

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

Summary of duties

RIDDOR requires employers and others to report work-related accidents, diseases and dangerous occurrences to the enforcing authorities. The regulations apply to all work activities.

Employer's duties

Reporting under RIDDOR is the duty of the responsible person, who, in the case of death or other reportable injury to an employee, is the employer.

Employees' duties

There are no specific duties on employees in these regulations. However, the legal functions of safety representatives under the Safety Representatives and Safety Committees Regulations 1977 include investigating notifiable accidents, diseases and dangerous occurrences.

RIDDOR Step by Step

Regulation 1: Citation and commencement

The regulations came into force on 1 April 1996. No amendments have been made since then, but HSC is currently conducting a fundamental review of RIDDOR (2006).

Regulation 2: Interpretation

An "accident" includes an act of non-consensual physical violence done to a person at work; and an act of suicide which occurs on, or in the course of the operation of, a relevant transport system. Hence suicides in police cells are unlikely to be reportable under RIDDOR. A "relevant transport system" means a railway, tramway, trolley vehicle system or guided transport system.

A "dangerous occurrence" (DO) means an occurrence which arises out of or in connection with work and is of a class specified in Schedule 2 of the regulations. These are the only dangerous occurrences that are reportable under RIDDOR.

A "major injury" means an injury or condition specified in Schedule 1 of the regulations (reproduced on page 32).

In connection with the reporting of accidents, the employer is the "responsible person" in the case of the death, other reportable injury or occupational disease suffered by an employee. In any other case, the responsible person is the person having control of the premises where the reportable accident, DO or disease happened. For example, in the case of the death or removal to hospital of a member of the public, the responsible person is the person in charge of the premises where the injury occurred.

HSE has advised that an injury to a member of the public resulting from police actions would be reportable only if:

- it resulted from an accident, and
- the accident arose out of or in connection with the work of the police, and

- the injured person died or was taken from the site of the accident to a hospital for treatment (whether or not any treatment was given when they got there).

Under RIDDOR, an injury to a member of the public resulting from deliberate police action directed at that individual, for example during arrest or self defence, would not be regarded as arising from an accident, and hence would not be reportable under RIDDOR.

In connection with the reporting of injuries to members of the public on police premises, the responsible person would be the person for the time being having control of those premises. Where an accident takes place outside those premises, such as in a street, but in connection with police work, the person having control of the police premises would again be the responsible person. In cases where the police are present in other premises, such as a football ground, then the responsible person would be whoever is in overall control of those premises.

Regulation 3: Notification and reporting of injuries and dangerous occurrences

Where a person at work dies, suffers a major injury or is incapacitated for more than three consecutive days (excluding the day of the accident but including any non-working days), the responsible person should forthwith notify the relevant enforcing authority. For the police service, the enforcing authority is the Health and Safety Executive.

The reporting procedure originally consisted solely of sending the official reporting form (F2508) to the local enforcing authority office, but this was simplified in April 2001 and now all cases can be reported to a single point, the Incident Contact Centre (ICC), based at Caerphilly. Incidents can be reported by telephone, fax, via the Internet or by post, and, in the case of reports via telephone or the Internet, the ICC will send a copy of the report to the responsible person for their records.

Regulation 4: Reporting the death of an employee

If an employee dies as a result of an accident at work within one year of the date of that accident, then the employer should inform the enforcing authority in writing as soon as it comes to their knowledge, whether or not the accident has already been reported under regulation 3 of RIDDOR.

Regulation 5: Reporting of cases of disease

Where a person at work suffers from any of the occupational diseases listed in Part 1 of Schedule 3 of the regulations, and their work involves one of the activities specified in the Schedule, the responsible person should report it to the relevant enforcing authority. Only those diseases or ill health conditions that are listed in the Schedule are reportable: for example, neither noise-induced deafness nor stress-related conditions are included. As with injuries and dangerous occurrences, reporting should now be directed to the Incident Contact Centre.

