

Safety & Environment Manual
Section 5 : Accident and Incident Investigation

**5.05 – Personal Accident Reporting and
Investigation**

Issue History

Version	Date	Author	Comments
8	July 2018	Mark Manser	Replacement of Near Miss with Close Call terminology and update of related processes. All paperwork retained in accordance with DPM0140 – Data Retention and Destruction Policy.
9	April 2021	Martin Lacey	Definitions reviewed. Accident Owner clarified. Section 11 of the Accident / Incident Investigation Report revised to make Recommendations more explicit. Standard re-formatted.
10	Mar 2023	James Moloney	Full review and rewrite of standard

Release Control

The following personnel must formally approve the document prior to assigning a non-draft version number.

Prepared by (Name & Title)	Authorised by (Name & Title)	Date Approved for Release
James Moloney Safety Systems Manager	Rob Mullen Managing Director	31/03/2023

Document Review

This Safety & Environment Manual Standard will be reviewed triennially or when any of the following occur:

- a) Introduction of new or alteration to existing methods.
- b) Internal reorganisation or restructuring.
- c) After any accident or incident investigation or audit that highlights the need for a review of systems and procedures relating to this procedure.
- d) Any change in relevant Legislation or Railway Group Standards/Rail Industry Standards.

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1. Purpose

This procedure describes how Trenitalia c2c reports and investigates safety events so the causes can be identified in a consistent and effective manner. This procedure is also designed to ensure that we comply with relevant legislation and industry standards.

2. Scope

- 2.1 This procedure applies to safety events to employees, contractors, members of the public (including passengers and trespassers), other railway group members, visitors (person on business) as well as emergency events. The person responsible for letting a contract must ensure that the contractor is aware of the requirements of this procedure.
- 2.2 The procedure does not cover: events that are reported to the police that do not involve injury, threat or abuse;
Occupational ill health: *(Any instances of occupational ill health must be reported to the c2c Human Resources Department.)*
- 2.3 The procedure covers personal injury resulting from road traffic accidents while driving on c2c business.

3. References

- RIS-3119-TOM-Iss 2 - Rail Industry Standard for Accident and Incident Investigation
- HSE 245 - HSE Guidance on Investigating Accident and Incidents.
- HSG 48 - HSE Guidance on human factors in health and safety and how to reduce errors and encourage better behaviour.
- RIDDOR - The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- SMS Section 9.01 - Accident / Incident Analysis
- Social Security Act 1998
- Health & Safety at Work Act 1974
- The Railways (Accident Investigation and Reporting) Regulations 2005 to be included in references

4. Definitions

Accident	An unplanned, uncontrolled event that results in death, injury, or other loss.
Assault/Threat/Abuse event	Any instance of physical assault, threatening behaviour, or verbal abuse.
Accident / Incident Reporting Database	A database used to record safety events and for managing and monitoring the results of investigations into their cause from start to completion.
Designated Competent Person (DCP)	The person designated to approve the remit and final investigation report.
Incident	Any occurrence, other than an accident or serious incident associated with the safe operation of the railway.
Investigating Manager	A manager that is competent to undertake accident / incident investigations as part of their duties and is appointed by the Responsible Manager.

Near Miss/Close Call	An unplanned, uncontrolled event, which under slightly different circumstances could have resulted in an accident.
Operational Incident	Any safety of the line event. <i>Examples: SPADs, derailments, collisions, station over runs, stop shorts, fail to calls, SDO/Door irregularities, train dispatch irregularities, TPWS events, etc (this list is not exhaustive).</i>
ORR	Office of Road and Rail
RAIB	Rail Accident Investigation Branch
Responding Person	The individual providing the initial response to the safety event.
Responsible Manager	The manager responsible for appointing the Investigating Manager, setting a standard investigation remit, ensuring that the investigation has been carried out satisfactorily, that all supporting documentation and evidence has been properly compiled and completed and that appropriate recommendations have been or will be implemented accordingly. Responsible Managers are further defined within Appendix A.
RIDDOR	Legislation which mandates the Reporting of Injuries, Diseases and Dangerous Occurrences to the Health & Safety Executive, ORR Safety Directorate or the Local Authority.
Safety Event	An accident, violent incident, operating incident or near miss. The term used to describe any occurrence which requires to be reported and investigated under this procedure.
SDC	Service Delivery Centre
SMS	Safety Management System
SMIS	Safety Management Intelligence System – national rail system for the reporting and collation of safety related information.

