Health and Safety Guideline

HSG 5.1 Health, Safety and Wellbeing Event Notification and Investigation

1. Purpose

This document provides guidance on the requirements associated with responding, reporting and investigating health, safety and wellbeing events. An event includes hazards, near misses and incidents that occurs as a result of University activities and environments and can be physical, psychosocial or environmental.

2. Scope

This Guideline applies to all health, safety and wellbeing activities of staff, students, visitors (including volunteers and contractors), Council members, and other persons interacting with the University of Newcastle (workers); the operations of staff of University aligned Research Centres and controlled entities; and all activities conducted by or on behalf of the University of Newcastle on and outside of the University's campuses.

3. Guidelines

3.1. First response

If a person(s) is injured in an incident, immediate first response must be provided as follows:

- ensure the health and safety of yourself and others;
- seek medical assistance if required;
- make the area safe to prevent further damage or harm;
- make a quick assessment of the seriousness of the incident, particularly if there has been injury or damage to plant and equipment and/or the environment;
- secure the area by contacting Security and the Health, Safety and Wellbeing (HSW) Team to isolate equipment, lockout, or isolated a hazards;
- inform the leader or supervisor and verbally notify people (colleagues, contractors, visitors etc.) in the immediate area; and
- preserve all evidence, take photos if possible and commence collection of witness names and statements.

All health, safety and wellbeing hazards, near misses, incidents and injuries must be reported by workers to their leader or supervisor as soon as practicable after the incident occurs, and ideally within 24 hours.

The relevant leader or supervisor must notify the HSW Team as soon as practicable if a worker requires medical treatment. Where a serious incident has occurred, an ambulance must be called immediately by the first responding leader, supervisor, First Aid Officer or non-injured worker, who should also immediately inform Security Services so they can direct the ambulance to where the injured worker is on campus.

The relevant leader or supervisor must notify the HSW Team as soon as practicable for any event that may be of interest to the media. HSW Team will then notify Future Students Communication and Engagement to advise of event details and to coordinate any media enquiries.

Where other people are exposed to an immediate hazard as a result of an incident, steps must be taken as soon as possible by the leader or supervisor to remove workers and other persons from the affected area until the hazard is removed or controlled.

3.2. Medical treatment

First Aid Treatment should be rendered to the injured worker by the nearest available First Aid Officer or by the responding Security Officer. Further advice regarding University of Newcastle First Aid Officers is available in Guideline HSG 5.2: First Aid.

Where immediate medical treatment is required, arrangements should be made by the First Aid Officer, leader or supervisor, or the HSW Team, for prompt referral to the University Health Service or calling of an ambulance.

3.3. Recording an event in the University All Incident Management System (AIMS)

In the event of an incident or near miss, and once the situation has been made safe, the involved worker, relevant leader or supervisor, First Aid Officer, or other responsible person must enter the details of the incident into the University's All Incident Management System (AIMS).

Any situation that could cause harm, that is, a physical, psychosocial or environmental hazard, must also be reported in AIMS.

Workers who do not have access to AIMS must report through their supervisor, who must complete the AIMS report on their behalf.

Any person reporting a hazard or incident must:

- Ensure that any descriptive information:
    - Is factual and unemotive;
    - Does not include personal information, including names and other personal identification, in any descriptive fields other than those explicitly requested (e.g. personal details when reporting on behalf of someone else) or that are integral to the completeness of the report;
- Ensure incidents containing issues of a confidential nature (e.g. private medical issues, unacceptable behaviour) are listed as confidential when entered into AIMS; and
- Provide relevant supporting documentation and photographs if available.

It is the responsibility of the HSW Team to ensure that duplicate reports for the same incident are cancelled and the reporting person advised. Except for confidential reports, AIMS automatically assigns the affected person's supervisor or leader as the Responsible Person for managing the incident report in AIMS. The supervisor or leader can transfer the report to a more suitable person to manage the report at any time. AIMS events entered by a student will be automatically assigned to the WHS Team but will be transferred to the relevant College or Division for further action if required.

Automatic email notifications are sent from AIMS to the affected worker's supervisor or nominated Responsible Person, and the HSW Team when an event is reported in the system. A de-identified email notification is also sent to the relevant Executive member for the College or Division.

