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1 Purpose

The purpose of this procedure outlines how ATNZ will report, document and investigate health and safety (H&S) incidents, including injuries, near misses and notifiable events/incidents. We recognise that it is important for us to learn from such incidents and to look to see if anything could be done differently to prevent it from happening again.

2 Scope

This procedure applies to all ATNZ workers, contractors and visitors and has been developed to provide guidelines for the correct reporting and recording of incidents and to actively support rehabilitation for those injured or harmed at work.

3 Definitions

<i>Incident Database:</i>	A Risk Management Database used to capture incidents and other H&S related events. The current ATNZ system is called Vault
<i>Contractor:</i>	Person(s) or companies working on a service/task or on behalf of any part of ATNZ, but who are not employed directly by the ATNZ business.
<i>Employee:</i>	A person who is employed directly by ATNZ, including full-time, part-time and casual employees.
<i>Event:</i>	Terminology used in the company's Incident Database to identify any activity being captured e.g. incidents, hazards, workplace inspections.
<i>First Aid Injury (FAI):</i>	First Aid Injury (FAI) is an injury or illness that may require first aid treatment or an injury that did not require any treatment upon a visit to see medical personnel. First Aid Treatment is defined as any tasks performed by a qualified First Aid Officer. An outline of what is included within the classification of First Aid Treatment is within Appendix 1.
<i>Hazard:</i>	Anything with the potential to cause harm, injury, illness or loss. Under HSWA, hazard is defined as "includes a person's behaviour where that behaviour has the potential to cause death, injury, or illness to a person (whether or not that behaviour results from physical or mental fatigue, drugs, alcohol, traumatic shock, or another temporary condition that affects a person's behaviour)".
<i>Incident:</i>	An unplanned event that results in or could have resulted in personal injury/illness, or product, plant or equipment.
<i>Illness:</i>	An occupational disease or illness is any chronic ailment that occurs as a result of work or occupational activity.
<i>Lost Time Injury (LTI):</i>	A Lost Time Injury (LTI) is an injury or illness resulting in an employee being unable to work for a full scheduled shift (other than the shift on which the injury occurred). A full scheduled shift is regardless of the length or duration of the shift (e.g. 2 hours, 4 hours or 12 hours).

<i>Medical Treatment Injury (MTI):</i>	A Medical Treatment Injury (MTI) is a work-related injury or illness other than a lost time injury, where the injury is serious enough to require more than minor first aid treatment. An outline of what is included within the classification of medical treatment is within Appendix 1.
<i>Near Miss:</i>	An event in the workplace that could have resulted in personal injury, property damage, vehicle incident etc. but did not.
<i>Notifiable Event:</i>	An event requiring notification to WorkSafe NZ when any of the following occurs as a result of work: <ul style="list-style-type: none"> • A death • Notifiable illness or injury • A notifiable incident
<i>Non-Work Injury:</i>	Non-Work Injury is an injury or illness that has occurred to an ATNZ employee that is attributable to an incident which did not occur in an ATNZ workplace and is, as such, not work-related.
<i>Restricted Work Injury (RWI):</i>	A Restricted Work Injury (RWI) is an injury or illness which results in the injured person being unable to fully perform their ordinary occupation (regular job) any time after the day or shift on which the injury occurred, and where alternative or light duties are performed or hours are restricted

4 Responsibilities

ATNZ Account/ATNZ Line Managers are responsible for

- Ensuring that any incidents and injuries involving their employees are reported accurately, investigated and recorded according to these procedures and that the recommended corrective/preventive actions are, as far as is reasonably practicable, implemented and reviewed to ensure their effectiveness.
- In the event that no treatment is required, assess and, if deemed appropriate, refer the person involved in the incident for stabilisation and recovery immediately following the injury
- Ensuring the Incident Report details are completed in conjunction with the person involved in the incident or witness to the incident;
- Reporting the incident to the ATNZ National/ATNZ Functional Manager and Health and Safety Manager;
- Maintain confidentiality of all Incident records in line with the Competenz Privacy Guidelines;
- Ensuring the integrity of reporting meets the requirements within this Procedure and
- Encouraging the reporting of all incidents
- Discussing with the Host Company the possibility that restricted/light duties can be accommodated and managed