5. Procedure

5.1 Reporting the Event

- 5.1.1 If any member of staff is involved in or witnesses a safety event; they must:
- a) Inform the appropriate person at the earliest practical opportunity
 - b) Complete the appropriate report form(s)
 - c) Send by email the completed report form to the SDC and the HQ Safety & Environment Department.
- 5.1.2 If a member of staff is advised by a person, such as a passenger, member of the public, contractor or employee of other Railway Group Members, that they have had or witnessed an accident on c2c premises, the member of staff must:
- a) Obtain as much information as possible about the circumstances of the accident
 - b) Inform their Line Manager at the earliest practical opportunity
 - c) Ensure that the site of the accident is made safe if necessary and take remedial action to prevent a similar accident happening whenever possible
 - d) Make an entry in the Accident Reporting Book and send copies to the SDC and the HQ Safety & Environment Department at safety.reporting@c2crail.net

e) Carry out any appropriate duty of care arrangements.

5.1.3 Where the event results in the affected employee being relieved from duty, the SDC will report the circumstances to the appropriate On-Call Manager.

Where the event results in a fatality or major injury, or is reportable under RIDDOR, the SDC will inform the ORR Safety Directorate (out of hours – see Appendix L) or the HQ Safety & Environment Department (during office hours). The SDC Controller will also advise the Head of Safety & Environment at the earliest opportunity.

As soon as it is known that the accident or assault will result in days being lost from duty, a “Lost Time” alert form should be completed and sent to the Head of Function, Line Manager and HQ Safety & Environment Team as soon as possible. If the accident or assault has resulted in a long period of sickness or absence, this should be completed each time a welfare call is undertaken to update as to the current situation.

5.1.4 The responding person will gather evidence and statements and will complete the preliminary report. If the on-call manager is not required to attend the event, they will take statements and complete a preliminary report on the next working day following the event. The on-call manager will email or scan the preliminary report form to the SDC and to the HQ Safety & Environment department.

5.1.5 There are two different levels of investigation carried out on c2c:

Local: The normal investigation which takes place for the majority of all safety events. The investigation is carried out by a competent investigator appointed by the Responsible Manager following the remit set by the Responsible Manager.

Formal: A formally structured investigation into the circumstances of a safety event following the principles outlined in Rail Industry Standard RIS-3119-TOM. by a competent investigator appointed by the Responsible Manager following the remit set by the Designated Competent Person (DCP).

5.1.6 Implementation of Investigation Process

a) The Responsible Manager / DCP will select and appoint a competent Investigating Manager.

b) The Responsible Manager / DCP will agree the remit with the Investigating Manager.

c) For Formal Investigations, this will be undertaken at the 72hr review stage.

d) If a completed investigation is not available within the 72 hours an interim report will be required and the final report within 10 days.

5.1.7 The Investigating Manager will:

a) Agree the remit for the investigation with the Responsible Manager / DCP.

b) ensure that a comprehensive investigation is conducted, and that immediate, basic, and underlying causes are correctly identified.

c) ensure that all supporting documentation and evidence is obtained and attached electronically to the investigation report.

d) ensure that recommendations are made where applicable to prevent recurrence.

e) ensure that all required details are entered into the investigation report form and submitted to the Responsible Manager in sufficient time to enable close out within 10 days of the accident.

f) If the investigation is not able to be closed out within the 10 days set, the Responsible Manager must request an extension from the HQ Safety & Environment Department.

5.1.8 Remit for 72hr reviews for Formal Investigations

- a) Establish the basic details of the event.
- b) Where applicable review the operating and competency history of those staff directly involved to establish if there were any known concerns, their experience levels or any existing competency or welfare issues.
- c) Where applicable work schedules prior to the event for those directly involved and any concerns relating to fatigue.
- d) Review the reports from those concerned and any other available evidence.
- e) Ensure that all other applicable evidence is being obtained within any critical time limits (e.g. CCTV, OTDR, etc).
- f) If applicable establish if any staff involved are required to attend a post incident medical.
- g) Establish if any immediate remedial actions are required prior to conclusion of the investigation.
- h) Establish if any temporary work restrictions are required for any staff involved, or if they can resume their safety critical duty.
- i) Highlight any areas where the investigation should focus and include these in the investigation remit.

