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# **RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) Procedure**

**Ref: HS-0001-018-v2**

**Status: Approved**

**Document type: Procedure**

**Overarching policy: [Health and Safety Policy](#)**

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## 1 Introduction

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The Trust has a legal obligation to report certain categories of incidents to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). By following this procedure responsible persons will ensure that RIDDOR reportable incidents are dealt with in a timely and effective manner to ensure compliance.

This procedure links to Our Journey To Change as outlined within the Health and Safety Policy.

*Note:*

*This procedure does not cover arrangements for Incident Reporting in the Trust. This is set out in the [Incident Reporting and Serious Incident Review Policy](#).*

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## 2 Purpose

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Following this policy will help the Trust to comply with its legal obligations:

- Health and Safety at Work etc. Act 1974
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

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## 3 Who this procedure applies to

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This procedure applies to all bank, locum, permanent, fixed term contract employees (including apprentices) who hold a contract of employment or are engaged with the Trust, and seconded (including students), volunteers, non-Executive Directors, Governors, and those undertaking research work within TEWV Trust. It also applies to external contractors, agency workers, including those within the Gig economy, limb workers, those on honorary contracts, those on work experience and other workers who are assigned to TEWV Trust.

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## 4 Related documents

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This procedure describes what you need to do to discharge duties under the Trust Health and Safety Policy.

This procedure also refers to:-

- ✓ Incident Reporting and Serious Incident Review Policy

## 5 Procedure

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Executive Directors and Senior Managers need to:

- Ensure that they, their operational managers, and employees are familiar with this policy and the Trust Incident Reporting and Serious Incident Review Policy.
- Ensure that all notifications of RIDDOR reportable incidents have formally been notified to the Health, Safety and Security Team to enable timely and accurate reporting to the Health and Safety Executive (HSE).
- Discuss and review RIDDOR incidents at appropriate meetings.

Managers need to:

- Ensure incidents are reported in their area of responsibility as per the Trust Incident Reporting and Serious Incident Review Policy.
- Notify the Health, Safety and Security Team of all incidents which result in an over 3-day incapacitation of a worker.
- Notify the Health, Safety and Security Team of any RIDDOR Reportable incidents (as described within this Procedure) within their area of responsibility, this includes incidents to staff, temporary staff, students, visitors, contractors, patients etc.
- Provide information requested by the Health, Safety and Security Team for investigation purposes.
- Participate in a review or investigation of the incident with the Health, Safety and Security Team.
- Identify any lessons learnt as part of the incident review.
- Implement any identified actions from subsequent RIDDOR reviews and investigations.
- Share any lessons learnt and actions with Senior Managers.

Staff need to:

- Report any incidents immediately or within 24 hours using the Trust's Incident reporting system.
- Advise the Trust in the approved manner, on the first day of sick leave, that they are going to be off work.

The Health, Safety and Security Team need to:

- Keep a record of all over 3-day incapacitations of workers.
- Report all RIDDOR incidents to the HSE.
- Carry out reviews and investigations for all RIDDOR incidents.
- Identify any lessons learnt and actions from RIDDOR incidents.
- Compile and distribute the CEO's Reportable Issues log, detailing RIDDOR incidents.
- Report RIDDOR incidents at the bi-monthly Health, Safety, Security and Fire Group.

The Infection Prevention and Control Team need to:

- Notify the Health, Safety and Security Team of any inoculation incidents that involve a blood borne virus.

## 5.1 RIDDOR Definitions

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A RIDDOR reportable incident is when:

- There has been an **accident** which caused the injury.
- The accident was **work-related**.
- The injury is of a type which is **reportable**.

### 5.1.1 What is an 'accident'?

As defined on the HSE Website:

*"In relation to RIDDOR, an accident is a separate, identifiable, unintended incident, which causes physical injury. This specifically includes acts of non-consensual violence to people at work."*  
HSE.gov.uk

### 5.1.2 What is meant by 'work-related'?

RIDDOR only requires the Trust to report accidents if they happen 'out of or in connection with work'.

### 5.1.3 What are 'reportable' injuries?

The following injuries are reportable under RIDDOR when they are as a result of a work-related accident:

- The death of any person.
- Specified Injuries to workers.
- Injuries to workers which result in their incapacitation for more than 7 days.
- Injuries to non-workers which result in them being taken directly to hospital for treatment, or specified injuries to non-workers which occur on hospital premises.

