



REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES REGULATIONS (RIDDOR) POLICY (APPENDIX Q)

South Central Ambulance Service NHS Foundation Trust
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DOCUMENT INFORMATION

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Ratifying committee/group: Health, Safety and Risk Group.

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1. Introduction

- 1.1 The Trust recognises its responsibilities under the Health and Safety at Work Act 1974 and also its responsibilities under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 to report all 'notifiable incidents' arising out of or in connection with work within the specified timeframes to the Health and Safety Executive (HSE).
- 1.2 This policy sets out the Trust's arrangements regarding the reporting of 'notifiable incidents' in accordance with RIDDOR to the Health and Safety Executive (HSE).

2. Scope

- 2.1 This policy applies to all who work for or on behalf of the Trust. It also applies to anyone who is adversely affected by the activities of the Trust and as a result of this sustains an injury or disease that is reportable, under RIDDOR, to the Health and Safety Executive (HSE).

3. Equality statement

- 3.1 The Trust is committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, race, gender, religion/belief, sexual orientation, gender reassignment and pregnancy/maternity or any other basis not justified by law or relevant to the requirements of the post. The Trust will therefore take every possible step to ensure that this procedure is applied fairly to all employees regardless of the afore mentioned protected characteristics, whether full or part time or employed under a permanent or a fixed term contract or any other irrelevant factor.
- 3.2 By committing to a policy encouraging equality of opportunity and diversity, the Trust values differences between members of the community and within its existing workforce, and actively seeks to benefit from their differing skills, knowledge, and experiences in order to provide an exemplary healthcare service. The Trust is committed to promoting equality and diversity best practice both within the workforce and in any other area where it has influence.
- 3.3 Where there are barriers to understanding; for example, an employee has difficulty in reading or writing, or where English is not their first language, additional support will be put in place wherever necessary to ensure that the process to be followed is understood and that the employee is not disadvantaged at any stage in the procedure. Further information on the support available can be sought from the HR Department.

4. Aim

- 4.1 The aim of this policy is to:
 - Ensure that the Trust has framework whereby all 'notifiable incidents' are identified and reported to the HSE within the specified timeframes
 - Ensure staff and management are aware of the process by which incidents are reported
 - Inform all managers and staff within the Trust about the types of injuries, diseases and dangerous occurrences that are covered under the RIDDOR and

which must be reported to the HSE

- Inform all managers and staff within the Trust about the necessity and importance of reporting all incidents but in particular those incidents which are reportable to the HSE
- Ensure that 'notifiable incidents' are investigated
- Ensure that the Health, Safety and Risk Group receive a report on the number of 'notifiable incidents' which are reported to the HSE.

5. Roles and responsibilities

5.1 Trust Board

5.1.1 The Trust Board will ensure that there are suitable and sufficient arrangements and adequate resources for the effective implementation of this and other associated health and safety policies.

5.2 Chief Executive

5.2.1 The Chief Executive has overall accountability for ensuring that the Trust fulfils its legal responsibilities, and that the policy objectives are achieved, and that effective machinery is in place for the achievement of the policies concerned with health, safety, welfare and environmental protection.

5.2.2 He is also responsible for ensuring that:

- Trust policies are reviewed as appropriate in order to secure continuing compliance with existing policies, current legislation and any changes in the law
- the allocation of the resources necessary to maintain sound and efficient health and safety arrangements
- the effective implementation of this policy within the Trust.

5.3 Executive Directors

5.3.1 Executive Directors are responsible for the effective implementation of this policy within their directorates and for ensuring that there are adequate resources available to fulfil the requirements of this policy.

5.4 Managers and Supervisors

5.4.1 Managers and Supervisors are responsible for:

- advising their staff that they should report all incidents immediately or within 24 hours of the incident occurring
- bringing this policy to the attention of their staff
- informing the Risk Team if one of their staff is off work as a result of an incident at work and is likely to be off for over seven days, not including the day of the incident; and/or they anticipate one of the staff is going to be off work for over seven days as a result of an injury at work
- informing the Risk Team if one of their staff is unable to do their full range of duties for over seven days (not including the day of the incident) as a result of an incident at work or an injury sustained at work
- investigating any incidents reported by their staff; and in particular any incidents involving their staff which have been reported to the HSE as per RIDDOR

- working with other departments in the Trust to prevent a similar incident occurring;
- providing, upon request, a report to the Health, Safety and Risk Group on the investigation into any incidents involving their staff which have been reported to the HSE.

5.5 All staff

5.5.1 All staff are responsible for:

- taking reasonable care of their own health and safety and that of others and should not act in a way that puts themselves or others at risk
- reporting any incidents, particularly any 'notifiable incidents' immediately or within 24 hours using the Trust's Incident reporting system, Datix
- advising the Trust in the approved manner, on the first day of sick leave, that they are going to be off work.

