Queen Mary University of London

Health & Safety Directorate

Accident & Incident Management and Reporting

Queen Mary University of London

Health and Safety Policy

(Ref: QMHSD_HS_PCY007)

Contents

1.0 Executive Summary

1.1 This policy details need for the reporting of all health and safety incidents, whether they led to harm (accidents) or there was no harm (near-miss). The goal of this Policy is to ensure prompt reporting of incidents to allow them to be managed effectively to prevent further harm. Incidents are followed up and investigated to learn from the incident to help prevent a reoccurrence. Trends will be monitored to ensure University programmes can be improved where indicated by the data. The data will be based on University incidents and its analysis; and where appropriate will examine external sources such as UK university wide data.

1.2 Some incidents need to be reported to the regulator. Where these occur, prompt and compliant reporting is required.

2.0 Introduction

2.1 When incidents occur it is important that that we manage the overall process effectively. Initially the incident needs to be managed to ensure no escalation of the incident and to provide prompt treatment if anyone is injured. As soon as possible after the incident, the person who first became aware of it should report it (or ensure it is reported) via MySafety.

2.2 The report will be assessed by the Health and Safety Directorate (HSD), and where appropriate, an investigation will be undertaken. Where required, HSD will ensure prompt and compliant reporting of the incident to the regulator. HSD will support any investigation as appropriate to ensure lessons are learnt to prevent both a local repetition and a broader issue elsewhere in the University.

2.3 Incident data will be reported to senior leaders and used to inform them where future health and safety programmes should be improved.

3.0 Purpose

3.1 The purpose of this Policy is to outline the University's approach to ensure:

- Any serious incident is controlled and managed, and anyone injured receives prompt and appropriate treatment.
- All incidents are reported, followed up, and, where required, thoroughly investigated.
- Incidents are escalated and reported to the regulators, where required.
- Incidents are assessed to identify trends and are reported through HSAG.

4.0 Scope

4.1 This policy applies to:

- All staff, visitors, students, and contractors on Queen Mary controlled premises.
- All Queen Mary staff, students and researchers working for Queen Mary on other premises (including public spaces e.g., field trips and travel overseas including teaching at the China facilities).
- The Policy does apply to the Malta Medical School, with the exception to report incidents to the UK regulator. Local regulatory reporting will be in line with local regulatory requirements.
- Whilst first aiders do record first aid treatment for non-work-related medical incidents, these are not reportable and generally there is no need for investigation. Confidential medical information should be restricted access.

5.0 Legislation

5.1 Legislation relating to the management of incidents and regulatory reporting.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.

The Management of Health and Safety at Work Regulations 1999 Reg (5).

6.0 Terms and Definitions

6.1 The key definitions contained within the Regulations and industry guidance include:

- **Incident:** An adverse health and safety event which can include both accidents and near miss events.
- **Accident**: An event that results in injury, ill health, loss, or damage.
- **Near miss:** An event that, while not causing harm, has the potential to cause injury, ill health or damage. This would include dangerous occurrences. Within this definition we would also include undesired circumstance: a set of conditions or circumstances that have the potential to cause injury or ill health, e.g., untrained staff using step ladders.
- **RIDDOR:** These Regulations require certain incidents to be reported within specified timeframes to the Regulator. These requirements are summarised in Appendix 1. The Health and Safety Directorate has the primary responsibility to ensure compliant reporting to the regulators.

7.0 Roles and Responsibilities

7.1 Specific roles and responsibilities include:

7.2 All members of staff, contractors, and students: To report all health and safety incidents, regardless of whether they resulted in harm. They should be reported using MySafety. This link is on the front page of the Health and Safety Directorate website and on Connected.

7.3 Managers and supervisors: There are three primary responsibilities. Firstly, to ensure all staff, and those working under their responsibility, are aware of the reporting process, including why it is important to report incidents to improve health and safety performance. Secondly, when incidents do occur, the role requires the manager to support the investigation process to ensure the incident causation is understood and lessons are learnt. Finally, where information on incidents is received from other areas, managers should ensure these lessons are translated into local safety programmes.

