Best practice guidance on the reporting and investigation of accidents and incidents

Best Practice Guidance Version 2
March 2016
Reporting and investigation of accidents and incidents

Introduction
The Medical Research Council (MRC) recognises its workforce as its most valuable asset. In order to maintain a healthy workforce and a safe environment for its employees, its visiting workers and the public, it is also essential to maintain a responsible attitude to health and safety. A central part of this attitude is to ensure that staff and visiting workers recognise the importance of reporting each and every accident or incident and understand the accident and incident reporting procedure operated by the MRC.

The policy of the MRC is that all occupationally related accidents, incidents and dangerous occurrence, no matter how seemingly trivial, are recorded and an investigation is carried out into the causes of the accident, incident or dangerous occurrence so that a recurrence can be prevented.

Actions
Directors are responsible for implementing this Best Practice Guidance The actions required are set out in the Directors Summary
Directors Summary

The instruction and guidance in this document outline the management structure that should be in place within an MRC establishment to ensure that any accident, incident or dangerous occurrence that occurs whilst an activity is being carried out on behalf of or for the MRC is properly recorded using the on-line accident recording system and investigated.

It also describes the steps that must be taken if it is necessary to report such an accident or dangerous occurrence to the Health and Safety Executive (HSE – which is the regulating authority).

Action required

Ensure that;

- Employees and visiting workers are aware of the importance of reporting and recording all accidents and incidents.
- Senior managers, in particular, are aware of the accident and incident investigation procedures.
- Employees who are responsible for notifying the regulatory authorities have been identified.
- Appropriate employee and visiting worker training has been carried out.

Definitions

Brief definitions are given below of the terms used in the following guidance.

**Accident** - an unplanned, occupationally related event which causes injury to person(s).

**Incident or near miss** - an unplanned, occupationally related event which may cause, if circumstances are not changed, injury to person(s) in the future.

**Dangerous occurrence** - an unplanned, occupationally related event as listed in guidance note 2.

**Occupationally related** - an undertaking or activity occurring at work or that is being carried out for, or on behalf, of the MRC.

In this document a ‘must’ indicates a mandatory requirement and a 'should' reflects a strong recommendation.

Where appropriate the content of these guidance notes can be adopted as local codes of practice. Establishments are encouraged however to adapt the content for local needs, with the strict provision that local standards are at least as high as those stipulated in this document.
Guidance notes

Guidance note 1  General information and employee responsibilities
Host institutions
Visitors and contractors
Accident statistics
Reporting incidents
Reporting accidents
Emergencies
Absence from work
Accident investigations

Guidance note 2  The reporting of accidents and dangerous occurrences
Appendix I: Major Injuries, Dangerous Occurrences, Reportable Diseases
Appendix II: Accident report form template
Appendix III: Accident reporting: Liaison between Personnel and Safety Staff

Guidance note 3  The investigation of accidents and dangerous occurrences
Appendix I: Accident Investigation Report Checklist

Guidance note 4  Accident and incident reporting, review and investigation:
Supplementary Guidance (incorporating information for contacting local HSE offices)
Guidance Note 1

General information

All MRC employees and visiting workers should be aware of the accident and incident reporting procedures that are in place in MRC establishments. Employees and visiting workers will normally be given this information during their induction. It is however, important that reminders are issued at periodic intervals.

Host institutions

Units embedded in host institutions may choose to use the accident/incident reporting procedures of the host institution. If this is the situation then MRC employees should know that this is the case.

Establishments using the reporting mechanism of their host must also forward accident and incident statistics to the MRC Corporate Health, Safety and Security (H,S&S) Section through the RIVO on-line reporting system (see Accident statistics).

The exception is a RIDDOR\(^1\) reportable situation. The Corporate H,S&S Section of the MRC must be informed as soon as possible. This can be done via the Head of Section or a member of the Corporate team.

Lone working

All employees and visiting workers, especially those working alone or out of hours, must know the accident reporting procedure and how to obtain first aid or medical help.

Visitors and contractors

Any non-employee who is involved in an accident or near-miss incident whilst on MRC premises or whilst visiting an MRC unit must report the matter immediately to the person responsible for his or her presence on site. A non-employee travelling or working on behalf of the MRC must also report any accident or near miss incident to their MRC contact person.

