RIBBLE VALLEY BOROUGH COUNCIL REPORT TO PERSONNEL COMMITTEE

Agenda Item No.

meeting date: WEDNESDAY, 5 JUNE 2013

title: HEALTH & SAFETY

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1 PURPOSE

1.1 This report presents a review of the health and safety performance of the Council during the period April 2012 to March 2013.

- 1.2 Relevance to the Council's ambitions and priorities:
 - Council Ambitions Effective management of health and safety risks supports the Council's ambition to make people's lives safer and healthier for staff as well as for the community.
 - Community Objectives Effective risk control systems for staff, contractors and members of the public supports the Community Strategy theme to promote health and well-being within the community.
 - Corporate Priorities Health and safety reports provide the information needed by people in the Council who have particular responsibilities within the health and safety management system; these people include directors, senior managers, managers, supervisors, health and safety professionals and employees/safety representatives.
 - Legal To ensure legal compliance with the Health and safety at Work etc.
 Act, applicable Regulations and Approved Codes of Practice and, in
 particular, the Management of Health and Safety at Work Regulations 1999,
 Regulation 5, (health and safety arrangements).

2 OVERVIEW

- 2.1 Senior management have shown commitment and a positive attitude towards the management of Health and Safety and the overall culture is now one of continuous improvement. In the recent staff survey 73% of staff thought that the Council provides a safe and healthy work environment, however, just 37.8% of staff thought that their Manager explained risk assessments to them to keep them safe at work and, therefore, this indicates an area where more focus is needed in the coming year. Health and Safety continues to be an agenda item at staff meetings and features appear regularly in Backchat. The Chief Executive attends Health and Safety Committee meetings, which serve as a forum for consultation with employees, the meetings are well attended and effective.
- 2.2 Effective management of health and safety risks helps the Council to:
 - maximise the well-being and performance of its employees;
 - stop people being killed, injured or suffering ill-health by their work;

- prevent damage to its reputation in the eyes of customers, suppliers, other stakeholders and the wider community;
- encourage better relationships with contractors, and more effective contracted activities; and
- minimise the likelihood of prosecution and consequent penalties.
- 2.3 The Ribble Valley Borough Council Health and Safety Management System utilises the model provided in HS(G)65, see Figure 1, this is a framework for directors, managers, health and safety professionals and employee safety representatives all of whom will be involved in the implementation of the Health and Safety Management System (HSMS).

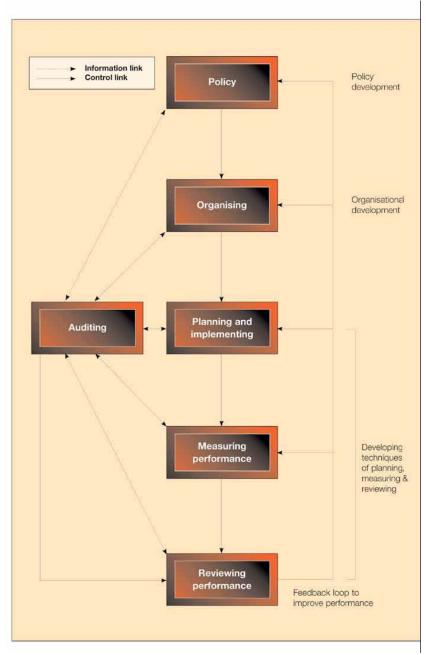


Figure 1. HSG65.

- 2.4 The Health and Safety Management System comprises three levels of control:
 - Level 3 effective workplace precautions provided and maintained to prevent harm to people at the point of risk (guards, ventilation, instructions and systems of work).
 - Level 2 risk control systems (RCSs): the basis for ensuring that adequate workplace precautions are provided and maintained (policies and procedures).
 - Level 1 the key elements of the health and safety management system: the management arrangements (including plans and objectives) necessary to organise, plan, control and monitor the design and implementation of RCSs.

In addition, a positive health and safety culture supports each level.