7.4 Estates and Facilities (EAF): Whilst the entire policy is relevant to Estates and Facilities (EAF), there are three key differences from many other areas. Firstly, EAF will have a responsibility to ensure any infrastructure issues highlighted during departmental investigations are either resolved, or EAF advise on their proposed action and any timelines. EAF also manage significant numbers of contractors. It is expected that incidents that occur on our site, or under our control, will be reported to the University. Whilst RIDDOR reports contain personal information, we require to be informed when RIDDOR reports are made by our contractors whilst working under our control. Finally, EAF have recruited their own H&S Manager who, with other EAF specialists, will provide investigation support within EAF where required.

7.5 Health and Safety Directorate (HSD)

7.5.1 To manage the MySafety system. HSD oversee the operation, and reporting, from the University incident management system MySafety. This includes providing support and training where needed, and producing, or providing access to, reports for Schools / Institutes / Directorates.

7.5.2 Health and Safety Advisory Group (HSAG) reporting, including annual report. HSD support HSAG by producing statistical reports, highlighting significant incidents, and producing an annual health and safety report. This annual report provides details of significant incidents, and actions taken; statistical reports; and reports made to the regulators.

7.5.3 Incident report assessment and investigation support. Every report is assessed and allocated by a health and safety professional within HSD. Where the incident warrants investigatory support, or it is requested, HSD will provide this. The assessment will include determining if the incident is reportable to the regulator.

7.5.4 Report incidents to the regulator. Ensure timely and compliant regulatory reports where required. Will act as the point of contact for any follow up or regulatory investigations.

7.5.5 Where medical incidents are reported on MySafety, but are not linked to health and safety events, HSD will mark these for no further action. This will act as a record of the event and any treatment given.

7.6 Specialist contractors: Are required to report any incidents that occur whilst on Queen Mary property or working on Queen Mary activities to their contact. The detail will be recorded by the contractor or their hosts on the MySafety system. The University should also be advised if any RIDDOR reports are made.

7.7 Schools and institutes: Ensure all staff, researchers, students, and contractors are aware of the requirements of this Policy. Where incidents occur, any remedial actions should be tracked to the point of closure. Incident data should be monitored for any developing trends indicating there is a more significant underlying issue and appropriate action taken to address this if identified.

7.8 Occupational Health: There are a range of medical conditions reportable under RIDDOR, which must be diagnosed by a medical professional. These are referred to as “diseases” in the legislation. Where this trigger is met for a work-related medical condition, it is important that a full a set of details are provided to HSD from the Occupational Health Service or the medical professional to ensure the issue is escalated and is correctly reported to the regulator.

7.9 First aiders: Report all events where first aid is administered, including treatment provided. This acts as a record of the event and allows for any health and safety issues to be identified from the event. This applies to both physical and mental health first aid. If you have concerns about sensitive information, contact the first aid trainer for advice.

7.10 Safety Coordinators: Safety coordinators will support local investigations and reporting where this part of their agreed role. Safety coordinators are well trained and often have considerable experience which many departments use to support the incident reporting and investigation process.

7.11 Trade Union Safety Representatives: Trade union safety representatives can investigate accidents, near misses, and other potential hazards and dangerous occurrences in the workplace. They can present the findings of their investigations to the University. The University goal should always be for this to be a collaborative approach with different groups working together to improve health and safety management at the University.

8.0 Policy / Operational Arrangements

8.1 The key operational arrangements include:

8.1.1 Response to imminent danger: It is crucial that the incident is controlled to prevent any further injury or loss. Anyone in danger must be removed a safe distance from the event. Security often takes the lead in the early stages of an incident and act as the initial point of escalation where required.

8.1.2 Reporting: All incidents should be reported. If a duplicate report is submitted, HSD will identify this and combine the records. This should happen as soon as possible after the event, even if information is incomplete or unknown at that stage. Further information can be obtained and added after the initial report. If a report needs to be made to the regulator, this will be completed at this point by HSD. In addition to Security, HSD will escalate any serious incidents within the University where this is appropriate.

8.1.3 Accident and Incident Investigation: The four steps of the process, as described by HSE are outlined below. The results of the investigation should be recorded on MySafety, although it is common practice to also write up the investigation in a University Word template. This separate report is stored and managed through MySafety.

