Incident Reporting and Investigation Procedure

Important

In the event of an emergency, call 000 for police, fire brigade or ambulance assistance. If you are on University premises, inform Campus Security (1800 931 633) as soon as possible to coordinate and expedite the attendance of emergency services.

See the Emergency Flipchart for other emergency response information.

Following the emergency response, the incident should be reported as per this procedure.

Section 1 - Purpose

(1) This procedure outlines processes and requirements for reporting and investigating health, safety and security incidents at Charles Sturt University (the University), including incidents related to:

a. the health, safety and wellbeing of individuals within scope of this procedure
b. security of the University's physical facilities, people, and information and activities within the scope of this procedure.

(2) This procedure is not an emergency response process. In case of an emergency, see the Emergency Flipchart.

Scope

(3) This procedure applies to:

a. all University workers (including staff, contractors and volunteers), students and visitors
b. all University Campuses, operations, sites, entities and research areas, and
c. all security incidents occurring on University premises or during University activities.

Section 2 - Policy

(4) This procedure supports the:

a. Health, Safety and Wellbeing Policy
b. Facilities and Premises Policy
c. Resilience Policy

Section 3 - Procedure

Part A - Reporting incidents

(5) All health and safety or security incidents (e.g. unplanned events resulting in, or having the potential for injury, ill-

health, damage, security breach or other loss) must be reported:

a. centrally via the Incident and Risk Management System within 24 hours of the incident occurring, and
b. where appropriate to the situation, directly to the responsible manager(s) who have responsibility for the persons or facilities affected by the incident.

(6) Security incidents involving the University's physical premises and facilities must also be recorded to ensure the safety and security of people and assets.

(7) The following tables set out the reporting requirements for different incident types, who the reports should be made to or by, and the applicable timeframe. Note that:

a. an incident may require reporting under both tables, and/or fall within multiple types on the same table
b. multiple internal reports of the same incident by different parties are expected, encouraged and may be required as per the table, and
c. external reporting should only be submitted by the parties listed.

Incidents impacting persons (injury, illness or safety)

(8) Incidents impacting persons (injury, illness or safety):

Type of incident	Reports required	Report to	Report by	Reporting timeframe
All safety incidents, including those involving injury or illness to a person	Internal	Responsible manager	Anyone present or aware of the incident	Immediately after emergency response (if required)
	Internal	Incident and Risk Management System	Anyone present or aware of the incident First aid officers attending the incident Security officers attending the incident Responsible manager(s)	Within 24 hours of the incident
Incidents involving the death of a person, a serious injury or illness, or a dangerous incident (e.g. a notifiable incident under the WHS Act)	Internal	Either: 1. Manager, Health Safety and Wellbeing 2. Director, Security and Resilience (CSO)	Responsible manager(s)	Immediately after emergency response (if required)
	External	SafeWork NSW	Health, Safety and Wellbeing	As soon as practicable, within 48 hours
All incidents involving an employee work-related injuries and illnesses (serious or otherwise)	External	Workers compensation insurer	Health, Safety and Wellbeing	Within 48 hours of the incident occurring or of the University receiving notification. See also the Injury Management and Return to Work Program Procedure.
Incidents that threaten or compromise the safety, security or wellbeing of any person on University premises	Internal	Incident and Risk Management System	Anyone present or aware of the incident Security officers attending the incident	Immediately after emergency response (if required)

Incidents involving security or damage to University property

(9) Incidents involving security or damage to University property:

Type of incident	Reports required	Report to	Report by	Reporting timeframe
Incidents involving University facilities and premises such as unauthorised access, theft, vandalism, damage, suspicious activities that may pose a risk to assets, breaches of access controls or security systems, etc.	Internal	Incident and Risk Management System	Anyone present or aware of the incident Security officers attending the incident	Immediately after emergency response (if required)
Incidents involving significant damage to a motor vehicle	External	Police	Anyone present or aware of the incident Responsible manager	
Drones	In accordance with the University Remotely Piloted Aircraft Systems (RPAS) Operations Manual, which can be obtained from the Office of the Deputy Vice-Chancellor and Vice-President (Research)			

Escalation and management of critical incidents and crises

(10) This procedure applies to safety and security incident management at the operational level. Incidents reported through this process will be assessed for severity, and those classified as Level 2 (critical incidents) or Level 3 (crises) will be escalated and managed under the Crisis Management Procedure. Student-related incidents may also be managed according to the Student Critical Incident Plan where appropriate. Incidents may also constitute an emergency and/or crisis and will be escalated and managed as required under the Emergency Management Procedure and site emergency plans.

