



Australian Government

Comcare

NOTIFICATION OF AN INCIDENT

This notification form is approved by Comcare for the purposes of section 38(5) of the *Work Health and Safety Act 2011* (Cth).

MANAGEMENT OF AN INDIVIDUAL'S PRIVACY

This form seeks to collect information—including personal information—for the purpose of administering and enforcing the WHS Act and the Work Health and Safety Regulations 2011 (Cth) (WHS Regulations).

Comcare is authorised by law to collect personal information under section 38 of the WHS Act where it is reasonably necessary to do so when administering and enforcing the Act and Regulations. Information on how Comcare manages an individual's privacy is available at http://www.comcare.gov.au/about_us/privacy.

INSTRUCTIONS

The red numbers in the form indicate the relevant section in the attached 'Guidance and examples'. All questions marked with an asterisk (*) are mandatory.

For further guidance refer to Comcare's *Guide to work health and safety incident notification*.

The duty to notify is held at all times by the person conducting the business or undertaking. (1)

Notifications can be given to Comcare by fax on 1300 305 916.

1. Details of the person conducting the business or undertaking (PCBU) which gave rise to the incident

* Agency/department/authority/company	<input type="text"/>
* Australian Business Number (ABN) (2)	<input type="text"/>
* Australian Company Number (ACN) (2)	<input type="text"/>
* Street address	<input type="text"/>
* Town/suburb	<input type="text"/>
* State	<input type="text"/>
* Postcode	<input type="text"/>

Person with management or control (PWMC) of the workplace where the incident occurred (2a)

* As above Other

If you have selected 'other' please complete the following

* Agency/department/authority/company

* Australian Business Number (ABN) (2)

* Australian Company Number (ACN) (2)

* Street address

* Town/suburb

* State

* Postcode

2. Previous notification of this incident

Has this incident been notified to Comcare previously, by telephone or in writing (fax or email)?

Yes No

If you have selected 'yes', please tick one of the following reasons for subsequent notification:

- Required by Comcare after previous telephone notification
- Requested by Comcare after previous written notification
- Additional information being notified
- Change to information previously notified
- Other

If 'other', what is the reason?

Method of first notification to Comcare

Telephone In writing Other

Date first notified to Comcare

Comments—include Comcare reference number if known

3. Details of the incident

* Date of incident

* Time of incident

* Type of incident (3)

- The death of a person
- A serious injury or illness of a person
- A dangerous incident

* Serious injury or illness type (if applicable) (4)

- Treatment as inpatient in a hospital
- Amputation of any part of body
- Serious head injury
- Serious eye injury
- Serious burn
- Separation of skin from underlying tissue (such as degloving or scalping)
- Spinal injury
- Loss of a bodily function
- Serious lacerations
- Medical treatment within 48 hours of exposure to a substance

Did the injury or illness require the person to have 'immediate' treatment?

- Yes No

* Dangerous incident type (if applicable) (5)

- An uncontrolled escape, spillage or leakage of a substance
- An uncontrolled implosion, explosion or fire
- An uncontrolled escape of gas or steam
- An uncontrolled escape of a pressurised substance
- Electric shock
- The fall or release from a height of any plant, substance or thing
- 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
- The collapse or partial collapse of a structure
- The collapse or failure of an excavation or of any shoring supporting an excavation
- The inrush of water, mud or gas in workings, in an underground excavation or tunnel
- The interruption of the main system of ventilation in an underground excavation or tunnel

Was there a serious risk to a person's health and safety that was 'immediate or imminent'?

- Yes No

Did this incident occur at a major hazard facility? (6)

- Yes No

Where did the incident occur?

* Workplace known as (7)

* Street address

* Town/suburb

* State

* Postcode

* Country

* Describe the exact location of the incident (8)

* Describe the sequence of events immediately leading up to the incident, including what, if anything, may have gone wrong (9)

* What activity was being performed when the incident occurred? (10)

* What, if any, plant, vehicles, equipment, substances or things were involved in the incident? (11)

4. Details of persons who died or suffered serious injury or illness

Note: You must include the full names and details of all persons who died or suffered a serious injury or illness.

