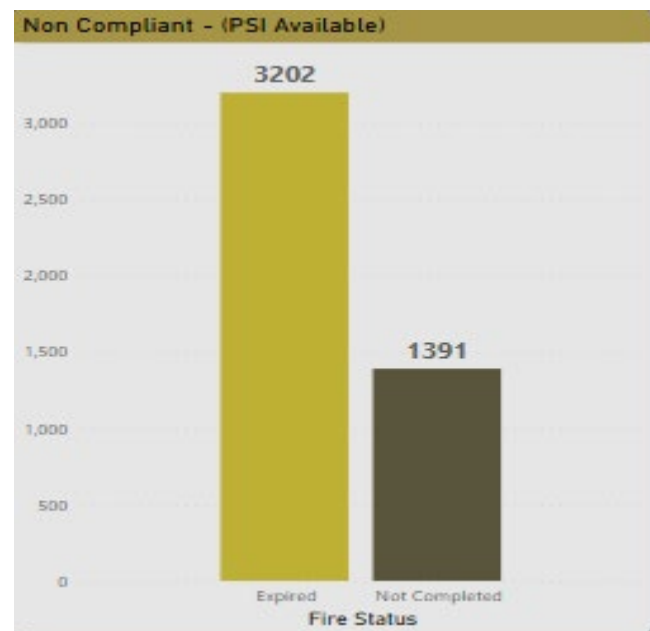
5a Fire Training Statistics



FIRE SAFETY AWARENESS (INC FIRE WARDENS RESPONSIBILITIES) E-LEARNING

This has now been merged into one course.

Comparison of the figures show that compliance has improved. This is still a combined figure of the previous course and the newer version so it is hoped that further compliance will be reached when recertification takes place. This will hopefully be much improved with the new flag system on SCoPE, alerting people when mandatory/statutory training is due for renewal. However, an 80% compliance rate is within tolerance.



OFFICIAL

H&S Training



SCOTTISH POLICE
AUTHORITY

6. Current H&S Training

Learning Development Working Group

The Learning Development Working Group had developed toolbox talks for dissemination. On feedback received from LTD, it has been determined that they would be more beneficial as narrated videos. These will be short reference guides on areas we feel officers and staff need supported and will be available as a resource on the H&S Intranet site.

The Health and Safety team continue to deliver a wide variety of F2F and virtual learning and all offerings can be found via SCoPE and the H&S Intranet site. We are also highly encouraging participants of the training to evaluate our course to ensure we are providing the most up to date, relevant content.

H&S for PS/SPA Line Management

A briefing paper was discussed for approval in relation to the above through the Professionalism and Assurance governance structure. A meeting was held with Leadership and Talent to discuss the possibility of introducing an input into the already established People and Development Management Programme and the Leadership Programme. A paper is currently being drafted for consideration at People Board.

6a Training courses

Courses Available

Course Title	Description	Who is it for?	Requirement	How is it delivered and what is the duration of the course?
Risk Assessment	This course will provide the learner with knowledge and skills on how to undertake a risk assessment in the workplace	This course is aimed at anyone who will be required to write risk assessments on behalf of PSOS/SPA.	Mandatory - Core	Courses are available to book on SCoPE. Virtual delivery is preferable. Face-to-face delivery on request. Duration is 2 - 3hours Pre-read - Risk Assessment blank template Hazard Checklist Example RA templates
Health and Safety Inspection Guidance	This course will provide the learner with knowledge required to carry out the 6 monthly inspections	Those persons nominated by the Responsible Person to carry out the weekly/monthly/ 6-monthly checks	Desirable - Competence	The course can be delivered in person with a practical walkthrough (recommended) or via Webex. Duration 1-3 hours depending on delivery type
Designated Safety Co-ordinator (DSC)	This course will cover all the H&S responsibilities required within a PS building. This includes both fire and safety responsibilities within common areas and the reporting process.	This course is aimed at those who are appointed as the DSC in line with the Health and Safety Policy , - p26.	Mandatory - Core	Courses are available to book on SCoPE. Duration is 2 - 3 hours
Manual Handling	The purpose of this course is to instruct delegates on how to manual handle loads safely, reducing the risk of injury. It will focus on correct lifting techniques and how to risk assess the task.	This course is for anyone who requires to move and handle items on a regular basis, such as Estates, IT and Production staff.	Mandatory - Core	Courses are available to book on SCoPE. Virtual delivery is preferable. Face-to-face delivery on request. Duration is 2 - 3 hours
Manual Handling Awareness	The purpose of this course is to give delegates an awareness on safe handling of loads and reducing risks.	This course is for anyone who has an element of manual handling in their role, but is limited.	Mandatory - Competence	Courses are available to book on SCoPE. Virtual delivery is preferable./ Face-to-face delivery on request - duration approx. 2hrs
Asbestos Awareness	This online presentation seeks to inform officers and staff about asbestos, how to spot the signs and how to protect yourself and others from exposure	This presentation should be viewed by anyone who may come into contact with Asbestos materials	Desirable - competence	Asbestos Awareness