Part B - Preserving the incident site

(11) In the event of a health and safety or security incident, the site must be preserved to support investigations.

(12) For all incidents, do only what is needed to make the site safe (e.g. provide first aid, fight any fire, contain spills, electrical isolation, physical barriers, and contact emergency services) if it is safe to do so, before reporting the incident as per Part A.

(13) Where a notifiable incident has occurred (that is, involving the death of a person, a serious injury or illness, or a dangerous incident):

a. all evidence must be preserved as it is until the regulator approves otherwise, and
b. where there is a risk of a similar incident occurring again, all work in the area must be suspended and must not resume until the investigation has been completed and/or corrective action(s) taken.

(14) For all other incidents:

a. preserve all evidence as it is, where possible, until a Health, Safety and Wellbeing staff member approves otherwise, and
b. photograph any evidence that needs to be moved before moving it.

Part C - Investigating incidents

(15) The University promotes investigation of all health and safety or security incidents. This supports a safety culture of learning from errors to prevent recurrences and compliance with legislation.

Responsible managers/investigators

(16) All incidents will be investigated by a responsible manager (or an appropriate investigator they nominate) as per the following:

Incident type	Review of incident report	Incident investigation
Incidents involving injury or illness to a person	As relevant or appropriate, the supervisor/manager (responsible manager) with responsibility for: 1. the injured or ill person 2. the facility or site of the incident, and/or 3. the activity during which the incident occurred.	The responsible manager or nominee A member of the Health, Safety and Wellbeing team may conduct or oversee investigations for high-risk safety incidents
Incidents involving damage or loss of property and/or security-related incidents involving people or property	Director, Security and Resilience (CSO)	Campus Facilities Manager or another appropriately assigned investigator Director, Security and Resilience (CSO) may conduct or oversee investigations for high-risk security incidents

(17) Review/investigation of an incident report must be completed within five business days. Where this timeframe cannot be met (such as where an external review is required, information is pending, or the assigned investigator is not able to complete the process in time):

a. the responsible manager(s) must notify their appropriate line manager (or the next responsible manager under clause 16), document the delay in the Incident and Risk Management System and actively track the investigation until it is completed, and
b. decisions on escalating responsibility and/or reporting on the delayed investigation will be made by the relevant responsible parties as specified in this procedure.

(18) An incident report or investigation may be managed under another internal process, such as emergency or critical incident processes (as per clause 10), Complaints Management Policy and procedures, Gender-based Violence Prevention and Response Policy and procedures and/or Student Misconduct Rule 2020, where appropriate or relevant.

Investigation and review process

(19) Investigators and reviewers must seek to do the following:

a. Gain an understanding of what happened by:
    i. speaking with those involved or impacted by the incident, witnesses and experts
    ii. visiting the incident site (if appropriate)
    iii. reviewing documents and records related to the activity involved in the incident (these might include risk assessments, safe work procedures (SWPs), training records, etc.).
b. Identify the contributing factors and hazards that caused the incident.
c. Decide on suitable corrective actions. These must be consistent with the hierarchy of controls (see the Health, Safety and Wellbeing Procedure - Risk and Hazard Management).
d. Discuss and agree on actions with the person(s) who will be responsible for them.

(20) Incidents involving drones must be investigated in accordance with the University Remotely Piloted Aircraft Systems (RPAS) Operations Manual, which can be obtained from the Office of the Deputy Vice-Chancellor and Vice-President (Research).

Investigation and review findings and corrective actions

(21) Investigators and reviewers must record the investigation and any corrective actions taken or proposed in the Incident and Risk Management System.

(22) Heads of organisational units may be required to review the incident investigations and proposed corrective actions for suitable completion, as directed by Health, Safety and Wellbeing (HSW) staff. HSW staff may also request further investigation and/or additional or changed corrective actions.