3 POLICY DEVELOPMENT

- 3.1 A new Policy for the Management of Occupational Road Risk has been produced, this policy demonstrates the Council's commitment to proactively managing the risks from driving at work and to preventing road traffic crashes involving Council Officers who are required to drive on Council business.
- 3.2 Organisations may be convicted under the Corporate Manslaughter and Corporate Homicide Act 2007 if a road death is associated with a gross breach of duty of care caused by senior management failure.
- 3.3 Ribble Valley Borough Council recognises that the same duty of care, under Health and Safety law, is owed to staff who drive their own vehicles for work as applies to employees who drive Council owned, leased or hired vehicles, this policy therefore applies equally to own vehicle drivers and Elected Members on Council business.

4 THE COUNCIL'S SIGNIFICANT HAZARDS

- 4.1 Construction this covers a range of operations including property maintenance and management, refurbishment, demolition and excavation, as well as specific hazards such as asbestos and legionella.
- 4.2 Transport this includes waste transfer station and depot management, occupational road risk and vehicle operations and maintenance; In 2011/12, 7 claims were made in respect of own damage, settled for £2500, 1 in respect of third party damage, settled for £1650 and another claim is still under negotiation with a reserve of £3,000 for own and third party damage. In 2012/13 4 claims were made, 3 were settled in favour of the claimants at a total cost of £1750, 1 claim is still under negotiation.
- 4.3 Fire this is an important area due to the potential severity of any incidents and the size of the authority's property portfolio.
- 4.4 Mental health problems these are the biggest cause of sickness absence in local government. Stress, anxiety and depression are the main issues, 173 working days were lost at Ribble Valley in the 2012/2013 year, however only 39 of these were work-related, the remainder being attributable to personal circumstances.
- 4.5 Musculoskeletal injuries bad backs, muscle damage and sprains are not just caused by lifting or moving heavy things, repetitive tasks such as intensive keyboard

use can also be to blame along with slip or trip accidents, 31 working days were lost at Ribble Valley in the 2012/2013 year due to this type of injury, this compares with 585 in 2011/2012.

- 4.6 Waste Management The HSE has developed a new strategy for the industry for 2012-2015, their priorities include reducing accident numbers, promoting effective health and safety management, continued improvements in safety culture/workforce engagement and increasing levels of health and safety competence.
- 4.7 The main aims of the strategy are: -

Leadership

4.8 To encourage strong leadership, especially in key stakeholders and intermediaries across the industry, so they can demonstrate how and what they are doing to improve health and safety.

Worker involvement

To encourage organisations to ensure that employers, managers and workers work together to prevent work-related ill health and injury.

Competence

4.9 To encourage an increase in competence across the industry, so that employers are sufficiently competent to identify and proactively manage their risks, employees understand the risks they face and their role in dealing with them.

Healthier, safer workplaces

To create healthier, safer workplaces across the industry by:

- targeting key health issues and working with those bodies best placed to bring about a reduction in the numbers and the incidence rates of work-related ill health; and
- setting priorities to deliver a significant reduction in the rate and number of deaths and accidents.
- 4.10 Nationally the activities involved in waste and recycling continue to cause fatal accidents to Council staff and members of the public; there have been no fatalities at Ribble Valley although there were two serious near misses in 2012/2013, one of which was potentially fatal. The incidents were reported promptly and following investigation and review of risk assessments operatives received refresher training to reduce the likelihood of reoccurrence. The HSE is yet to revisit RVBC in their current intervention scheme.
- 4.11 The HSE Fees for Intervention (FFI) scheme began on Monday, 1 October 2012. The scheme places a duty on the HSE to recover its costs for carrying out its regulatory functions. Inspectors who identify material breaches at the sites they visit will charge organisations £124.00 an hour for the time they spend investigating and resolving the breaches.
- 4.12 There were no prosecutions, improvement notices or prohibition notices issued to RVBC by the HSE during 2012/13.