Functional Managers are responsible for

- Reviewing on a regular basis, Incident Report details in the company's Incident Database to ensure they have been completed correctly
- Maintaining confidentiality of all Incident records in line with the Competenz Privacy Guidelines; and
- Ensuring the integrity of reporting meets the requirements within this Procedure

Health and Safety Manager is responsible for

- Informing those involved of reporting and investigation requirements as outlined in these procedures;
- Immediately notifying ATNZ GM of a notifiable event;
- Reviewing all Incident Report details in ATNZs Incident Database to ensure they have been completed correctly;
- Ensuring all relevant personnel have reviewed, made comments if applicable and signed off the Incident Report form;

- Maintaining confidentiality of all Incident records in line with the Competenz Privacy Guidelines; and,
- Providing technical advice and assistance to ATNZ Account/ATNZ Line Managers as they conduct their investigations to identify contributing factors and ensure actions are recommended.

Everyone is responsible for:

- Ensuring that all incidents and injuries in which they are involved are reported to their ATNZ Account/ATNZ Line Manager and/or Host Company as soon as possible but within 24 hours of the incident occurring.
- Participating and co-operating with any incident investigations if requested to do so
- Providing their ATNZ Account/ATNZ Line Manager and/or Host Company with any relevant and up to date medical certificates related to any work injuries or illnesses, including any that indicate the need for workplace adjustments to support rehabilitation.
- Participating in the rehabilitation processes outlined in this procedure, including attending meetings and discussions with their ATNZ Account/ATNZ Line Manager, Host Company and/or treatment provider
- Working within any restrictions indicated in the rehabilitation plan, and advising their ATNZ Account/ATNZ Line Manager and/or Host Company as soon as possible if they feel the plan is not working

5 Procedure

5.1 Reporting and Recording

- 5.1.1 We ask that everyone (including contractors) ensures that all incidents or near misses (no matter how small, or whether treatment was needed or not) are reported to their ATNZ Account/ATNZ Line Manager as follows:
- For injuries, immediately; and
 - For all other events, within the shift and no later than 24 hours.
- 5.1.2 All incidents will be recorded in ATNZs Incident Database and this will assist us with analysing trends and monitoring progress of any agreed actions, with an aim of preventing a similar occurrence. The ATNZ Account/ATNZ Line Manager will follow up with an appropriate investigation.
- 5.1.3 In circumstances where immediate access to the database or app is not practical or accessible, an Incident Reporting Form and Incident Investigation Form can be completed. This must be transferred over to the Incident Database within 24 hours of the incident occurring (or when the database is available for use).

5.2 Reporting a Notifiable Event

- 5.2.1 Reporting of incidents to the regulator (ie WorkSafe NZ) shall be as per the applicable requirements (refer to appendix 2) and will be undertaken only by the H&S Manager or nominated company representative.
- 5.2.2 It is important for accuracy and confidentiality that no one, other than the ATNZ General Manager or nominated company representative, talks to the media or the Regulator.
- 5.2.3 Where an incident results in the involvement of WorkSafe (or other regulators), ATNZ will work with, and support any investigation. If we consider it appropriate, we will also seek advice from our legal advisors to ensure we are doing all we can and should be doing in such cases.

5.3 Immediate Response to an Incident

- 5.3.1 If a person(s) is injured in an incident, immediate attention must be provided in accordance with the hosts and ATNZs process:
- Do not put yourself in danger;
 - Seek assistance if required;
 - Make a quick assessment of the seriousness of the incident, particularly if there has been damage to plant and equipment and/or the environment;
 - Secure the area by isolating equipment, locking out, barricading hazards etc. if necessary;
 - Preserve all evidence, take photos if possible and seal off the area if necessary; and,
 - Inform your host and verbally notify people (colleagues, contractors, visitors etc.) in the immediate area.
 - Notify your ATNZ Account/ATNZ Line Manager

