



WENDOVER ARM TRUST

ACCIDENT/INCIDENT PROCEDURE

www.wendoverarmtrust.co.uk

Registered Charity No. 801190

Document Location

The editable version of this document is held by the Wendover Arm Trust Health & Safety Coordinator. It is available to all members of the Wendover Arm Trust and the public via the Wendover Arm Trust's website:

www.wendoverarmtrust.co.uk

Printed copies may be out-of-date. The latest version is held on the Wendover Arm Trust's website.

Revision History

Issue	Date	Author	Summary of changes
Issue 1	April 2021	M Wright	First issue

1. Purpose

1.1. The purpose of this procedure is to set out the actions that must be taken in the event of an accident or dangerous occurrence in order to ensure the safety of volunteers and the public, and to secure any relevant evidence to aid subsequent investigation. It also sets out who the accident or incident must be reported to as well as who undertakes the investigation(s).

2. Scope

- 2.1. Any accident or dangerous occurrence that occurs as a result of the Wendover Arm Trust's activities or on any site controlled at that time by the Wendover Arm Trust. The scope also includes any instances of ill-health that require the intervention of any medical staff or a first aider on any site controlled at that time by the Wendover Arm Trust.
- 2.2. This procedure therefore applies to any WAT restoration site, restoration or maintenance activities and also any other activities undertaken by WAT volunteers such as fund-raising or publicity events. This list is not exhaustive.
- 2.3. The requirements of this procedure apply to all WAT volunteers. There are specific responsibilities placed on certain individuals in this procedure.

3. Definitions

Accident	An unplanned, unwanted, unscheduled event or occurrence that results in injury to persons or damage to property. This includes acts of violence and instances of ill-health that require the intervention of any medical staff or a first aider.
CITB	Construction Industry Training Board
CRT	Canal & River Trust
HSE	Health & Safety Executive
Incident	An unplanned, unwanted, unscheduled event or occurrence that could have resulted in injury to persons or damage to property but did not on this occasion. Also known as a 'Near Miss'.
IWA	Inland Waterways Association
Near Miss	See 'Incident' above.
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
WAT	Wendover Arm Trust.

4. Reference & Related Documents

4.1. Legislation

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
Social Security (Claims and Payments) Regulations 1979 – Schedule 4

4.2. Guidance

GE706 'Construction site supervision' – CITB
HSG245 'Investigating accidents and incidents' – HSE
INDG453 'Reporting accidents and incidents at work' – HSE

4.3. Related Documents

WAT Accident/Incident Form ([link](#))
WAT Restoration Volunteer Handbook and Health and Safety Guide ([link](#))