5 SUMMARY OF ACHIEVEMENTS

- 5.1 The Council's Health and Safety Policy clearly sets out how the Council will manage the Health, Safety and Welfare of all employees and others who may be affected by its undertakings, therefore the health and safety goal of the Council is to effectively implement all sections of the Policy.
- 5.2 Overall, again, 2012/2013 was a positive year in terms of health and safety management and achievements include:
 - 5.2.1 Adoption of the new Management of Occupational Road Risk Policy setting out the Council's commitment to effectively manage "at work driving" activities and setting out the goals and arrangements for putting the policy into effect.
 - 5.2.2 Phil Dodd, John Shears and Stephen Frankland attended the RoSPA Occupational Advanced Driving Test, Phil and John gained the Silver Award. These members of staff are now qualified to carry out driving assessments.
 - 5.2.3 The Ribble Valley Borough Council Drivers Handbook has been revised and updated to include all drivers including fleet, lease, casual and essential car users.
 - 5.2.4 The Ribble Valley Borough Council Waste Collection and Recycling Service, Health and Safety Handbook has been revised and has been issued to refuse collection staff along with briefings on the contents.
 - 5.2.5 The Health and Safety Advisor continues to play a proactive role in advising event organisers in the management of event safety and the production of Event Management Plans. Notable successes in 2012 were the Clitheroe Food Festival, Diamond Jubilee Celebrations and the Torchlight Procession.
 - 5.2.6 The Health and Safety Advisor carried out Manual Handling and Work at Height Training for all the Platform Gallery Staff. Further training is to be provided to all other relevant sections of the Council. A reduction in sickness absence is expected in this section as a result of the training.
 - 5.2.7 Briefing sessions were held at the depot for Refuse Collection Staff on the importance of following safe systems of work and the potentially serious consequences of failing to implement training, risk control systems and procedures. Inductions continue for staff and contractors employed at Salthill Depot and who are subject to the site specific systems and procedures.
 - 5.2.8 Joint Workplace Inspections with Safety Representatives from Unison have taken place regularly throughout the year. Any issues raised were speedily resolved and a positive working relationship with the union continues.
 - 5.2.9 Significant proactive and reactive work has been undertaken providing a wide range of support both corporately and operationally.

6 ACCIDENT AND INCIDENT STATISTICS

6.1 Accidents

In the 2012 – 2013 period there were 70 accidents, 39 of which involved members of the public, of the 31 involving RVBC staff 9 of the accidents resulted in 83 lost working days, 4 of these were reportable to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995. 37 of the accidents to

members of the public occurred at the pool mostly involving slips and trips and collisions. The Refuse Collection service accounted for 18 of the accidents to RVBC staff. (See Appendix 1.) The Health and Safety Advisor will continue to investigate accidents and incidents, along with managers, supervisors and safety representatives in accordance with the new Policy and Procedure for the Reporting and Investigation of Accidents and Incidents in order to prevent reoccurrence and further lost time incidents and associated losses. (See Appendix 2.)

Incidents

6.2 The total number of "incidents", no loss events, reported by employees was 11, 4 of which were at the Swimming Pool, 2 were abusive and potentially violent incidents to other staff, the remainder being of a minor nature.

7 TARGETS FOR 2013/2014

7.1 Construction

- 7.1.1 Monitor the implementation of the Policy for the Health and Safety Management and Control of Contractors and Consultants to ensure compliance at procurement stage and during works on site.
- 7.1.2 Continue to implement the Council's Control of Asbestos and Legionella Bacteria Policies and carry out monitoring, sampling and testing as appropriate.
- 7.2.3 Ensure the duties imposed by the Construction (Design and Management) Regulations 2007, are carried out for all applicable design and construction works.

7.2 Transport

- 7.2.1 Implement the Council Policy for the Management of Occupational Road Risk, (MORR), reviewing and revising the Council's risk assessments for driving vehicles including, the "grey fleet", and carry out driving assessments where appropriate.
- 7.2.2 Continue to monitor the number of incidents resulting in damage to refuse collection vehicles and implement an initiative to reduce the number of incidents and lower the burden of repair costs for vehicles and property.

7.3 Fire

- 7.3.1 Implement the corporate policy for Fire Safety which identifies roles and responsibilities for those employees with duties in the event of Fire and Emergency in accordance with the Regulatory Reform (Fire safety) Order 2005.
- 7.3.2 Carry out basic fire safety refresher training for employees and further specific Fire Safety training for all Fire Marshals in accordance with the Fire Safety (Employees' Capabilities) (England) Regulations 2010.
- 7.3.3 Ensure fire alarm testing and practice evacuations of public buildings are carried out regularly and liaise with the Fire and Rescue Service during statutory inspections and audits.

