

# University Occupational Health and Safety Standard

## INCIDENT REPORTING AND MANAGEMENT

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<b>1. PURPOSE</b> .....	<b>2</b>
<b>2. SCOPE</b> .....	<b>2</b>
<b>3. ABBREVIATIONS</b> .....	<b>2</b>
<b>4. DEFINITIONS</b> .....	<b>3</b>
<b>5. ROLES AND RESPONSIBILITIES</b> .....	<b>3</b>
<b>6. INCIDENT REPORTING</b> .....	<b>7</b>
6.1 Why report	7
6.2 What to report	7
6.3 Who can report	7
6.4 How to report - SIRIS	7
6.5 Incidents reportable to the health and safety executive	8
6.6 Fatal Accidents	8
<b>7. INCIDENT INVESTIGATION</b> .....	<b>8</b>
7.1 Information, Instruction, and training	8
7.2 Participation of workers in incident investigation	8
7.3 Prioritising incident investigations	9
7.4 Undertaking an incident investigation	9
7.5 Communication	9
<b>8. INCIDENT MANAGEMENT REPORTS AND PERFORMANCE REVIEW</b> .....	<b>9</b>
8.1 Management reports	10
8.2 Trend analysis	10
8.3 Audit	10
<b>9. DOCUMENTATION AND RECORDS</b> .....	<b>10</b>
<b>10. COMMUNICATION AND REPORTING</b> .....	<b>10</b>
<b>11. TOOLS</b> .....	<b>11</b>
<b>12. COMPLIANCE</b> .....	<b>11</b>
<b>13. DOCUMENT HISTORY</b> .....	<b>11</b>

## 1. PURPOSE

The University is committed to meeting its legal obligations by ensuring that it has adequate arrangements, facilities and trained personnel to reduce the risk of injury, or ill health, from work related activities.

The purpose of this Standard is to define and outline the University's arrangements for the reporting of accidents, incidents, dangerous occurrences and near miss episodes and to provide guidance on their investigation.

## 2. SCOPE

This document applies to all work-related functions undertaken by the University including on campus and off campus activities. Incident reporting and management applies to staff, students, visitors, contractors, members of the public, and any others affected by the University's activities.

## 3. ABBREVIATIONS

<b>DSC</b>	Departmental Safety Co-ordinator
<b>HSE</b>	Health and Safety Executive
<b>HoD</b>	Head of Department
<b>IMT</b>	Incident Management Team
<b>OHS</b>	Occupational Health and Safety
<b>RIDDOR</b>	Reporting of Incidents, Diseases and Dangerous Occurrences Regulations
<b>SACSOH</b>	Statutory Advisory Committee on Safety and Occupational Health
<b>SHaW</b>	Safety, Health and Wellbeing (department)
<b>SIRIS</b>	Strathclyde Incident Reporting and Investigation System
<b>UCO</b>	University Compliance Officer

## 4. DEFINITIONS

- 4.1 Accident** An unplanned and uncontrolled event that gives rise to injury / harm to the health of any person or damage to property / equipment.
- 4.2 Dangerous Occurrences** Certain unintended, specified events defined by RIDDOR, which may not result in a reportable injury, but which do have the potential to cause significant harm.
- 4.3 Incident** An unplanned and uncontrolled event (or sequence of events) that may give rise to or gives rise to, injury / harm to the health of any person or causes damage to property or equipment. Includes accidents, fire, near miss events, occupational ill health, unsafe acts or conditions, dangerous occurrences, and physical violence / verbal aggression at work.
- 4.4 Investigator** The appropriate member of staff assigned to investigate an incident.
- 4.5 Major fire** Involves smoke, heat and flames causing property damage to multiple building fixtures or fittings;
- 4.6 Minor fire** Involves smoke, heat and flames, causing only localised damage to equipment and property;
- 4.7 Near miss fire** Involves only smoke without flames, which may or may not cause damage;
- 4.8 Near miss** An unplanned and uncontrolled event that had the potential to cause injury or damage but through good fortune did not;
- 4.9 Occupational ill health** A condition acquired in relation to a work activity. In relation to RIDDOR, an occupational disease or condition listed in the Regulations that has been confirmed by a medical practitioner;
- 4.10 SIRIS** The University of Strathclyde's online incident management system.
- 4.11 Unsafe acts** Non-compliances with a safe procedure which could lead to an incident.
- 4.12 Unsafe conditions** A hazardous physical condition or circumstance which could lead to an incident.