5. Action to be taken in the immediate aftermath of an accident or incident

- 5.1. In the event of an accident or incident, the immediate priority must be to ensure the safety of volunteers and the public. This includes providing first aid and any necessary medical attention to any injured person(s) but also requires that other volunteers and the public are prevented from having a follow-on accident. This may require keeping them away from the accident site. First aiders are trained to look for any dangers before approaching a casualty, but all volunteers have a responsibility to ensure their own safety and that of others.
- 5.2. If a first aider is not nearby or you are alone with the injured person, shout “HELP”, blow a whistle if you have one or sound a vehicle horn to attract the attention of others.
- 5.3. If an ambulance or other emergency services are required it will be necessary to send a volunteer to the access point to direct them to the injured person(s).
- 5.4. Details of the access points including postcodes, Ordnance Survey grid references and “What3Words” locations are given in the WAT Restoration Volunteer Handbook and Health and Safety Guide ([link](#)). These details are also contained on laminated cards issued to restoration volunteers ([link](#)).
- 5.5. If the Team Leader is one of the people injured in the accident and is unable to carry out the actions outlined in this procedure, then another person must take on that role in an ‘acting’ capacity. This can be any other volunteer.
- 5.6. The Team Leader (or any other person that is making any necessary arrangements) should recognise that accidents can be traumatic events effecting people’s mental capacity to act and think rationally. There is a risk that they might deteriorate into shock and become a casualty themselves. The Team Leader should satisfy themselves that those who are tasked with a role are in a fit state to carry it out.
- 5.7. Once the injured person has been taken care of and the site has been made safe the Team Leader should ensure that any relevant evidence relating to the accident is preserved or recorded, preferably by taking photographs. The Team Leader should ask all witnesses to record what they saw/did whilst it is still fresh in their memory. This includes the injured person if they are able to do so, although their medical needs take priority.
- 5.8. The Team Leader should contact the WAT Operations Director to notify them of the accident/incident as soon as practicable. If the Operations Director cannot be contacted, contact the WAT Health & Safety Coordinator.
- 5.9. The Team Leader should investigate the accident as thoroughly as they can whilst they and others are still on site. The Team Leader should write a brief report on their findings. This should take priority over restoration progress.
- 5.10. If possible, a WAT Accident/Incident Form should be completed, preferably by the injured person. If that is not possible then the Team Leader should do it. Hard copies of the WAT Accident/Incident Form are kept in the messing huts, an electronic copy is held on the WAT website: www.wendoverarmtrust.co.uk. A copy is also an appendix to this procedure.

6. Collection of Evidence and Investigation

- 6.1. The purpose of investigating accidents is to understand why the accident happened with the aim of preventing future accidents/incidents. It is **not** about apportioning blame.
- 6.2. The Team Leader should ensure that any relevant evidence relating to the accident is preserved or recorded, preferably by taking photographs. The Team Leader should ask all witnesses to record what they saw/did whilst it is still fresh in their memory.

- 6.3. The Team Leader should investigate the accident as thoroughly as they can whilst they and others are still on site. The Team Leader should write a brief report on their findings. This should be attached to the accident/incident form either electronically or in hard copy.
- 6.4. The accident/incident form should be sent to the WAT Health & Safety Coordinator along with witness statements, photographs and the Team Leader's report. Email is the preferred method. If sending hard copies ensure that a copy is kept in the event of loss.
- 6.5. The Health & Safety Coordinator should review the evidence and Team Leader's report and if considered necessary, make further recommendations to address the root causes with the aim of preventing future accidents or incidents.
- 6.6. The Health & Safety Coordinator should then send the completed accident/incident form to the Operations Director for consideration of the recommendations by them and WAT Council.

7. Reporting

- 7.1. Initially the Team Leader should contact the WAT Operations Director to notify them of the accident/incident as soon as practicable. If the Operations Director cannot be contacted, contact the WAT Health & Safety Coordinator.
- 7.2. Any accident/incident that occurs on land owned by the Canal & River Trust (CRT) must be reported to them as soon as possible and within 72 hours of the accident/incident. The accident/incident should be reported to the CRT local supervisor by the Operations Director or the Health & Safety Coordinator in the absence of the Operations Director. Due to the short time span available to report any accident/incident to CRT, it is unlikely that WAT will have completed their investigation. If this is the case then a copy of the investigation report will be forwarded on to the CRT local supervisor once it is completed by the Health & Safety Coordinator. At the time of issue of this procedure the CRT local supervisor is Dean Peters (dean.peters@canalrivertrust.org.uk).
- 7.3. If the accident/incident occurs on land owned by someone other than CRT (e.g. at a fund raising or publicity event) then it should be reported to the landowner or person/organisation responsible for the land as soon as possible. A copy of the investigation report will be sent to the relevant person/organisation once complete by the Health & Safety Coordinator.
- 7.4. Any accident or incident should be reported to WAT's insurers if it meets any of the following criteria:
 - It is likely to result in an insurance claim.
 - It is reportable under RIDDOR (see below).
 - It is an accident involving an item of plant, a vehicle or trailer.

At present WAT's insurance is arranged through the IWA and any accident/incident reports should be made to Neil Edwards (IWA head office) on 01494 783453 or neil@waterways.org.uk.