Person 1

* Title	<input type="text"/>
* First names	<input type="text"/>
* Last name	<input type="text"/>
* Date of birth	<input type="text"/>
* Residential address	<input type="text"/>
* Town/suburb	<input type="text"/>
* State	<input type="text"/>
* Postcode	<input type="text"/>
* Occupation (if relevant)	<input type="text"/>
* Employer (if relevant)	<input type="text"/>
* Telephone number	<input type="text"/>
* Email address (if known)	<input type="text"/>

* Relationship to the PCBU (12)

- Employee
- Contractor/Self-employed
- Labour hire worker
- Group training apprentice or trainee
- Volunteer
- Member of the public
- Defence youth cadet
- Other

* Injury/illness details (13)

* Details of any treatment received or needed (14)

* Where was the injured person taken for treatment?

Person 2 (if applicable)

* Title

* First names

* Last name

* Date of birth

* Residential address

* Town/suburb

* State

* Postcode

* Occupation (if relevant)

* Employer (if relevant)

* Telephone number

* Email address (if known)

* Relationship to the PCBU (15)

- Employee
- Contractor/Self-employed
- Labour hire worker
- Group training apprentice or trainee
- Volunteer
- Member of the public
- Defence youth cadet
- Other

* Injury/illness details (16)

* Details of any treatment received or needed (17)

* Where was the injured person taken for treatment?

Additional injured persons (if applicable)

* Details of any other persons injured in the incident (17)

5. Details of workers involved in a dangerous incident (if not already named above)

Note: These persons may be contacted to provide additional information about this incident.

* First names

* Last name

* Role for the relevant work task giving rise to the incident

* Employer (if not the PCBU)

* Telephone number

* Email address (if known)

Worker 2 (if applicable)

* First names

* Last name

* Role for the relevant work task giving rise to the incident

* Employer (if not the PCBU)

* Telephone number

* Email address (if known)

6. Action taken or proposed to prevent a recurrence of a similar incident

* What action was taken immediately following the incident to prevent a recurrence of a similar incident—or to minimise any risk to health and safety that was present because of, or in the aftermath, of the incident? (18)

* Describe any longer term action taken or proposed to prevent a recurrence (if known) (19)

7. Disturbance/preservation of incident site

The person with management or control of a workplace (PWMC) at which a notifiable incident has occurred must ensure, so far as is reasonably practicable, that the site where the incident occurred is not disturbed until an Inspector arrives at the site—or any earlier time that an Inspector directs (s39(1) of the WHS Act).

* Has the site where the incident occurred been disturbed?

No Yes Don't know

If you have ticked 'no' proceed to section 8.

If you have ticked 'yes' or 'don't know' please answer the following question.

* Has a Comcare Inspector arrived at the site or authorised disturbance of the incident site? (20)

No Yes Don't know

If you have ticked 'yes' please complete the following.

* Inspector's name

* Date authorised

* Time authorised (if known)

If you have ticked 'no' please answer the following.

* Has the incident site been disturbed for one of the reasons set out in section 39(3) of the WHS Act? (20)

No Yes Don't know

* Primary reason for disturbance (20a)

- To assist an injured person
- To remove a deceased person
- To make the site safe or to minimise the risk of a further notifiable incident
- Police investigation
- Inspector of the regulator has given permission

* How was the site disturbed? (20b)

8. Details of person completing this form

* Title	<input type="text"/>
* First name	<input type="text"/>
* Last name	<input type="text"/>
* Position/designation	<input type="text"/>
* Telephone number	<input type="text"/>
* Email address	<input type="text"/>

9. Contact person for further enquiries

As above Other

If you have ticked 'other' please complete the following

* Title	<input type="text"/>
* First name	<input type="text"/>
* Last name	<input type="text"/>
* Position/designation	<input type="text"/>
* Telephone number	<input type="text"/>
* Email address	<input type="text"/>

10. Person responsible for implementing longer term remedial action

As in 8 above As in 9 above Other

If you have ticked 'other' please complete the following

* Title

* First name

* Last name

* Position/designation

* Telephone number

* Email address

GUIDANCE AND EXAMPLES

1 Who should complete this form?

The duty to notify is not transferable and is held at all times by the relevant person (entity) conducting a business or undertaking (PCBU).

However, the way in which the PCBU discharges this duty may involve arranging for another entity or person to submit notifications on their behalf. For example, this could be:

- > the person with management or control (PWMC) of the workplace
- > the supervisor of the injured worker
- > any other person with identified responsibility to notify.

Any failure by that person or entity to submit a notification on behalf of the PCBU may result in the PCBU having liability for a breach of section 38 of the WHS Act.