## 5. ROLES AND RESPONSIBILITIES

The [University OHS Standard for Roles, Responsibilities and Accountabilities](#) document defines the organisational arrangements necessary to implement the Occupational Health, Safety and Wellbeing Policy at each level of the organisation.

Specific roles, responsibilities and duties for incident management are detailed below:

### 5.1 University Court

University Court has the overall duty for ensuring the health and safety of all those who may be affected by the University activities, both on or off the premises.

Court Members have both an individual and a collective duty to seek assurances that lessons have been learnt following major incidents and significant near miss events and actions have been fully implemented.

### 5.2 University Compliance Officer

The UCO oversees safety, health and wellbeing management arrangements and performance in areas within their control and has delegated authority from the Principal for leading the University corporate Occupational Health and Safety Management System. In relation to incident management, the UCO is responsible for:

- Escalating any serious safety, health and wellbeing issues to the Principal and Vice Chancellor where there is need for clear direction and to oversee the investigation of major incidents and significant near miss events;
- Lead the University's IMT and support other executive, directorate and managerial roles to ensure that the University's emergency planning, business continuity, and fire safety arrangements are established, implemented, tested and maintained.

- Seek annual assurances from other Executive Officers and Professional Services Directors to confirm that lessons have been learnt following major incidents and significant near miss events and actions have been fully implemented.

### **5.3 Other Executive Officers**

In collaboration with the UCO, Executive Officers are responsible for performance monitoring of this Standard within their area of control including the University's significant partnerships, collaborations and wholly owned companies. They must ensure that departments are resourced such that this Standard is fully implemented.

In relation to incident management, Executive Officers are responsible for:

- Escalating any serious safety, health and wellbeing issues to the UCO where there is need for clear direction and provide appropriate assistance with the investigation of major incidents and significant near miss events;
- Providing assistance to the University's IMT in the event of a major incident, accident or significant near miss event, as required and support other executive, directorate and managerial roles to ensure that the University's emergency planning, business continuity, and fire safety arrangements are communicated established, implemented, tested and maintained;
- Monitor and review health and safety audit findings, learnings from major incidents, accidents and significant near miss events and emerging, ensuring sufficient resources are in place for HoDs/Directors of Professional Services to progress preventative and corrective actions to address non-conformances in a timely manner;
- Seek assurances from HoDs to confirm that lessons have been learnt following major incidents and significant near miss events and actions have been fully implemented.

### **5.4 Faculty / Directorate Health, Safety and Wellbeing Manager/Adviser (or equivalent)**

Are appointed by the Executive Officers to provide competent health and safety advice and support, within their area of responsibility, including incident management. They are expected to:

- Ensure all incidents and near miss events related to Faculty/Professional Services staff have been reported to the SHaW team and investigated timeously by the relevant HoD in conjunction with the DSC, and recommendations are implemented to prevent recurrence;
- In collaboration with Departmental Business Continuity Coordinators, develop and maintain the business continuity/emergency response plans and associated documents to ensure each Faculty/Professional Services Directorate is fully prepared to manage a major incident;
- Provide the Executive Officer with regular performance monitoring reports set against KPIs, audit findings, training data, escalation of significant incidents, benchmarking against other sector institutions;

### **5.5 Heads of Departments/Services/Schools/Directors of Professional Services**

Hold delegated authority for the health, safety and wellbeing of all those personnel who work within their area of responsibility.