5.6 The Risk Team

5.6.1 The Risk Team, and in particular the Health, Safety and Security Officer, are responsible for:

- identifying all 'notifiable incidents' which should be reported to the HSE
- reporting all 'notifiable incidents' to the HSE via the designated F2508 form
- informing all relevant managers that a 'notifiable incident' involving one of their staff has been reported to the HSE
- informing Occupational Health of the reports made to the HSE in accordance with RIDDOR
- assisting the manager, where appropriate, with the investigation into incidents reported to the HSE
- informing and inviting managers who have investigated 'notifiable incidents' to present their report to the Health, Safety and Risk Group
- providing either a monthly, bi-monthly and quarterly report on the numbers and type of 'notifiable incidents' that have been reported to the HSE to the following: Health, Safety and Risk Group, the Quality and Safety Committee and the Contract Quality Review Meeting
- liaising with the HSE in connection with any RIDDOR incident.

6. Definitions

6.1 A 'notifiable incident' is any incident, injury, disease or dangerous occurrence that has to be reported to the Health and Safety Executive in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.

7. Categories of incidents reportable to the Health and Safety Executive

7.1 Under RIDDOR, the Trust a duty to report five broad categories of incident arising 'out of or in connection with' work or work activities, these are:

- **Fatalities** (including when an employee dies as a result of occupational exposure to coronavirus, however, this would be reported as an occupational

exposure to a biological agent.)

- **Major injuries** such as certain physical injuries (e.g. breaking an arm/leg)
- Incidents which incapacitate an employee for **over seven days** (such as the spraining of an ankle and/or physical violence)
- **Diseases** (such as the following arising from work activities; occupational asthma, allergy to latex, dermatitis and occupational exposure to coronavirus).
- **Dangerous occurrences** (such as an electrical fault which causes a fire or explosion; or an incident which led to the release or escape of coronavirus (SARS-CoV-2)).

Each of these categories will be considered more fully below.

7.2 Duty to report fatalities

7.2.1 The Trust has a duty to report a fatality at work of:

- a Trust employee if it occurs whilst they are at work and occurs as a result of the work activities
- a self-employed person if it occurs whilst they are either working on Trust premises and/or on behalf of the Trust and occurs as a result of the work activities
- a member of the public if it occurs whilst they are on Trust premises and occurs as a result of a work activity.

7.2.2 All of these fatalities if they arise out of in connection with work or work activities must be reported to the HSE **immediately** by telephone and a report (F2508 form) completed and sent to the HSE.

7.2.3 The Trust's Risk Team will do this immediately once the fatality has been reported to them.

7.2.4 A fatality of a patient due to medical reasons is not reportable to the HSE.

7.3 Duty to report major injuries

7.3.1 The Trust has a duty, within 10 days of the incident occurring, to notify the HSE of the following types of major injuries:

- Fatality: if an employee is killed whilst at work (notify the HSE immediately)
- Fractures to limbs, other than fingers, thumbs or toes
- Amputation
- Dislocation of shoulder, hip, knee or spine
- Loss of sight (temporary or permanent)
- Chemical or hot metal burn to the eye or 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
- Any other injury leading to hypothermia, heat-induced illness or unconsciousness which requires resuscitation or 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 due to absorption of any substance by inhalation, ingestion or through the skin
- Acute illnesses requiring medical treatment due to exposure to a biological agent or its toxins or infected material.

7.4 Duty to report injuries to people not at work

7.4.1 The Trust has a duty to report to the HSE, within 10 days, any injury to a person not at work (member of the public/patient/patient's relative, carer, etc.,) if it arises out of or in connection with the work activities of the Trust and results in them being taken to hospital (irrespective of whether they receive treatment or not).

7.4.2 If a person who is not at work is injured on a Trust premises as a result of an accident arising out of or in connection with work and sustains a major injury listed above then this must be reported to the HSE.

7.5 Duty to report an 'over' seven day injury

7.5.1 The Trust has a duty to report to the HSE, within 15 days, any accidents at work (including an act of physical violence) which results in a Trust employee or a self-employed person (working at or for the Trust) going off work for over seven days (not including the day of the injury).

7.5.2 An 'over seven day injury' is one which is not major, but which results in the injured person being away from work or unable to do the full range of their normal duties for more than seven days (including any days they would not normally be expected to work, such as week-ends, rest days or holidays) but not counting the day of the injury.

7.5.3 Examples of 'over seven day injuries' include:

- A clinician suffers a back injury when lifting a patient and is incapacitated from work or unable to do the full range of their normal duties for 'over seven days' (not including the day of the injury)
- A receptionist trips over in the office and sprains his/her ankle and is incapacitated from work or unable to do the full range of their normal duties for 'over seven days' (not including the day of the injury)
- A clinician or non-clinician is assaulted by a patient and is incapacitated from work or unable to do the full range of their normal duties for 'over seven days' (not including the day of the injury) due to the injury sustained and the shock.

