

WHS Incident and Investigation Procedure

Section 1 - Preamble

(1) Charles Darwin University ('the University', 'CDU') is committed to fostering a safe workplace and learning environment through the management of Work, Health and Safety (WHS) incidents and their subsequent investigation. This includes damage to property, and both physical and psychosocial incidents.

Section 2 - Purpose

(2) This procedure provides the framework for incident notification, reporting, classification and investigation for all University campuses and facilities. This ensures all Work, Health and Safety incidents, including near misses are reported, recorded and sufficiently investigated to produce appropriate corrective actions to minimise the chance of repeat incidents.

(3) This procedure should be read in conjunction with the [Work Health and Safety Policy](#).

Section 3 - Scope

(4) This procedure applies to all workers, as defined by the [Work Health and Safety \(National Uniform Legislation\) Act 2011 NT](#). It also includes higher degree by research candidates and affiliates, who undertake any activities on University premises, or who execute work for or on behalf of the University either on or off campus.

(5) This procedure does not pertain to a member of the public who suffers a medical event that occurs whilst participating in clinical activities, unless the facility or equipment was a contributing factor. For further clarification on this contact Work Health and Safety.

(6) The [Critical Incident and Emergency Management Policy and Procedure](#) and the [Material Change Procedure](#) provides information on incidents which are required to be reported to [TEQSA](#) in accordance with the [Tertiary Education Quality and Standards Agency Act 2011](#).

Section 4 - Procedure

Immediate Incident Response

(7) A first responder to an incident should:

- a. make the incident scene safe;
- b. initiate an emergency response or medical treatment – refer to the Emergency Management Plan (as required);
- c. notify a supervisor or manager;
- d. preserve the incident scene; and
- e. report the incident details.

Incident notification and classification

(8) All workplace incidents are to be reported to the relevant supervisor/manager and an [Incident Report form](#) must be completed as soon as possible. Table One provides information on how certain types of incidents are classified. The classification of an incident informs the response taken.

- a. Verbal notification to Work Health and Safety should occur immediately to determine whether immediate notification to the relevant regulator/s is required.

(9) The work area where an incident occurred manages the incident through to completion with the support of Work Health and Safety. The Senior Manager Work Health and Safety is the final authority for the classification of an incident or hazard.

Table One - Incident Classification

Incident Classification	WHS Impact
Extreme	<ul style="list-style-type: none">- Multiple or single fatality; and/or- Irreversible health damage without loss of life;- more than one person seriously injured; or- Any incident relating to Work, Health and Safety that is classified as a level 3 critical incident in accordance with the Critical Incident and Emergency Management Policy and Procedure- Notifiable incident as classified in the Work Health Safety Act 2011 (NT) including a dangerous incident.
Major	<ul style="list-style-type: none">- Multiple or single major injury;- Permanent (full or partial) disabling injury;- Workplace modifications required.- Any incident relating to Work, Health and Safety that is classified as a level 2 Major Emergency event in accordance with the Critical Incident and Emergency Management Policy and Procedure
Moderate	<ul style="list-style-type: none">- Temporary (full or partial) disabling injury or health effect;- Injury that temporarily alters a person's future;- Suitable duties in accord with injury management guidance;- Hazard which could result in harm to persons or damage to equipment. <p>(Moderate classification is related to employees only in relation to lost time injuries classifications).</p>
Minor and insignificant	<ul style="list-style-type: none">- Medical Treatment Injury;- First Aid treatment;- Short-term inconvenience; or- Near Miss.

Notifiable incidents

(10) The [Work Health and Safety \(National Uniform Legislation\) Act 2011 NT](#) Part 3 requires the WHS Regulator to be notified of certain incidents. The following incidents are notifiable:

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

(11) [NT Worksafe](#), or other applicable state based organisation provides further information on determining whether an incident is notifiable.

Table Two - Incident notification timeframes and responsibilities

Incident Classification	Reported By	Reporting To	WHS Escalation and Reporting
Extreme, Major or Notifiable Incident	First on scene or work unit representative	000 or Security, who then notifies WHS	Within one (1) hour of incident, Senior Manager Work Health Safety to notify via phone: - NT WorkSafe or other state equivalent; - The Vice-Chancellor; and - the Critical Incident Controller.
Moderate, Minor or insignificant incident	First on scene or work unit representative	WHS within 24 hours of incident	WHS Advisor to investigate with reporting person, work unit and Senior Manager Work Health and Safety.