If the event is marked "confidential", it is automatically forwarded directly to the HSW Injury Management Advisor as the default Responsible Person, bypassing any other party, for triaging and transferring to the appropriate area for management.

The Person Responsible has 14 days after the report was submitted to enter a management plan, including corrective actions, if required. A reminder is emailed to the Person Responsible if a management plan is not entered. Unless a corrective action has been submitted within two weeks of the report submission, the event escalates to the manager of the Person Responsible.

The assigned Responsible Person or the HSW Team may invite relevant stakeholders to have view only access to any report, except for confidential reports. For confidential reports, the HSW Injury Management Advisor may grant additional access only upon the consent of the affected person.

3.4. Investigation

The inherent risk rating and nature of the event will determine the level of investigation required. Events are classified into three levels to determine the appropriate level of investigation response. With respect to psychosocial hazards, incidents and near misses, refer to KRA 2.11: Identifying and Managing Psychosocial Hazards in the Workplace.

Level 1 events (low and medium inherent risk rated events) are incidents of a minor nature, such as:

- injuries requiring first aid treatment only;
- injuries which require minor medical treatment but which are not a lost time injury nor ongoing medical treatemnt;
- identified hazards which do not present a serious risk of injury; and
- minor property damage.

Level 1 events do not require a formal investigation but must detail the actions taken in the AIMS management plan. The AIMS management plan is to be completed by the Responsible Person to:

- review the details of the event;
- assess the residual risk of the hazard; and
- identify and implement appropriate corrective actions.

More than one person's input is valuable in any event review. Other persons who may be asked by the supervisor to contribute to a Level 1 event review include members of a Health and Safety Committee, other area supervisors, workers from the injured worker's team, and members of the HSW Team.

Level 2 events are incidents that result in a lost time injury or significant medically treated injury and / or are high and extreme inherent risk rated events but do not involve a serious illness or injury or a dangerous occurrence. A Level 2 event may require an investigation led by the HSW Team or College safety personnel and may include relevant supervisors and subject matter experts as required. The ICAM investigation is recorded in AIMS. The investigation must include:

- collection of facts to include evidence related to people, environment, equipment, procedures, organisation contributing factors;
- timeline of events;
- determination of root causes;
- determination of corrective and preventative actions;
- record of findings and learnings;

- communication of findings;
- development of a corrective action plan and implementation of appropriate corrective actions.

The Associate Director Wellbeing, Health and Safety may require an additional investigation for a Level 2 serious events where the incident is of significant complexity, is notifiable to a Regulator (see Level 3), is in a specialist area, or has organisational wide relevance or consequence as requested through a Risk Committee or Executive Committee. The additional investigation will be led by a member of the HSW Team with appropriate training and experience or an external investigator, and recorded on the Serious Incident Investigation Report. See Appendix 1 for overview of the serious incident workflow.

Level 3 events are incidents that are notifiable to the applicable Regulator in accordance with their notifiable incident classifications.

For Level 3 and Level 2 serious events, an investigation will be led by a member of the HSW Team and which may include the leader or supervisor, and other appropriate personnel who can provide specialist input e.g. IFS, Insurance or external specialist. A Serious Incident Investigation Report will be completed and records kept in accordance with the University's Records and Information Management Policy and Guideline HSG 7.1: Health and Safety Records and Document Control.

In respect of a notifiable incident, the scene of the incident must be secured by Security Services and must not be disturbed unless actions are required to help or remove trapped or injured persons, to make the site safe, or the actions are directed or permitted by the HSW Team on confirmation of regulator advice.

The Associate Director Wellbeing, Health and Safety or HSW Team nominee will notify the applicable Regulator of a notifiable incident as required by the legislation and undertake an investigation in accordance with any directions provided by the Regulator.

The below table provides guidance for each risk level of an event including the timeframe to commence the investigation and maximum time for corrective action (task) closeout. The timeframe for corrective action (task) closeout may be amended by the Associate Director, Wellbeing, Health and Safety in consultation with the responsible leader and supervisor and based on risk considerations and the University risk appetite.

