



Hazard and Incident Management Procedure

1. Purpose

This procedure outlines the requirements and responsibilities for all relevant stakeholders with respect to reporting and investigation of incidents and hazards. It also outlines the procedural requirements for the statutory reporting of notifiable work-related injuries and diseases, a requirement of employers under the [Work Health Safety Act 2020](#) (the Act).

Incident and hazard reporting and investigation aims to prevent further injury / illness to workers, patients and visitors, to identify high-risk areas and tasks, and implement preventive strategies.

2. Procedure

This document sets out the procedures for the management of hazards and incidents which present a risk to WACHS staff, contractors, students, volunteers or visitors.

This procedure outlines processes for:

- incident and hazard reporting
- internal escalation and external notification
- incident investigation
- remedial and corrective action, and
- consultative processes.

Please refer to [Appendix A](#) for the Hazard and Incident Management Process Flowchart.

2.1 Hazard and Incident Reporting and Management

All incidents, hazards, and near misses occurring at the workplace must be reported and investigated. When an incident or hazard is reported:

- Immediate action is to be taken by all available staff to provide first aid to injured workers and/or prevent further persons from becoming injured, if possible.
- Verbal report of hazard / incident to relevant manager / supervisor is to occur to ensure early notification, and immediate risk management implementation if required.
- The worker is to complete a [Safety Risk Report Form](#) (SRRF) to report the hazard / incident. The SRRF is to be submitted via email to the worker's supervisor / manager and cc'd to the local WHS electronic mailbox within 48 hours of occurrence or earlier if possible.
- Where multiple workers are involved or impacted by an incident or hazard, multiple SRRF can be completed and submitted. Additionally, any worker can submit a SRRF on behalf of another worker where required, if the worker has not, or cannot, submit a SRRF.
- When the WHS team receive a SRRF they are to determine if the incident is categorised as a Major Incident, refer to [Appendix B - Major Incidents](#). Major Incidents require a more complex investigation to be completed and must involve the Regional WHS Consultant, with oversight by the Regional Work Health Safety and Security (WHSS) Manager in the investigation and control process.

- If the incident is not classed as a Major Incident, the manager / supervisor in consultation with a Health Safety Representative (HSR) and relevant workers, completes Section B: Hazard / Incident Investigation and Control, part 5. Minor Hazard / Incident Investigation and conducts an investigation and risk assessment to determine the risk associated with the hazard. Investigations are to commence within 48 hours of the SRRF being received and completed in a timely manner, ideally within 5 working days of commencement.
- To control the hazard / incident, the manager / supervisor, in consultation with the HSR and relevant workers, must complete Section B: Incident / Hazard Investigation and Control, part 6. Risk Controls and develop a plan to implement corrective actions. The corrective action strategy is to be developed in accordance with the 'hierarchy of controls'. Where necessary and appropriate, the manager / supervisor is to seek advice from the WHS Consultant and others, as required, to ensure proposed risk controls are adequate.
- Workers are consulted throughout all stages of the process as necessary through various mechanisms, e.g., workers involved in the incident, HSRs, WHS committees. This is done to seek input and adequate information, in order to improve decision making around health and safety matters.
- The manager / supervisor is responsible for verifying the effectiveness of the implemented risk controls within a timeframe mutually agreed by the manager / supervisor, HSR and Regional WHS Consultant. The review is to involve consultation with the HSR and relevant workers.
- Completed SRRFs must be submitted to the WHS Department for review by the Regional WHS Consultant, entry of the investigation findings and controls into the safety database and electronic record-keeping.
- The manager and/or the WHS team will communicate with the worker regarding the status of the incident report.