Reporting and recording of incidents

(12) Incident reporting is required to:

- a. ensure notification to external or legislative authorities within applicable timeframes (where required by legislation);
- b. ensure appropriate emergency response is actioned (where necessary);
- c. ensure appropriate levels of the University's management and staff are informed of the incident's basic details in a timely manner;
- d. preserve evidence and secure the incident scene;
- e. assist in identification of a risk or hazard that requires attention due to having the potential to cause harm; and
- f. ensure incidents are recorded and classified by Work Health and Safety.

(13) All incident information collected, including records of notifiable incidents, are to be recorded in accordance with the [Records and Information Management Policy and Procedure](#) and are protected for access by authorised employees only. Incident information may include:

- a. all investigation reports including preliminary assessments;
- b. remedial / corrective actions;
- c. witness statements;
- d. relevant risk assessments;
- e. incident photographs;
- f. permits, authorisations; and
- g. any other evidence collected.

(14) Regardless of classification, all incidents must be reported to the delegated Senior University representative and Work Health and Safety. All incidents that are notifiable to a regulator (EPA, NT WorkSafe etc.) will also be reportable to University Council and Vice-Chancellor's Advisory Committee.

Investigation

(15) The objective of an investigation is to determine its cause(s) and contributing factors so that corrective/preventative actions can be developed and implemented to manage the risk and reduce the likelihood of recurrence. Table three describes the investigation requirement according to its incident classification.

Table Three - Incident classification and corresponding investigation requirements

Incident Classification	Investigation Requirement
Extreme	<ul style="list-style-type: none"> - Incident Cause Analysis Method (ICAM) Investigation if requested by the Regulator. - Other investigation method relevant to the incident. Regulatory or Legal exposure. - Incident Report form to be forwarded to WHS. - Incident Close Out Report to be completed by WHS with lessons learned and corrective measures undertaken.
Major	<ul style="list-style-type: none"> - ICAM Investigation if requested by the regulator. - Other investigation method relevant to the incident. Regulatory or Legal exposure. - Incident Report form to be forwarded to WHS. - Incident Close Out Report to be completed by WHS with lessons learned and corrective measures undertaken.
Moderate	<ul style="list-style-type: none"> - ICAM Investigation, dependent on the nature of the incident and if requested by the regulator. - People, Environment, Equipment, Procedures, Organisation (PEEPO) Investigation. - Other investigation method relevant to the incident. - Incident Report form to be forwarded to WHS. - Incident Close Out Report to be completed by WHS with lessons learned and corrective measures undertaken.
Minor and insignificant	<ul style="list-style-type: none"> - Incident Report form to be forwarded to WHS. - Other investigation method relevant to the incident. - Incident Close Out Report to be completed by WHS with lessons learned and corrective measures undertaken.

Appointment of an investigation team

(16) The Senior Manager Work Health and Safety or their delegate will ensure an investigation is undertaken in accordance with this procedure and the investigation team is appropriately resourced.

(17) The Senior Manager Work Health and Safety will assign an adequately qualified and experienced Lead Investigator to facilitate an investigation into the incident to determine the cause/s and contributing factors so corrective/preventative actions can be developed and implemented.

(18) For all incidents requiring an ICAM investigation, the Lead Investigator will:

- a. have completed ICAM Lead Investigators Training Course;
- b. complete the required comprehensive investigation report, in association with the Investigation Team, including the forwarding of a Corrective Action Plan report containing the Investigation Team's recommendations to the respective work area's Senior Management;
- c. liaise with the work area during the investigation process;
- d. undertake the investigation process in accordance with the provisions of the ICAM methodology; and
- e. distribute the investigation report as required.

(19) Where contractors are involved in an incident, including high potential incidents, they are to provide access to people, sites and other resources as needed to fully investigate the incident and implement corrective and preventative actions to prevent recurrence.

Investigation response timeframes

(20) With the exception of a preliminary report, where an investigation cannot be completed within thirty (30) days, a reason must be reported and extension approved by the Director People and Culture. Table four describes the response timeframes according to the incident classification.