7.4 Mental Health Problems

- 7.4.1 Monitor instances of work related stress symptoms including anxiety and depression and assist Managers and Personnel Section in the risk assessment process for individual cases.
- 7.4.2 Work alongside the Personnel Section in developing strategies for reducing the number of working days lost due to work related stress through implementation of the Health and Safety Executive's Management Standards and the Ribble Valley Borough Council Policy on the Management of Stress at Work.

7.5 Musculoskeletal Injuries

- 7.5.1 Review workstation risk assessments for all users of display screen equipment in accordance with Health and Safety (Display Screen Equipment) Regulations 1992 (as amended in 2002).
- 7.5.2 Conduct Advanced Display Screen Assessments where musculo-skeletal disorders have been identified and ensure ergonomic adjustments are carried out and monitored.
- 7.5.3 Continue to monitor manual handling activities carried out by Council employees and where necessary conduct risk assessments where appropriate.
- 7.5.4 Provide in-house manual handling training and refresher sessions for all employees where appropriate and in particular in the Refuse Collection Service to reduce the number of working days lost due to musculo-skeletal and work related upper limb disorders.

7.6 Waste Management

- 7.6.1 Waste collection and recycling continues to be one of the highest risk activities undertaken by the Council. Transport operations associated with collection activities (municipal and commercial) and at a range of waste management and recycling sites represent the most significant risk of serious or fatal accidents to workers and members of the public. 'Struck by moving vehicle' accounts for about only 4% of all reported accidents, however, over 40% of all fatalities fall within this category. The new strategy of the HSE is one of targeting and reducing inspections, however waste and recycling is one of the comparatively high risk areas were proactive intervention will be retained, these interventions will include both in-house and contracted collection services.
- 7.6.2 Continue to liaise with the HSE and attend at their forthcoming intervention visits which will focus on:
 - the Council's route risk assessments which highlight major hazards on the route(s) and indicate how they may be avoided or the risks minimised, for example, arranging collections to avoid certain times of the day in sensitive areas (eg. start, finish and lunch times for schools);
 - ii) identification of those areas where it is reasonably practicable to carry out single-sided street collection in order to minimise the risks of refuse collectors crossing the road;

- iii) Safe reversing and use of reversing assistants. The risks being reduced by:
 - eliminating or reducing reversing manoeuvres wherever possible;
 - devising and following safe systems of work;
 - using reversing aids such as mirrors, CCTV, detectors and alarms;
 - using trained reversing assistants only when the risks cannot be adequately controlled by the above; and
 - monitoring work activities from time to time to ensure that the agreed system of work is being implemented.
- 7.6.3 The teams operate on a "Group Task and Finish" basis. This type of system is recognised by the HSE as requiring a greater level of management and supervision as it may encourage workers to rush the job and take dangerous short cuts, robust monitoring of the service, in-house and contracted, must therefore be carried out with instances of non-compliance reported to supervisors, managers and contract managers and appropriate enforcement action applied.

Events

7.6.4 Provide Health and Safety support and input for events including the Clitheroe Food Festival and the Clitheroe Bonfire alongside the Clitheroe Bonfire Committee.

7.6.5 Accidents and Incidents

Implement the new Policy and Procedure for the Reporting and Investigation of Accidents and Incidents.

7.6.6 First Aid

Provide a defibrillator for emergency use at Salthill Depot following the campaign by the NHS and the British heart Foundation.

7.7 Professional Development

- 7.7.1 The Health and Safety Advisor will be continuing his professional development by attending courses and seminars arranged by the Institution of Occupational Safety and Health, IOSH, The Institution of Civil Engineers, ICE, both of which he holds Graduate Membership and the International Institute of Risk and Safety Management of which he is a full member.
- 7.7.2 The Health and Safety Advisor continues to Chair the Lancashire Local Authority Health and Safety Advisor's Forum and regularly attends evening meetings of the Manchester and District IOSH Branch and Public Services Section.