2.2 Internal Escalation of Major Incidents

In the event of a major incident:

- The manager is to confirm the incident details and liaise with the Regional WHSS Manager (or delegate) Executive Director, Tier 4 and other managers as required.
- The regional WHSS Manager is to notify the Director Work Health Safety Wellbeing immediately.
- The regional WHSS department is to notify external stakeholders as appropriate and determine if, and what type of support is required to commence / complete the reporting / investigation process.
- The manager, regional WHS department and Health and Safety Representative (HSR) are to undertake an incident investigation and apply interim controls to manage the hazard and risks. The investigation is to commence within 48 hours of the SRRF being received and completed in a timely manner, ideally within 28 working days of commencement. Should the investigation exceed 28 working days in length, escalation to the Regional WHSS Manager to facilitate and expediate the process.
- The manager / supervisor is responsible for verifying the effectiveness of the implemented risk controls at a timeframe mutually agreed upon by the manager / supervisor, and Regional WHS department. The review is to involve consultation with the HSR, Regional WHS Committees and relevant workers.
- Regional WHS departments are responsible for guiding and managing the investigation process including entry of the investigation findings and controls into the safety database and electronic record-keeping. Investigation reports must include reference to the SRRF Number and trim folder reference for all relevant supporting documentation.

- Completed major investigation reports must be quality assured by the Regional WHSS Manager and submitted to the Executive Director, Tier 4 and Director Work Health Safety Wellbeing (DWHSW).
- The Major Investigation Reports findings and recommended controls are to be authorised by the Executive Director (ED) and DWHSW before being implemented where it is reasonably practicable.
- The Investigation Reports findings and recommended controls will be communicated to the Tier 4 and the appropriate HSM who in turn will communicate to the interested parties in relation to the incident.

2.3 Management of SRRFs Relating to Harassment, Bullying, Victimisation or Workplace Violence

SRRFs which allege harassment, bullying, victimisation or workplace violence instigated by another WACHS worker may be reported through the safety risk reporting system, however there are separate WA Health policies applying to the resolution of such matters, including the MP 0117/19 - [Prevention of Workplace Bullying Policy](#), the MP 0116/19 - [Grievance Resolution Policy](#) and the MP 0125/19 - [Notifiable and Reportable Conduct Policy](#). Safety Risk Report forms covering these matters are to be referred by the Regional WHSS Manager to the Regional HR Manager for appropriate action where necessary, with the reporting worker being advised in writing of this action. Note that the SRRF must be updated with any resulting resolution and risk assessment.

2.4 Investigation Guide

The applicable investigation tools are to be utilised from this list:

- [Aggression Investigation Checklist](#)
- [Manual Tasks Investigation Checklist](#)
- [PEEPO Record Investigation Checklist](#) (People, Environment, Procedures, Organisation)
- [Slips, Trips, Falls Incident Investigation Checklist](#)
- [Psychological Risk Assessment Tool](#)

3. Roles and Responsibilities

Workers are responsible for:

- reporting all hazards, incidents, injuries, dangerous occurrences and system failures which occur or have the potential to occur
- taking action, in the event of an injury or unsafe situation, that will as far as is practicable ensure the safety of themselves and others
- participating in the investigation process where appropriate
- ensuring they have completed all training required of them to perform their role.

Supervisors and managers are responsible for:

- providing a safe place of work for workers as far as practicable
- ensuring that injured workers, contractors or visitors to WACHS receive, or are referred to, appropriate first aid or medical assessment for any reported illness or injury
- taking action, in the event of an injury or unsafe situation, that will as far as is practicable ensure the safety of themselves and others
- ensuring all hazards, incidents, injuries, dangerous occurrences and systems failures are appropriately reported for areas under their supervision

- ensuring contractors are inducted to WACHS sites and understand their reporting responsibilities
- conducting investigations into reported incidents and ensuring corrective actions are developed and implemented to eliminate or reduce the risk of injury
- consulting with workers and WHS representatives regarding WHS matters that impact on their work – this may include involvement in investigation where appropriate
- providing regular feedback to worker regarding status of investigation and corrective actions
- ensuring staff are appropriately trained to perform the tasks and duties expected of them.