It is the responsibility of the MRC contact person to report and record the accident or near-miss incident.

All injuries however minor must be reported and recorded.

Visitors and contractors should also notify their own employer where applicable.

Accidents sustained by employees away from the normal workplace or other MRC-managed areas.

If an MRC employee is injured in the course of their work away from their normal workplace or MRC-managed areas, either within the UK, within their employment in one of our non-UK

---

\(^1\) See details in note 2
establishments, or when working overseas, the accident must be recorded by the ‘parent’ unit. If this occurs within the UK, then the requirements of RIDDOR will apply.

The MRC’s common law duty of care as an employer applies wherever an employee is working, so all accidents that occur whilst at work for the MRC abroad must be recorded. It may be difficult and unreasonable to conduct an in depth investigation in these circumstances, but as detailed a report as possible should be made as and when the information becomes available.

Travel insurance cover is dealt with in another publication https://corp.mrcintranet.mrc.ac.uk/general/Pages/Travel.aspx.

Accident statistics

Units are required to update their accident and incident statistics, using the The RIVO electronic accident and incident reporting system, on a regular basis. The analysis of this data allows the Corporate H,S&S Section to identify trends. The data may also be used to identify training requirements that will help to reduce accidents and incidents within a particular sector. The Head of Corporate H,S&S is obliged to submit regular and up to date reports to MRC Operations Board.

Responsibility

1. Any person witnessing or involved in an accident must inform his/her Line Manager immediately.

2. The Line Manager should inform the Unit Safety Manager or his/her deputy.

3. In the event of a serious injury or a serious incident or dangerous occurrence, the Safety Manager or person nominated by the Unit Director should contact a member of the Corporate H,S&S team and where necessary inform the Unit Director. The Corporate H,S&S team member and the Head of Corporate H,S&S must be contacted at the earliest opportunity if the incident is reportable under the RIDDOR Regulations.

Reporting incidents

There is a known link between the number of incidents or near miss occurrences, and the number of accidents that occur. It is important, therefore, that all incidents or near miss occurrences are reported and investigated. Wherever necessary, appropriate action should be taken to avoid a recurrence of the incident or near miss occurrence thus preventing the possibility of a future accident.

The Reporting of Accidents

The MRC does not operate a “threshold limit” on the type or severity of accident that should be reported and recorded. **All accidents however minor or apparently trivial, which happen at work, or during an activity that is carried out on or on behalf of the MRC, must be reported as soon as possible and recorded.**

In most situations the injured person will be capable of doing this; he/she must also inform his/her line manager of the injury.
Details of the accident to be recorded must include the following:

(a) The date and time of the incident
(b) The full name of the person(s) affected
(c) The name and status of the person completing the entry if different from (b) above
(d) The occupation of the person affected
(e) The nature of the injury or condition and the body part affected
(f) The place where the accident occurred
(g) A brief but clear description of the circumstances

If an injury renders an employee unable to make a record of the accident, this should be done by a witness or someone who is able to enter an account of the incident. The employee's account must be entered as soon as possible after the event.

An incident/accident report remains a live document until complete: this will include

- Details of the subsequent investigation and a link or reference to that report
- A record of any changes made to risk assessments and procedures as a result of the incident.
- A link to absences from work related to the accident or incident, through injury and/or illhealth

A sample blank form is attached as Appendix II. All these functions are included and available within the RIVO reporting system.

**Emergencies**

A first-aid trained person should be able to deal with the immediate after effects of the majority of workplace incidents. Where outside medical assistance is required, e.g. an ambulance, local arrangements should ensure the emergency services are met and guided by the quickest route to the casualty. The injured party must be accompanied to hospital by at least a close colleague and/or the first aid trained person with knowledge of the incident.

Line management must be told immediately so that nearest relatives can be informed of the situation.

**Absence from work**

Where an accident results in sickness absence from work, employees must indicate this on the End of Sickness Absence form ensuring that they tick the boxes indicating the cause of the absence is work-related. This form is available on Oracle or MRC HUB as Form HR 2.07 and can be accessed via Human Resources > Forms. Employees absent as a result of an accident at work must keep their line manager informed of their progress, up to and including their return to normal duties.