#### 5.1.4 Specified injuries to workers

Specified injuries to workers are:

- Fractures, other than to fingers, thumbs, and toes.
- Amputation of an arm, hand, finger, thumb, leg, foot, or toe.
- Any injury likely to lead to permanent loss of sight or reduction in sight in one or both eyes.
- Any crush injury to the head or torso, causing damage to the brain or internal organs.
- Any burn injury (including scalding) which:
  - Covers more than 10% of the whole body's total surface area.
  - Causes significant damage to the eyes, respiratory system, or other vital organs.
  - Where the eyes, respiratory system or other vital organs are significantly harmed as a consequence of a burn, this is a reportable injury irrespective of the surface area covered by that burn. Damage caused by smoke inhalation is not included in this definition.
- Any degree of scalping requiring hospital treatment.
- Any loss of consciousness caused by head injury or asphyxia.
- Any other injury arising from working in an enclosed space.

#### 5.1.5 Occupational diseases

*“A reportable disease must be diagnosed by a doctor. Diagnosis includes identifying any new symptoms, or any significant worsening of existing symptoms. For employees, they need to provide the diagnosis in writing to their employer.” HSE.gov.uk*

RIDDOR reportable diseases are:

- **Carpal Tunnel Syndrome:** where the person's work involves regular use of percussive or vibrating tools.
- **Cramp of the hand or forearm:** where the person's work involves prolonged periods of repetitive movement of the fingers, hand, or arm.
- **Occupational dermatitis:** where the person's work involves significant or regular exposure to a known skin sensitiser or irritant.
- **Hand Arm Vibration Syndrome:** where the person's work involves regular use of percussive or vibrating tools, or holding materials subject to percussive processes, or processes causing vibration.
- **Occupational asthma:** where the person's work involves significant or regular exposure to a known respiratory sensitiser.
- **Tendonitis or tenosynovitis:** In the hand or forearm, where the person's work is physically demanding and involves frequent, repetitive movements.

### 5.1.6 Exposure to carcinogens, mutagens, and biological agents

RIDDOR requires the reporting of cases of occupational cancer, and any disease caused by an occupational exposure to a biological agent.

Biological agents include:

- Transmission of blood borne viruses, for example those contracted following a needlestick incident.
- Legionnaire's disease.

A RIDDOR report should be made whenever there is reasonable evidence suggesting that an occupational exposure was the likely cause of the disease.

### 5.1.7 Dangerous occurrences

Dangerous occurrences apply to all workplaces and include incidents involving, for example:

- Lifting equipment.
- Pressure systems.
- Overhead electric lines.
- Electrical incidents causing explosion or fire.
- Explosions.
- Biological agents.
- Radiation generators and radiography.
- Breathing apparatus.
- Collapse of scaffolding.

### 5.1.8 Non-fatal accidents to non-workers

Accidents to members of the public or others who are not at work must be RIDDOR reported if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury.

If the accident occurred at a hospital, the report only needs to be made if the injury is a 'specified injury' as stated in [section 5.1.4](#).

Refer to the flow charts within [Appendix 1](#)

### 5.1.9 COVID-19

COVID-19 may be reportable under RIDDOR as either a dangerous occurrence, a case of disease or a death due to exposure to a biological agent. Advice should be sought from the Health and Safety Team.

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### 5.1.10 Incidents that do not fall under RIDDOR Regulations

The following examples are not considered to be reportable under RIDDOR:

- Acts of deliberate self-harm including suicide. Refer to [Appendix 1](#) flowcharts.
- Breaches of confidentiality.
- AWOL's.
- Occupational Stress.
- A patient or visitor is injured by an act of physical violence from another patient. Refer to [Appendix 1](#) flowcharts.
- A patient receives a healthcare-associated infection while receiving treatment in hospital. Refer to [Appendix 1](#) flowcharts.
- A patient admitted to hospital for treatment contracts Legionnaires' disease in hospital. Refer to [Appendix 1](#) flowcharts.

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## 5.2 RIDDOR Reporting Time Periods

For most types of incidents, including:

- Accidents resulting in the death of any person.
- Accidents resulting in specified injuries to workers.
- Non-fatal accidents requiring hospital treatment to non-workers.
- Dangerous occurrences.

The HSE must be notified by the Health, Safety and Security Team within 10 days of the incident.

For accidents resulting in an incapacitation of a worker for over-seven days, the Health, Safety and Security Team must notify the HSE within 15 days of the incident.

Cases of occupational disease, including those associated with exposure to carcinogens, mutagens, or biological agents, must be reported by the Health, Safety and Security Team to the HSE as soon as a diagnosis is known.