7.6 Duty to report work related diseases

7.6.1 If a Doctor or the Occupational Health Department notifies the Trust that a member of staff suffers from a work related disease that has been contracted at work or arising from work activities then the Trust has a duty to report this, within 10 days of receiving this information or the incident occurring, to the HSE.

7.6.2 Reportable Diseases include:

- Some skin diseases, such as occupational dermatitis
- Occupational asthma or respiratory sensitization
- Infections such as hepatitis, tuberculosis, legionellosis and tetanus

- Any other infection reliably attributable to work with biological agents or potentially infected material
- Other conditions, such as occupational cancer and certain musculoskeletal disorders.

7.6.3 Examples of Reportable Diseases include:

- A member of staff is diagnosed as having COVID-19 which is attributed to an occupational exposure to coronavirus.
- A clinician contracts Tuberculosis (TB) after attending to a patient with TB
- A display screen equipment user suffers from work-related upper limb disorder
- A clinician suffers dermatitis associated with wearing latex gloves
- A clinician becomes Hepatitis B positive after contamination with blood from an infected patient.

7.6.4 Examples of diseases which are not reportable:

- A clinician becomes colonised with Methicillin-resistant Staphylococcus Aureus (MRSA) after treating a patient infected with MRSA
- A clinician catches chicken pox after dealing with patients who have chicken pox where he/she has worked, but whose child also has chicken pox.

7.6.5 Types of reportable diseases consist of:

- Occupational exposure to coronavirus and subsequent diagnosis of having Covid-19
- Certain poisonings from acrylamide monomer; arsenic; benzene; beryllium; cadmium; carbon disulphide; diethylene dioxide; ethylene oxide; lead; manganese; mercury; methyl bromide; nitrochlorobenzene; oxides of nitrogen, phosphorus
- Some skin diseases such as occupational dermatitis due to work with glutaraldehyde; biocides, anti-bacterials, preservatives or disinfectants; organic solvents, anti-biotic or other pharmaceuticals and therapeutic agents
- Occupational dermatitis due to work with oxidising agents such as domestic bleach or reducing agents; soaps and detergents; and any other known irritants or sensitising agents, particularly chemicals bearing the warning 'may cause sensitisation by skin contact' or 'irritating to the skin'
- Skin cancer, chrome ulcer, oil folliculitis/acne
- Occupational asthma due to work with isocyanates, proteolytic enzymes, anti-biotics, glutaraldehyde
- Lung diseases including farmer's lung, pneumoconiosis, asbestosis, lung cancer, mesothelioma
- Infections such as leptospirosis, hepatitis, tuberculosis, anthrax, legionellosis and tetanus
- Other conditions such as: occupational cancer, certain musculoskeletal disorders, decompression illness and hand-arm vibration syndrome
- Inflammation, ulceration or malignant disease of the skin and/or bones due to work with ionising radiation
- Blood dyscrasia due to work with ionising radiation.

7.7 Infections

7.7.1 For the purposes of RIDDOR, an infection is the entry and multiplication of an infectious agent in the body causing a damaging reaction in the tissue.

7.7.2 The Trust would only need to report a case of infection listed above only when it is attributable to the work that a person does.

7.8 Duty to report dangerous occurrences

7.8.1 The Trust has a duty to report, within 10 days of them occurring the following dangerous occurrences:

- Failure of extended duration breathing apparatus (EDBA) to supply air to the wearer whilst in an irreplaceable atmosphere
- Failure of the extended duration breathing apparatus (EDBA) during testing immediately prior to or immediately after leaving an irrespirable environment
- Collapse, overturning of load bearing parts of lifts lifting equipment
- Explosion, collapse or bursting of any closed vessel or associated pipe work
- Electrical short circuit or overload causing fire or explosion
- Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of a material beyond a site boundary, injury caused by explosion
- Accidental release of a biological agent likely to cause human illness, including coronavirus and Covid-19
- Failure of industrial radiography or irradiation equipment to de-energise or return to its safe position after the intended exposure period
- 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
- A dangerous substance being conveyed by road is involved in a fire or released
- 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 or uncontrolled release in a building of:
 - o 100kg or more of a flammable liquid
 - o 10 kg or more of a flammable liquid above its boiling point
 - o 10 kg or more of a flammable gas
 - o 500kg of these substances if released into the open air.
- Accidental release of any substance which may damage health.

Please note, the above list is not exhaustive.

8. Timeframes for reporting incidents to the Health and Safety Executive

8.1 The time frames for the reporting of incidents to the Health and Safety Executive (HSE) are as follows:

- **Fatalities** arising out of or in connection with work have to be reported

immediately by telephone to the HSE and a report (F2508 form) must be completed and sent to them within 24 hours.

