

## **H&S Information Sheet #8**      **Accident Reporting & Investigation**

### **Reporting Accidents**

It is a **legal requirement** that a record is kept of any accident, however small, affecting staff, volunteers, customers or visitors to workplaces.

### **Accident Books**

The HSE *Accident Book B1 510* (ISBN 0 7176 2603 2) can be ordered from the HSE or purchased at most booksellers. This contains useful information on first aid and how to manage H&S information to help prevent accidents from happening in the first place.



Any organisation using its own accident book or accident forms needs to ensure that personal details and information on previous accidents cannot be seen by anyone making a new entry.

All workers, not just those who work at one site, should have access to an accident book.

*Oxfam requires every van used on stock collection schemes to carry accident forms, since stock collection staff tend to be area-based rather than attached to a single shop.*

### **Reporting to Management**

All accidents, however small, should also be reported to management. Personnel Departments or H&S Advisors will usually want to monitor accident statistics in order to analyse and learn from them. This is an important way of measuring H&S performance and assessing whether control measures are effective and in line with statutory requirements.

*The Shaw Trust shops use the HSE Accident book and send their H&S Department a photocopy of each accident report.*

*PDSA's Personnel Department receives the top copy of its triplicate accident report form. Details are entered on a database so that the number and type of accidents at each shop can be monitored.*

*British Heart Foundation uses a quadruplicate accident form. Its Personnel Department and Insurance Administrator each receive a copy, as does the relevant Area Manager.*

### **RIDDOR**

Under the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 1995 (RIDDOR) certain accidents, work-related diseases and dangerous occurrences have to be reported to government.

**To be reportable the accident must "arise out of, or be in connection with, work".**

A reportable accident, therefore, needs to relate to one or more of these:

- how the work is organised, supervised or performed
- the equipment or substances used (e.g. pricing guns, steamers, chemicals)
- the condition or maintenance of the premises (e.g. stairs, carpets, lighting)

If a customer has a heart attack or black-out in the shop there is no need to report it, even if the person is taken to hospital.

However, if a customer has a heart attack during an argument over a charity's policies, the incident may be reportable. If poor ventilation in the shop is the probable cause of a person fainting, and requiring hospital treatment, this may also be reportable.

Major or over-3-day injuries arising out of acts of violence at work would also be reportable.

## Safety Matters in Charity Retailing

The main factor determining whether RIDDOR is applicable is the severity of the injury. **Over-3-day injuries** are ones that prevent workers from doing their normal work for more than 3 consecutive days after the date of the accident. **Major injuries** are listed overleaf.

The type of person who is injured also determines whether the accident needs reporting. For instance, any accidents to members of the public, that require them to be taken from the site of the accident to a hospital, need to be reported.

Reportable accidents are summarised in the table below.

### Reportable Accidents

| Injured Person  | Reportable Event  |
|---|---|
| Employee at work (includes volunteers, trainees, work experience, New Deal)     | Death<br>Major injury<br>Over-3-day injury<br>Certain diseases arising out of work activities |
| Self-employed person at work on premises (e.g. stock collector, window cleaner) | Death<br>Major injury<br>Over-3-day injury  |
| Person not at work (e.g. member of the public)                                  | Death<br>Injury where a person is taken to hospital for treatment                             |

**Major Injuries** are defined as:

- fracture of the skull, spine, pelvis and any bone (but excluding fingers or toes)
- amputation of a hand or foot, or a finger, thumb or toe where the bone or a joint is completely severed
- loss of sight in, or penetrating injury or chemical or hot metal burn to, an eye
- injury requiring medical treatment or loss of consciousness due to electric shock
- loss of consciousness due to lack of oxygen
- acute illness or loss of consciousness caused by absorption of any substance

- acute illness believed to be the result of exposure to a pathogen or infected material
- any other injury resulting in a person being admitted to hospital for over 24 hours

**Dangerous Occurrences** include:

- the collapse, overturning or failure of a load bearing part of a lift or hoist
- the explosion, collapse or bursting of any closed vessel
- electrical short circuit or overload causing fire or explosion
- an explosion/fire resulting in the suspension of normal work for more than 24 hours
- the collapse or partial collapse of any scaffold over 5 metres high
- any unintended collapse of a building or structure under construction, alteration or demolition involving a fall of > 5 tonnes of material or of a wall or floor at a workplace
- bursting, explosion or collapse of a pipeline

**Reportable diseases** include:

- certain poisonings
- some skin diseases such as dermatitis
- infectious diseases such as hepatitis, tuberculosis, anthrax and tetanus

## Reporting Procedure

**Major injuries and dangerous occurrences** should be reported without delay by telephone, fax or via the Internet to the Incident Contact Centre (ICC).