Moodle Packages

There are Health and Safety [Moodle packages](#) that must be completed online when you start with PSOS/SPA.

They are:

- Staff Induction (Module 7)
- Fire Awareness
- Basic Driver Authorisation

How do I book on the course?

You should complete a [Training Request form - 140-006](#)

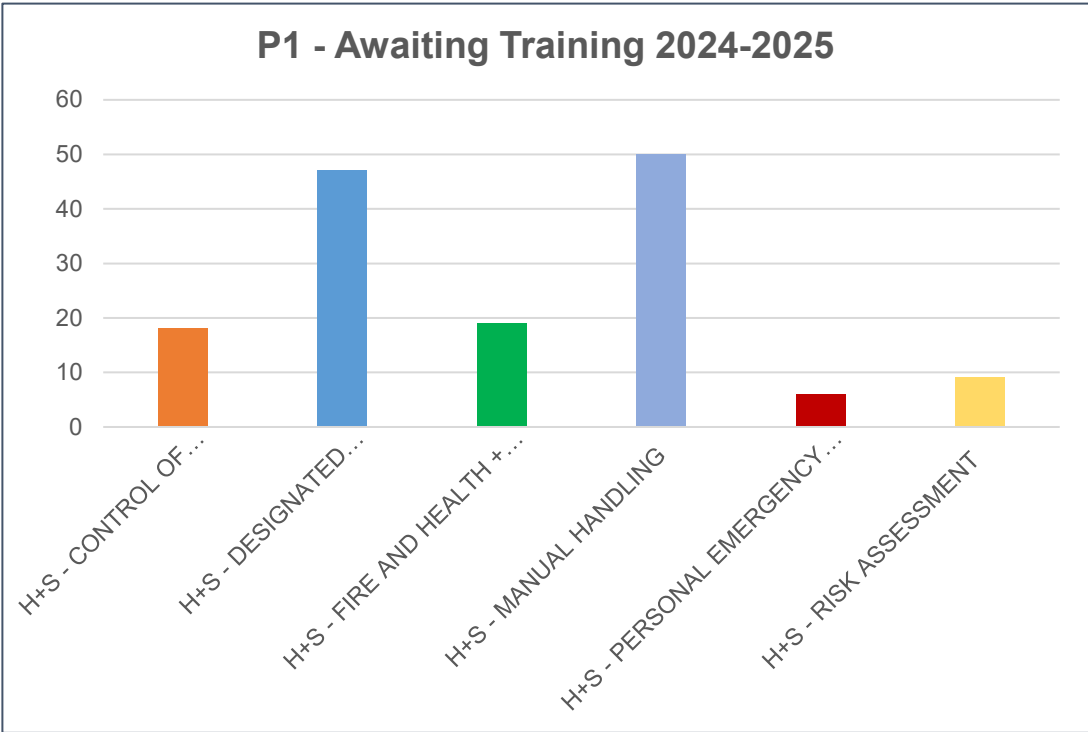
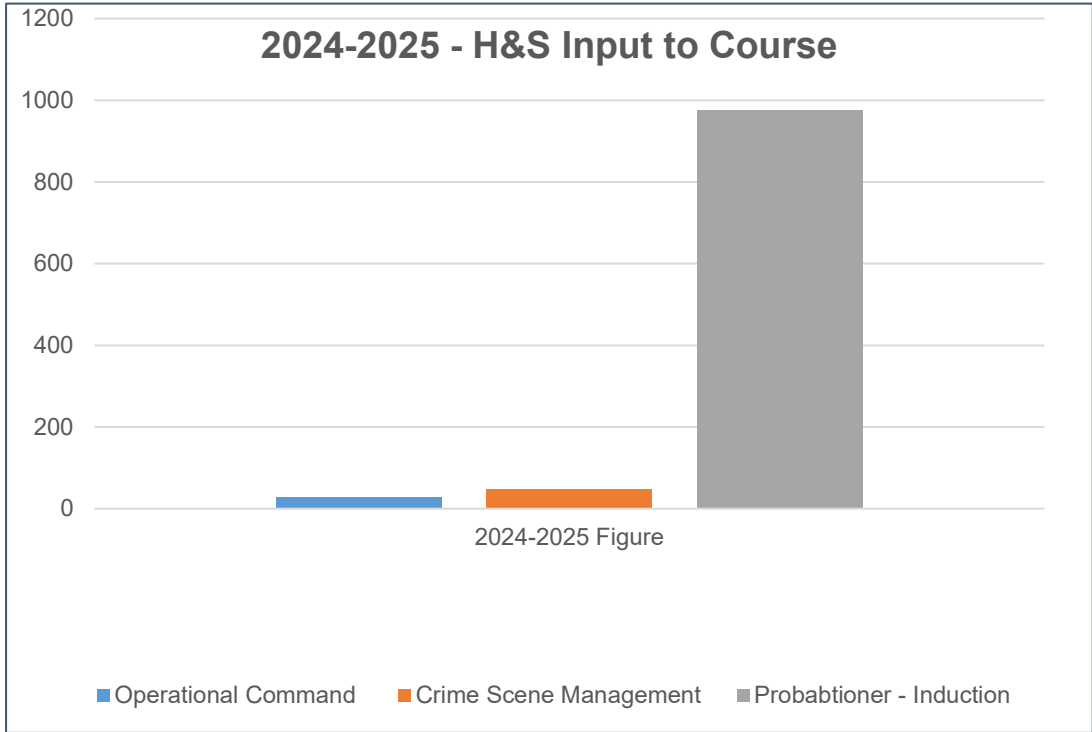
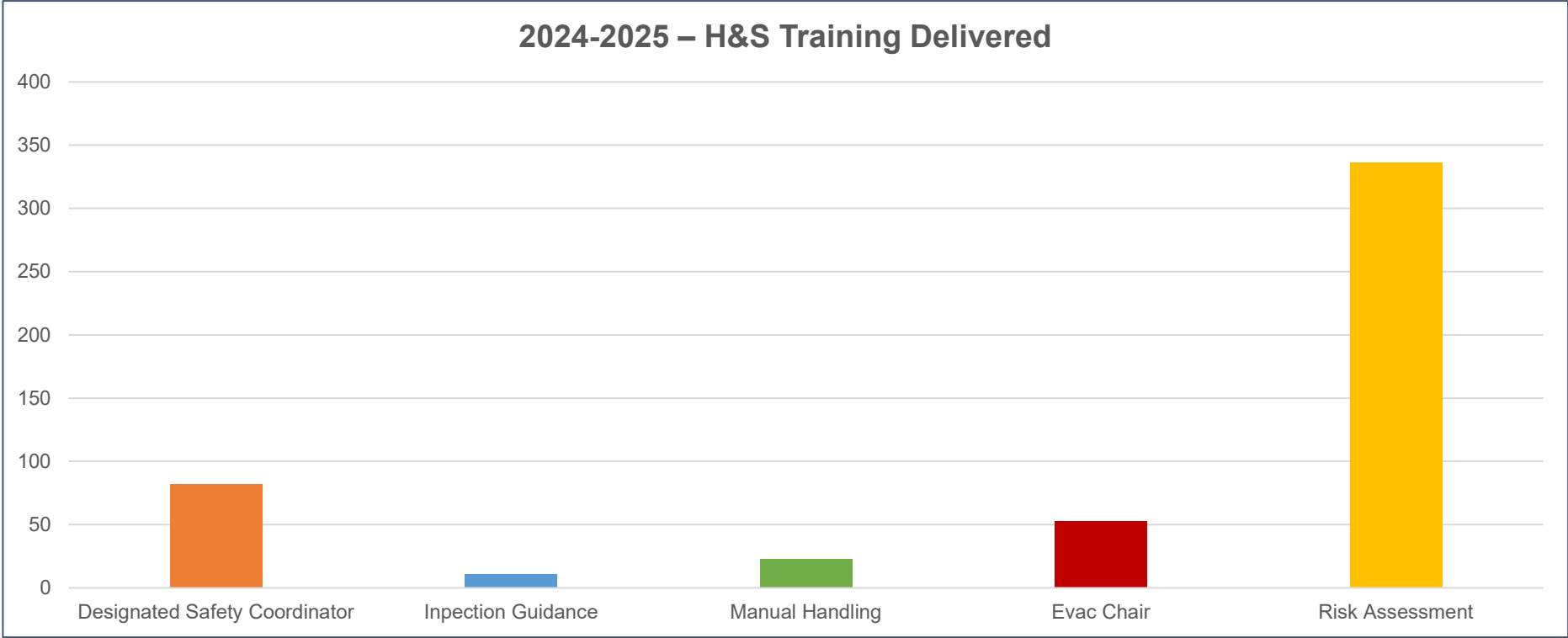
Line managers must authorise this request. If you are already on the P1 list, at the next available course, you will be allocated a space.