In relation to incident management, Heads of Departments/Services/Schools/Directors of Professional Services must ensure that they:

- Promote the importance of reporting accidents, incidents, near miss events and cases of work related ill-health to staff and students, visitors etc.;
- Liaise with the Head of SHaW to oversee the timely investigation of departmental related incidents, near miss events and cases of work-related ill-health in order to comply with the requirements of RIDDOR and approve investigation reports;
- Provide assistance to the University's IMT in the event of a major incident or significant near miss events or as part of a test exercise as required;
- Monitor and review health and safety audit findings, learnings from major incidents, accidents and significant near misses and emerging trends, ensuring sufficient

resources are in place for Assistant Directors, Operational Managers and DSCs to progress preventative and corrective actions to address non-conformances in a timely manner;

- Seek assurances from Operational Managers and DSCs to confirm that lessons have been learnt following major incidents and significant near miss events and actions have been fully implemented;
- Provide updates to the Executive Deans on actions from inspections and audits and provide assurances that lessons have been learnt from inspections, incidents and significant near miss events.

## 5.6 Departmental Safety Coordinators

Provide a coordinating role within departments and act as the main point of contact for championing safety, health and wellbeing issues as delegated by the HoD. They have a lead role in incident management and investigation within their area of responsibility and where appointed are supported by a Deputy Departmental Safety Coordinator(s) and Area Safety Coordinator(s).

The DSC will:

- Ensure all incidents and near miss events related to departmental staff and students have been reported to the HoD and to the corporate SHaW team.
- As directed by the HoD, investigate incidents and near miss events and recommend corrective and preventative actions to the HoD to prevent recurrence;
- Ensure incident reports are populated with as much information as possible and as accurately as possible;
- Submit completed incident reports within the required timescale;
- Undertake investigations (with a degree of proportionality, dependent on the severity of the incident) and identify remedial actions (as appropriate);
- Complete the [SIRIS Incident Reporting and Investigation](#) training course.

## 5.7 Line Managers / Principal Investigators / Research Supervisors

Responsible on a day-to-day basis for ensuring that this Standard is effectively implemented within their area of responsibility and risks associated with activities undertaken are appropriately managed to prevent incidents. They must:

- Ensure all health and safety incidents and near miss events and cases of work-related ill health are reported to the HoD and DSC;
- Provide assistance to the HoD in the event of a major incident or significant near miss event as required;
- Participate in the investigation of reported incidents and significant near miss events within the work area they supervise;
- Adopt corrective and preventative actions to prevent a reoccurrence of reported incidents and significant near miss events within their area of responsibility;
- Complete the [SIRIS Incident Reporting and Investigation](#) training course where appropriate.

## 5.8 Safety, Health and Wellbeing

The University is required to provide competent health and safety assistance to support an effective OHS Management System. In relation to incident management SHaW will:

- Administer the University's incident reporting system;
- Support the Head of SHaW to investigate significant incidents and near miss events and cases of work-related ill-health to determine immediate, underlying and root causes;
- Provide advice and guidance to HoDs on how to investigate incidents and significant near miss events;
- Review submitted incident reports requesting further information, as appropriate;
- Carry out further investigation as deemed necessary;

- Submit reports on behalf of the Head of SHaW to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, and communicate this to the relevant department(s) involved;
- Communicate lessons learnt following safety incidents to HoDs and DSCs and any changes to relevant legal requirements;
- Provide regular summary reports to the UCO, to include an analyses of incidents, near miss events and occupational ill-health data;
- Provide training on incident reporting and investigation.

#### **5.9 All Staff, students, visitors,**

Within the scope of this Standard:

- Staff and Students must report all incidents, near miss events, work related ill-health and unsafe acts and conditions to their Academic Supervisor, Line Manager, DSC or other responsible person;
- Visitors must report all incidents, near miss events, work related ill-health and unsafe acts and conditions to a responsible person;
- The DSC must submit the report as soon as possible via the SIRIS incident reporting webform;
- Staff, Students and Visitors must assist in any investigation, as requested.

#### **5.10 Contractors and service providers**

Within the scope of this Standard, contractors and service providers are required to report any health and safety related incidents occurring on University of Strathclyde premises. They are also responsible for:

- Co-operating with any University of Strathclyde led investigation;
- Undertaking their own independent incident investigation;
- Where appropriate, forwarding on the incident investigation report to the relevant University appointed Project Manager.