The **Regional WHS Department** is responsible for:

- monitoring and reviewing Safety Risk Report Forms (SRRFs) for effective incident management and reporting
- providing advice and recommendations on preventative and corrective actions where required
- participating in incident investigations and assisting in corrective action reviews to prevent incident reoccurrences
- communicating outcomes and recommendations of major hazard investigations to Tier 4 and the appropriate HSM
- tabling outcomes and recommendations of major hazard investigations at relevant local WHS Committee where appropriate.

The **Regional WHSS Manager** is responsible for:

- facilitating / quality assuring incident investigations for major incidents. This includes ensuring the WACHS Major Incident Investigation register is up to date and maintained.
- providing governance and subject matter oversight to hazard / incidents with a high to extreme risk rating
- reporting at executive level all high to extreme risk investigations including recommendations and outcomes of the incident
- applying a collaborative approach to the investigation guiding the WHS team in process completion.

Please refer to [Appendix A](#) for the Hazard and Incident Management Process Flowchart.

All staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. Monitoring and Evaluation

4.1 Monitoring

Monitoring of this policy will be undertaken by the WACHS WHS team, Central Office. It is to be measured by:

- established KPI and report monitoring (investigation length, closed actions)
- feedback from stakeholders
- audits of compliance with relevant legislative, policy and procedure requirement.

4.2 Evaluation

This policy will be reviewed as required to determine effectiveness, relevance and currency. At a minimum it will be reviewed every two years by the Director Work Health Safety Wellbeing.

5. Compliance

This procedure is a mandatory requirement under the [Work Health Safety Act 2020](#).

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

6. References

ISO 45001:2018 Occupational Health and Safety Management System (this superseded AS/NZS 4801 on 13 July 2023). Available from: <http://www.saiassurance.com.au/iso-45001-2018-ohs-and-management-systems>

Department of Energy, Mines, Industry Regulation and Safety, "What is a hazard and what is risk?", www.dmp.wa.gov.au/Safety/What-is-a-hazard-and-what-is-4721.aspx

7. Definitions

Term	Definition
Causal Factors	Any behaviour, omission, or deficiency that if corrected, eliminated or avoided, probably would have prevented the incident.
Hazard	A source or a situation with a potential for harm in terms of human injury or ill-health, damage to property, damage to the environment, or a combination of these.
Health and Safety Representative (HSR)	Health and Safety Representatives are elected by co-workers to represent them in consultation about health and safety matters with the employer as per s. 60 of the Act.
Incident	An event that during the course of undertaking work-related duties resulted in or could have resulted in injury or disease. This includes Near Miss Incidents.
Investigation	A systematic examination of an event and its cause or contributing factors.
Major Incidents	An incident that results in a serious injury or death of a person, or a dangerous incident. See Appendix B for further details.
Near Miss Incidents	An incident which has occurred where no personal injury/illness, property or environmental damage actually occurred, but given a slight shift in time or position, could have occurred.
Notifiable Work Related Injury	A work-related death, injury or disease required to be reported to WorkSafe WA as a requirement of the Act. See Appendix C for further details.
Risk	The likelihood and consequence of an injury or harm occurring.
System Failure	Systematic processes that fail to manage the task, activity, process or problem safely.

8. Document Summary

Coverage	WACHS-wide
Audience	All staff
Records Management	Non Clinical: Records Management Policy Clinical: Health Record Management Policy
Related Legislation	Work Health and Safety Act 2020 Work Health and Safety (General) Regulations 2022
Related Mandatory Policies / Frameworks	<ul style="list-style-type: none"> • MP 0116/19 Grievance Resolution Policy • MP 0125/19 Notifiable and Reportable Conduct Policy • MP 0117/19 Prevention of Workplace Bullying Policy • MP 0180/23 Work Health and Safety Management Policy • Integrity Framework • Work Health and Safety Framework
Related WACHS Policy Documents	<ul style="list-style-type: none"> • Work Health and Safety Policy
Other Related Documents	<ul style="list-style-type: none"> • WACHS Safety Alert Template • WACHS Major Incident Investigation Template • WACHS 5 Whys Guide
Related Forms	<ul style="list-style-type: none"> • Aggression Investigation Checklist • Manual Tasks Investigation Checklist • PEEPO Record Investigation Checklist • Safety Risk Report Form • Slips, Trips, Falls Incident Investigation Checklist
Related Training Packages	Work Health and Safety: Managers and Supervisors (WHSMS EL2)
Aboriginal Health Impact Statement Declaration (ISD)	ISD Record ID: 3382
National Safety and Quality Health Service (NSQHS) Standards	1.01, 2.01
Aged Care Quality Standards	Nil
Chief Psychiatrist's Standards for Clinical Care	Nil