8.1.3.1 Step one: Gathering the information: This includes witness accounts, photographs, and diagrams.

8.1.3.2 Step two: Analysing the information: The information gathered will need to be analysed. Techniques include, but are not limited to, process mapping and creating a timeline. This will lead to immediate, underlying and root causes to be identified.

8.1.3.3 Step three: Identifying risk control measures: The analysis will lead to control measures which are appropriate to prevent a reoccurrence of the incident and similar incidents elsewhere in the University.

8.1.3.4 Step four: The action plan and its implementation: The actions required should be assigned to individuals with a timeline. These must be tracked to closure.

8.1.4 Escalation, reporting to HSAG, and trend analysis: Most of this policy is focussed on the management of individual incidents. However, it is important that incidents are looked at to identify trends, to escalate emerging issues to senior leaders and HSAG, and to use this information to inform future University health and safety objectives.

9.0 Further Information

9.1 Further information sources:

- HSE guidance Investigating accidents and incidents: A workbook for employers, unions, safety representatives and safety professionals www.hse.gov.uk/pubns/hsg245.pdf
- RIDDOR HSE Web site https://www.hse.gov.uk/riddor/

- HSD website which includes a link to incident reporting http://www.hsd.qmul.ac.uk/accident-reporting/
- Rights of trade union safety representatives to investigate incidents. https://www.hse.gov.uk/involvement/prepare/union/index.htm

10.0 Appendices

Appendix 1 Summary of RIDDOR Reporting Requirements.

RIDDOR only requires you to report accidents if they happen 'out of or in connection with work'. The fact that there is an accident at work premises does not in itself, mean that the accident is work-related – the work activity itself must contribute to the accident. An accident is 'work-related' if any of the following played a significant role:

- The way the work was carried out.
- Any machinery, plant, substances, or equipment used for the work.
- The condition of the site or premises where the accident happened.

Deaths and injuries: If someone has died or has been injured because of a work-related accident, including an act of physical violence to a worker.

Specified injuries to workers: The list of 'specified injuries' in RIDDOR 2013 includes but is not limited to:

- Fractures, other than to fingers, thumbs and toes.
- Amputations.
- Any injury likely to lead to permanent loss of sight or reduction in sight.
- Any crush injury to the head or torso causing damage to the brain or internal organs.
- Serious burns (including scalding) which includes significant damage to the eyes or respiratory system.
- Any scalping requiring hospital treatment.
- Any loss of consciousness caused by head injury or asphyxia.
- Requires resuscitation or admittance to hospital for more than 24 hours

Over-seven-day incapacitation of a worker: Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury.

Over-three-day incapacitation: Accidents must be recorded, but not reported where they result in a worker being incapacitated for more than three consecutive days.

Non-fatal accidents to non-workers (eg members of the public): Accidents to members of the public or others who are not at work must be reported if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury. Examinations and diagnostic tests do not constitute 'treatment' in such circumstances. There is no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.

Occupational diseases: Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work: These diseases include but are not limited to:(regulations 8 and 9):

- Carpal tunnel syndrome.
- Severe cramp of the hand or forearm.
- Occupational dermatitis.
- Hand-arm vibration syndrome.
- Occupational asthma.

- Tendonitis or tenosynovitis of the hand or forearm.
- Any occupational cancer.
- Any disease attributed to an occupational exposure to a biological agent.

Dangerous occurrences: There are 27 categories of dangerous occurrence, they include but are not limited to:

- The collapse, overturning or failure of load-bearing parts of lifts and lifting equipment.
- The accidental release of any substance which could cause injury to any person.
- The failure of any closed vessel or of any associated pipework of a pressure system, where that failure could cause the death of any person.
- Any accident or incident which results or could have resulted in the release or escape of a biological agent likely to cause severe human infection or illness.
- The sudden, unintentional, and uncontrolled release inside a building of 100 kilograms or more of a flammable liquid or 10 kilograms or more of a flammable gas.

Document Control

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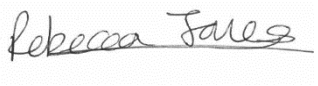
Approved by: Rebecca Jones Date: 24/08/23 Signature: 	Position: Director of Health & Safety
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