7.7.3 The Health and Safety Advisor continues to chair the RVBC Health and Safety Committee meetings.

8 RISK ASSESSMENTS

- 8.1 The review of risk assessments is progressing with the Environmental Health Service. Reviews of risk assessments for the operations carried out at Salthill Depot will take place and further development of the process will be implemented for the remaining sections at the Council Offices to ensure that the risk assessment data base is complete. Risk assessment sessions where staff and managers are able to get involved in the production of their own risk assessments and where any necessary training can be carried out by the Health and Safety Advisor are key elements to the RVBC Health and Safety Management System.
- 8.2 All managers need to remain aware of the importance of their personal behaviour in supporting positive health and safety performance and act accordingly. Encouraging supervisors and staff to take ownership of the risk assessment process and to actively implement the control measures identified.

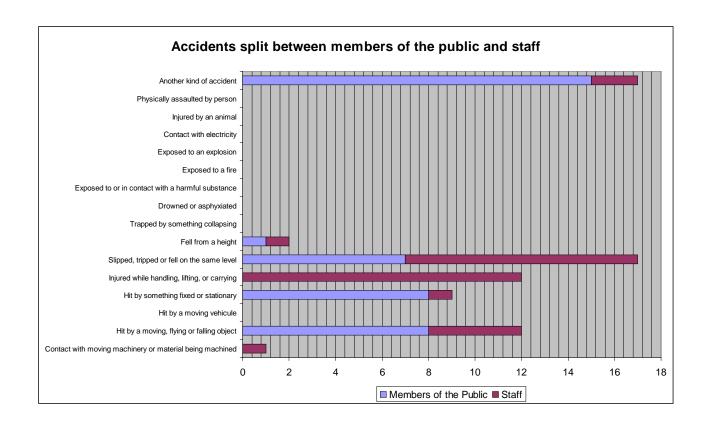
9. CONCLUSION

- 9.1 The Chair of the HSE, Judith Hackitt, has stated that the waste management and recycling industry has grown rapidly over the past decade in response to the environmental challenge. Unfortunately, it remains an industry with a poor health and safety performance with fatality rates reaching over ten times the all industry average second only to agriculture.
- 9.2 Local authorities have a major role to play in reducing these high rates of fatal injury, and the high rates of other injuries which accompany them. They are the clients for this work if it is contracted out, and are the direct employers if the service is delivered in-house. HSE is very aware of the competing pressures on local authorities. One key principle is that there is no need for this to be seen as a trade off meeting recycling targets and achieving improvement in health and safety performance are compatible and complimentary goals.
- 9.3 At Ribble Valley Borough Council Accident/incident rates are improving with a corresponding reduction in lost working days due to accident injuries, it is hoped this trend will continue in the coming year, however effective monitoring of safe working practices is essential in maintaining this trend. The in-house collection and disposal of paper waste re-introduces manual handling of sacks to our systems and will require closer control and management during the initial stages of the change over.
- 9.4 Health and Safety leadership must continue at the top, the attitude, behaviour and example of leadership at Chief Executive and Director level must continue to permeate throughout management and supervisory levels so that everyone knows what they need to do and that they have the skills, abilities and resources to do their jobs safely.

PHIL DODD HEALTH AND SAFETY OFFICER JANE PEARSON DIRECTOR OF RESOURCES

For further information please contact Phil Dodd on 01200 414526.

APPENDIX 1





POLICY AND PROCEDURE FOR THE REPORTING AND INVESTIGATION OF ACCIDENTS AND INCIDENTS

APRIL 2013

POLICY AND PROCEDURE FOR THE REPORTING AND INVESTIGATION OF ACCIDENTS AND INCIDENTS

1. INTRODUCTION

- 1.1 This Ribble Valley Borough Council (RVBC) policy outlines the procedures that are to be adopted when any employee, visitor or contractor experiences an accident or incident whilst working on, or visiting, council premises. This includes council employees working at other locations on council business.
- 1.2 It is council policy to identify and investigate unplanned losses (accidents) and near misses (incidents), including abusive or threatening behaviour, to establish the underlying and root causes of these types of events. Although accident/incident investigation is a reactive process, a comprehensive accident reporting and investigation process is a proactive measure that can effectively prevent future accidents/incidents.
- 1.3 In order to implement this policy effectively it is important that all accidents and incidents, irrespective of the resulting or potential injury or damage, be reported according to these procedures.