5.2 Recommendations

- a) All actions taken and recommendations must be recorded on the investigation form and be clearly linked to sound conclusions reached through the analysis of gathered evidence.
- b) Actions and recommendations to be logged in the recommendations tracking database will be tracked
- c) Local Actions must be tracked locally by the Reviewing Manager with local arrangements made for the tracking of 'offline' actions
- d) Local tracking must include the investigation reference number, actions details, actions owner and assigned timescales.
- e) Recommendations arising from investigations are tracked through to conclusion and monitored to ensure that they are effective in achieving their aims, c2c shall have in place formal recommendations review groups within in its structure of safety meetings.
 - The areas that the groups will focus on include:
 - Tracking of open Recommendations
 - Monitoring of closed recommendations
 - Identification of key learning points and
 - Sharing of good practice.

5.3 Claims

- a) The Claims Handler acts as the initial point of contact for the c2c Company solicitor. The Claims Handler will liaise with Responsible Managers as necessary to provide the solicitor with information.
- b) Managers must not enter correspondence with solicitors, Trade Unions or any non-c2c person(s) on a matter of personal injury to staff, contractors, or members of the public.
Should a solicitor or other external person wish to visit premises leased by c2c in order to interview witnesses or examine/ photograph an accident site, they must be referred to the Claims Handler.
- c) No written material, photographs or copies of materials may be loaned, given, or sold to an injured party or their representative. Any such requests must be directed to the Claims Handler.

6. **Record Keeping**

The Responsible Manager will retain completed Accident Reporting Books for four years after the date of the last entry.