Employees that are absent for more than seven days must ensure they acquire a ‘Statement of fitness for work’ (known as a ‘fit note’) from the GP.

Line managers must inform their local HR adviser of all work-related absences to ensure accurate records are maintained. A flow-chart illustrating exchange of information is attached as Appendix IV.
Accident and incident investigations

All accidents and incidents must be investigated irrespective of the nature and severity of the accident, near miss or dangerous occurrence. MRC establishments must ensure that all those with line management responsibilities are aware of the requirement to investigate accidents. The complexity and resource requirements for the investigative process will vary depending upon the nature and severity of the accident.

Risk assessments must be reviewed and appropriate amendments made to take into account the findings and recommendations from accident investigations and reports.

The Unit Safety Manager will normally give assistance to line managers and your Corporate H,S&S team member is available to provide additional advice and assistance.

The Corporate MRC H,S&S Section periodically runs accident investigation courses according to demand and available resources. Where establishments run their own training for accident and incident reporting and investigation, local courses must fully subscribe to the requirements of this policy and guidance.

Management responsibility for record keeping

When an injury or near miss is reported to a line manager, that manager should ensure that appropriate records are maintained. Where appropriate these records will include a copy of a completed F2508² form (or details of all correspondence between the establishment and HSE on the matter) and other documents such as training records, risk assessments etc. relating to the accident investigation.

Line managers and/or Human Resources must keep records of any developments to the injured person’s health, up to and including a return to normal duties. The line manager or Human Resources must also check that an End of Sickness Absence Form is completed to reflect that the absence was occupationally related and this information relayed to the local safety co-ordinator and, where appropriate, occupational health professional via Unit or headoffice HR.

Accident records should be maintained for at least a period of three years. More information is published in the “Record keeping document”. Further details can be found in the document on the Web site http://www.mrc.ac.uk/skills-careers/working-for-mrc/safety-security-resilience/policies-and-guidance1

---
² see guidance note 2
Guidance Note 2

Notifiable injuries, diseases and dangerous occurrences

Certain incidents must be notified to the local enforcing authority (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. The nature (normally severity of injury) of the incident will determine how the HSE is notified and this is detailed below and in Appendix 1.

Details on how to notify HSE of RIDDOR-reportable accidents or occurrences can be found on http://www.hse.gov.uk/riddor/. The site also gives further information about RIDDOR.

Details of a RIDDOR incident must be communicated to the HSE within 10 days of the incident occurring.

RIDDOR incidents include;

- Death or major injury at work
- Acts of violence to people at work resulting in more than 7 days absence
- Where a member of staff is absent from work for more than 7 days following an accident (this includes weekends but does not include the day of the incident)
- Members of the public who are killed or require hospital treatment due to a work-related activity.

**Note 1:** Deaths, major injuries and dangerous occurrences must be notified to the HSE by the quickest possible means (telephone). The Corporate Section must be informed of all accidents or incidents that require reporting under RIDDOR at the very earliest opportunity (see Guidance on investigation).

**Note 2:** RIDDOR requires that the HSE is informed if a person is absent from work for more than three consecutive days due to a work related injury. It is important to understand exactly what is meant by this. The actual day of the accident or RIDDOR reportable incident is not counted within the three day period. Days that would not normally be considered as working days, e.g. weekends or days off for shift workers or part-time workers, are however still included.

Here are a couple of examples for clarification.

**Ex 1:** An injury occurring on a Monday with the employee returning on the Friday of the same week would not be reportable under the regulations. The regulations specifically refer to incapacity for normal work rather than absence from work. Thus if an employee returned to work the day after an accident and had to be given a totally different job for more than seven days, due to incapacity to perform any part of his or her normal duties, a notification would be made.

**Ex 2:** No notification is required if an employee is only limited to part of his or her normal duties, such as working in the library, using the telephone or attending meetings and lectures.
RIDDOR Reports

MRC establishments must appoint a person responsible for reporting RIDDOR incidents. It is also advised that establishments appoint at least one deputy to that person to cover absences due to holiday, sickness etc..