Table Four - Investigation Response Timeframes

Incident Classification	Investigation Response Timeframes and Accountability
Extreme, Major or Notifiable	<ul style="list-style-type: none">- Immediate notification to WHS Regulator is required via phone or in writing by the Senior Manager Work Health and Safety.- A subsequent incident briefing or notification may be required by the Regulator within forty-eight (48) hours of the incident.- A preliminary report may be required by the Regulator within five (5) working days of the incident.- ICAM or relevant investigation report to be completed by the WHS team within 30 working days of date of incident if requested by the regulator. Director People and Culture must review the investigation report and seek final authorisation from the delegated authority in accordance with the delegations register.- Senior Manager Work Health and Safety submits the final report to the regulator if requested.
Moderate	<ul style="list-style-type: none">- Section C – PEEPO investigation to be completed within 30 working days of the incident by the Work Health and Safety Advisor and authorised by the Senior Manager Work Health and Safety before being reviewed by the relevant work area.
Minor or insignificant	<ul style="list-style-type: none">- Incident Report form completed by the relevant local work area and submitted to Work Health and Safety within 30 working days.

Relationship to other investigations

(21) Any one incident may attract several different investigations, performed by external agencies or authorities. Such authorities may include Emergency Services, EPA or WHS Regulator (none of whom are bound by this reference). Investigators may be called upon to coordinate their activities with those conducting these investigations.

Corrective and preventative actions

(22) Where system deficiencies have been identified through the investigation process, the responsible work area is required to develop a Corrective Action Implementation Plan based on recommendations from the investigation outcomes. The development and implementation of the Corrective Action Implementation Plan occurs when the incident investigation report has been agreed to and signed by the work area representative. The Lead Investigator may facilitate the development of the Corrective Action Plan with the work area representative.

(23) The respective work area is accountable for:

- a. liaising with all action assignees prior to the action being assigned.
- b. monitoring the due date for completion of the agreed corrective actions.
- c. action completion notification to Work Health and Safety.

(24) Following completion of all actions, closure of the incident is recorded by Work Health and Safety. They assess compliance to the above requirements and will determine action plan effectiveness.

Hierarchy of control

(25) As part of post incident corrective action management strategy, Work Health and Safety and work area representatives need to stipulate control measure(s) to be put in place. The hierarchy of controls framework is utilised to determine appropriate control measure(s) and are selected from the highest order commencing with implementing controls to eliminate the hazard. For further information on the hierarchy of control framework see [Hazard Identification Risk Assessment and Control Procedure](#).

Completion Timeframes and communicating outcomes

Table Five - Corrective action planning, completion timeframes and communicating outcomes

Incident Classification	Timeframes and Accountability
Extreme, Major or Notifiable	<p>Timeframes</p> <ul style="list-style-type: none"> - Corrective Action Implementation Plan to be developed within three (3) working days of submission of the investigation report (to be completed within thirty (30) days of the incident). - Corrective actions to be completed within thirty (30) working days. - Evidence of corrective action must be submitted to Work Health and Safety within thirty (30) working days. e.g. photographic evidence, updated Safe Work Procedure written or reviewed. - Lessons Learnt - an Initial Lessons Learnt should be released within seven (7) days of the event by Work Health and Safety. - WHS Bulletin should be released within fourteen (14) working days of the completed investigation. <p>Accountability</p> <ul style="list-style-type: none"> - Relevant work area delegate in collaboration with Work Health and Safety .
Moderate	<p>Timeframes</p> <ul style="list-style-type: none"> - Corrective Action Plan to be developed within three (3) working days of completion of the event investigation report. - Corrective actions to be completed within thirty (30) working days. - Evidence of corrective actions completed to be submitted to Work Health and Safety for review. - Closure of incident by email incident close out notification from Work Health and Safety. - Lessons Learnt - if relevant, an initial Lessons Learnt should be released within seven (7) working days of the event. <p>Accountability</p> <ul style="list-style-type: none"> - Relevant work area delegate in collaboration with Work Health and Safety.
Minor or Insignificant	<p>Timeframes</p> <ul style="list-style-type: none"> - Corrective Action Plan to be developed with details provided to Work Health and Safety within four (4) working days from the completion of the event report. - Evidence of corrective actions completed to be provided to Work Health and Safety within thirty (30) days of Corrective Action Plan development. - Closure of incident by incident close out email and report (if required) from Work Health and Safety on completion of Corrective Action Plan. <p>Accountability</p> <ul style="list-style-type: none"> - Relevant work area delegate in collaboration with Work Health and Safety.