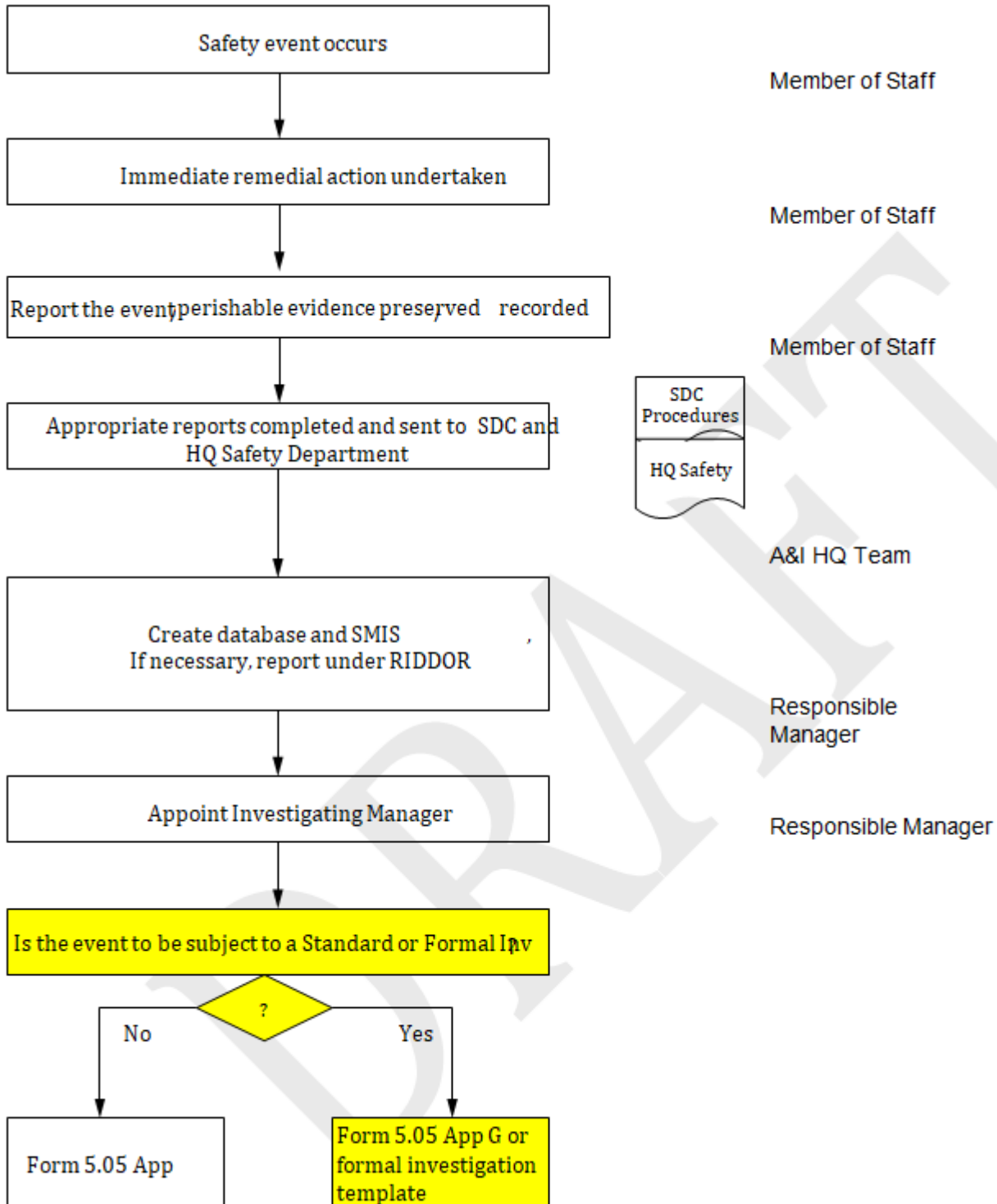
7. **Monitoring and Review**

- a) The Head of Safety & Environment monitors compliance against timescales through periodic monitoring.
- b) Information on the rate of completion of Safety Event entries is provided to c2c through the Safety Performance Report.
- c) The requirements of this procedure will be subject to audit by the HQ Safety Department & Environment Department as part of the Safety Management assurance process.

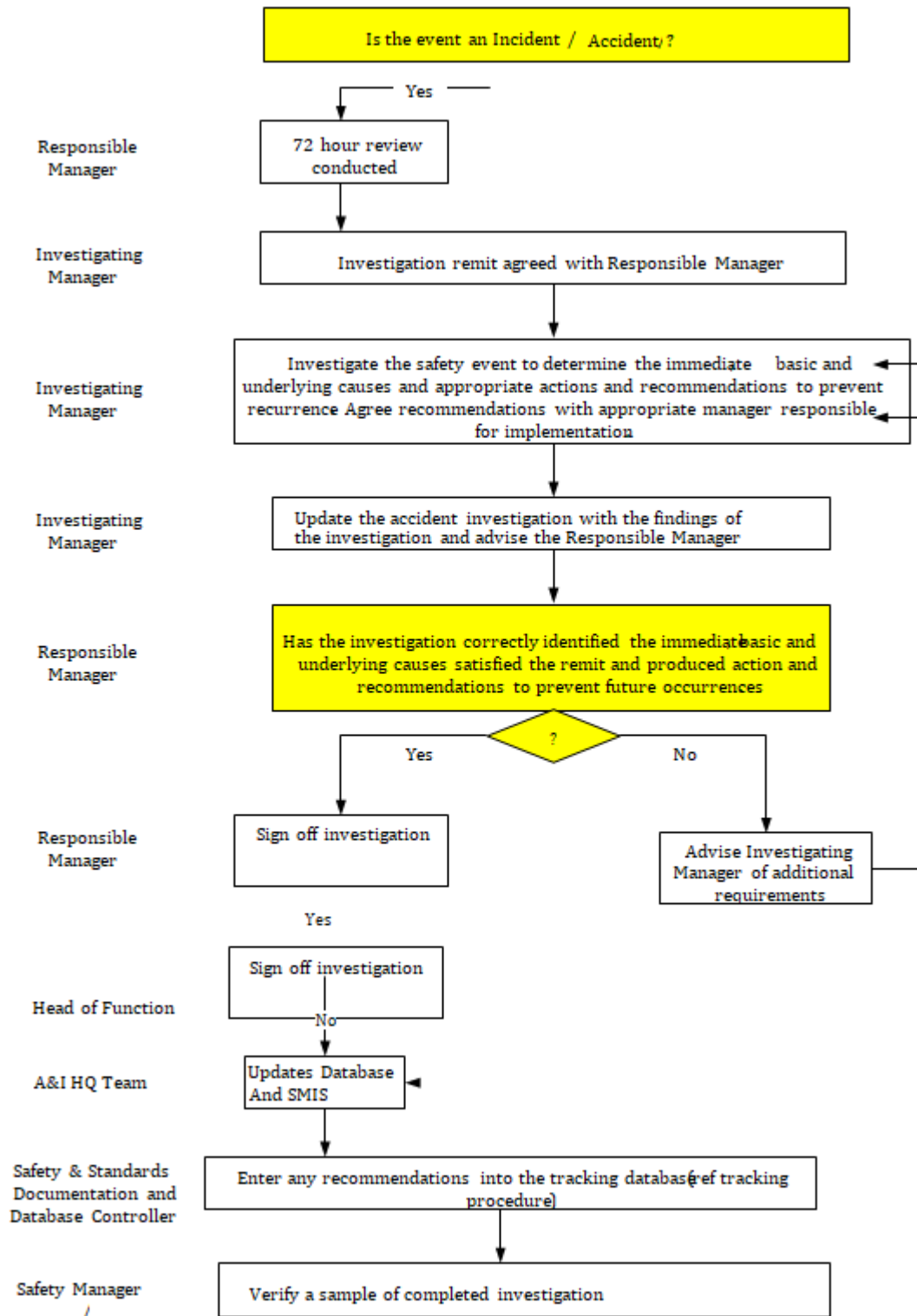
8. **Competence Management for relevant personnel**

