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Incident investigatio©n

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Incidents. Are events where there has been a loss of control to create unsafe acts or conditions. This includes near-miss, accidents (see below), dangerous occurrence, fire, and violence or aggressive behaviour at work.

Near-miss. An event that could have resulted in an accident but no actual harm was received.

Accident. An unplanned event that results in harm: injury, lost time from work or studies by injuries, where first aid is used or an ambulance call-out has been required, sporting injuries on UoR premises, injury while on fieldwork/fieldtrip or overseas, or occupational diseases/work-related ill health, or non-work-related ill health that requires assistance for the individual completing UoR related activities. These may include RIDDOR-specified incidents.

Dangerous occurrence. This is a loss of material containment, loss of control or other incident with a high potential to cause significant injury, loss of life, or damage to property or the environment. These will likely include RIDDOR-specified incidents.

RIDDOR. The Reporting of

recommendations to those best-placed to action them to make improvement, and HSCs must communicate their investigation findings and recommendations to their H&S Services Liaison Adviser (LA) within 14 days of receiving the incident allocation. HSCs are responsible for managing any sensitive

other police or MIT activity. For all deceased persons incidents, H&S Services may attend (but not speak) at related Coroner's Court hearings. All other attendance at such hearings should be agreed through Legal Services.

H&S Services will allocate incidents to appropriate HSCs as soon as reasonably possible and typically within 24 hours of receipt. Incident allocation will follow the procedure published on the H&S Services website. HSCs will be asked to make initial inquiries to determine the immediate causes and assess the significance of the incident and so decide the depth of the investigation required.

Where an HSC's enquiries identify a possible RIDDOR-reportable incident has occurred (see Appendix A), the HSC must promptly discuss this with H&S Services – preferably their LA, otherwise the H&S Services Director - to ensure any legally-reportable incidents are identified promptly (see Appendix A). H&S Services will submit reportable incidents to the relevant enforcing agency.

Further investigation should be proportionate to the likelihood for reoccurrence and the severity of the incident (e.g. potential for injuries, actual injuries received, number of indivi11.25 Tf1 10 g0 G[r)4(ec)29(ei)-1

i. the death of any person as a result of an accident (e.g. not suicide)
ii. a major injury as a result of a work-related accident (includes fractures; amputations; dislocations; serious eye injuries; crushing injuries to head or torso, serious burns including scalding, scalpings, loss of consciousness by head injury or asphyxiation, any injury arising from working in an enclosed space, exposure/inhalation/ingestion of a harmful substance or biological agent
iii. someone who is not at work (e.g. a student or visitor) suffers an injury as a result of an accident and is taken from the scene directly to a hospital.
iv. a reportable dangerous occurrence (includes failure or overturning of lifting equipment, failure of pressure vessels or any part of the associated pipework, collapse of scaffolding; damage to pipework, contact with overhead electric cables; electrical overloading or short circuits that result in fire or explosion; release of biological agents likely to cause severe human infection).
v. an injury to an employee which results in them being unable to do their normal job for more than seven consecutive days (excluding the day of the accident but including any days which would not have been working days, including weekends - referred to as "over-7-day injuries").
vi. a reportable occupational disease which is confirmed by a doctor's diagnosis (includes work-related upper limb disorders; occupational asthma; infections due to biological agents and/or micro-organisms; specific poisonings and cancers).

Note: this is a simplified summary of the Regulations. H&S Services are responsible for assessing the incident and deciding if it is reportable to HSE.

Obtain facts

Date and time of incident.
Name(s) and contact details of injured/affected person(s), age, sex, occupation/course of study.
The nature of the injury (size, position, location, e.g. 2cm cut to right thumb) / ill health / assault / property damage sustained, details of treatment received (also if by/not by trained first aider), hospital attended, length of stay, length of absence from work/study, if normal duties could not be undertaken on return to work,
Location details 842.2(t)22 Tf1 0 0 1 160 59874 0 595.5 842.25 reW*nBT/F3 11.25 Tf1 0 0 1 90.1 301.78 TmC

Location details

Was the fire fighting and first aid response suitable, were correct spillage procedures known and followed?
Was the incident promptly reported to the relevant parties (if not, why not)?
How was the injured person treated and supported –was this adequate?
Were the needs of witnesses adequately addressed (de-briefing, counselling etc)?

Identify and record any further action needed to prevent a recurrence or improve future emergency preparedness or response

You should assess or reassess the risks of this particular activity / equipment / area. When doing this you should question the adequacy of existing control measures and work methods and any discrepancy between these and what was intended. You will need to establish if the existing controls meet current standards and are adequate to effectively control risks.

In particular, you may need to:

Improve physical safeguards or safety features or modify design or workplace layout.
Improve existing work methods or introduce new safe working procedures.
Provide additional safety equipment e.g. lifting aids, personal protective equipment.
Produce or review risk assessments.
Update written health & safety rules, standards or policies, communicate these to employees / students, as appropriate.
Improve communications systems.
Make changes to or provide extra training, supervision or information sources.
Introduce better testing, maintenance or cleaning arrangements.
Introduce or improve inspection, monitoring and audit systems.
Review similar risks in other sections.

Once you have identified what is required to prevent a recurrence of the incident in question, the investigator should communicate recommendations to those best-placed to effect improvement, making it clear what is required and by when. Those persons should formulate an action plan.

Lessons learnt should be shared with other groups carrying out similar activities within the School/Function, or more widely across campus.

Remember:

Always try to talk to the injured person and witnesses to get their account of events

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