In order to avoid misunderstanding, the council has defined accidents and incidents as: -

Accident: - any unplanned event that results in personal injury, ill health or damage to property, plant or equipment as a result of work activity.

Incident: - the term **incident** includes **near-misses** and **undesired circumstances**, where there is the potential for injury or the incident has resulted in threats to staff, damage to council property or a financial loss.

Dangerous occurrence: - one of a number of specific, reportable adverse events, as defined in the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

This procedure establishes a systematic process to ensure that accidents, incidents and resulting absences are reported in a timely manner and that, following investigation, appropriate corrective actions are identified and implemented.

2. RESPONSIBILITIES

2.1 Chief Executive

The Chief Executive has ultimate responsibility for ensuring that the Council fulfils its legal responsibilities with respect to the reporting of accidents and incidents, that policy objectives are achieved and that effective machinery is in place for the implementation of this policy.

2.2 Directors

Directors, through Heads of Service and Managers ensure that all staff within their sphere of responsibility are aware of the need to complete accident or incident report forms and to notify Human Resources and the Health and Safety Advisor.

2.3 Heads of Service/Managers

Heads of Service/Managers are accountable to their Director for implementing the Council Policy and Procedure for the Reporting and Investigation of Accidents and Incidents and for ensuring that the accident book, (HSE BI 510), has been properly completed with as much detail as possible to assist any future investigation.

- 2.4 Heads of Service/Managers should inform the Health and Safety Advisor immediately and, where possible, establish the facts and take short-term actions to prevent recurrence; this may include stopping activities in the case of serious or imminent danger.
- 2.5 Heads of Service/Managers should inform the HR department and the Health and Safety Advisor as soon as practicable of any absence resulting from accidents at work. For external reporting purposes, where possible, an estimate of the expected period of absence should be provided.

3 EMPLOYEES

- 3.1 An injured employee, or someone acting on their behalf, must complete an accident record in the Accident Book as soon as practicable. Completed accident records should be detached from the Accident Book, passed to HR and securely stored for at least 3 years. Accident Books are available at the HR office in the council offices, main office, at the depot and at the pool office.
- 3.2 Employees should complete the accident record giving their personal details and details about the accident. Each question that applies should be answered. Do not complete section 5 called "for the employer only".
- 3.3 Complete or leave blank the tick box at the bottom of section 4. The tick box is included to allow you to indicate whether you are happy for the personal information about you and your accident to be given to safety representatives and representatives of employee safety. Employers are required under both statute and common law to keep personal information confidential.
- 3.4 Employees involved in, or witnessing, an Incident should complete an Incident /Near Miss Report Form, Appendix 1, and forward this to the Health and Safety Advisor.

4 HEALTH AND SAFETY ADVISOR

- 4.1 The Health and Safety Advisor is responsible for overseeing and reviewing all accident and incident investigations and preparing statistics to assist in monitoring health and safety performance.
- 4.2 The Health and Safety Advisor is responsible for investigating major/high risk accidents and incidents and instigating remedial action as required, providing reports to a relevant Head of Service/Director and assisting in the councils defence in the event of any (potential) enforcement action.
- 4.3 The Health and Safety Advisor is responsible for ensuring that corrective action is taken wherever health and safety failings occur, in liaison with the respective managers and for liaising with the Health and Safety Executive, Coroner, Police and others, as necessary.
- 4.4 The Health and Safety Advisor is responsible for notifying accidents and dangerous occurrences that are reportable under the provisions of RIDDOR (the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995), to the enforcing

authority, see Appendix 2.

