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Health and Safety Reporting (RIDDOR) Policy

Sample policy template. This is a Verivius-authored template based on the verbatim text of the statutory source. Tenants adapt the operational sections to their own organisation. Where this template and the live regulation diverge, the live regulation wins.

Statutory anchor: Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (SI 2013/1471) **Primary source:** https://www.legislation.gov.uk/uksi/2013/1471/contents **Last reviewed:** 2026-06-01 **Verivius pack version:** v1.1, 2026-06-01

1. What the regulation says

> Where any person at work, as a result of a work-related accident, suffers [a specified injury listed in (a)-(h)], the responsible person must follow the reporting procedure.
>
> Where any person at work is incapacitated for routine work for more than seven consecutive days (excluding the day of the accident) because of an injury resulting from an accident arising out of or in connection with that work, the responsible person must send a report to the relevant enforcing authority in an approved manner as soon as practicable and in any event within 15 days of the accident.
>
> Where any person not at work, as a result of a work-related accident, suffers (a) an injury, and that person is taken from the site of the accident to a hospital for treatment in respect of that injury; or (b) a specified injury on hospital premises, the responsible person must follow the reporting procedure, subject to regulations 14 and 15.
>
> Where any person dies as a result of a work-related accident, the responsible person must follow the reporting procedure.
>
> Where an employee has suffered an injury reportable under regulation 4 which is a cause of his death within one year of the date of the accident, the employer must notify the relevant enforcing authority of the death in an approved manner without delay, whether or not the injury has been reported under regulation 4.
>
> An entry in the record referred to in paragraph (1) must be kept for at least three years from the date on which it was made.
>
> The responsible person must notify the relevant enforcing authority of the reportable incident by the quickest practicable means without delay, and send a report of that incident in an approved manner to the relevant enforcing authority within 10 days of the incident.

> The full text of the regulation is at https://www.legislation.gov.uk/uksi/2013/1471/contents. Where this policy and the regulation diverge, the regulation wins.

2. Plain British summary

RIDDOR creates a duty to report certain work-related events to the relevant enforcing authority (the Health and Safety Executive for most providers; specific bodies for offshore and rail). The reportable categories are: deaths from a work-related accident (Regulation 6), specified non-fatal injuries to workers (Regulation 4), non-fatal injuries to non-workers including patients that result in hospital treatment from a work-related accident (Regulation 5), dangerous occurrences listed in Schedule 2 (Regulation 7), occupational diseases (Regulation 8), and exposures to carcinogens, mutagens and biological agents (Regulation 9). The "work-related" qualifier is load-bearing: a patient injury caused by patient frailty alone is not RIDDOR-reportable; a patient injury caused by a slippery floor, faulty equipment, or staff handling error is. Reports for fatalities and specified injuries must be made by the quickest practicable means without delay; the formal report follows within 10 days. The responsible person must also keep an internal record for at least 3 years.

3. Scope

This policy applies to all employees, contractors, agency workers, and visitors at <provider name>. It covers work-related accidents involving workers and non-workers (patients, visitors, members of the public), occupational diseases, dangerous occurrences listed in RIDDOR Schedule 2, and exposures to carcinogens, mutagens, or biological agents. It covers every site, every patient-handling activity, every premises-and-equipment-related risk, and the cross-link from RIDDOR-reportable events to the platform's incident-reporting register.

(Tenant updates the angle-bracket placeholder.)

4. Roles and responsibilities

- **Registered Manager:** the "responsible person" under RIDDOR for most providers. Accountable for the RIDDOR reporting system. Reads every RIDDOR-reportable record and signs off the report before submission.
- **Nominated Individual:** holds provider-side accountability.
- **Health and Safety Lead (named individual; in small services often the Registered Manager):** the day-to-day RIDDOR-decision authority. Reads each new incident at log-time to confirm the RIDDOR-trigger call. Files the report with HSE through the online portal or, for fatalities and specified injuries, by phone first.

- **All staff:** know what counts as a RIDDOR-reportable event (death, specified injury, over-7-day worker incapacity, non-worker injury requiring hospital treatment from a work-related accident, dangerous occurrence, occupational disease, exposure to carcinogens or biological agents), raise the suspected RIDDOR event to the Health and Safety Lead the same shift.

(Tenant updates the named role-holders.)