- a) Recognising the importance of providing their staff with suitable information, instruction and training, c2c will ensure that this is addressed by providing initial and continuous review.
- b) Recognising skills and knowledge fade and look to address this through on-going competence management. This will be managed through initial and refresher training.
- c) Monitoring and quality checking reports and investigations.
- d) Reviews and appraisals on reports and investigations
- e) Appointment of dedicated Investigating Managers who maintain skills and knowledge
- f) Local Managers are responsible for ensuring that their teams are aware of reporting and response procedures

Section 2: Flowcharts



Section 2: Flowcharts



Appendix A: Responsible Managers Accidents / Assaults / Close Calls

Location	Person Involved	Responsible Manager
<u>Stations</u> (excluding PTI events involving trains)	Staff	Functional Manager (e.g. Driver Depot Manager, Station Manager, Fleet Safety & Standards Manager)
	Customers / Public	Customer Delivery Manager
	Visitors	Customer Delivery Manager
	Security contractors	Customer Delivery Manager / Head of Revenue Protection & Security
	Contractors working within their own worksite	c2c Function Responsible for the management of the site
	Tenants	Station Manager
<u>PTI and On board trains</u> (including boarding trains)	Staff	Functional Manager (e.g. Driver Depot Manager, Customer Delivery Manager, Fleet Safety & Standards Manager)
	Customer / Public	At DOO dispatch Locations: Driver Depot Manager At Locations where dispatch is undertaken by station staff: Customer Delivery Manager.
	Security contractors	Head of Revenue Protection & Security
<u>Traincare depots</u>	Staff	Functional Manager (e.g. Fleet Safety & Standards Manager, Driver Depot Manager)
	Public	Fleet Safety & Standards Manager
	Visitors	Fleet Safety & Standards Manager
	Contractors	Fleet Safety & Standards Manager
<u>Offices and training centres</u>	Staff	Functional Manager (e.g. Fleet Safety & Standards Manager, Driver Depot Manager, Manager responsible for the management of the location)
	Visitors	As determined by multi-occupancy procedure.

Notes:

The Responsible Manager will appoint the Investigating Manager.

For staff accidents etc. that do not occur on c2c leased premises, the Responsible Manager identified above should liaise with the relevant Location Manager.

For staff accidents where the accident occurs at premises outside the control of the functional line manager, the investigating manager must make the location manager aware of the findings of the investigation.

For contractor accidents, the c2c investigating manager must liaise with the contractors owning manager.