Event / Audit Level	Event Description	Investigation to commence	Corrective action plan / tasks created	Tasks finalised
Level 1	• Injuries requiring first aid treatment only • Injuries which require minor medical treatment but which are not lost time injuries or ongoing treatment. • Identified hazards which do not present a serious risk of injury • Events resulting in minor property damage • Low and medium residual risk rated events	As required	Within 14 business days	Within 6 months
Level 2	• Lost time injury or significant medically treated injury • High and extreme residual risk rated events but do not involve a serious illness or injury or a dangerous occurrence (notifiable incident)	Within 3 business days	Within 14 business days	Within 3 months
Level 3	• Events or dangerous occurrences that are notifiable to the Regulator in accordance with the notifiable incident legislative classifications	Within 1 business day	Within 14 business days	Within 1 month

3.5. Contributing factors

Contributing factors must be nominated from the categories of People, Environment, Equipment, Process or Organisation (PEEPO) as indicated in the AIMS Investigation tab. Contributing factors are to be determined from:

- Interviews with the people directly involved in the incident e.g. injured person; witnesses; leader and/or supervisor of the location;
- Inspection of the incident site;
- Use of photos, video footage and diagrams as required;
- Review of the sequence of events; and

- Review of relevant documentation e.g. training records, risk assessments, Standard Operating Procedures; hazard reports; previous incident reports; Health and Safety Committee minutes.

3.6. Root cause

Once possible contributing factors have been identified, the root cause(s) are to be identified using the ICAM “5 whys” methodology included in the Investigation section in AIMS.

Root causes are often due to one or more system failures and the process described will lead to determining the system failures which include:

- Inadequate plant/equipment/personal protective equipment;
- Inadequate procedures/instructions;
- Inadequate training;
- Inadequate management/supervision;
- Inappropriate or inadequate work environment;
- Inadequate management of hazards and risks;
- Inappropriate actions and/or behaviour by an individual or team;
- Inadequate management system;
- Inadequate contractor management.

3.7. Corrective and preventative actions

Once the root causes have been identified appropriate corrective actions can be determined. Corrective actions should:

- Control the hazard to an acceptable level;
- Not introduce a new hazard;
- Consider the "hierarchy of control” in structuring appropriate risk reduction activities.

The hierarchy of controls addresses the preferred methods for eliminating or minimising a hazard:

- Elimination: removing the hazard altogether e.g. by finding a different way of doing a task;
- Substitution: introducing a less hazardous process or substance;
- Engineering: introducing physical protection to separate the hazard from persons or to contain the hazard, or to modify plant and equipment;
- Administrative: procedures and processes such as training, risk assessments, Standard Operating Procedures and safety meetings;

- Personal Protective Equipment (PPE): e.g. safety eye wear, hearing protection, safety footwear, safety gloves, protective overalls, the last line of defence.

Further information on the hierarchy of control is contained in the Guideline HSG 3.1: Health and Safety Risk Management.

3.8. Communication of findings

Once completed, the investigation report for Level 2 serious and Level 3 incidents is to be distributed to the Head of School or Director and the HSW Team. A summary report is also to be tabled at the relevant Health and Safety Committee, and the University Health and Safety Committee, for discussion and review of the corrective actions.

Executive Committee and Council are advised of notifiable and serious incidents in the Quarterly WHS Reports.

The Associate Director Wellbeing, Health and Safety will determine if a Health, Safety and Wellbeing Alert or other communication to the University community is relevant to impart learnings or provide education regarding a particular hazard or incident that has organisation-wide application or relevance.

3.9. Monitoring the effectiveness of controls

An important part of the process of investigating hazard reports, incidents or near misses is to ensure that the action(s) put in place to control the hazards or risks are effective and maintained. Leaders and supervisors are to utilise safety walks and talks, observations, workplace inspections and HSMS self-assessments to check that corrective actions and risk controls have been maintained and are effective in reducing the likelihood or consequence of the risks identified in the investigation.

In particular, the HSW Team and local Health and Safety Committees must periodically review the control effectiveness of actions, following any serious incident or the identification of high-risk activities.

4. Definitions

In the context of the Health and Safety Management System Framework:

All Incident Management System (AIMS)	The University's online incident and hazard reporting system.