## 6 Definitions

Term	Definition
RIDDOR	<ul style="list-style-type: none"> <li>Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.</li> </ul>
HSE	<ul style="list-style-type: none"> <li>Health and Safety Executive</li> </ul>

## 7 How this procedure will be implemented

<ul style="list-style-type: none"> <li>This procedure will be published on the Trust's intranet.</li> </ul>
<ul style="list-style-type: none"> <li>Line managers will disseminate this procedure to all Trust employees through a line management briefing.</li> </ul>
<ul style="list-style-type: none"> <li>Line managers to ensure that the appropriate staff are booked on to the courses identified in the below training needs analysis and the examination (where applicable) is successfully completed.</li> </ul>

### 7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
Supervisors and Managers	346 RIDDOR online digital learning – available on ESR	15 minutes	3 yearly

## 8 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Compliance with the legal requirements outlined within the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.	<p><b>Frequency:</b> Monthly</p> <p><b>Method:</b> Interrogation of InPhase incidents reported as falling under the RIDDOR regulations and the production of an exception report.</p> <p><b>Responsible:</b> Undertaken by members of the Health, Safety and Security Team as directed by the Head of Health, Safety and Security.</p>	Implementation and monitoring are directed by the Executive Risk Group and devolved to the HSSF Group.

## 9 References

- ✓ Health & Safety at Work Act 1974
- ✓ Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- ✓ HSE Document: HSIS1 Reporting injuries, diseases and dangerous occurrences in health and social care Guidance for employers 2013 (rev 4)

## 10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	14 January 2025
Next review date	14 January 2028
This document replaces	HS-0001-018-v1
This document was approved by	EFM DMT
This document was approved	19 December 2024
This document was approved by	Health, Safety, Security and Fire Group
This document was approved	14 January 2025
An equality analysis was completed on this policy on	07 October 2024
Document type	Public