9. Document Control

Version	Published date	Current from	Summary of changes
2.00	8 July 2024	8 July 2024	<ul style="list-style-type: none"> legislative updates and general review minor change to title
2.01	15 July 2024	8 July 2024	Minor amendment to: <ul style="list-style-type: none"> update flowchart add link to checklist update WHS Manager Responsibilities

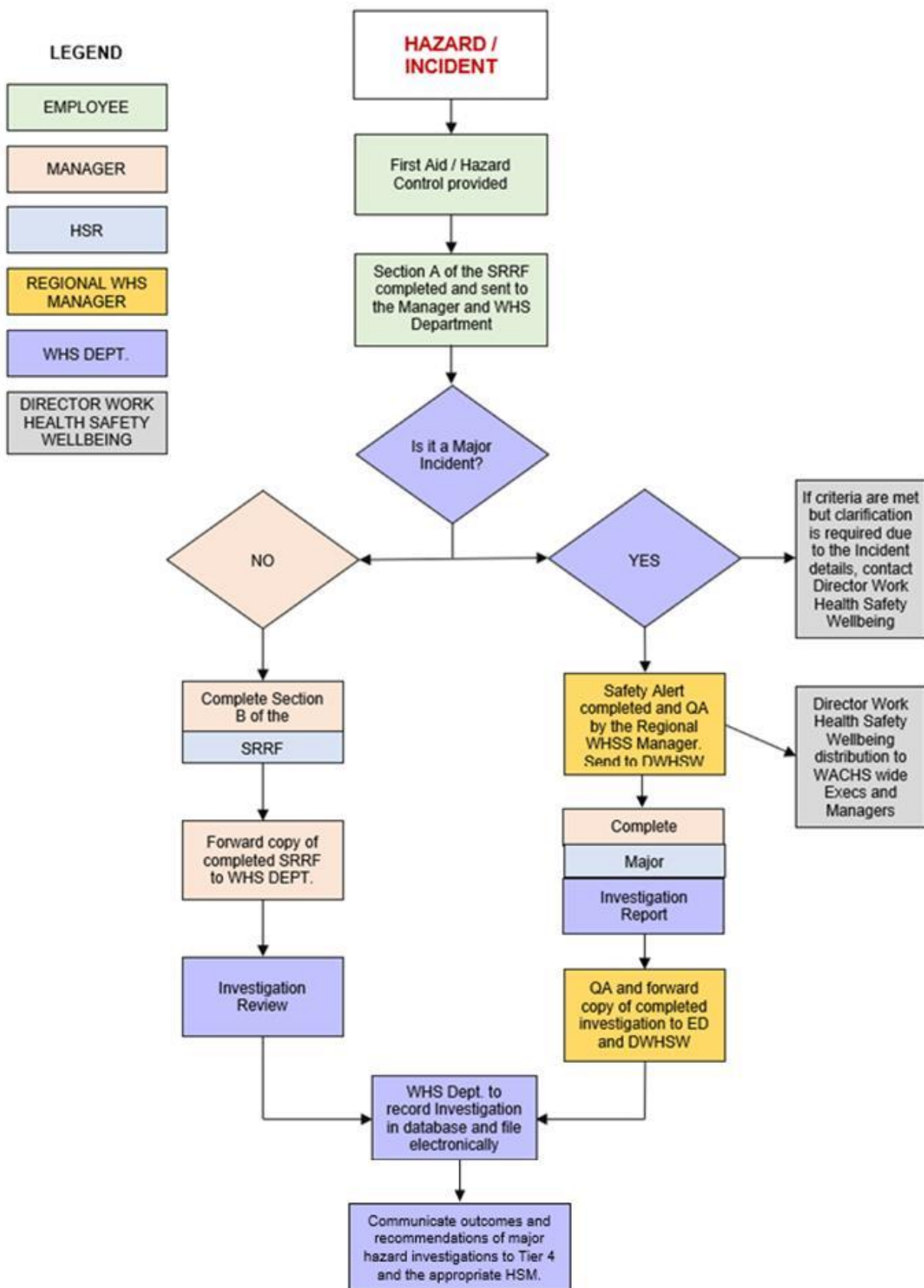
10. Approval

Policy Owner	Executive Director People, Capability and Culture
Co-approver	Nil
Contact	Director Work Health Safety and Wellbeing
Business Unit	People, Capability and Culture
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This document can be made available in alternative formats on request.

Appendix A: Hazard and Incident Management Process Flowchart



Appendix B: Major Incidents

Definition

A major incident is defined as, but is not limited to:

- a work-related death
- an injury that:
 - requires admittance to hospital as an inpatient
 - is from exposure to any substance that causes acute symptoms
 - electric shock (requires further reporting as soon as possible to the relevant energy supplier or EnergySafety - the energy regulator)
 - is a dangerous occurrence (examples include):
 - the damage to, or failure of major plant or equipment
 - the collapse of a floor, wall or ceiling of a building used as a workplace
 - an electrical short, malfunction or explosion
 - an uncontrolled explosion, fire or escape of gas, steam or other hazardous substance.
- incidents identified by the WHSS Manager / Director Work Health Safety Wellbeing as being extreme risk, complex by virtue of their outcome or potential outcome and may be subject to:
 - legal advice (and establishment of legal professional privilege); and / or
 - more comprehensive root cause analysis investigation by a competent person
 - reporting to our insurance provider for public liability issues.

Occasions may arise where incidents have occurred that meet the above incident criteria, however further clarification may be sought. A risk-based approach will determine if additional investigation is required including media exposure, significant financial implications and reputational risk to the organisation. Governance advice is to be sought from the Director Work Health Safety Wellbeing.