5.4 Incident Investigation

- 5.4.1 The purpose of the investigation process is to understand what went wrong, what may have contributed to the incident and to identify what may need to change to ensure that a similar incident is unlikely to occur. It is **NOT** to apportion blame.
- 5.4.2 The level of investigation, along with guidance on who will lead the investigation and which type of investigation is best suited to that event (refer to appendix 3).
- 5.4.3 Where warranted, we may enlist the assistance of subject matter experts and/or external providers to help us with certain types of investigations.
- 5.4.4 Most investigations identify opportunities for improvement. Therefore, where corrective actions have been identified, these will be tracked to completion. The progress of these will be reported in our H&S performance reports, and discussed at team, management and H&S committee meetings.
- 5.4.5 If we believe that sharing learnings will help to reduce reoccurrences and help our people to understand what happened, we will create a Safety Alert and aim to complete this within 7 days of the incident occurring.
- 5.4.6 Although our host companies will carry out their own investigation, there may be situations where we will carry out a joint investigation.

5.5 Supporting Injured Workers

- 5.5.1 When a workplace injury results in the need for first aid or medical treatment, this will be arranged immediately. The host company will have trained first aiders and first aid boxes.
- 5.5.2 If external medical treatment or assessment is required, the injured person will attend the nearest medical provider and provide an ACC certificate to their host company and ATNZ Account/ATNZ Line Manager. Where at all possible, will be accompanied by a line manager so that we can provide and arrange for additional support, if necessary.

5.6 Supporting rehabilitation and return to work

- 5.6.1 Some incidents result in an injured person requiring adjustments to work (hours, activities or both) to support recovery. As soon as we are aware of the need for a rehabilitation plan, we will act upon it.
- 5.6.2 We ask all employees to let us know immediately if their treatment provider has indicated that they will need support or adjustment in work activities to help them get back to work and recover.

- 5.6.3 ATNZ Account/ATNZ Line Managers will be aware of the rehabilitation protocols and will work closely with the employee and host, and if appointed, the ACC Case Manager, to arrange for appropriate return to work plans to be prepared.
- 5.6.4 Throughout the duration of the rehabilitation plan, the host, ATNZ Account/ATNZ Line Manager and injured employee will meet regularly and monitor progress. At any time if the plan is considered ineffective, medical assessment and advice will be sought.
- 5.6.5 Rehabilitation is considered completed when, either the treatment provider has issued a full clearance medical certificate, or medical advice indicates that the rehabilitation has been unsuccessful.
- 5.6.6 All reasonable attempts will be made by the host company and ATNZ to accommodate any changes to work patterns and activities, however if this is not possible, the ATNZ Account/ATNZ Line Manager will seek advice from the Health and Safety (**H&S**) Manager and Human Resources (**HR**) on how to manage the situation.

6 Documentation

The following documents support the effective implementation of this procedure:

- Return to Work Plan and Monitoring Form
- Injury Management Flowchart
- Incident Reporting Form
- Incident Investigation Form

7 Appendixes

Appendix 1	Medical Treatment Injury vs First Aid Injury Table
Appendix 2	Notifiable Event Reporting Requirements
Appendix 3	Incident Escalation and Investigation Guidelines

8 Review

This procedure shall be reviewed every two years.

Appendix 1 - Medical Treatment Injury vs First Aid Injury Table

Please Note: Often there is a debate between the definition of a Medical Treatment Injury and First Aid Injury. The table below outlines the difference between various treatments but is not an exhaustive list. Refer to the Health & Safety Manager for any further clarification.