Where safety related events occur on public premises but are caused by our activities, the Head of Safety must be consulted to determine if we need to carry out an investigation into the event and to appoint a suitable Responsible Manager.

Appendix B: 72 Hour Review template

72 Hour Review Agenda

Event Date		Event Type		Event Location	
Location of 72Hr Review				Date of 72Hr review	
Attendees	Name	Job Title	Company/Location		
Staff Involved <i>(Traincrew, station staff etc)</i>				Depot	
Remit for 72 Hour Review					
1	Establish the basic details of the event				
1.a	<div style="background-color: #cccccc; padding: 5px;"><i>Summary of event</i></div>				
1.b	<i>What were the immediate causes</i>				

2	Review Competency History of those involved			
2.a	<i>Records of assessment</i>			
	Date	Type <i>Practical/ Discreet</i>	Grade Achieved	Issues/comments <i>Where assessment completed in time, any issues identified, etc</i>
2.b	<i>Previous Operational Incident History</i>			
	Date	Incident	Comment. <i>support plans in place/ effective/ completed/ etc</i>	
2.c	<i>Experience level</i>			

2.d				
3	Review Evidence			
3.a	<i>Staff reports</i> <i>Witness Reports</i> <i>Recorded evidence etc</i>			
3.b	<i>Evidence Still to obtain</i>			
4	Immediate actions			
4.a				
4.b	<i>Communication of Event/lessons learnt to other functions</i>			
5	Highlight any areas for the investigation to focus on			
5.a	<i>Areas to include/specific objectives for the remit</i>			
6	Signatures			
Chair	Name		Signature	

Appendix C: Responsible Manager Sign Off

Criteria	Has the Investigation met the criteria		Comments
	Yes	No	
The reports submitted by the Investigating Manager have been reviewed to ensure that a thorough investigation has taken place.			
The investigation has collected all suitable and sufficient evidence, analysed it thoroughly and identified the evidence that has directly and indirectly contributed to the event.			
The investigation has identified relevant factors for consideration and correctly identified the causes based upon the causal factors.			
The investigation determined the correct causation with consideration to the Job, the Individual and the Organisation.			
The control measures and recommendations identified are appropriate and they have been agreed with the manager responsible for their implementation, including a timescale for completion.			
<p>Any Questions answered "No" should be returned to the investigating manager with guidance as to what is required. If the investigation has been signed off with any of the criteria is answered "No", a justification should be the comments section.</p> <p>Responsible Manager [Print Name</p> <p>Signature:</p> <p>Date</p>			

Appendix D: Accident / Assault Reporting Brief

Forms should be sent to safety.reporting@c2craill.net and customerinformation.manager@c2craill.net

Report forms should be completed by the person involved in the accident unless they are not an employee / contractor, are physically unable or it is inappropriate e.g. the injured person has been taken to hospital.

Report forms must be submitted at the earliest opportunity and no later than the end of the working day or shift/duty.

- Every event below must be reported in accordance with the arrangements in this procedure:
- All accidents, assaults or near misses involving staff, contractors, passengers, persons on business or other persons where the event occurs on c2c controlled premises and is reported to the Company either at the time or later, irrespective of the severity of the injury;
- All assaults must be reported to both c2c and the BTP
- All instances of occupational ill health involving staff
- All instances of passenger ill-health where the event results in an injury and occurs on c2c controlled premises; and
- Any safety related event which may cause adverse publicity to c2c.

Appendix E – Close Call initiative

Close Call Reporting

c2c has implemented an initiative to encourage the reporting of Close Calls. It is important we are informed of all unsafe practices and conditions to enable us to understand and address the causes of these close calls and prevent an accident or damage occurring.

We understand everyone is busy and want to make the process as simple as possible so all you have to do is click [here](#) to access the smart form where you can record your close call.