Appendix C: Reportable Injuries and Diseases

Regional WHS Departments are to report the below list of notifiable incidents to WorkSafe WA using the appropriate notification method and/or form.

The definition of a notifiable incident in the *Work Health and Safety Act 2020* is:

- (a) the death of a person; or
- (b) a serious injury or illness of a person; or
- (c) a dangerous incident.

Serious injury or illness includes the following:

- immediate treatment as an in-patient in a hospital
- immediate treatment for:
 - any amputation
 - serious head injury, including eye injury
 - serious burn
 - separation of skin from underlying structures (e.g., degloving/ scalping)
 - spinal injury
 - loss of a bodily function
 - serious lacerations
- treatment within 48 hours from a medical practitioner due to substance exposure
- occurs in a remote location and requires urgent transfer to a medical facility for treatment
- any injury likely to prevent the person from doing their normal work for at least 10 days after the day on which the injury or illness occurs (in the opinion of a medical practitioner)

A dangerous incident includes the following incidents, where any person is exposed to a serious risk to their health and safety, from an immediate or imminent exposure to:

- an uncontrolled escape, spillage or leakage of a substance; or
- an uncontrolled implosion, explosion or fire; or
- an uncontrolled escape of gas or steam; or
- an uncontrolled escape of a pressurised substance; or
- electric shock; or
- the fall or release from a height of any plant, substance or thing; or
- the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with the regulations; or
- the collapse or partial collapse of a structure; or
- the collapse or failure of an excavation or of any shoring supporting an excavation; or
- the inrush of water, mud or gas in workings, in an underground excavation or tunnel; or
- the interruption of the main system of ventilation in an underground excavation or tunnel; or
- any other event prescribed by the regulations but does not include an incident of a prescribed kind.