Reporting of Injuries, Diseases & Dangerous Occurrences Regulations – RIDDOR

The reporting of accidents, ill health and dangerous occurrences is a legal requirement under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995. The regulations lay down the requirements concerning the reporting of work-related accidents, dangerous occurrences and diseases to the enforcing authorities (HSE in the University's case). The information enables the enforcing authorities to identify where and how risks arise and to investigate serious accidents.

This document describes the actions to be taken within the University to comply with RIDDOR, including the latest changes that came into force on 6 April 2012.

The scope of the reporting procedure includes injuries and occupational ill-health to persons on University property and to those in other locations engaged in activities related to the University. It applies to employees and non-employees, i.e. students, members of the public, visitors.

(Please note: reporting of serious incidents to contractors engaged on our premises is the responsibility of the contractor’s employer.)

If an accident occurs, please note that the first priority must be to render first aid, take remedial action to deal with injuries and render the situation safe.

Then, for certain serious accidents the Health & Safety Executive (HSE) must be notified immediately as an Inspector may wish to have the opportunity to visit the scene as soon as possible, before anything significant has been disturbed.

The University arrangements to deal with this are given below under ACTIONS.

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1. Summary of occurrences that need to be reported to the HSE

- **Death or major injury** of an employee (for a list of major injuries, see Appendix 1)
  (For employees this includes as a result of physical violence.) Safety Office must inform HSE immediately by telephone and in writing within 10 days.

- **Accidents resulting in incapacity of an employee to work for more than 7 consecutive days** (does not include the day of the incident itself but does include weekends and rest days). Incapacitation means that the worker is absent or is unable to do work that they would reasonably be expected to do as part of their normal work. Safety Office must inform HSE in writing within 15 days.

- **Death or injury to members of the public/persons not at work** (includes students) for injury, this includes where they are taken to hospital from the scene of the accident for treatment (University-related activity only). Safety Office must report to HSE within 15 days.

- **Dangerous occurrences** (for definition, see Appendix 2) Safety Office must inform HSE immediately by telephone and in writing within 10 days. **Certain specified work-related diseases** (for definition, see Appendix 3) Safety Office must notify HSE once confirmation of the diagnosis is received from a medical practitioner.

* Revised requirement in force from 6 April 2012

2. Actions to comply with RIDDOR

**Note:** Where immediate notification to the University Safety Office is specified - either telephone 13401 or email: bb-safety-office@exmail.nottingham.ac.uk.

- **For notifying SERIOUS ACCIDENTS:**
  i.e. Death, Major Injury (see list in Appendix 1) and Member of the Public (includes students) taken to hospital
  - The person on the spot shall ensure that the appropriate Head of the management unit (e.g. HOS/HOD), or in their absence a line manager of similar status, is informed together with the local Safety Officer.
  - A person on the spot shall immediately notify the University Safety Office, ext. 13401.
  - If there is no reply from the Safety Office then:
  - The Health & Safety Executive must be immediately telephoned directly (0115 - 9712800) giving necessary details of the incident.
  - The Safety Office must be informed as soon as possible. Any documents may be faxed directly to the Safety Office on 0115 9513399 or emailed to bb-safety-office@exmail.nottingham.ac.uk.
  - **Out of Hours procedure** (HSE has an out-of-hours duty officer for very serious incidents (work related death or serious incident causing public concern)
  - Normal immediate action of dealing with any injured persons must be taken, and any action to make the area safe;
The reporting procedures in 2 and 3 above shall be put into operation at the first opportunity during normal working hours.

Nothing should be disturbed until a preliminary investigation of the facts, backed up as appropriate by descriptions and/or photographs has been made by someone in authority in the School/Department or by the University Safety Officer or an HSE Inspector.

If in any doubt about whether an incident constitutes a major injury, contact the Safety Office immediately for advice. Notify the Safety Office immediately if an injured person has a suspected major injury such as a broken bone.

• **For notifying DANGEROUS OCCURRENCES:**
  Follow stages 1 - 5 above as for notification of Major Injuries.

  There are 21 categories of Dangerous Occurrences (see Appendix 2). These do not necessarily involve injury but have the potential of doing so. Those most likely to occur at the University are:

  o an uncontrolled release or escape of a potentially hazardous material;
  o an explosion or fire causing suspension of normal work for over 24 hours.

  Occurrences in these categories should always be notified immediately to the Safety Office.

• **For notifying OTHER ACCIDENTS involving absences of more than 7 days:**
  Immediate notification of the University Safety Office should be made on the first day of any absence following an accident. It is a legal requirement to notify the HSE within 15 days in writing of absences of more than 7 days. This notification will be made online by the Safety Office on HSE Form 2508.