The RIDDOR website provides details on the accepted methods of reporting injuries and incidents (summarised in Appendix 1). Briefly, reports can be made by

- Telephone
- On-line
- E-mail
- Post

Full guidance on these options can be found at [http://www.hse.gov.uk/riddor/report.htm](http://www.hse.gov.uk/riddor/report.htm)

If you have to make the notification by telephone or choose that option, the operator will complete the form during the conversation. A copy will then be sent to you to check for accuracy. If the call was required under RIDDOR, **do not wait until you receive the confirmation before notifying Corporate H,S&S.**

If you complete your notification on-line, by email or by post (thus not requiring immediate notification by telephone) you must retain a copy of the submission for local records and **send a further copy without delay to Corporate H,S&S.**
Appendix I

Major injuries, dangerous occurrences and reportable diseases

This appendix details other injuries or occurrences that are included in RIDDOR and must be reported to HSE.

Major injuries

a) Any fracture (including break, crack or chip), other than to the fingers, thumbs or toes.
b) Any amputation.
c) Dislocation of the shoulder, hip, knee or spine.
d) Loss of sight (whether temporary or permanent).
e) A chemical or hot metal burn to the eye or any penetrating injury to the eye.
f) Any injury resulting from an electric shock or electrical burn (including burns caused by arcing or arcing products) leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours.
g) Any other injury either leading to hypothermia, heat-induced illness or to unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours.
h) Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent (including bacteria, viruses, fungi and parasites).
i) Either acute illness requiring medical treatment or loss of consciousness resulting from the absorption of any substance by inhalation, ingestion or through the skin.
j) Acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins.

Dangerous Occurrences

Those most relevant to the MRC are summarised below.

Lifting machinery: The collapse, overturning, or failure of any load-bearing part of any lift or lifting equipment.

Pressure systems: The failure of any closed vessel (including a boiler of boiler tube) or of any associated pipe work in which the internal pressure was above or below atmospheric pressure, where the failure has the potential to cause the death of any person.

Overhead electric lines: Any unintentional incident in which plant or equipment comes into contact with overhead power lines.

Electrical short circuit: Electrical short circuit or overload caused by fire or explosion which results in the stoppage of the plant.
involved for more than 24 hours or which has the potential to cause the death of any person.

**Explosives**
Certain incidents involving explosives.

**Biological agents**
Any accident or incident which resulted or could have resulted in the release or escape of a biological agent likely to cause severe human infection or illness (i.e. biological agents in Hazard Groups 3 and 4).

**Breathing Apparatus**
Malfunction of breathing apparatus, either while in use or during testing immediately prior to use.

**Collapse of scaffolding**
The complete or partial collapse of any scaffold whose top is more than 5 metres above its base, or which is erected near water where there is a risk of drowning after a fall.

**Carriage of dangerous substances**
Any incident involving a vehicle carrying a dangerous substance where there is an uncontrolled release or escape of the dangerous substance or a fire which involves the dangerous substance.

**Collapse of a building or structure**
Any unintended collapse or partial collapse of any building or structure under construction, alteration or demolition which involves a fall of more than 5 tonnes of material; or of any floor or wall of any building used as a place of a work; or of any false-work.

**Explosion or fire**
An explosion or fire which results in the suspension of normal work in the premises for more than 24 hours.

**Escape of flammable substances**
A sudden, uncontrolled release inside a building of 100kg or more of a flammable liquid, 10kg or more of a flammable gas; or in the open air of 500kg or more of flammable liquid or 10kg of flammable gas.

**Escape of substances**
An accidental release or escape of any substance in a quantity sufficient to cause the death, major injury or any other damage to the health of any person.
Reportable Diseases

RIDDOR contains a 12 page list of reportable diseases, which can be summarised as follows.

a) Poisonings by a small range of substances, including acrylamide, arsenic, cadmium, carbon disulphide, lead and mercury.

b) Skin diseases, including occupational dermatitis, skin cancer, chrome ulcer, folliculitis and acne.

c) Lung diseases, including occupational asthma, extrinsic alveolitis (including farmer’s lung), pneumoconiosis, asbestosis and mesothelioma.

d) Infections, including brucellosis, hepatitis (all forms), legionellosis, leptospirosis, Lyme Disease, tetanus, or any other infection reliably attributable to work with those organisms or their carriers.

e) Other conditions, such as occupational cancers, certain musculoskeletal disorders and hand-arm vibration syndrome.