Examples of Close Calls are:

Unsafe Acts:

- Unauthorised operation or use of equipment
- Using defective tools or equipment
- Using tools or equipment in an improper manner
- Poor housekeeping
- Removing or bypassing safety barriers or devices
- Failure to warn or signal as required
- Indulging in horseplay, or distracting or startling others
- Failure to wear personal protective equipment

Unsafe Condition:

- Lack of adequate of safety barriers or devices
- Lack of adequate warning system
- Accumulation of waste (fire hazard)
- Protruding hazards
- Close clearance and congestion hazards
- Hazardous arrangement of storage
- Inadequate illumination or intense noise
- Defective tools and equipment,

For more information, please contact the Safety Department

Appendix F: Accident Investigation Report

Appendix A2. Accident / Near Miss / Occupational Ill Health Investigation Form

This form or its electronic equivalent must be completed by the Investigating Manager.

Part B		Ref No (as Part A):		
Section 1: Further Details:				
Lost Time? <i>If so, how long?</i>				
Has person returned to work on restricted duties? <i>If so, what restrictions are in place?</i>				
Confirm Health & Safety Rep Advised?	Yes / No	Health & Safety Rep Name:		
Section 2: Evidence Gathered				
Report Form?	Yes / No	If not, why not?		
CCTV?	Yes / No	If not, why not?		
Photographs?	Yes / No	If not, why not?		
Witness Statements?	Yes / No	If not, why not?		
Employee Records? (e.g. accident / training record)	Yes / No	What / if not, why not?		
Site Records? (e.g. risk assessment / PGIs)	Yes / No	What / if not, why not?		
Open recommendations from prior incidents?	Yes / No	What / if not, why not?		
Technical Reports?	Yes / No	What / if not, why not?		
For PTI accidents, Stepping Distance (H+W)	Yes / No	If not, why not?		
Any other evidence:				
Section 3: Timeline				
<i>Events leading to the accident:</i>				
<i>Events during the accident:</i>				

Events after the accident:

Section 4: Evidence Findings

Assess the evidence, demonstrate what it tells you.

Section 5: Analysis of Evidence

Cross reference the evidence to assess its validity and whether what happened matches what should happen.

Section 6: Conclusions

The analysis of the evidence details what happened and what went wrong. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

Immediate Cause:

Cause Category:	Lack of care / attention.	Lack of equipment.	Lack of training.	Poor attitude.	Unsafe act.	Unsafe condition.	Other.
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Underlying Cause: This is the not directly attributable to the cause but were factors which allow the immediate cause to exist.

Contributory Factors:

Factors for Consideration:			
Section 7: Actions			
Action 01:			
Owner:		Timescale:	
Action 02:			
Owner:		Timescale:	
Action 03:			
Owner:		Timescale:	
Section 8: Recommendations			
Recommendation 01:			
Owner:		Timescale:	
Recommendation 02:			
Owner:		Timescale:	
Recommendation 03:			
Owner:		Timescale:	
Section 9: Sign Off			
Investigating Manager Name:			
Investigating Manager Job Title:			
Signature:			
Date:			

Appendix G: Lost Time Alert Form

Name		
Grade		
Date of Accident		
Home Location		
Nature of Injury(s)		
Number of days lost to date		
Number of days expected to be lost	This can be taken from either from the estimation given by the IP themselves or from a hospital or doctor certificate.	
Details of any chain of care put in place		
Name and Job Title of Person completing this form		Date:

On completion of this form it should be sent to the Head of Function, the IP line manager / owning manager and safety.reporting@c2crail.net

Appendix H – Close Call initiative (QR Code)

Close Call Initiative

c2c is implementing an initiative to encourage the reporting of Close Calls. It is important that we are informed of all unsafe practices and unsafe conditions to enable us to understand address the causes of these. The aim is to address the causes to prevent an accident or damage occurring.

We understand everyone is busy and want to make the process as simple as possible so there are just 6 simple questions to submit your Close Call.

Please use the following QR code to open up our Close Call form



c2c September 2017

c2c

Appendix I - Guidance for completing investigations for Slip/Trip/Falls

Exact location of accident

Photos of location

CCTV – from station

Type and condition of floor surface – wet, dry, damaged, etc

Prevailing weather conditions

Winterisation procedures if cold or icy

Check that announcements are being made for weather conditions

Check that appropriate signage is displayed

Type of footwear worn by injured party – if known

Whether or not the injured party was carrying anything, running or was distracted

Reports from c2c staff or contractors who may be involved as witnesses

Check for spillages and ensure they are cleared up

Check for defects (e.g. guttering) and cordon area then report as fault

Details of last Planned General Inspection

Fault details/Maintenance Reports

Any other relevant information – e.g. did the injured party have a valid rail ticket?