- All **major injuries** (with the exception of 'over seven day' injuries) and certain diseases and dangerous occurrences have to be reported to the HSE within 10 days.
- '**Over seven day**' injuries (not including the day of the injury) have to be reported to the HSE within 15 days.

8.2 As there is strict liability attached to these regulations, a failure to report to, or a late report to the Health and Safety Executive can result in the Trust being prosecuted in a criminal court of law.

9. Road Traffic Incidents

9.1 Road traffic incidents arising from the movement of a vehicle on a road are only reportable where either the injured person was engaged in, or a person was injured as a result of:

- Exposure of a substance being conveyed by a vehicle
- Vehicle loading and unloading activities but not picking up or dropping off passengers
- Construction, demolition, alteration, repair or maintenance activities on or alongside public roads
- An accident involving a train.

9.2 Although a road traffic incident may not be reportable under RIDDOR to the HSE, it would not prevent them from investigating the incident.

10. Work-related stress

10.1 Any reported incidents of work-related stress are not reportable to the HSE under RIDDOR because work-related stress is held to be psychological in nature and not physiological.

10.2 However, if an employee goes off work with stress as a result of a particular single incident and is experiencing post-traumatic stress disorder then this could be reportable. In such cases, the Manager of the individual who has gone off on sick leave as a result of such an incident would have to discuss this incident with the Risk Team.

11. Training

11.1 The Trust recognises the importance of training and education in increasing awareness of risk and safety issues. On Induction, all staff will receive information, instruction and training and in relation to health and safety, reporting incidents and 'notifiable incidents' under RIDDOR.

12. Equality and diversity

12.1 An initial screening equality and diversity impact assessment has been carried out on this policy and, as per appendix 3, is available on request.

13. Monitoring

- 13.1 The effectiveness of this policy will be monitored regularly by the Risk Team who will provide an annual report to the Health, Safety and Risk Group which will include information on:
- a) The number of notifiable incidents reported to the HSE every quarter or two months.
 - b) The number of notifiable incidents reported to the HSE within the designated timescales.
 - c) The findings of an audit on 10% of the notifiable incidents reported to the HSE in a financial year.

14. Consultation and review

- 14.1 A consultation exercise on the policy will be carried out with the stakeholders every three years, or less if there are any relevant changes to legislation or best practice.

15. Implementation (including raising awareness)

- 15.1 The policy will be implemented and communicated to managers and staff within the Trust via the weekly newsletter, Staff Matters. Emails will also be sent to senior managers and area managers asking them to bring the existence of the policy to their staff.

16. References

- Health and Safety at Work Etc. Act 1974
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.
- Management of Health and Safety at Work Regulations 1992 (Amended 1999).

17. Associated documentation

- 17.1 The Trust documentation associated with this policy is as follows:

- Health and Safety Policy & Procedures
- Adverse Incident Reporting and Investigation Policy
- Risk Management Strategy
- Management of Violence and Aggression Policy & Procedures.

18. Appendix 1: Review

- 18.1 This policy is regularly reviewed and updated with information in line with relevant national guidance and legislation. A full 'Review Table of Contents' is available on request.

19. Appendix 2: Responsibility

- 19.1 The responsibility for this policy is shared between various Policy Groups, Lead Director/Officers, Working Groups and Committee members.

19.2 A full list of all responsible parties can be made available upon request.

20. Appendix 3: Equality impact assessment - Screening

20.1 An initial screening equality impact assessment has been carried out and has identified that the policy does not have an adverse or detrimental impact on any of the proscribed equality groups as the policy is designed to protect all staff who carry out work for or on behalf of the Trust.

20.2 The screening element of the initial 'Equality Impact Assessment' is available on request.

21. Appendix 4: Equality impact assessment – Full assessment

21.1 Due to the outcome of the initial screening equality impact assessment, it has not been necessary to carry out a full equality impact assessment.

22. Appendix 5; Ratification

Policy Title: Reporting of Injuries, Diseases and Dangerous Occurrences Regulations Policy.

Author's Name and Job Title: John Dunn, Head of Risk and Security.

Review Deadline: July 2021.

Consultation From – To (dates): 29/4/21 to 20/5/21.

Comments Received? (Y/N): Y.

All Comments Incorporated? (Y/N): Y.

If No, please list comments not included along with reasons:

Equality Impact Assessment completed (date): 29/4/21.

Name of Accountable Group: Health, Safety and Risk Group.

Date of Submission for Ratification: 19/5/2021.

Template Policy Used (Y/N): Y

All Sections Completed (Y/N): Y

Monitoring Section Completed (Y/N): Y

Date of Ratification: 26/5/2021.

Date Policy is Active: June 2021.

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Signature of Accountable Group Chair (or Deputy):

Name of Accountable Group Chair (or Deputy): Chief Operating Officer.