Evaluation

We would welcome any feedback you may have on any of our training content and delivery.

[Evaluation Form](#)

6b Training Statistics





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**HEALTH
AND SAFETY**

Health and Safety Workplan 2025/26

OFFICIAL

Strategic Plan objectives 2024-2027

Key Area 1

Reviewing existing health and safety performance measures and evidence through reporting to recognise achievement and identify areas for improvement

Key Area 2

Simplifying and modifying policies, SOPs and guidance to make efficiencies, for ease of use and understanding

Key Area 3

Encourage a culture of transparency through communication to embed health and safety throughout each discipline

Key Area 4

Utilise technologies already available within PS and explore new developments to enhance the current health and safety management system

Key Area 5

Continue to improve and advise on sufficient workplace standards and monitor performance

Key Area 6

Putting emphasis and measures in place to influence behaviours, in respect of work-related ill health inclusive of stress

Key Area 7

Keep abreast of industry changes to take an active approach to confronting new challenges

Draft Proposal for priorities in 2025/2026

Objective	Action	By Whom	Due	Resources
Key Area 1.2 Enhance reports and forms to allow ease of compliance and monitoring	Continue to seek appropriate software tools to enhance reporting and engagement with officers and staff	H&S	31/03/26	Business as usual activity for Health and Safety Department – particular focus for forms within the health and safety team policy group
Key Area 2.1 Review the Health and Safety Policy	Development of SOP to enhance the new policy statement	H&S	31/03/26	As above along with support from Policy Support and Governance framework
Key Area 3.1 Monitor that all necessary risk is assessed, and mitigations are embedded throughout the organisation	Review and update all generic risk assessments (GRA); creation of new GRAs; monitor progression of CoA 24/25; identify those who require training and deliver accordingly; communicate changes effectively through committees and intranet	H&S Divisions Support areas	Ongoing	Business as usual activity for Health and Safety department, however, will require time allocation of SPOCs in divisions and support areas to progress
Key area 4 Utilise technologies already available within PS and explore new developments to enhance the current health and safety management system	Explore ways of utilising the current technologies available through PS whilst identifying, where possible, the use of external packages designed for health and safety compliance such as Safety Culture	H&S	Ongoing	Assistance from colleagues in Data Protection/Digital/Finance/Procurement (where appropriate)
Key Area 5.1 Develop Health and Safety Training across all roles and responsibilities	Continue to identify training needs and development for all; exploration of H&S for Senior Leadership training in line with ISO 45001	H&S	Ongoing	H&S Learning Development Working Group to produce content with assistance from L&T and LTD
Key Area 6.2 Improve data capture to affect positive change in the reduction of harm	Drive Accident, Incident and Near Miss reporting through various engagement opportunities and with new form format; utilisation of identified new enhanced systems to improve data capture as described above	H&S	31/03/26	H&S with support from various colleagues across the force inc YSM/SCoPE Management/APU