<p>Medical Treatment is defined as treatment that can only be provided by a qualified medical practitioner e.g. GP, Specialist, Chiropractor, Osteopath, Physiotherapist, Optometrist etc.</p> <p>Treatment is defined as actions taken by a Medical Practitioner in an attempt to cure or treat an injury. In this definition an x-ray/scan is not considered treatment but a process used to diagnose an injury, therefore, injuries that have only required x-rays, CAT scans, MRI's, blood screening etc. to diagnose an injury would be considered only as a First Aid Treatment.</p>	<p>First Aid Treatment is defined as any tasks performed by a qualified First Aid Officer</p> <p>If treatment is given by a First Aid Officer or medical professional for any item under "Considered Medical Treatment", the classification is to remain as a Medical Treatment Injury (MTI), irrespective of who performs the treatment.</p>
Considered Medical Treatment	Considered First Aid Treatment
Treatment of infection (more than one dose/prescription of medication as per point 2).	Application of antiseptics during first visit to medical personnel
Application of antiseptics during second or subsequent visit to medical personnel	Treatment of first degree burn(s)
Treatment of second or third degree burn(s)	Application of bandage(s) during any visit to medical personnel
Application of sutures (stitches) by a medical practitioner	Use of elastic bandage(s) during first visit to medical personnel
Application of butterfly adhesive dressing or steri-strip(s) in lieu of sutures by a medical practitioner	Removal of foreign bodies (not embedded) in eye if only irrigation is required
Removal of foreign bodies embedded in eye	Removal of foreign bodies from wound: if procedure is uncomplicated, and is, for example by tweezers or other simple technique
Removal of foreign bodies from wound; if procedure is complicated because of depth of embedment, size or location	Use of non-prescription medications and administration of single dose of prescription medication on first visit for minor injury or discomfort
Use of prescription medication (except a single dose/prescription on first visit for minor injury or discomfort)	Soaking therapy on initial visit to medical personnel or removal of bandages by soaking
Use of hot or cold soaking therapy during second or subsequent visit to medical personnel	Application of hot or cold compress(es) during first visit to medical personnel
Application of hot or cold compress(es) during second or subsequent visit to medical personnel	Application of ointments to abrasions to prevent drying or cracking
Cutting away dead skin (surgical debridement)	Application of heat therapy during first visit to medical personnel
Application of heat therapy during second or subsequent visit to medical personnel	Use of whirlpool bath therapy during first visit to medical personnel
Use of whirlpool bath therapy during second or subsequent visit to medical personnel	Negative x-ray or MRI taken to confirm the existence or otherwise of a diagnosed condition
Positive x-ray or MRI diagnosis (fractures, broken bones, etc. including teeth)	Observation of injury during visit to medical personnel
Admission to a hospital or equivalent medical facility for operative treatment	Tetanus injection or precautionary antibiotics in case of infection
Fracture of any bone irrespective of the treatment prescribed (including teeth)	Administering immunisations (e.g. tetanus, hepatitis B) or application of antiseptics
Upon the seventh (7th) appointment with a doctor, physiotherapist, chiropractor, or any other allied health practitioner	Any one time treatment including subsequent follow up treatment for minor injuries

Appendix 2 – Notifiable Event Reporting Requirements

Information provided from WorkSafe NZ website

NOTIFIABLE EVENT

A notifiable event is any of the following events that arise from work:

- a death
- a notifiable illness or injury or
- a notifiable incident

NOTIFIABLE INJURY or ILLNESS

In this part, notifiable injury or illness of a person means an injury or illness requiring the person to have immediate treatment (other than first aid) for:

- the amputation of any part of his or her body;
- a serious head injury;
- a serious eye injury;
- a serious burn;
- the separation of his or her skin from an underlying tissue (such as de-gloving or scalping);
- a spinal injury;
- the loss of a bodily function;
- serious lacerations;

an injury or illness that requires, or would usually require, the person to be admitted to a hospital for immediate treatment

an injury or illness that requires, or would usually require, the person to have medical treatment within 48 hours of exposure to a substance