NB If you are in any doubt over whether a dangerous occurrence or a condition should be reported, ask a member of the Corporate H,S&S team.
**SAMPLE ACCIDENT REPORT FORM**  
**Appendix II**

This, or similar, form can be used as a first and active record. The accident or incident must be entered however on the web-based recording system as soon as possible.

<table>
<thead>
<tr>
<th>Reference Number</th>
<th>...............................................</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Injured Party</td>
<td>..................................................................................</td>
</tr>
<tr>
<td>MRC Staff □</td>
<td>Staff Number.......................</td>
</tr>
<tr>
<td>Other Staff □</td>
<td></td>
</tr>
<tr>
<td>Student □</td>
<td></td>
</tr>
<tr>
<td>Visitor/Member of public □</td>
<td></td>
</tr>
<tr>
<td>Contractor/Engineer □</td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td>.............................................................</td>
</tr>
<tr>
<td>Date/Time of Incident</td>
<td>...............................................................</td>
</tr>
<tr>
<td>Location (e.g. room or facility)</td>
<td>.............................................................</td>
</tr>
<tr>
<td>Injury(ies) Sustained</td>
<td>..................................................................................</td>
</tr>
<tr>
<td>Body Part(s) Affected</td>
<td>..................................................................................</td>
</tr>
<tr>
<td>Additional medical treatment required (Y/N)</td>
<td>..........</td>
</tr>
<tr>
<td>Hospital attendance or admission (Y/N)</td>
<td>..........</td>
</tr>
<tr>
<td>RIDDOR incident or occurrence (Y/N)</td>
<td>..........</td>
</tr>
</tbody>
</table>

If yes: -

- Telephone report (Y/N) ....... Reported by: .................................
- Form F2508 completed (Y/N) ....... Completed by: .................................
- Dispatched by: ............................ Filed by: .................................
- Date/Time reported to Unit Safety Manager/Administrator .................................
- Date/Time reported to Corporate Health, Safety and Security .................................

Report Completed by .................................
<table>
<thead>
<tr>
<th>Description/Details of incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-Aid Treatment Given (to be completed by the First-Aid trained person)</td>
</tr>
<tr>
<td>Immediate Recommendations</td>
</tr>
</tbody>
</table>
Accident Reporting

Appendix III

Liaison between Human Resources and Health and Safety

Unit safety manager or person responsible for RIDDOR reporting or Regional or Unit HR

Is accident or incident immediately reportable to HSE? e.g. Death

No

Enter in accident book

No

Notify HSE within 10 days

Yes

Keep record of lost days

No

Contact Unit safety co-ordinator

Yes

Contact Regional or Unit HR

>7 day absence

No

Notify HSE within 10 days

Yes

No further action

Telephone HSE

Work related absence

No
Guidance Note 3

The investigation of accidents and dangerous occurrences

This section is designed to advise Line Managers and Unit Safety Managers on the procedure for the investigation of an accident and/or dangerous occurrence.

This procedure must be followed for every incident or accident reportable under RIDDOR. Non-reportable events will not necessarily require the early presence of a member of Corporate H,S&S.

It will help ensure:

- that all incidents where there is the potential to cause serious injury, ill health or damage to plant or equipment are reported and investigated.
- compliance with The Health and Safety at Work Act 1974 (HASWA) and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

Note: This procedure is to be used to complement any existing local procedures.

Procedure

1. The scene of the work related incident must not be disturbed, unless there is immediate danger, until the Unit Safety Manager and/or the Line Manager has attended. Corporate Health, Safety and Security must be informed as soon as possible.

2. On being advised of a work related RIDDOR-reportable incident member of the Corporate H,S&S team notified will log the details, give advice on the investigation procedure and attend the scene of the incident as soon as possible.

3. Corporate H,S&S will advise and assist with all RIDDOR-reportable work related incidents

4. The Unit Safety Manager and/or the Line Manager must keep a record of details relevant to the incident, i.e. sketches, evidence, photographs, names of witnesses etc.