(See page 4 for how to contact the ICC and also for the reporting procedure in Northern Ireland.)

The ICC will complete the official reporting form, F2508, and send the employer a copy so that any errors can be corrected and the form returned within 10 days of the incident.

**Over-3-day injuries** should be reported within 10 days of the accident, using form F2508. They can also be reported by telephone in which case the form will be sent by the ICC to the employer to check that the details are correct.

## Safety Matters in Charity Retailing

In cases where employees of another organisation (e.g. a shop fitter) suffer a major injury whilst at work, the person in control of the premises should report it on the day of the accident to the person's employer.

Failure to submit a report could incur a fine. If an organisation is found guilty in court for a breach of the law, then a fine of £5,000 may be levied for failure to report the incident. This fine would be additional to any that the court imposes for the original offence.

Employers should keep a record of any reportable injury, disease or dangerous occurrence for at least 3 years from the date of the incident. Copies of the report forms could be filed or details could be recorded on a computer or in a written log.

*Most charities require Shop or Depot Managers to telephone the details of a major incident on the day of the event either to their line manager or their Personnel/H&S Departments, who then telephone the ICC or local authority and complete and send off the official report.*

### EHO Investigations

RIDDOR reports are forwarded to the relevant local authority for investigation. Environmental Health Officers (EHOs) will pay particular attention to the causes of the majority of accidents and of the most serious injuries. For charity retailers this is likely to mean:

- Slips, Trips and Falls
- Manual Handling
- Workplace Transport

Slips, Trips and Falls are EHO's top priority. They account for about a third of all reportable accidents to employees and the majority of accidents to members of the public who are injured at places of work.

EHOs will concentrate on ensuring floors and stairs are in good condition and free from obstructions such as trailing cables, sacks, etc.

They will also look for manual handling assessments at shops and depots and for real examples of how injury risks have been reduced.

"Workplace transport" refers mainly to vehicles such as forklift trucks, but given the

amount of driving involved with stock collection, it may be advisable to consider the risks of injury to the persons involved in this work.

*The Princess Alice Hospice has used an external firm to train its van drivers in driving techniques.*

### Internal Investigation

Reactive monitoring, via the investigation of accidents and dangerous occurrences, is vital to ensuring effective H&S management.

Any incident that either has, or could have, caused some kind of loss to an organisation or its employees should be investigated to identify any underlying system failure.

The amount of effort put into the investigation should reflect the **potential seriousness** of the accident and **not** the level of injury or loss sustained.

**Research has shown that for every serious, disabling incident there are:**

- **10 that lead to minor injuries**
- **30 that have the potential to cause loss to an organisation**
- **600 near misses**

Careful study of near misses or minor injury accidents may highlight a potential for major accidents due to failures in management controls that can be prevented by appropriate remedial action.

It would normally be sufficient for a supervisor (e.g. Shop Manager) to investigate accidents resulting in minor injury or damage and that did not have the potential for greater harm. The supervisor would be expected to take suitable remedial action.

More serious accidents, including reportable ones under RIDDOR, would normally be investigated formally by a line manager (e.g. an Area or Operations Manager).

In some very serious cases it may be appropriate to involve a small team of people, including the local supervisor, employee

safety representative, a safety advisor and others as required.

It is highly likely that a number of factors will be identified as leading to a serious incident, all of which should be pursued to establish the underlying control failure. It is equally rare that one individual person can be identified as having caused the accident.

Lack of training, skill or suitability for the task are more likely to be the causes of human error than pure negligence or malice.

**An investigation should not seek to lay blame on an individual or group of people.**

The investigator should be thorough, persistent and open-minded in his approach. It is often useful to draw plans and sketches, take measurements and photographs of the scene and the surrounding area to provide a permanent record for future reference.