5 ACCIDENT/INCIDENT INVESTIGATION

- 5.1 The investigation and analysis of work-related accidents and incidents forms an essential part of managing health and safety. However, learning the lessons from what is uncovered is at the heart of preventing accidents and incidents, identifying what is wrong and taking positive steps to put it right.
- 5.2 An effective investigation requires a methodical, structured approach to information gathering, collation and analysis. The findings of the investigation will form the basis of an action plan to prevent the accident or incident from happening again and for improving the Council's overall management of risk. Findings will also point to areas of risk assessments that need to be reviewed.

The Council investigates accidents and incidents for the following reasons: -

- To ensure that the Council is operating within the law.
- The Management of Health and Safety at Work Regulations 1999, regulation 5, requires employers to plan, organise, control, monitor and review their health and safety arrangements. Health and safety investigations form an essential part of this process.
- Following the Woolf Report on civil action, the council is expected to make full disclosure of the circumstances of an accident to the injured parties considering legal action. Thoroughly investigating accidents and taking remedial action would demonstrate to a court that the council has a positive attitude to health and safety.
- To provide essential information for the council's insurers in the event of any claim.
- 5.3 The level of investigation is determined by the potential consequences and the likelihood of the accident or incident recurring. Investigations will be thorough and structured avoiding bias and leaping to conclusions. The table in Appendix 3 provides guidance in determining the level of investigation appropriate for the accident or incident.
- 5.4 Investigations will be carried out in accordance with the guidance issued by the Health and Safety Executive. Following the guidance is not compulsory but by following the guidance the council will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance as illustrating good practice.

6 LEGISLATION

- 6.1 The legal requirements for recording and reporting accidents, diseases and dangerous incidents at work are laid down in the Social Security (Claims and Payments) Regulations 1979, the Social Security Administration Act 1992 and the reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).
- 6.2 Safety Representatives are legally entitled to be given/receive information from completed Accident Book forms under the Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996.

RIBBLE VALLEY BOROUGH COUNCIL

INCIDENT/NEAR MISS REPORT FORM

The purpose of this form is to record all adverse events. The term **accident** is used where injury or ill health occurs and The Accident Book should be completed in those circumstances. The term **incident** includes **near misses** and **undesired circumstances**, where there is the potential for injury or the incident has resulted in threats to staff, damage to council property or a financial loss. **III health** is defined as any illness, disability or other physical problem caused or made worse by one's work.

REPORTED BY: -		DATE AND TIME OF INCIDENT: -			
INCIDENT	T 11 1	MINIOD	05010110	MA IOD	
INCIDENT	ILL	MINOR	SERIOUS	MAJOR	FATALITY
	HEALTH	INJURY	INJURY	INJURY	
For office us	se only				
	STIMATED FINAN	CIALLOSS £			
ACTUAL/ESTIMATED FINANCIAL LOSS £					
BRIEF DETAILS (WHAT, WHERE, WHO, WHEN AND EMERGENCY MEASURES TAKEN).					
Brazil Berrate (Wilkit, Whier, Whier, When and Emerce Francis).					

15

COMPLETED BY: -	DATE: -
RECEIVED BY: - Health and Safety Advisor	DATE: -

Major: - some form of permanent disability. Serious: - absent for more than 3 weeks. Minor: - absent for less than 2 days.

APPENDIX 2

Types of reportable injury: -
Deaths
Major injuries
Over-seven-day injuries
People not at work: -
Where a member of the public or person who is not at work has died, or
• Injuries to members of the public or people not at work where they are taken from the
scene of an accident to hospital for treatment.
Reportable major injuries are:
• fracture, other than to fingers, thumbs and toes;
• amputation;
dislocation of the shoulder, hip, knee or spine;
loss of sight (temporary or permanent);
chemical or hot metal burn to the eye or any penetrating injury to the eye;
• injury resulting from an electric shock or electrical burn leading to unconsciousness, or
requiring resuscitation or admittance to hospital for more than 24 hours:

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

 any other injury leading to hypothermia, heat-induced illness or unconsciousness, or requiring resuscitation, or requiring admittance to hospital for more than 24 hours;

unconsciousness caused by asphyxia or exposure to a harmful substance or biological

agent;

• acute illness requiring medical treatment, or loss of consciousness arising from

absorption of any substance by inhalation, ingestion or through the skin;

acute illness requiring medical treatment where there is reason to believe that this

resulted from exposure to a biological agent or its toxins or infected material.