#### **5.11 Third Parties**

Third parties are required to report any health and safety related incidents occurring on University of Strathclyde premises, such as common areas, or where the incident could have been a result of University activity or deficiencies in University buildings or facilities, or where the incident had potential to cause injury or ill health to others. They are also responsible for:

- Co-operating with any University of Strathclyde led investigation;
- Undertaking their own independent incident investigation;
- Where appropriate, forwarding on the incident investigation report to the relevant University appointed contact.

#### **5.12 The Health and Safety Executive**

The HSE is Britain's national regulator for workplace health and safety. RIDDOR requires employers, the self-employed and those in control of premises to report certain workplace incidents. RIDDOR reportable incidents are made to the HSE by SHaW. Following the submission of a RIDDOR reportable incident the HSE may attend the workplace. Their role is to:

- Carry out targeted inspections;
- Undertake incident investigations;
- Take enforcement actions and hold those who break the law to account.

#### **5.13 The Statutory Advisory Committee on Safety and Occupational Health**

SACSOH meets three times per year to monitor the implementation and operation of the University's Occupational Health, Safety and Wellbeing Policy and to ensure key workplace risks are identified and appropriately controlled. In relation to this Standard they will:

- Consider any findings following incident investigations including those undertaken by Trade Union representatives.

- Receive an annual report detailing the analysis of incidents occurring in the relevant reporting period.
- Receive any other incident data as requested.

#### 5.14 Faculty/Directorate Health, Safety and Wellbeing Committee

The Faculty/Directorate Safety, Health and Wellbeing Committee is expected to consider occupational safety, health and wellbeing risks in all key business decisions. In relation to this Standard they will monitor and review learnings from major incidents and significant near miss events and emerging trends.

#### 5.15 Departmental Health, Safety and Wellbeing Committees

The purpose of a Departmental Health, Safety and Wellbeing Committee is to assist the HoD in fulfilling their health and safety functions. In relation to this Standard they will monitor and review learnings from major incidents and significant near misses and emerging trends.

## 6. INCIDENT REPORTING

### 6.1 Why report

The University, as an employer, has a legal responsibility to:

- Have effective arrangements in place to manage Safety, Health and Wellbeing;
- Investigate the cause(s) (immediate, underlying and root causes) of incidents and significant near miss events;
- Ensure identified remedial action is taken which will reduce the risk of a recurrence and the frequency of incidents;
- Report [RIDDOR reportable incidents](#) to the relevant enforcing authorities.

### 6.2 What to report

All health, safety and wellbeing incidents must be reported. Incidents are categorised into the following categories:

- Accidents
- Fire
- Near Miss
- Occupational Ill Health
- Unsafe Acts
- Unsafe Conditions
- Violence / Aggression

### 6.3 Who can report

Anyone can report an incident, whether they are associated with the University of Strathclyde or not. Reports can be completed by someone involved in the incident, on behalf of someone else or as a witness to an incident. Reports should be completed and submitted with as much information as possible. Where an incident occurs in a hosting department, notification will be sent to both the DSC of the hosting department and the DSC (and / or other nominated member(s) of staff) of the reporting person's department.

Contractors and services providers should report the incident to the local responsible person e.g. the Departmental Supervising Officer or the DSC. The Departmental Supervising Officer or the DSC may assist the contractor or service provider in submitting the incident report or they may submit the report on their behalf.

### 6.4 How to report - SIRIS

All incidents, or suspected occupational ill-health, must be reported to the immediate academic supervisor, line manager, or DSC as soon as possible. This will enable a prompt response and also ensure that any necessary remedial action is taken.

SIRIS should be used to report any incident occurring either on University of Strathclyde premises or in work related incidents occurring off campus. Reports must be submitted by the [webform](#) which is accessible both on and off campus. Reports can be submitted via computer, tablet or mobile phone.

In the case of an emergency where an immediate response is required on campus Security Services should be called internally on X2222 or externally on 0141 548 2222. If off campus local emergency arrangements should be followed or the emergency services contacted on 999 (UK). In the event of a major incident, SHaW should also be notified directly internally on X2726 or externally on 0141 548 2726.

