



## INCIDENT REPORTING POLICY

### DOCUMENT VERSION CONTROL

Date	Author	Version	Status	Reason for Change
Sept 2015	SEStran	1.1	FINAL	Updated RIDDOR
Oct 2017	SEStran	1.2	FINAL	Adoption of version control
March 2019	SEStran	1.3	FINAL	Changes to retention, RIDDOR and language.

## **1. POLICY STATEMENT**

SEStran are committed to the safety of employees, and anyone who could be affected by our activities, by minimising the risks from all work-related incidents. We aim to provide a safe and healthy working environment for all employees. Incident reporting and investigation will help by identifying where we can improve our processes.

We will investigate and record all incidents including near misses and other events. SEStran operates a “no-blame” approach to incident reporting. Incidents are valuable learning events and should be treated as such. Identifying improvements in processes and operational controls will be the focus of any investigation.

### **1.1. DEFINITION**

For the purpose of this policy an incident is any unplanned or unwanted event arising from work activities which has resulted in or had a potential to cause:

- personal injury
- ill-health
- damage to property, plant or equipment
- any loss in productivity

This includes any acts of violence to employees as described in the Violence at Work Policy and harassment of any employee by a third party as defined by the Dignity at Work Policy.

## **2. INTRODUCTION**

SEStran will take all reasonable steps to ensure that the work environment is safe.

We will design working practises to ensure any risks are minimised. Any potential hazards will be subject to risk assessments and these will be regularly reviewed. We recognise that even with the operational controls in place unplanned or unwanted events can still occur. The investigation of work-related incidents is an important step in effectively managing the risks associated with our work activities. It provides an opportunity to learn from what has happened and take action to help prevent it from happening again.

## **3. SCOPE**

This policy applies to all employees of SEStran and covers all activities arising out of company business. It complements the Violence at Work Policy and the Dignity at Work Policy.

#### **4. REPORTING OF INCIDENTS**

All incidents involving employees, consultants and clients that arise from our activities must be reported using the Incident Reporting Form (Appendix 1). This includes near miss incidents in which no person was injured but where a dangerous situation was identified. Near misses commonly go unreported but are just as important to report as they can highlight potential problems that, under slightly different circumstances, could have caused harm.

Incidents must be immediately reported by the affected person(s) to their line manager. The line manager will investigate the incident and complete the Incident Reporting Form. Where the line manager is unavailable the incident must be reported to another manager.

Fatalities must also be immediately reported to the Partnership Director.

Where appropriate, Section 4(a) of the Incident Report Form should be completed if the affected person has any time off work or attends hospital for treatment.

The form can be completed by hand or electronically. Additional documents may be added to the report together with relevant photographs. Once complete, the original copy(s) should be sent electronically to the Partnership Director ([jim.grieve@sestran.gov.uk](mailto:jim.grieve@sestran.gov.uk)). The manager should retain the original form and additional information for a period of 3 years.

Completed Incident Report Forms and the information they contain must be treated as confidential at all times. Forms should not be circulated beyond those directly involved. Where the line manager or Partnership Director is required to share any general information about the incident any identifying details should be removed.

#### **5. INVESTIGATION**

Once the area has been made safe every effort should be made to preserve the scene of the incident. The line manager must investigate the incident as soon as possible after being notified.

Where the incident is serious, or could have been more serious, a more detailed investigation must be considered; for example, multiple or life changing injuries or significant damage to property. The line manager should consult with the Partnership Director to determine the extent of the investigation that may be required; including whether to request assistance from the Scottish Government's Occupational Health and Safety Team.

If the incident has resulted from a building defect or failure of a building operational control then the relevant premises manager should also be notified so they have the opportunity to conduct their own investigation.

Guidance on conducting an investigation is included in the HSE publication *HSG24 – Investigating accidents and incidents* which is available at:

<http://www.hse.gov.uk/pubns/hsg245.pdf>

Any additional investigation notes and observations not covered in the form should be added to the report as required.

## **6. RIDDOR**

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) requires that certain injuries or diseases arising from work activities are notified to the HSE. Guidance on which injuries or diseases are reportable is included in the HSE publication *INDG453(rev 1) – Reporting accidents and incidents at work* which is available at:

<http://www.hse.gov.uk/pubns/indg453.pdf>

RIDDOR reports should be submitted to the HSE using one of the online forms available at:

<http://www.hse.gov.uk/riddor/report.htm>

Occupational diseases must be reported to the HSE as soon as is practical. While occupational diseases may be diagnosed by an employee's GP in the first instance all such cases should be referred to Occupational Health. The line manager should also immediately inform Falkirk Council's Health, Safety and Care Team at:

[health.safety@falkirk.gov.uk](mailto:health.safety@falkirk.gov.uk)

The Health, Safety and Care Team will provide guidance to the line manager on investigating the cause of the occupational disease and assist in preparing the report.

## **7. RISK ASSESSMENT**

The Partnership Director will ensure that any relevant risk assessments are reviewed to take account of any incident or near miss and the findings of the subsequent investigation.

## **8. RESPONSIBILITIES**

### **8.1. PARTNERSHIP DIRECTOR**

The Partnership Director is responsible for the effective operation of the policy across SEStran as a whole and for ensuring that relevant procedures are implemented. They are also responsible for ensuring that

adequate resources are made available to implement appropriate protective measures, where these have been identified as a result of risk assessment or incident investigation.

## **8.2. MANAGERS**

Managers are responsible for implementation of the SEStran Incident reporting procedures. They are also responsible for ensuring that an Incident Reporting Form is completed fully on each occasion.

In all cases Managers are responsible for conducting an investigation to identify how the incident occurred and for identifying and implementing any appropriate measures to prevent re-occurrence.

The Manager will report the incident to the Partnership Director and, if required under RIDDOR, to HSE.

## **8.3. EMPLOYEES**

Employees are responsible for reporting all incidents to their manager immediately or as soon as possible following the incident. They will give a full and accurate account of details leading to the incident and of the incident itself.

The employee will cooperate with the Manager's investigation into the incident including provision of written witness testimony where appropriate.

## **9. MONITORING AND REVIEWING**

The Partnership Director will provide relevant information on incidents to the Performance and Audit Committee at appropriate intervals. The Performance and Audit Committee will consider information provided on incidents to identify trends and possible improvements to systems of work and risk assessments.

The Partnership Director will review this policy annually, in conjunction with the Performance and Audit Committee, taking into consideration legislative amendments and best practice advice.

## **Appendix 1: Incident Report Form**