Regulation 7: Records

The responsible person should keep a record of any reportable injury, disease or dangerous occurrence for three years after the date on which it happened. The details required, which are listed in Schedule 4, are:

- the date and method of reporting
- the date, time and place of the event
- personal details of those involved, and

Under the Social Security (Claims and Payments) Regulations 1987, employers of more than 10 people must record all accidents, normally in an accident book BI 510. In October 2004, HSE published a revised version of the accident book, containing amended accident forms including a tick box indicating that the injured person has agreed to their personal information being disclosed to the safety representative.

- a brief description of the nature of the event or disease.

Records may be kept in any form, but extracts must be made available to the enforcing authority on request. In addition, using their powers under the HSW Act, HSE inspectors may require any part of the records to be produced. Details may be recorded on a computer, copies of report forms may be filed or a written log may be kept.

Regulation 10: Restrictions on the application of regulations 3, 4 and 5

The requirements in regulations 3 and 4 for reporting the death or injury of a person do not apply to accidents involving vehicles moving on a public road (section 192 of the Road Traffic Act 1988) unless they result from:

- exposure to a substance being conveyed on the vehicle
- work connected with the loading or unloading of the vehicle
- work on or alongside a road, being concerned with the construction, demolition, alteration, repair or maintenance of the road, its boundaries or adjacent buildings or structures
- an accident involving a train.

More information: A Guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 L73
HSE Books, PO Box 1999, Sudbury, Suffolk CO10 2WA

Therefore, injuries resulting from collisions between vehicles are not reportable, but HSE has asked police forces to report accidents where police officers have been injured while working on foot at the roadside, e.g at vehicle stops, setting out traffic cones or deploying Stinger.

Schedule 1: Major Injuries

- 1 Any fracture, other than to the fingers, thumbs or toes
- 2 Any amputation
- 3 Dislocation of the shoulder, hip, knee or spine
- 4 Loss of sight (whether temporary or permanent)
- 5 A chemical or hot metal burn to the eye or any penetrating injury to the eye
- 6 Any injury resulting from an electric shock or electrical burn (including any electrical burn caused by arcing or arcing products) leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours
- 7 Any other injury –
 - (a) leading to hypothermia, heat-induced illness or to unconsciousness,
 - (b) requiring resuscitation, or
 - (c) requiring admittance to hospital for more than 24 hours.
- 8 Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent
- 9 Either of the following conditions which result from the absorption of any substance by inhalation, ingestion or through the skin –
 - (a) acute illness requiring medical treatment; or
 - (b) loss of consciousness.
- 10 Acute illness which requires medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

Extract from Schedule 2: Dangerous occurrences

- Collapse, overturning or failure of any lift, crane, access platform
- Failure of any pressure system with the potential to cause the death of any person
- Failure of any freight container while it is being raised, lowered or suspended
- Any incident in which plant comes into contact with an uninsulated overhead electric line in which the voltage exceeds

200 volts

- The unintentional explosion or ignition of explosives other than one caused by the unintentional discharge of a weapon where, apart from that unintentional discharge, the weapon and explosives functioned as they were designed to do
- Any accident or incident which resulted or could have resulted in the release or escape of a biological agent likely to cause severe human infection or illness
- Any incident in which breathing apparatus malfunctions while in use or during testing immediately prior to use in such a way that had the malfunction occurred while the apparatus was in use it would have posed a danger to the health or safety of the user
- The failure of any load-bearing part of fairground equipment or any part designed to support or restrain passengers
- Any incident involving a road tanker or tank container used for the carriage of dangerous goods in which the road tanker overturns, the tank is seriously damaged, there is an uncontrolled release or a fire involving the dangerous goods.
- Any unintended collapse or partial collapse of any building or structure under construction, reconstruction, alteration or demolition involving the fall of more than 5 tonnes of material

Extract from Schedule 3: Reportable diseases

- Certain poisonings
- Some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne
- Lung diseases including occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma
- Infections such as leptospirosis, hepatitis, tuberculosis, anthrax, tetanus and legionellosis
- Other conditions such as occupational cancer, certain musculo-skeletal disorders, decompression illness and hand/arm vibration syndrome.