5. The Unit safety Manager and/or the Line Manager should keep the relevant Safety Representatives involved in any subsequent investigation.

6. The Unit Safety Manager and the Line Manager concerned will ensure that the incident is fully investigated and recommendations made. The investigation should be recorded.

7. Recommendations from the investigation report should be actioned within an agreed time scale and where necessary the risk assessment reviewed.

An example checklist is shown in Appendix I.
## Appendix I

### Accident investigation report checklist

#### Establishment of the relevant facts

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date, time and location of accident or incident</td>
<td></td>
</tr>
<tr>
<td>Brief summary of accident or incident, including name(s) of injured or affected parties and nature of injury or near miss</td>
<td></td>
</tr>
<tr>
<td>Set out time-line of events where appropriate (this can be added to retrospectively after witness interviews)</td>
<td></td>
</tr>
<tr>
<td>What process or task was being performed at the time of the incident and was it authorised?</td>
<td></td>
</tr>
<tr>
<td>Details of any machinery, equipment or materials involved in the incident?</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Response</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>If applicable, the date(s) of the last statutory test(s) or examination(s) of plant, tools or equipment</td>
<td></td>
</tr>
<tr>
<td>Status of any safety equipment in relation to the occurrence (e.g. position of guards, use of personal protective equipment)</td>
<td></td>
</tr>
<tr>
<td>Environmental conditions (e.g. lighting, noise, temperature, housekeeping, etc.)</td>
<td></td>
</tr>
<tr>
<td>Training record of personnel involved</td>
<td></td>
</tr>
<tr>
<td>Were there any warning notices/signs in existence at the time of the incident? What were they?</td>
<td></td>
</tr>
<tr>
<td>List any relevant document to the incident e.g. Safety Permits, Licences. Please attach copies</td>
<td></td>
</tr>
</tbody>
</table>
Any other relevant information
**Witness Account of Incident**

If more than one witness, please complete a separate sheet for each.

<table>
<thead>
<tr>
<th>Name ..........................................................</th>
<th>Job Title ..........</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee No. .................................................</td>
<td>Department ...</td>
</tr>
<tr>
<td>Telephone Ext. ..................................................</td>
<td>Date of Account .......</td>
</tr>
</tbody>
</table>

Accident reporting version 2
Summary
State the considered cause(s) of the incident

Recommendations
Each action should be assigned to a named Supervisor or Manager with a realistic completion date.

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Action</th>
<th>Completion Date</th>
</tr>
</thead>
</table>

Completion of action to be confirmed in writing to the undersigned

Signature of Manager making report .................................................................

Date .................................................
Guidance Note 4

Accident and incident reporting, review and investigation: supplementary information

Why report accidents?

1. To protect the employer and employee

The keeping of records of accidents and reportable occurrences is an MRC requirement. In certain circumstances it is a requirement in law and it is prudent in all other cases. For example, should there be any future request for further investigation of an accident, either by the employer or by the employee, it is important that records can be made readily available. An injury that appears minor at the time, for example a back strain, may recur and lead to a claim for compensation. In the event of such a claim being made the employee will need to demonstrate the employer's negligence or failure to provide a safe system of work. It is therefore in the best interest of the employer, as well as the employee, that factual records of any incident are made as near to the time as possible.

2. Compliance with the law

Certain incidents must be reported by the employer in order to comply with RIDDOR. Failure to do so is a criminal offence. Further information on RIDDOR is given elsewhere, but it is important to iterate that the full extent and implications of an accident are not always recognised at the time. A minor needle-stick injury, for example, could lead to a serious infection requiring a notification under RIDDOR. This point in itself reinforces the need to record each and every accident, however minor it appears to be at the time.

3. To assist management

The maintenance of good accident records is an asset to health and safety management.

Local management

In smaller establishments, where there are few accidents and where the safety committee meets infrequently, it is likely that the local safety manager's responsibility for the accident reports will extend to their inspection and periodic review. In all other establishments, however, it is suggested that the accident records for that period are reviewed by the safety committee. The committee can recommend further action as appropriate. This could lead for example to a review of a particular technique or protocol or the identification of training needs. The recording of accidents is not an end in itself, but also a means to achieving a safer workplace.