Over-seven-day injuries

As of 6 April 2012, the over-three-day reporting requirement for people injured at work

changed to more than seven days (not counting the day of the accident but including

weekends and rest days). The report must be made within 15 days of the accident.

Over-three-day injuries

A record must still be kept of the accident if the worker has been incapacitated for more

than three consecutive days, however the accident book record kept under the Social

Security (Claims and Payments) Regulations 1979, (HSE BI 510), will be enough.

Occupational diseases

Employers and the self-employed must report listed occupational diseases when they

receive a written diagnosis from a doctor that they or their employee is suffering from these

conditions and the sufferer has been doing the work activities listed.

18

Dangerous occurrences: -

Dangerous occurrences are certain listed near-miss events. Not every near-miss event must be reported. Here is a list of those that are reportable:

- collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- explosion, collapse or bursting of any closed vessel or associated pipework;
- failure of any freight container in any of its load-bearing parts;
- plant or equipment coming into contact with overhead power lines;
- electrical short circuit or overload causing fire or explosion;
- any unintentional explosion, misfire, failure of demolition to cause the intended collapse,
 projection of material beyond a site boundary, injury caused by an explosion;
- accidental release of a biological agent likely to cause severe human illness;
- failure of industrial radiography or irradiation equipment to de-energise or return to its safe position after the intended exposure period;
- malfunction of breathing apparatus while in use or during testing immediately before use:
- failure or endangering of diving equipment, the trapping of a diver, an explosion near a diver, or an uncontrolled ascent;
- collapse or partial collapse of a scaffold over five metres high, or erected near water
 where there could be a risk of drowning after a fall;
- unintended collision of a train with any vehicle;
- dangerous occurrence at a well (other than a water well);
- dangerous occurrence at a pipeline;
- failure of any load-bearing fairground equipment, or derailment or unintended collision of cars or trains;

- a road tanker carrying a dangerous substance overturns, suffers serious damage,
 catches fire or the substance is released;
- a dangerous substance being conveyed by road is involved in a fire or released.

The following dangerous occurrences are reportable except in relation to offshore workplaces:

- unintended collapse of:
 - any building or structure under construction, alteration or demolition where over five tonnes of material falls;
 - a wall or floor in a place of work;
 - any false work;
 - explosion or fire causing suspension of normal work for over 24 hours;
 - sudden, uncontrolled release in a building of:
 - 100 kg or more of flammable liquid;
 - 10 kg of flammable liquid above its boiling point;
 - 10 kg or more of flammable gas; or
 - of 500 kg of these substances if the release is in the open air;
 - accidental release of any substance which may damage health.

ACCIDENT/INCIDENT INVESTIGATION

Potential Worst Consequence of Accident/Incident

Likelihood of	Minor	Serious	Major	Fatal
recurrence				
Certain				
Likely				
Possible				
Unlikely				
Rare				

RISK	MINIMAL	LOW	MEDIUM	HIGH
INVESTIGATION	MINIMAL	LOW LEVEL	MEDIUM	HIGH LEVEL
LEVEL	LEVEL		LEVEL	

Relevant supervisor to look into the circumstances of the event and try to learn any lessons which will prevent future occurrences.

Short investigation by the relevant supervisor or line manager into the immediate, underlying and root causes to learn lessons and prevent recurrence.

More detailed involving supervisor or line manager, H&S advisor and safety representative to establish immediate, underlying and root causes.

Team investigation involving supervisors, managers, H&S advisor and safety representatives under supervision of senior manager or directors to establish the immediate, underlying and root causes.

Severity Index	Description
Fatal	Death
Major	Permanent total incapacity
Major	Permanent severe incapacity
Major	Permanent slight incapacity
Major	Absent from work for more than three weeks with subsequent recurring incapacity
Serious	Absent from work for more than three weeks with subsequent complete recovery
Serious	Absent from work for more than three days but less than three weeks with subsequent complete recovery
Minor	Absent from work for less than three days with complete recovery
Minor	Minor injury with no lost time and complete recovery
Minor	No human injury expected