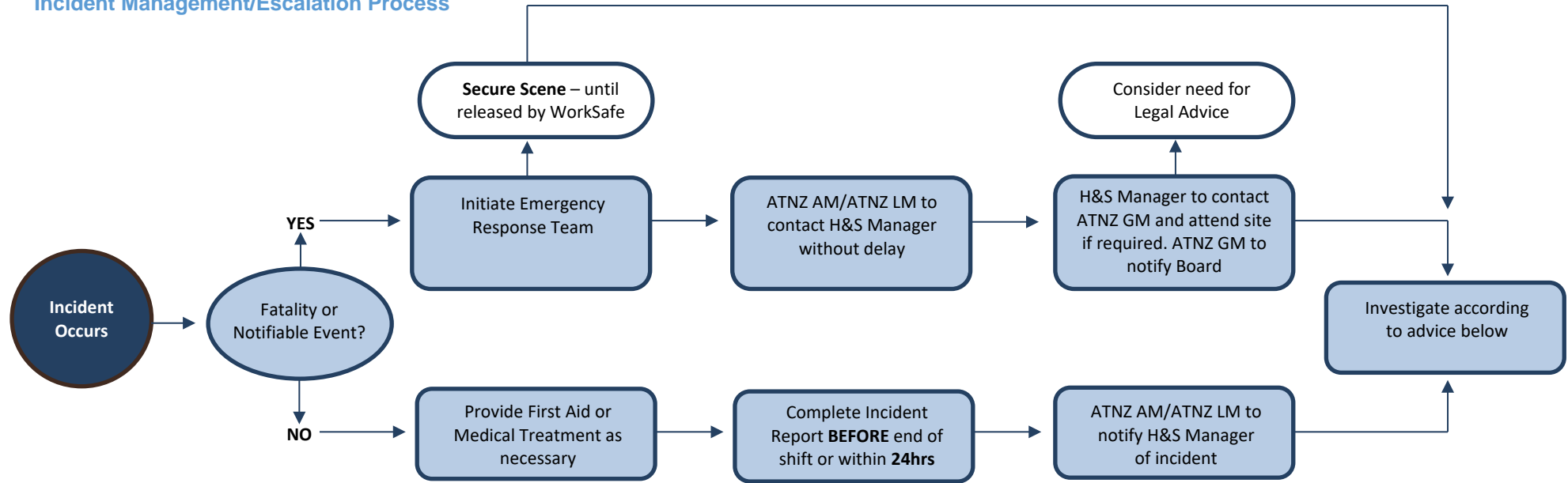
NOTIFIABLE INCIDENT

A notifiable incident means an unplanned or uncontrolled incident in relation to a workplace that exposes a worker or any other person to a serious risk to that person's health or safety arising from an immediate or imminent exposure to—

- an escape, a spillage, or a leakage of a substance; or
- an implosion, explosion, or fire; or
- an escape of gas or steam; or
- an escape of a pressurised substance; or
- an 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 regulations; or
- the collapse or partial collapse of a structure; or
- the collapse or failure of an excavation or 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
- a collision between 2 vessels, a vessel capsize, or the inrush of water into a vessel; or
- any other incident declared by regulations to be a notifiable incident for the purposes of this section.

Appendix 3 – Incident Escalation and Investigation Guidelines

Incident Management/Escalation Process



Investigation Guidelines

Types of Incidents	→ Fatality → WorkSafe Involvement → Legal Privilege	→ Lost Time Injury (actual or potential) → Notifiable to WorkSafe → Significant Near Miss	→ Restricted Work injury → Medical Treatment injury	→ First Aid Injury → Near Miss with Injury potential
Investigation Type/Timeline	Detailed investigation (e.g. ICAM) to commence within 24hrs or under instruction of legal advisor Submit report within 48hrs	Commence investigation within 24hrs Submit report within 1 week	Commence investigation within 3 days or as determined by Account Manager/Line Manager Submit report within 2 weeks	Account Manager/Line Manager to determine investigation start time H&S Manager to determine if an investigation needs to be carried out and maintain records of decision Submit report within 4 weeks
Investigator Competencies	Led by person with significant investigation experience (may be an external specialist)	Trained in investigation techniques (internal or external resource)	Complete basic investigation techniques and supported by H&S Manager as required	Complete basic investigation techniques and supported by H&S Manager as required
Investigation Team Members	Senior Leadership Team Host Company ATNZ Account/ATNZ Line Manager ATNZ National/ATNZ Functional Manager H&S Manager External Resource (as required)	Senior Leadership Team (as required) Host Company ATNZ Account/ATNZ Line Manager ATNZ National/ATNZ Functional Manager (as required) H&S Manager (under guidance or as required)	Senior Leadership Team (as required) Host Company ATNZ Account/ATNZ Line Manager ATNZ National/ATNZ Functional Manager (as required) H&S Manager (under guidance or as required)	Host Company ATNZ Account/ATNZ Line Manager H&S Manager (under guidance or as required)