5. Procedure

The RIDDOR procedure operationalises the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

1. **Recognise and report.** When an accident or dangerous occurrence happens, the staff member ensures the immediate safety of any person involved, then raises the event to the Health and Safety Lead the same shift. Where the event is fatal or involves a specified injury, the Health and Safety Lead is notified immediately by phone.
2. **Log the event in the incident register.** Every reportable event is also logged in the platform's incident reporting register so the audit trail runs through one place.
3. **Trigger assessment.** The Health and Safety Lead applies the RIDDOR trigger map: is this a death (Reg 6), a specified injury to a worker (Reg 4), an over-7-day incapacity injury to a worker (Reg 7(a)), a non-worker injury from a work-related accident requiring hospital treatment (Reg 5), a dangerous occurrence in Schedule 2 (Reg 7), an occupational disease (Reg 8), or a carcinogen/mutagen/biological agent exposure (Reg 9). The "work-related" qualifier is checked first: patient injury caused by patient frailty alone is not RIDDOR; patient injury caused by slippery floor, faulty equipment, or staff handling error is.
4. **Immediate notification (where applicable).** Fatalities, specified injuries, and dangerous occurrences must be notified to HSE by the quickest practicable means without delay (typically the HSE phone line for fatalities; HSE online form for the rest within the immediate window).
5. **Formal report.** The formal report follows within 10 days of the incident for the categories notifiable under Reg 4 (worker specified injury), Reg 5 (non-worker injury), Reg 6 (death), and Reg 7 (dangerous occurrence). Within 15 days for the over-7-day worker incapacity reports under Reg 4. Within 10 days for occupational diseases under Reg 8.
6. **Use the HSE online portal.** Reports are submitted through the HSE online reporting form (riddor.hse.gov.uk) or by phone for fatal and specified-injury events. The HSE reference number is captured against the platform's incident record.
7. **Cross-link to other obligations.** RIDDOR-reportable events affecting service users may also meet the Reg 18 (Registration Regulations 2009) CQC notification trigger. The Health and Safety Lead spawns the CQC notification where applicable.
8. **Cross-link to duty of candour.** RIDDOR-reportable events affecting service users at the moderate-harm threshold or above open a duty-of-candour record per the Reg 20 policy.

9. **Investigation and learning.** Every RIDDOR-reportable event is investigated through the standard incident-investigation lifecycle. The investigation surfaces the work-related root cause, which produces improvement actions.
0. **Pattern review.** The aggregate RIDDOR-reportable pattern is reviewed quarterly at the health and safety committee (or the clinical governance committee in providers without a separate H&S committee). HSE may inspect the RIDDOR records during a routine visit; the pattern review is the visible evidence that the team is reading its own data.

6. Training requirement

- All staff complete health and safety awareness training at induction and every three years, covering RIDDOR triggers and the same-shift-raise expectation.
- The Health and Safety Lead completes RIDDOR-specific training at appointment and refresher every two years.
- Staff handling clinical waste, sharps, and biological materials complete role-specific COSHH and biological agent training at induction and annually.
- Manual handling training at induction and annually for clinical and care staff (RIDDOR Reg 4 specified injuries include several from poor handling).

Training records held in the tenant's training matrix register.

7. Audit

Compliance with this policy is monitored by the Health and Safety Lead:

- **Per-incident trigger sign-off:** every incident logged in the trailing month is checked for RIDDOR-trigger sign-off (report filed where one should have been; no-report-needed reasoning attached where the work-related qualifier was not met).
- **Quarterly RIDDOR-pattern review:** trailing-12-month view by category, by site, by activity. Patterns producing repeat causes are escalated as a system-level risk.
- **Annual policy review:** the policy is read against the live RIDDOR 2013 text and any current HSE guidance.

Audit findings recorded in the tenant's audit register; actions logged in the improvement-actions register.

8. Record-keeping

RIDDOR records are held for a minimum of 3 years from the date the entry was made per RIDDOR Reg 12(2). Most providers retain RIDDOR records for the same 8-year minimum as the related incident record under the NHS Code of Practice on Records Management. HSE may inspect the records at any reasonable time within the retention period.

The platform's incident record (which cross-links to the RIDDOR report) is held for the standard incident-retention period per the incident reporting policy.

Verivius preserves the per-record audit trail indefinitely while the workspace is active.

9. Related policies in this pack

- Safe Care and Treatment Policy (`hscra-reg-12-safe-care-and-treatment`)
- Premises and Equipment Policy (`hscra-reg-15-premises-and-equipment`)
- Statutory Notifications Policy (`cqc-reg-18-notification-of-other-incidents`)
- Duty of Candour Policy (`hscra-reg-20-duty-of-candour`)
- Fire Safety Policy (`fire-safety-order-2005`)

10. Document control

Version	Date	Author	Changes
v1	2026-05-19	Verivius (sample)	Initial sample template.
v1.1	2026-06-01	Verivius (sample)	Filled out Sections 3 to 8 with concrete content. Section 4 names the Health and Safety Lead role with the RIDDOR-trigger and HSE filing responsibilities. Section 5 expanded to a 10-step procedure covering recognise, log, trigger assessment, immediate notification for fatalities and specified injuries, formal report, HSE portal use, cross-link to CQC Reg 18, cross-link to duty of candour, investigation, pattern review. Section 6 names training tiers. Section 7 names the audit cadence. Section 8 references the RIDDOR Reg 12(2) 3-year minimum plus NHS Code of Practice on Records Management.

This sample policy template was issued by Verivius as part of the Mock Inspection design partner onboarding pack. It is a template, not a substitute for legal advice or the tenant's own policy-development process. Where this template and the live regulation diverge, the live regulation wins.