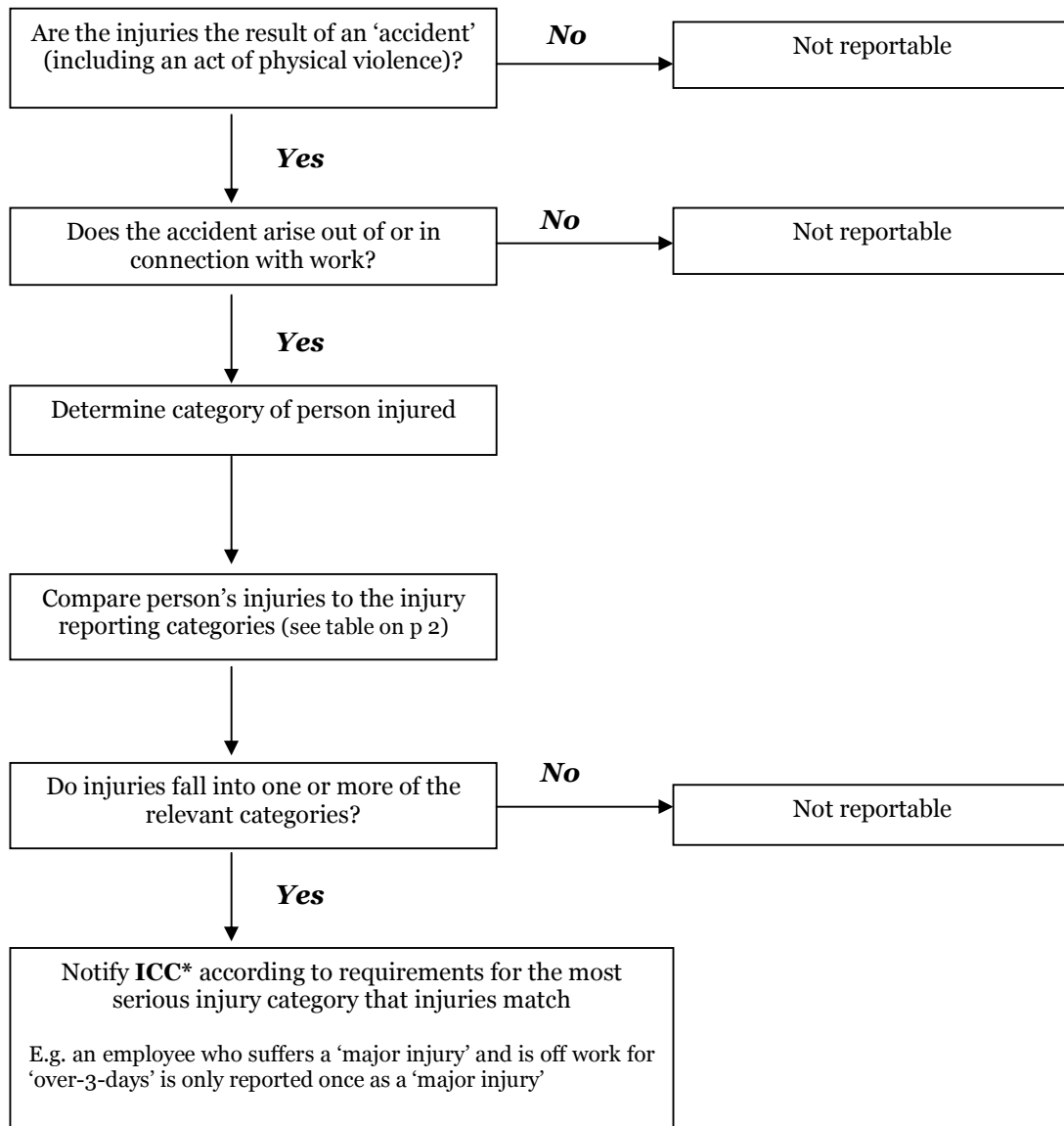
Investigation reports should be used to recommend action to prevent recurrences, to provide information for annual H&S reports, and for management reviews and audits of H&S systems and controls. If a claim is made, they may be required by insurance companies to assist in determining liability.

### Further Reading

*A guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.* HSE publication. ISBN 0 7176 2431 5

*RIDDOR (NI) 97.* Free booklet explaining the Regulations and reporting procedure in Northern Ireland. HSENI 00 02-C. Can be ordered via the HSENI helpline (tel: 0800 032 0121)

**IS THE ACCIDENT REPORTABLE?**



**\* For England, Scotland and Wales:**

Incident Contact Centre, Caerphilly Business Park, Caerphilly CF83 3GG  
Tel: 0845 300 9923 Fax: 0845 300 9924 Website: [www.riddor.gov.uk](http://www.riddor.gov.uk)

**\* For Northern Ireland:**

Notify the environmental health department of the relevant district council using forms NI2508 (for injuries and dangerous occurrences) and NI2508A (for diseases). The addresses, telephone numbers and sample forms are contained in the free booklet listed under Further Reading. For more information: Health and Safety Executive for Northern Ireland, 83 Ladas Drive, Belfast BT6 9FR  
Tel: 028 9024 3249 Fax: 028 9023 5383 Website: [www.hseni.gov.uk](http://www.hseni.gov.uk)