2 Australian Business Number (ABN)

The ABN is a unique 11-digit identifying number that businesses use when dealing with other businesses, the Australian Taxation Office and other government agencies. If you do not know your organisation's ABN number, you can search for it at: <http://www.abr.business.gov.au/AdvancedSearch.aspx>

Australian Company Number (ACN)

Under the *Corporations Act 2001*, every company in Australia has been issued with a unique, nine-digit number known as an Australian Company Number (ACN). The purpose of the ACN is to ensure adequate identification of companies for business transactions. It must be shown on a range of documents.

If you do not know your organisation's ACN number, you can search for it at: <http://www.search.asic.gov.au/gns001.html>

If your company has an ABN, you may use it with your company's name in place of the ACN, provided that the ABN includes your nine-digit ACN.

2a Person with management or control (PWMC)

The person with management control of a workplace refers to the person conducting a business or undertaking to the extent the business or undertaking involves the management or control of the workplace—in whole or in part (section 20(1) of the WHS Act).

3 Type of incident

A single incident may result in multiple outcomes. For example, a crane collapse may result in a serious injury and also be a dangerous incident. The type of incident selected must relate to the most severe outcome. In this example, the type of incident would be serious injury.

The WHS Act (section 35) defines notifiable incidents as:

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

Please refer to the WHS Act for definitions of serious injury or illness (section 36) and dangerous incident (section 37).

For assistance with interpreting these terms please refer to Comcare's *Guide to work health and safety incident notification*.

4 Serious injury or illness type

The dropdown box in the form contains the treatment and injury details specified in the WHS Act and Regulations for serious injury or illness. Select the one that most adequately represents the highest level of treatment and injury that resulted from the incident.

Serious injury or illness is defined in section 36 of the WHS Act. The Regulations may also include or exclude other injuries or illnesses as serious injuries or illnesses, but do not currently do so.

5 Dangerous incident type

The dropdown box in this form contains a list of events specified in the WHS Act and Regulations as dangerous incidents. Select the dangerous incident type that best represents the incident in terms of the risk to health and safety of workers and other persons.

Dangerous incident is defined in the section 37 of the WHS Act as an incident in relation to a workplace that exposes a worker, or any other person, to a serious risk to health or safety emanating from an immediate or imminent exposure to certain events. The Regulations may also include or exclude other events as dangerous incidents, but do not currently do so.

An accident may involve a number of incident types. For example, 'the collapse or partial collapse of a structure' may have lead to 'an uncontrolled escape, spillage or leakage of a substance'. In this case determine whether the health and safety of workers or other persons was more at risk from the collapse of the structure, or from exposure to the spilled substance, and record that incident type. If the risk is the same for each incident type, record the incident that occurred first.

6 Did this incident occur at a major hazard facility?

Major hazard facilities (MHFs) are sites that have the potential to cause major accidents, where consequences may rival natural disasters in terms of loss of life, injury, damage to property and disruption of services. To be a MHF a facility must be:

- (a) determined by Comcare to be a MHF and/or licensed under Part 9 of the WHS Regulations
- (b) a facility at which chemicals listed in Schedule 15 of the Regulations are present, or likely to be present, in a quantity that exceeds the prescribed threshold quantities.

7 Workplace known as

The general workplace where the incident occurred may have a name by which it is commonly known. For example: Robertson Army Barracks, HMAS Stirling, Melbourne Delivery Centre, National Gallery, Yulara Visitors Centre, Black Mountain Laboratories.

A full street address must also be given in the relevant fields of the form.

8 Describe the exact location of the incident

This is intended to provide accurate details of where the incident occurred, for example:

- > On the corner of Barry Drive and Baldwin Close at the traffic light situated across from the Caltex petrol station in Braddon ACT 2612.
- > Storage room across from the lift on the north side on Level 1, 14 Moore St Canberra ACT 2601.
- > Bridge pier number 206, adjacent to the southern office compound on South Road, 200 metres north of the intersection with Days Road Regency Park SA 5010.

9 Describe the sequence of events immediately leading to the incident

Examples:

- > The crane operator was performing a pick and carry of a 6 tonne load with a mobile crane. After lifting the load, the operator was driving the suspended load to another area in the yard when the crane tipped over.
- > A contractor was conducting fault testing on an electrical cabinet when he touched a live socket and received an electric shock.
- > The worker was mixing cement using a machine called a paddle mixer. As the worker attempted to remove material from the open hatch, his fingers were caught by the rotating blades.

10 What activity was being performed when the incident occurred?

Examples:

- > The worker was lifting and shifting drums manually.
- > The soldier was loading his rifle, following the safe operating procedure (SOP) for rifle loading.
- > The worker was driving through the traffic lights when a person walked in front of the truck.