Appendix J- Guidance For Completing investigations for PTI events

Train Movement Accidents

Every Train Movement Accident will be subject to investigation by a Competent Person, i.e. a Driver Manager, a member of the Operations Training team or the Operations Standards Manager.

Draft reports will be reviewed by a Driver Depot Manager or by the Driver Operations Manager.

Train details - *identity, origin and destination, formation, unit and vehicle numbers, etc*

Location of incident – *platform, external door number*

Timeline of events

CCTV – *from train, station*

Photos of location

OTDR download

GSM-R voice communication recordings – *if necessary*

Platform stepping distance

Report from Train Driver (if available to be interviewed)

Reports from other c2c staff or contractors who were involved as witnesses

Report from Train Dispatcher - *where applicable*

Confirmation that fixed DOO equipment was in good condition – *where applicable*

Confirmation that hustle alarm and door controls/timing cycle were working normally – *where applicable*

Fault details/Maintenance Reports

Any other relevant information – *e.g. was the injured party in possession of a*

valid rail ticket?

Appendix K - Guidance for completing investigations for on-train Accidents: Slip/Trip/Falls within train

CCTV – *from train*

Photos of location

Type and condition of floor surface – *wet, dry, damaged, etc*

Fault details/Maintenance Reports – *as required*

OTDR download – *where excessive speed or heavy braking may have been*

contributory factors

Type of footwear worn by injured party – *if known*

Report from Train Driver – *as required*

Reports from other c2c staff or contractors who were involved as witnesses

Any other relevant information – *e.g. was the injured party in possession of a valid rail ticket?*

Guidance for completing investigations for Ergonomic / Manual Handling accidents

Provide a good description of events

If staff have been trained to carry out the task Is training still current?

If person is appropriate for task

Risk assessment

Fault details/Maintenance Reports

Guidance for completing investigations for Needle Stick Injuries

If person attended hospital/GP

If staff were wearing the correct Personal Protective Equipment

Dispose of item in a sturdy container until a 'sharps' container is available

Use 'litter picker' to retrieve item

Appendix L - Events that require immediate reporting by telephone to ORR and RAIBs

1. Any accident (derailment, collision, fire etc.) to a passenger train, tram or guided transport systems where fatalities or serious injuries occur to passengers, rail employees, other members of the public.
2. Any serious accident to a train, tram or guided transport system (e.g. high speed derailment or head-on collision) even if there are no casualties.
3. Any accident involving the release or combustion of dangerous goods from a train which necessitates the evacuation of railway personnel or the general public from the area affected.
4. Any dangerous occurrence involving a freight train carrying radioactive materials.
5. Any collision between a train and a road vehicle at a level crossing whether or not there have been any injuries.
6. Any pedestrian fatality at any type of level crossing.
7. Any fatal accident or serious injury (life threatening) to a rail employee on duty.
8. Any incident in which a passenger or their clothing or baggage is caught in the doors of a departing train in a manner likely to kill or injure that person³.
9. Any child (age under 18 years) trespasser fatally or seriously injured on the railway.
10. Any fatality or life threatening injury to a passenger.
11. The overturning or collapse of any crane, collapse of a high scaffold, collapse of a bridge or tunnel, failure of a structure which occurs on, or blocks, a railway.
12. Any incident of a runaway involving a train, wagon, engineers' trolley or on-track machinery.
13. Any incident which results or could have resulted in the release of a biological agent likely to cause severe human infection or illness (for example Legionella).
14. Any reportable injury or dangerous occurrence not mentioned above which receives or is likely to receive media attention.

³ These incidents are required to be reported under RIDDOR only if

- There is a failure of the doors; or
- A passenger is taken to hospital for treatment in respect of a work-related injury

ORR: Monday to Friday from 09:00 to 17:30 – Telephone 020 7282 3910

Outside these hours, weekends and public holidays, **serious** incidents should be reported to the Department for Transport (DfT) Duty Officer on telephone 020 7944 5445.

RAIB: Telephone 01332 253300