- 7.5. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) require work-related accidents (including acts of violence), occupational diseases and dangerous occurrences to be reported to the HSE under the following circumstances:
 - 7.5.1. The accident is work-related and it results in an injury of a type which is reportable:
 - death;
 - fracture, other than to fingers, thumbs and toes;
 - amputation of an arm, hand, finger, thumb, leg, foot or toe;
 - permanent loss of sight or reduction of sight;
 - crush injuries leading to internal organ damage;

- serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
- scalpings (separation of skin from the head) which require hospital treatment;
- unconsciousness caused by head injury or asphyxia;
- any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours;
- the injured person is away from work or unable to perform their normal work duties for more than seven consecutive days (not counting the day of the accident);
- the injured person is a member of the public or person who is not working must be reported if a person is injured, and is taken from the scene of the accident to hospital for treatment to that injury.

7.5.2.RIDDOR also requires reporting of certain occupational diseases where these are likely to have been caused or made worse by work. Consult with the WAT Health & Safety coordinator if this is thought to apply.

7.5.3.Note that RIDDOR does not require reporting of cases of illness that are not caused by work whatever the outcome for the casualty.

7.5.4.RIDDOR also requires reporting of certain dangerous occurrences (incidents with the potential to cause harm whether they did so or not) such as:

- the collapse, overturning or failure of any load-bearing part of any lifting equipment, other than an accessory for lifting (such as chains and slings);
- accidental contact of a mobile crane, vehicle or something being carried or lifted with an overhead line;
- Any unintentional explosion or fire in any plant or premises which results in the stoppage of that plant, or the suspension of normal work in those premises, for more than 24 hours;
- The unintentional collapse or partial collapse of any structure which involves a fall of more than 5 tonnes of material arising from, or in connection with, ongoing construction work;
- The unintentional collapse or partial collapse of any falsework;
- There are other types of dangerous occurrence that must be reported but these are unlikely to apply to WAT;
- RIDDOR does not require the reporting of road traffic accidents, unless the accident involved the loading or unloading of a vehicle or work alongside the road.


7.5.5.RIDDOR reports should be made to the HSE as soon as possible by the Operations Director or the Health & Safety Coordinator in the absence of the Operations Director. They should be reported online: www.hse.gov.uk/riddor.

8. After the incident

- 8.1. Accidents and incidents can be traumatic events, not only for those directly involved, but also for any witnesses or others who become involved such as first aiders, team leaders, accident investigators etc. Any person involved in any capacity may suffer after effects including 'flashbacks', sleeplessness or repeatedly going over what happened. This list is not exhaustive.
- 8.2. If you find that you are suffering after effects, you are advised to contact your GP who is best placed to help you deal with any negative effects.

Appendix A – WAT Accident/Incident Form

An electronic version of this form is held on the WAT website: www.wendoverarmtrust.co.uk

		WAT ACCIDENT/INCIDENT FORM		Number:	
DATE:			TIME:		
NAME(S) OF INJURED PERSON(S):					
NAME OF PERSON COMPILING REPORT IF DIFFERENT:					
PLACE WHERE ACCIDENT/INCIDENT OCCURED:					
WORK BEING UNDERTAKEN AT TIME OF ACCIDENT/INCIDENT:					
DESCRIPTION & CAUSE OF ACCIDENT/INCIDENT: (Including names of any witnesses) Continue overleaf if required					
NATURE OF INJURY & TREATMENT GIVEN TO INJURED PERSON(S)/ACTION TAKEN: Continue overleaf if required					
Signature of person compiling report:				Date:	
Signature of team leader at time of accident/incident:				Date:	
Send completed form to: healthandsafety@wendoverarmtrust.co.uk					
Comments & recommendations of Health & Safety Coordinator: Continue overleaf if required					
Signature of Health & Safety Coordinator:				Date:	