For further information see [Guidance Note – SIRIS – Reporting a Safety Related Incident](#).

## 6.5 Incidents reportable to the Health and Safety Executive

Certain types of injury incidents are reportable to the HSE under RIDDOR. Full details on RIDDOR can be found on the [HSE website](#).

**RIDDOR reports must only be made by SHaW. All RIDDOR reportable events are investigated by SHaW.**

Further information on RIDDOR can be found in the [Information Sheet RIDDOR Reporting](#).

## 6.6 Reporting and investigation of fatal accidents

### 6.6.1 Reporting a fatality

**On Campus:** A death occurring on campus should be reported directly to Security Services internally on X2222 or externally on 0141 548 2222.

**Off Campus:** A death of a student or member of staff occurring off campus should be reported via local emergency arrangements. Where a staff member has been notified of the death of a member of staff or a student off campus, they should record the contact details of the person reporting the death and their relationship to the person who has died.

The person receiving the report should then inform the Director of Human Resources (staff) or Director of Student Experience (students) immediately.

Where the reported death is work-related, the Head of SHaW should be informed immediately.

### 6.6.2 Investigating a fatality

Following the report of a death, the University will follow an incident response plan and the following investigations will be taken forward, as required:

- SHaW investigate into work-related causes and RIDDOR compliance; and
- Estates Services investigate into building fabric or other structural causes where this is a factor.

## 7. INCIDENT INVESTIGATION

Incident investigations are undertaken by trained and competent investigators using the [SIRIS Safety Incident system](#). The [SIRIS Safety Incident User Guide](#) provides detailed instructions on how to use SIRIS for the review of an incident and for the recording of a full investigation.

### 7.1 Information, instruction, and training

Those persons with management responsibility must provide suitable and sufficient resources and competent investigators.

[SIRIS Incident Reporting and Investigation](#) training is provided by SHaW. This online training course must be undertaken by staff who are responsible for incident investigation. The training is bookable via the online DAT booking system.

### 7.2 Consultation, participation and communication in incident investigation

The University is committed to its obligation to consult employees on matters that affect their health and safety. Departments/Faculties/Directorates are responsible for establishing, implementing and maintaining processes for consultation and participation of members of staff, and their representatives where applicable, to ensure the effective implementation of the OHS Health and Safety Policy.

A team approach to investigating incidents facilitates the involvement of appropriate members of staff and ensures that these people are able to consider the implications of incidents and identify and implement actions for improvement.



Further information on the consultation and participation of workers can be found in OHS Standard on Employee Consultation, Participation and Communications (coming soon).

### **7.3 Prioritising incident investigations**

All incidents should be investigated in a timely and proportionate manner however not all incidents require an in-depth full investigation.

When an incident is submitted online through SIRIS it becomes visible to the relevant DSC (and any other nominated member(s) of staff) and to SHaW. SHaW undertake an initial review and may contact the relevant DSC / department contact if required.

Most incidents will be managed locally within the department. This is the case for less critical incidents with no history of similar incidents where the facts and remedial actions are identified during the recording of the incident on SIRIS by the DSC (or other nominated member(s) of staff). This record is then reviewed by SHaW.

An assessment process is used to identify higher impact incidents (or incidents that may have had potential high impact) where additional controls, corrective and preventative actions are critical. These types of incidents will require a more thorough investigation or additional assistance/ competence.

All RIDDOR reportable incidents are subject to thorough investigation by SHaW (in collaboration with the relevant responsible persons). SHaW are responsible for assigning lead investigators from within the SHaW team, who are subsequently responsible for convening an investigation team.

### **7.4 Undertaking an incident investigation**

An investigation must begin as soon as possible after the incident is reported and the immediate medical needs (if any) of injured people have been met. The fundamental purpose of an incident investigation is to provide a tool for improving health and safety management. It is also to:

- Identify the immediate, underlying and root causes;
- Identify and implement preventative and corrective actions to prevent a recurrence;
- Reconsider existing risk assessments;
- Review the effectiveness of risk control measures;
- Identify tasks causing the greatest number of incidents;
- Ensure compliance with legal requirements for incident reporting, recording and investigation;
- Obtain details which might be needed if the incident later becomes subject to an insurance claim or legal action.