Part D - Recordkeeping and privacy requirements

(23) Reporting and recording health, safety and wellbeing incidents is an important component in hazard control, risk management and incident prevention. Information provided in reporting and recording incidents is managed in accordance with this procedure and the Privacy Management Plan.

(24) Incident records must be maintained as per NSW general disposal authorities. This may be up to 75 years for an incident that results in a serious personal injury or incapacity to University employees. Where a new incident management software is introduced before retention requirements are met, incident records must be migrated to the new system.

Section 4 - Guidelines

(25) Nil.

Section 5 - Glossary

(26) This procedure uses terms defined in the Health, Safety and Wellbeing Policy, as well as the following:

a. Critical incident – has the same meaning found in the Emergency Management Procedure.
b. Dangerous incident – (as per the Work Health and Safety Act 2011 (NSW)) means an incident in relation to a workplace that exposes any person to a serious risk resulting from an immediate or imminent exposure to:
    i. an uncontrolled escape, spillage or leakage of a substance
    ii. an uncontrolled implosion, explosion or fire
    iii. an uncontrolled escape of gas or steam
    iv. an uncontrolled escape of a pressurised substance
    v. electric shock, including minor shock resulting from direct contact with exposed live electrical parts (other than ‘extra low voltage’) including shock from capacitive discharge
    vi. the fall or release from a height of any plant, substance or thing
    vii. the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be design or item registered under the Work Health and Safety Regulations, for example a collapsing crane
    viii. the collapse or partial collapse of a structure
    ix. the collapse or failure of an excavation or of any shoring supporting an excavation
    x. the inrush of water, mud or gas in workings, in an underground excavation or tunnel, or
    xi. the interruption of the main system of ventilation in an underground excavation or tunnel.

c. Immediate treatment - means the kind of urgent treatment that would be required for a serious injury or illness. It includes treatment by a registered medical practitioner, a paramedic or registered nurse. Even if immediate treatment is not readily available, e.g. because the incident site is rural or remote or because the relevant specialist treatment is not available, notification must still be made.
d. Incident - means an unplanned event resulting in, or having the potential for injury, ill-health, damage or other loss. This includes injuries, accidents and near misses (including hazards).
e. Medical treatment - means treatment by a registered medical practitioner (a doctor).
f. Notifiable incident – (as per the WHS Act) means:
    i. the death of a person
    ii. a serious injury or illness, or
    iii. a dangerous incident.
g. Responsible manager - means the supervisor/manager with responsibility for the injured or ill person, the facility or site of the incident and/or the activity during which the incident occurred.
h. Security incident - means any event that involves intentional, malicious, criminal, or unauthorised human behaviour that compromises or threatens the physical security or integrity of University premises, people, information, or assets. This includes incidents arising from deliberate actions, negligent security practices, or unauthorised access,
i. Serious injury or illness - (as per the WHS Act) means an injury or illness requiring the person to have:
    i. immediate treatment as an in-patient in a hospital
    ii. immediate treatment for:
        - the amputation of any part of their body
        - a serious head injury
        - a serious eye injury
        - a serious burn
        - the separation of their skin from an underlying tissue (such as de-gloving or scalping)
        - a spinal injury
        - the loss of a bodily function
        - serious lacerations
        - medical treatment within 48 hours of exposure to a substance
    iii. any infection where the work is a significant contributing factor. This includes any infection related to carrying out work:
        - with micro-organisms
        - that involves providing treatment or care to a person
        - that involves contact with human blood or body substances
        - that involves handling or contact with animals, animal hides, skins, wool or hair, animal carcasses or animal waste products
    iv. the following zoonoses contracted during work involving animals, animal hides, skins, wool or hair, animal carcasses or animal waste products:
        - Q fever
        - Anthrax
        - Leptospirosis
        - Brucellosis
        - Hendra Virus
        - Avian Influenza
        - Psittacosis.

j. Worker – for the purpose of this procedure includes:
    i. staff – continuing, fixed-term, research and casual staff
    ii. contractors, subcontractors and consultants
    iii. visiting academics and researchers
    iv. affiliates – academic title holders, visiting academics, Emeritus Professors, adjunct and honorary title holders
    v. higher degree by research students
    vi. volunteers
    vii. work experience students
k. Workplace - for the purpose of this procedure, a workplace is any place where work is undertaken by the University, including field sites and off-campus locations.

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