Where a particular accident results in a member or members of staff being absent from work, the result is that the individual's work is delayed and time is lost. Any absences for a day or more must be recorded to enable local management to monitor lost time through work-related injury or illness.
Corporate management

As part of its central function, the Safety, Security and Resilience section collates and analyses accident data provided by establishments. The main purposes are twofold; first, to identify the causes of accidents and any notable trends, and secondly to facilitate the preparation of regular reports to Operations Board as well as forming part of the Annual Report presented to Council. The report includes a review of the number and causes of accidents, and makes particular mention of those accidents that required notification to HSE under RIDDOR and the number of 'lost-time' accidents.

What should be reported?

All accidents

All accidents should be reported wherever practicable and however small. There is no exact laid down format for recording them. To be of the fullest benefit however it is sensible that minor accident reports record similar details as are required for more serious accidents reportable to HSE.

Where local accident report forms are used, they should be designed to provide comprehensive information on each accident both to aid local management and the process of data analysis.

Major injuries

RIDDOR requires that when certain events (described previously) occur, the enforcing authority must be informed. Notifications are made to the reporting office by the appropriate route as identified at http://www.hse.gov.uk/riddor/report.htm. The most serious accidents or occurrences must be notified by telephone.

Who is responsible for RIDDOR Notifications?

Notifications to HSE are the responsibility of the employer. The situation in many establishments is somewhat complex, with as many as four employers involved. The recommended approach therefore is that which combines compliance with the law and common sense employing the following principles;

- That Unit directors are responsible for ensuring notifications are made, by themselves or others as appropriate, for all persons under their managerial control, including employees, students, visitors and trainees; this should include arrangements for contractors working on site within areas managed by the MRC.
- That where more than one employer is represented, the reporting arrangements for both telephone and written reports should be agreed by the employers and the agreement, including the identification of those individuals given the responsibility for notifying the authorities, and recorded in writing.

MRC establishments would make all necessary notifications to HSE directly for MRC employees, students and visitors. In some situations agreement could be reached with the other employers (e.g. health authorities, universities) for the MRC to make the notifications for its employees, whilst ensuring that the other employers are informed. In other circumstances, the other employer may wish to make the notification and thus should be contacted as soon as possible. In all cases it is essential that local arrangements are comprehensive and comprehensible to all those with managerial responsibility.
Categories of reportable injuries and conditions

a) Major injuries

The major injuries are stated clearly in the Regulations and are listed in Guidance Note 2 and its appendices. However, some of the categories may be less obvious. Any major eye injury must be reported, whether or not there is a subsequent period of absence from work and includes a chemical or hot metal burn. Also included is any acute illness requiring medical treatment, or loss of consciousness, resulting from the absorption of any substance, including by inhalation.

b) Absences for 'more than seven consecutive days'.

It is important to be clear as to what is meant by 'more than seven consecutive days'. The day of the accident is not included and days that are not normally working days (weekends or days off for shift-workers or part-time workers) are included. Examples and further information have been given on page 5.

c) Reportable diseases.

The list of diseases includes specific infections acquired through work activity. However it also includes any illness acquired at or through work caused by a known pathogen, the definition of which can be taken as those micro-organisms included in ACDP Hazard Groups 2, 3 and 4. This is complemented by the inclusion in Major injuries of any acute illness requiring medical treatment resulting from exposure to a pathogen or infected material.

The list of reportable diseases also includes occupational asthma acquired through work with 'animals or insects used for the purposes of research or education or in laboratories'.

What are the management objectives of reporting accidents?

To enable proper remedial action to be taken.

The making and keeping of proper accident records provides a starting point for accident review and investigation which may lead to changes in work practices.

To ensure that all possible measures are taken to prevent future recurrence of accidents, each accident should be reviewed as close to the time of the event as possible to determine the extent of the investigation. There is likely to be an overall relationship between the extent of the investigation and the severity of the accident but this is not always so. Cases will arise where a small injury or even a near miss could have become a more serious injury.

Thus, accident reports should be reviewed regularly. The Unit (or local) safety manager should examine the reports for the relevant period and review the circumstances and causes of each accident. He or she would then draw up a report of any accident or incident that had led to an investigation. These accident and investigation reports could then be tabled at the next safety committee meeting for discussion or presented directly to local management. This approach enables more meaningful and practical conclusions to be reached which may lead to changes being made to work practices.
To aid in monitoring of the health and safety policy.