Once all investigation actions are complete the investigation is closed.

For further information on the investigation process see [Guidance Note on Undertaking an Incident Investigation](#).

### **7.5 Communication**

The outcome of incident investigations should be shared with appropriate members of staff, which may include those impacted by the incident, those allocated actions, and other interested parties where appropriate including senior management, safety representatives, contactors and other interested parties where relevant.

If the incident has the potential to recur or has wider learning value the lessons learned should be shared (whilst preserving confidential information) with other areas of the University.

## **8. INCIDENT MANAGEMENT REPORTS AND PERFORMANCE REVIEW**

Incidents and incident management should be discussed by Safety, Health and Wellbeing Committees and by senior management on a regular basis and as a standing agenda item.

Reports are configurable within SIRIS and are linked to permissions in relation to the structure of the University, and in this respect provide transparency through the organisation structure. For

further information on configuring reports in SIRIS please refer to the Report Builder Guide that is issued as part of the Incident Reporting and Investigation training.

Incident management reports can identify opportunities for improvement and should be used to inform the Departmental/Faculty Safety, Health and Wellbeing Risk Register and Action Plan. For further information please refer to the [Hazard Identification and Risk Management Standard](#). Where areas of significant concern are identified they should be raised as appropriate through Head of Department to Executive Officers.

### **8.1 Management reports**

Regular management reports for the purpose of various committees and management meetings (e.g. Management Meetings, Departmental and Faculty Safety, Health and Wellbeing Committees, SACSOH, Executive Team Meetings, Senate, Court) provide an overview of incidents within a given time period.

The type of data presented should be determined by local requirements but should as a minimum include, for any given reporting period:

- Number of incidents;
- Type of incident;
- Primary cause;
- Status of recommendations/actions arising;
- Number of RIDDOR reports.

Incidents should be reviewed regularly to ensure that they are being managed effectively, and to identify any opportunities for improvement. Management review of incidents should as a minimum include:

- Progress of overdue actions;
- Progress of major investigations;
- Review of major incidents and significant near misses since last management review;
- Trend analysis; and
- Audit reports.

### **8.2 Trend analysis**

Incident reports over a pre-defined rolling period should be analysed to monitor for trends. Trends in incident data can identify opportunities for improvement in occupational health and safety management. Trend analysis reports are valuable tools and should be discussed by senior management.

### **8.3 Audit**

SHaW conduct audits on a periodic basis as part of the review of the Occupational Health and Safety performance review. Audit reports are circulated to senior management and include a review of performance against the OHS Incident Reporting and Management Standard.

## **9. DOCUMENTATION AND RECORDS**

**9.1** The requirements to meet the standard for incident management are described in this document. Some aspects are covered in more detail in other documents which are referenced throughout.

**9.2** The requirement for managing documents relating to this Standard can be found in the [University's Guidance on the Retention of Occupational Health and Safety Records](#).

**9.3** Written (including electronic) records are to be maintained to comply with this Standard.

## **10. COMMUNICATION AND REPORTING**

**10.1** A copy of the latest Standard will be available on the SHaW website.

**10.2** Departments are expected to report on compliance with this Standard as part of regular OHS performance monitoring, further information can be obtained from SHaW.

## 11. TOOLS

### 11.1 Guidance Notes

- [Guidance Note on Undertaking an Incident Investigation](#)

### 11.2 Information Sheets

- [Information Sheet on RIDDOR Reporting](#)

### 11.3 Forms

- [SIRIS incident reporting webform](#)
- [SIRIS login](#)

## 12. COMPLIANCE

This standard aims to meet the requirements of:

- Health and Safety at Work etc. Act (1974).
- Management of Health and Safety at Work Regulations (1999).
- RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (2013)
- Fire (Scotland) Act 2005
- Fire Safety (Scotland) Regulations 2006

## 13. DOCUMENT HISTORY

A record of changes to this document are maintained in the SHaW Document Control Register.