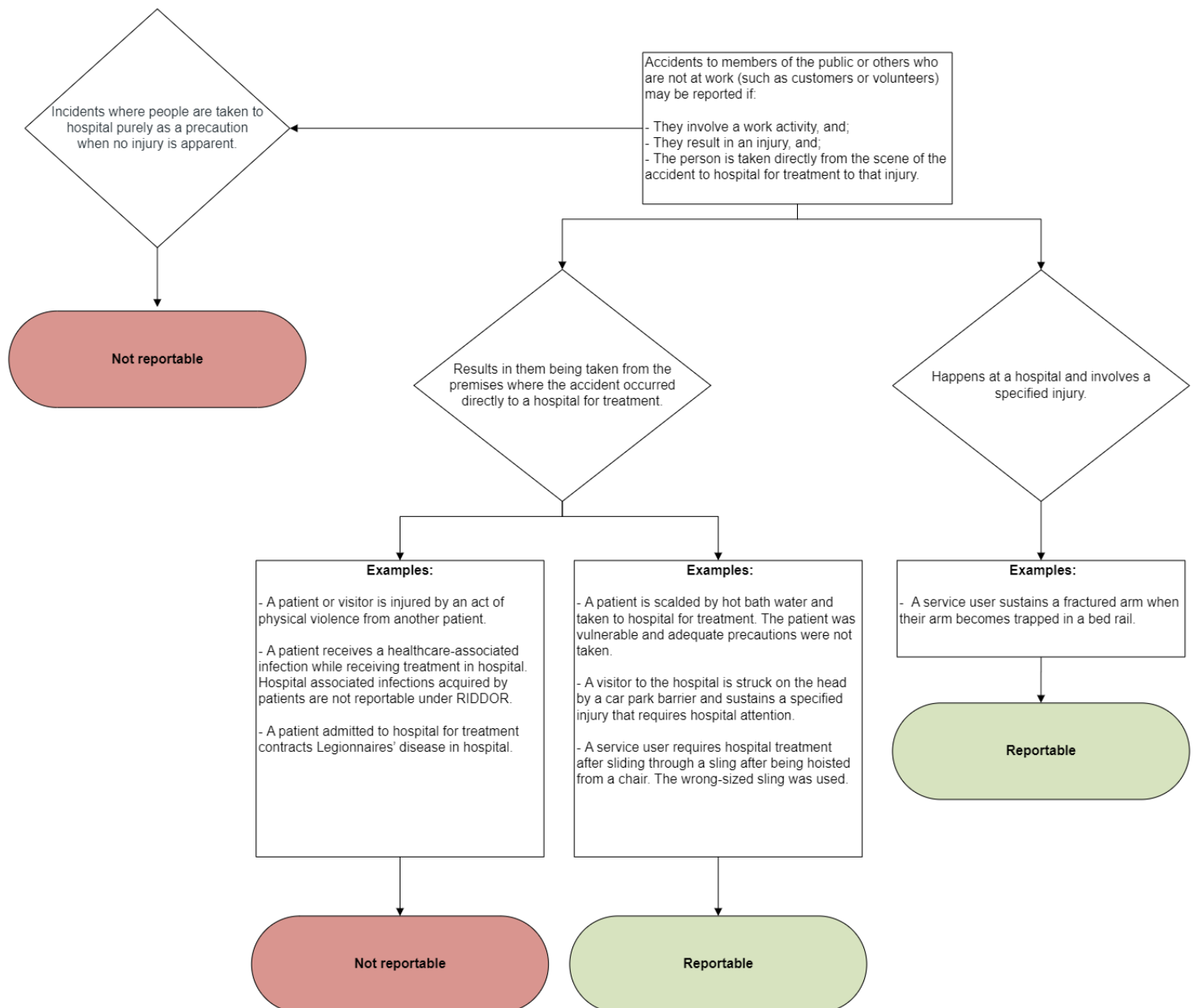
FOI Clause (Private documents only)	n/a

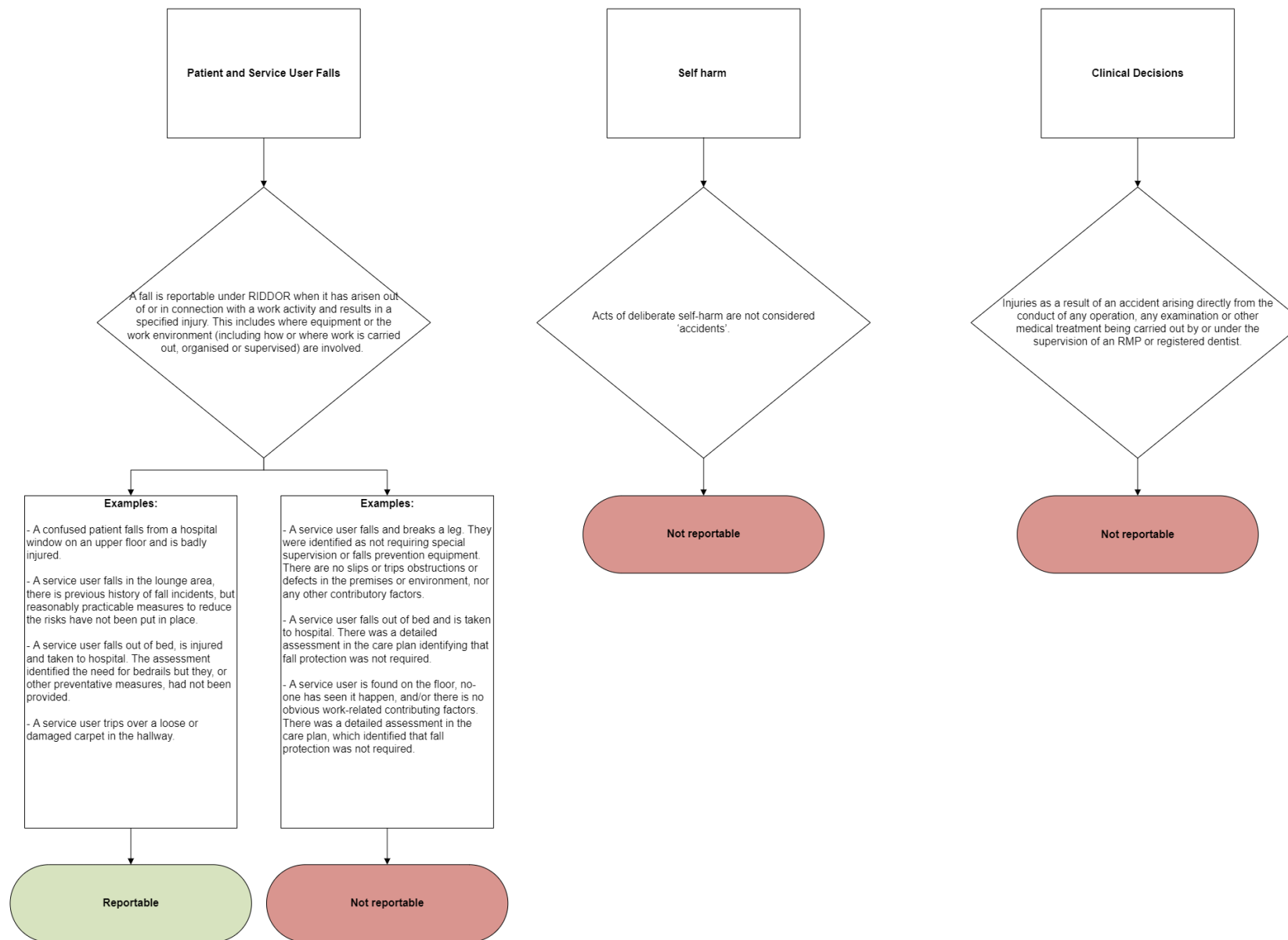
## Change record

Version	Date	Amendment details	Status
v1	20 Jan 2022	New document	Withdrawn
v2	14 Jan 2025	Formal review: Section 5 updated to include further information and clarity on duties. Appendix 1 added – non-fatal accidents to non-workers RIDDOR flowcharts	Published

## Appendix 1 – Non-Fatal Accidents to Non-Workers RIDDOR Flowcharts

The following two flowcharts have been compiled using information provided within the HSE's HSIS1 Reporting injuries, diseases and dangerous occurrences in health and social care Guidance for employer's document.





## Appendix 2 - Equality Analysis Screening Form

Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Health & Safety, EFM
Title	RIDDOR Procedure
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	<p>The objectives of this procedure are to:</p> <ul style="list-style-type: none"> <li>• Comply at all times with the Health and Safety at Work etc. Act 1974 etc. and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.</li> <li>• Manage health and safety effectively to improve the quality of patient care, visitors and working conditions of staff and others.</li> </ul>
Start date of Equality Analysis Screening	30 September 2024
End date of Equality Analysis Screening	07 October 2024

Section 2	Impacts
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All staff, patients, contractors and visitors and the general community.
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups?	<ul style="list-style-type: none"> <li>• <b>Race</b> (including Gypsy and Traveller) <b>NO</b></li> <li>• <b>Disability</b> (includes physical, learning, mental health, sensory and medical disabilities) <b>NO</b></li> <li>• <b>Sex</b> (Men, women and gender neutral etc.) <b>NO</b></li> <li>• <b>Gender reassignment</b> (Transgender and gender identity) <b>NO</b></li> <li>• <b>Sexual Orientation</b> (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) <b>NO</b></li> <li>• <b>Age</b> (includes, young people, older people – people of all ages) <b>NO</b></li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Religion or Belief</b> (includes faith groups, atheism and philosophical beliefs) <b>NO</b></li> <li>• <b>Pregnancy and Maternity</b> (includes pregnancy, women who are breastfeeding and women on maternity leave) <b>NO</b></li> <li>• <b>Marriage and Civil Partnership</b> (includes opposite and same sex couples who are married or civil partners) <b>NO</b></li> <li>• <b>Armed Forces</b> (includes serving armed forces personnel, reservists, veterans and their families) <b>NO</b></li> </ul>