Dangerous Occurrence	An event occurring in the course of work that exposes a worker or any other person to a serious risk to a person's health or safety emanating from an immediate or imminent exposure to: • an uncontrolled escape, spillage or leakage of a substance; • an uncontrolled implosion, explosion or fire; • an uncontrolled escape of gas or steam; • an uncontrolled escape of a pressurised substance; • electric shock; • the fall or release from a height of any plant, substance or thing; • the entrapment of a person in a confined space; • the entrapment of a person in machinery; • the collapse or partial collapse of a structure; or • the collapse or failure of an excavation or of any shoring supporting an excavation.
Executive Committee	Consisting of the Vice-Chancellor, the Deputy Vice-Chancellors, the Pro Vice-Chancellors, the Chief Operating Officer, Chief People and Culture Officer and the Chief Financial Officer, the University Secretary and the President of Academic Senate.
First Aid Officer	A person who has been appointed as a first aid officer and who • holds a current first aid certificate or occupational first aid certificate issued after successfully completing a SafeWork NSW approved first aid course, or • is qualified as a Level 3 or greater NSW ambulance officer, or • is qualified a medical practitioner, or is a registered nurse.
First Aid Treatment	A single treatment and subsequent observation of minor injuries such as scratches, cuts, burns, splinters, and strains. This includes an incident that requires medical assessment to determine if an injury has occurred where the assessment determines that no treatment is required, and the person returns to their normal duties without modifications.
Hazard	A situation, condition, or event, including a person's behaviour, that exposes a worker to a risk to their health or safety during the course of work in a workplace, that has the potential to cause injury, illness or even death or to damage buildings, plant or equipment.
Incident	An unplanned event that causes, or has the potential to cause, illness or injury to a worker or damage to building, plant or equipment.
Leader / Supervisor	Any member of the University who is responsible for supervising staff and/or undergraduate or postgraduate students and/or for leading research projects.
Lost Time Injury (LTI)	An incident resulting in time off work of one day/shift or more after the day in which the incident occurred, permanent disability or a fatality.
Medical Treatment	Medical treatment beyond first aid treatment provided by medical practitioner or other qualified medical personnel.
Near Miss	An unplanned incident which did not result in an injury or illness to a worker or anyone else on site but had the potential to cause harm.

Notifiable Incident	An incident which is notifiable to a regulator as defined by the relevant legislation. These including but are not limited to SafeWork NSW, Environmental Protection Authority, Office of Gene Technology Regulator. In the case of the safety regulator, this involves a dangerous occurrence or a serious injury or illness or death of a person.
Responsible Person	The individual identified in the AIMS report as the person responsible for assessing and developing the management plan. Usually the direct supervisor or relevant leader.
Serious Incident	Is any work-related fatality or serious injury or illness and may involve a worker, contractor or member of the public. It may include any injury or condition that requires immediate professional medical treatment and admission to hospital as an in-patient.
Worker	Includes an employee, conjoint, student on work experience, contractor, sub-contractor, and volunteer. A person is a worker if the person carries out work in any capacity for the University or another person conducting a business or undertaking, including work as: (a) an employee, or (b) a contractor or subcontractor, or (c) an employee of a contractor or subcontractor, or (d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking, or (e) an outworker, or (f) an apprentice or trainee, or (g) a student gaining work experience, or (h) a volunteer, or (i) a person of a prescribed class.

5. Responsibilities

A comprehensive list of health, safety and wellbeing responsibilities is provided in Guideline HSG 1.2: Roles and Responsibilities.

6. References & Related Documents

The following documentation is referenced in, or applicable to this Guideline:

HSG 1.2: Roles and Responsibilities

HSG 3.1: Health and Safety Risk Management

HSG 5.2: First Aid

HSG 7.1: Health and Safety Records and Document Control

Serious Incident Investigation Report (FRM-EL05.01)

Health, Safety and Wellbeing Alert (FRM-EL05.07)

University of Newcastle Records and Information Management Policy

7. Amendment History

Version	Date of Issue	Approval	Section(s) Modified	Details of Amendment
1, 2, 3, 4	December 2018	Manager Health and Safety	-	Original versions with latest amendment for HSG 7.1 Incident Notification and Investigation
5	July 2023	CPCO	All	1. Renamed and renumbered from HSG 7.1 to HSG 5.1 Health, Safety and Wellbeing Event Notification and Investigation 2. Updated content in all sections including new requirements for Serious Incidents and template for Alerts 3. Added new/renamed Related Documents 4. Added Amendment History 5. Amended document control header and footer

8. Appendices

Appendix 1 Serious Incident Workflow

Appendix 1 – Serious Incident Workflow