• **For notifying REPORTABLE DISEASES:**
  Complete the standard on-line University report form in the usual way upon receiving written diagnosis from a doctor that an employee suffers from a notifiable disease. Appendix 3 contains an illustrative list of reportable diseases.

3. Specific reporting requirements for students and members of the public

Previous updates (1996) covered the two points below:

• Reportable injuries to members of the public or people not at work, i.e. students, contractors, visitors, members of the public.
• Such injuries are reportable to HSE if they arise out of or in connection with University activity or premises, they include:
  o deaths
  o any injuries which cause a person to be taken from the site of the accident to a hospital for treatment

Examples for guidance:
• A member of the public trips on defective marquee flooring at an Open Day and is taken to hospital for treatment - University related, therefore REPORTABLE

• A student faints during a lecture because of low blood pressure, taken to hospital for treatment - not University-related, therefore NOT reportable. Reporting of MAJOR injuries for such persons is not a separate category as serious injuries would fall under category ii) above.

• **Acts of Violence:** Accident is now defined to include 'acts of violence' if arising out of or in connection with work.
  - Work related act of violence: e.g. a supervisor is hit by an employee while giving an instruction to carry out a work-related task. If as a result, the supervisor dies, suffers a major injury or over-7-day physical injury, this **would** be reportable to HSE.
  - Not work related act of violence: e.g. *a technician in a laboratory hits another during an argument over a personal matter.* Any injuries suffered **would not** be reportable to HSE.

**4. University Recording of Incidents**

RIDDOR requires employers to keep a record of over-3-day injuries; this will be covered by our standard on-line incident reporting.

Please note that in **all** cases of work-related injury, ill-health or dangerous occurrence, whether reportable to HSE or not, an incident report must be completed on line at http://uiwwwliv01.nottingham.ac.uk/ARI/([see “Reporting Incidents” for further information](#)).
Appendix 1

Definition of major injury

Major injuries include:

1. Any fracture, other than to the fingers, thumbs or toes
2. Any amputation
3. Dislocation of the shoulder, hip, knee or spine.
4. Loss of sight (whether temporary or permanent).
5. A chemical or hot metal burn to the eye or any penetrating injury to the eye.
6. Any injury resulting from an electric shock or electrical burn (including any electrical burn caused by arcing or arcing products) leading to unconsciousness, resuscitation or admittance to hospital for more than 24 hours.
7. Any other injury leading to hypothermia, heat-induced illness, unconsciousness, resuscitation, or admittance to hospital for more than 24 hours.
8. Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent.
9. Acute illness requiring medical treatment
10. Loss of consciousness arising from absorption of any substance by inhalation or ingestion or through the skin.
11. 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.

(Further explanation/guidance on this list is available from the Safety Office)
Appendix 2

**Dangerous occurrences**

[For further explanation or guidance on the following list, please contact the Safety Office or refer to HSE publication L73: A Guide to the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 1995.]

1. Collapse, overturning or failure of load-bearing parts of lifts and lifting equipment.
2. Explosion, collapse or bursting of any closed vessel or associated pipe work
3. Failure of any freight container in any of its load-bearing parts
4. Plant or equipment coming into contact with overhead power lines
5. Electrical short circuit or overload causing fire or explosion
6. Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion
7. Accidental release of a biological agent likely to cause severe human illness
8. Failure of industrial radiography or irradiation equipment to de-energise or return to is safe position after the intended exposure period
9. Malfunction of breathing apparatus while in use or during testing immediately before use
10. Failure or endangering of diving equipment, trapping of a diver, an explosion near a diver, or an uncontrolled ascent
11. 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
12. Unintended collision of a train with any vehicle
13. Dangerous occurrence at a well (other than a water well)
14. Dangerous occurrence at a pipeline
15. Failure of any load-bearing fairground, or derailment or unintended collision of cars or trains
16. A road tanker carrying a dangerous substance overturns, suffers serious damage, catches fire or the substance is released
17. A dangerous substance being conveyed by road is involved in a fire or released
18. 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
19. Explosion or fire causing suspension of normal work for over 24 hours
20. Sudden, uncontrolled release in a building of: 100 kg or more of flammable liquid; 10 kg of flammable liquid above its boiling point
21. Accidental release of any substance which may damage health
Appendix 3

Reportable occupational diseases include

(For further explanation or guidance on the following list, please contact the Safety Office or refer to HSE publication L73: A Guide to the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 1995.)

1. Certain poisonings
2. Some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne
3. Lung disease including: occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma
4. Infections such as leptospirosis, hepatitis, tuberculosis, anthrax, legionellosis and tetanus
5. Other conditions such as: occupational cancer, certain musculoskeletal disorders, decompression illness and hand-arm vibration syndrome.
References:

2. HSE Guidance on Reporting Accidents and Incidents at Work, INDG453 (01/12)
3. www.hse.gov.uk/riddor