Describe any negative impacts	There will be times when health and safety has to take priority and this may have an impact on a person's protected characteristics. TEWV would however always try and mitigate as much as possible any negative impact whilst ensuring health and safety legislation is followed.
Describe any positive impacts	Procedure is in place to reduce risk to all staff, patients, visitors, contractors etc. To ensure that the Trust complies with RIDDOR regulations.

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Health & Safety at Work Act 1974 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	Programme of visits and audits have been undertaken where concerns have been discussed and documented. These have been considered while reviewing the procedure.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

<b>Section 4</b>	<b>Training needs</b>
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

**Check the information you have provided and ensure additional evidence can be provided if asked**

## Appendix 3 – Approval checklist

	Title of document being reviewed:	Yes / No / Not applicable	Comments
<b>1.</b>	<b>Title</b>		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
<b>2.</b>	<b>Rationale</b>		
	Are reasons for development of the document stated?	Yes	
<b>3.</b>	<b>Development Process</b>		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
<b>4.</b>	<b>Content</b>		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
<b>5.</b>	<b>Evidence Base</b>		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
<b>6.</b>	<b>Training</b>		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	
<b>7.</b>	<b>Implementation and monitoring</b>		
	Does the document identify how it will be implemented and monitored?	Yes	

	Title of document being reviewed:	Yes / No / Not applicable	Comments
<b>8.</b>	<b>Equality analysis</b>		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	Approved 23.10.2024
<b>9.</b>	<b>Approval</b>		
	Does the document identify which committee/group will approve it?	Yes	
<b>10.</b>	<b>Publication</b>		
	Has the policy been reviewed for harm?	Yes	
	Does the document identify whether it is private or public?	Yes	Public.
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	