

# Health, safety and welfare

This page is from APP, the official source of professional practice for policing.

First published 23 October 2013 Updated 18 January 2022

Written by College of Policing

3 mins read

In major incidents, a wide range of physical or psychological hazards may be faced by either the public or emergency responders. All of these hazards must be managed appropriately to prevent unacceptable risk to the safety of staff and public.

Ensure that plans facilitate quick identification and hazard management at all stages of an incident. These plans should include pre-deployment assessments and major incident responses from initial report to recovery.

Each emergency response agency is responsible for the health and safety of its own staff. However, health and safety should also be coordinated through the strategic commander (or strategic coordination centre). Safety support and advice for emergency responders involved must link into this command structure. All agencies engaged in an operation of this nature, including external providers and contractors, must work effectively together to ensure the safety of all staff.

An initial incident assessment is needed to identify any immediate potential hazards to staff and public. This will be a dynamic risk assessment as part of the [\*\*Joint Emergency Interoperability Programme\*\*](#) (JESIP) principles ([\*\*Joint Decision Model\*\*](#)). There needs to be a joint understanding of risk between emergency response agencies. This is achieved by agreeing potential control measures through sharing information about the potential threats and hazards.

For further information see [\*\*HSE \(2009\) Striking the balance between operational and health and safety duties in the Police Service: An explanatory note.\*\*](#)

## Incident safety advisory cell

The identified lead emergency responder should consider requesting the responding agencies to form an incident safety advisory cell. This cell will identify all significant hazards, set a safety strategy and ensure continuity of hazard identification. It will also ensure that risk control measures

are appropriately managed by each agency. The incident safety advisory cell should comprise scientific advisors, operational practitioners and health, safety and medical professionals who are able to advise on relevant issues.

## Requirements of an incident safety advisory cell

The incident safety advisory cell should:

- set the strategy for safety
- inform the tactical decision-making process
- provide timely and consistent safety critical strategies, information and instruction to all those affected or dealing with the incident
- implement the operational plan and support developing safety options to support informed joint decision making
- coordinate an oversight of safety and health advice and support, immediately advising on the incident hazard profile, supporting the assessment and monitoring of hazards and activity, recovering and cleaning up

This should include:

- hazard profiling the scene
- supporting the development of incident risk assessments and managing hazards, including safe systems of work
- providing pragmatic safety advice for an often-dynamic scenario and environment
- post-event debriefing of staff and structured organisational learning

## Occupational health and welfare

In order to ensure that officers and staff are fit for the role, forces should have appropriate pre-screening selection processes, including health and psychological screening. These may include:

- vaccination for the role, including for overseas deployments where appropriate
- periodic health monitoring
- pre-deployment health assessment

Following potential exposure to physical and chemical hazards, there should be post-incident monitoring. Any monitoring will be informed by the scene hazard profile and activity risk assessment developed during the incident. The disaster victim identification (DVI) role also carries potential psychological exposure risk.

Ensure that a robust and auditable process is in place to manage these physical and psychological hazards during and after deployment. Forces should have access to occupational health services and trained psychologists to support this process.

For further information see [Strategic Welfare Advice for the response to a mass fatalities incident \(PDF 252KB\)](#).

## Tags

Civil emergencies