An overall assessment of accident report data, such as that undertaken annually by the Safety, Security and Resilience section, can highlight deficiencies in the present system and suggest areas of improvement, for example in specific health and safety training. This assessment, placed alongside inspections and other factors, forms an essential part of the monitoring process.

How should investigations be done?

For a great many of the accidents that occur, especially those that are or appear at the time to be minor, the safety co-ordinator may only know of the event some time later. In these situations therefore, any investigation by the safety manager is retrospective, its accuracy and objectiveness reliant on the memories of those involved and of witnesses.

The health and safety of staff is however the responsibility of line managers. The initial reporting of an accident should therefore be to the line manager or delegated individual within the group. An early decision can then be made on whether an investigation should be made.

Complementary to the advice included in Guidance Note 3, the person carrying out the investigation should consider the following points:

**Decision on procedure**

1. Does any injured party require further medical attention?
2. Is any immediate notification necessary to the enforcing authority?
3. Should the site be left undisturbed?

**Collection of facts**

1. Identify names of witnesses;
2. Examine and record details of the site, e.g. plans, photographs etc.;
3. Record environmental factors - lighting, noise, other potential hazards;
4. Examine any plant, machinery;
5. Examine and take details of the operation of safety devices;
6. Determine as far as possible the circumstances of the accident including the order of events;
7. Interview witnesses as soon as possible after the event.

**Background**

Where appropriate, according to the severity or potential severity of the incident, the investigator should look into the relevant background factors. This may include;

1. Comments of supervisory staff;
2. Comments of safety representatives;
3. Adequacy of training;
4. Any previous similar accidents or near misses;
5. Examination of equipment or plant maintenance records;
6. Personal factors (ill health, stress, relationships with other staff).

**Basic rules**

1. Do not rush and avoid being side-tracked;
2. Avoid over-consideration of legal implications (compensation, etc.);
3. Give equal prominence to background factors where necessary as well as the immediate aspects of injury and mechanical breakdown;
4. Avoid apportioning blame.

**Risk Assessments**

Finally, recommendations from any accident investigation must be incorporated into the risk assessment as soon as is practicable.

**Contacting HSE**

RIDDOR reporting can be found at [http://www.riddor.gov.uk/](http://www.riddor.gov.uk/). Reports can be made in the following ways:

- Telephone: 0845 3009923
- On-line
- Email

Completing the relevant hard copy form and sending it by post to:

Incident Contact Centre
Caerphilly Business Park
Caerphilly
CF83 3GG

**HSE area offices (open 9 a.m. to 5 p.m. Monday to Friday)**

A full list of HSE Offices can be found at [http://www.hse.gov.uk/contact HSE](http://www.hse.gov.uk/contact HSE). Each MRC establishment should ensure it has the details of its local HSE office (which is likely to be the same as that entered on the HSE Law Poster displayed at all MRC locations.

The main ones affecting MRC Units and teams are:
London (all)
Rose Court, 2 Southwark Bridge
LONDON. SE1 9HS
Tel: 0845 345 0055. Fax: 020 7556 2102

Bedfordshire, Cambridgeshire, Hertfordshire
14 Cardiff Rd., Luton. LU1 1PP.
Tel: 01582 444200 Fax: 01582 444320

West Midlands and Warwickshire
1 Hagley Road
BIRMINGHAM. B16 8HS
Tel: 0121 607 6200. Fax: 0121 607 6349

Berkshire, Dorset, Hampshire, Wiltshire, IofW
Priestley House, Priestley Rd., Basingstoke. RG24 9NW.
Tel: 01256 404000 Fax: 01256 404100

Derbyshire, Lincolnshire, Nottinghamshire
The Pearsons Building, 55 Upper Parliament St., Nottingham. NG1 6AU.
Tel: 0115 971 2800 Fax: 0115 971 2802

Northampton, Leicestershire, Rutland
5th Floor Belgrave House
1 Greyfriars
NORTHAMPTON. NN1 2BS
Tel: 01604 738300. Fax: 01604 738333