11 What, if any, plant, vehicles, equipment, substances or things were involved in the incident?

Section 5 of the WHS Act defines plant as including:

- (a) any machinery, equipment, appliance, container, implement and tool
- (b) and any component of any of those things
- (c) anything fitted or connected to any of those things.

Substance is defined as 'any natural or artificial substance, whether in the form of a solid, liquid, gas or vapour'.

Examples:

- > Company truck, 2 tonne, rego ABC-123 and 25kg drums (empty).
- > F88 Steyr automatic rifle.
- > Paint solvent—methyl ethyl ketone—and leather work gloves.
- > 20 tonne Linmac mobile crane, registration number 123-456.

12 Relationship to the notifying entity

Select from the drop down list to show the relationship the injured person had to the entity that conducts the business or undertaking that gave rise to the incident.

13 Provide injury/illness details

This should be as descriptive and precise as possible.

Examples:

- > Suffered a broken left leg, sprain to the right ankle and a suspected broken rib.
- > Received minor laceration to front of head/temple and possible concussion.
- > Suffered an amputation of part of the little finger of left hand, severe laceration of the ring finger, and ligament and tendon damage to the left wrist.

14 Details of any treatment received or needed

Examples:

- > Worker taken to hospital with breathing difficulties and was admitted for observation overnight.
- > Worker taken to hospital in an ambulance, treated in casualty where burns were dressed and worker was referred for skin grafts.
- > First aid administered by first aid officer on site. Ice pack applied. Worker taken to emergency dental practice to replace knocked out tooth.

15 Provide injury/illness details (Person 2)

(Same as 13)

16 Details of any treatment received or needed (Person 2)

(Same as 14)

17 Details of any other persons injured in the incident

List each of the persons named on a different line, including details of their injuries and treatment received. Where possible include the relationship to the entity that conducts the business or undertaking that gave rise to the incident.

Examples:

- > Joe Smith—member of the public, taken to hospital and an x-ray was taken confirming fracture of the left index finger.
- > Jane Brown—employee, could be suffering from concussion, went to her local GP who advised her to apply a cold compress and gave her two days off work.

18 What action was taken immediately following the incident to prevent a recurrence?

List all immediate action that has been taken to prevent such an incident from occurring again.

Example:

The hydraulic lift was immediately returned to the loading dock and all employees were reminded to wear their personal protective gear (i.e. helmets) when in the loading zone.

19 Describe any longer term action taken or proposed to prevent a recurrence

Describe what action will be undertaken, or is proposed, to prevent future recurrences. If remedial action has not yet been determined, describe the process to determine the remedial action.

Examples:

- > An internal investigation will be undertaken to review the manual loading process and update it, if necessary.
- > Signs will be placed around the loading area reminding staff of their duty to wear appropriate safety gear at all time.
- > Check with the manufacturer and/or supplier that the guard for the power-take off shaft is the correct size and length for the drive shaft, and replace where necessary.

20 Disturbance/preservation of incident site

Subsection 39(1) of the WHS Act sets out the requirement for the PWMC to ensure the site where an incident occurred is not disturbed until an Inspector arrives at the site—or any earlier time that an Inspector directs.

For example, if the incident site is confined to a particular physical location within an office building, and no immediate risk to health and safety remains for people in other parts of that office, then the entire office would need to be isolated (preserved) until Comcare Inspectors advise otherwise.

In terms of subsection 39(3) of the WHS Act, subsection (1) does not apply to any action:

- (a) to assist an injured person
- (b) to remove a deceased person
- (c) that is essential to make the site safe or to minimise the risk of a further notifiable incident
- (d) that is associated with a police investigation
- (e) for which an Inspector or the regulator has given permission.

20a Primary reason for disturbance

There may be more than one permitted reason for the site to be disturbed. For example, it may have been necessary to disturb an incident site to assist an injured person and to make the site safe. Choose from the list the reason that caused the most disturbances or, if equal, choose any one of the relevant reasons.

20b How was the site disturbed

Examples:

- > The crane that had tipped over was leaking fuel onto the ground. To prevent ignition of the fuel several loads of sand were spread on the fuel and around the crane.
- > Emergency services personnel cut into the cabin of the truck, removing the roof and the passenger side door, in order to gain access to the injured driver. Police removed several items, including a mobile phone, from the cabin.
- > Several pallets of stock were moved from the area to enable emergency vehicles to have access. The chemical spill was cleaned up to limit the spread of harmful fumes to neighbouring properties and prevent discharge into the nearby lake. All warehouse doors were opened to increase ventilation to the area.