Roles and Responsibilities

(26) The Vice-Chancellor, Senior Executive Team (SET), Directors and Managers are responsible for ensuring:

- a. appropriate resources and processes are implemented for reporting, recording, classification, investigation and the management of work health and safety incidents; and
- b. all work health and safety incidents are managed effectively, and reporting requirements are met.

(27) The Director People and Culture is responsible for:

- a. reviewing ICAM reports prior to final approval by the delegated authority; and
- b. reviewing requests for extensions to investigation reports that are unable to be completed within thirty (30) days.

(28) The Senior Manager Work Health and Safety is responsible for:

- a. ensuring all external authorities including the WHS Regulator and Emergency Services are notified within the timeframes prescribed in this procedure;
- b. collaborating with relevant work area representatives and Senior Executives to oversee the compilation, review and submission of ICAM or other investigation reports, Corrective Action Plans and Investigation reports as described in this procedure;
- c. ensuring notifiable, extreme and major incident investigation reports contain all relevant information to enable the University Legal to provide legal advice based on accurate and complete information as required;

- d. providing an incident briefing, as required, to the Vice-Chancellor, Vice-Chancellor's Advisory Committee, and/or the University Council where legal accountabilities may need to be determined; and
- e. ensuring incident investigations are undertaken in accordance with this procedure, including the appointment of a Lead Investigator where required, and that the investigation team is appropriately resourced.

(29) The Work Area Manager is responsible for ensuring:

- a. all workers under their supervision are made aware of this procedure;
- b. the responsible manager, the investigation team, and the work area representative are responsible for ensuring the investigation report and any resulting corrective action plans are accurate and complete and in accordance with this procedure; and
- c. that a subject matter expert or safety specialist is provided to the representative of the investigation team, if technical or quality support is required.

(30) First responder(s) are responsible for:

- a. ensuring the injured person is attended to;
- b. considering the welfare of witnesses and others;
- c. ensuring the incident area to ensure it is safe (preserving the incident site if a significant incident/event);
- d. implementing any corrective actions necessary to prevent an injury or recurrence; and
- e. ensuring that incidents/hazards are reported to Work Health and Safety within 24 hours of the occurrence/identification.

(31) University contractors and representatives are responsible for:

- a. reporting all work health and safety incidents to their supervisor as soon as reasonably practicable within 24 hours; and
- b. where a contractor is involved in an incident, the University representative is responsible for reporting in accordance with the notification classification requirements.

(32) University employees and all other workers are responsible for:

- a. taking reasonable care of their own health and safety;
- b. taking reasonable care that their acts or omissions do not adversely affect the health and safety of other persons;
- c. reporting all work health and safety incidents to their supervisor as soon as reasonably practicable within 24 hours; and
- d. assisting relevant teams in the investigation process.

Section 5 - Non-Compliance

(33) Non-compliance with Governance Documents is considered a breach of the [Code of Conduct - Employees](#) or the [Code of Conduct - Students](#), as applicable, and is treated seriously by the University. Reports of concerns about non-compliance will be managed in accordance with the applicable disciplinary procedures outlined in the [Charles Darwin University and Union Enterprise Agreement 2025](#) and the [Code of Conduct - Students](#).

(34) Complaints may be raised in accordance with the [Complaints and Grievance Policy and Procedure - Employees](#) and [Complaints Policy - Students](#).

(35) All staff members have an individual responsibility to raise any suspicion, allegation or report of fraud or corruption in accordance with the [Fraud and Corruption Control Policy](#) and [Whistleblower Reporting \(Improper Conduct\) Procedure](#).

Status and Details

Status	Current
Effective Date	2nd June 2026
Review Date	18th November 2028
Approval Authority	Vice-President Governance and University Secretary
Approval Date	2nd June 2026
Expiry Date	Not Applicable
Responsible Executive	Fiona Coulson Vice-Chancellor
Implementation Officer	Peta Preo Director People and Culture
Enquiries Contact	Leah Kenna Senior Manager Work Health and Safety <hr/> Work Health and Safety

Glossary Terms and Definitions

"Critical Incident Controller" - Critical Incident Controller (CIC) is a University employee appointed and responsible for the overall management of a critical or serious/dangerous emergency incident.

"Incident Cause Analysis Method" - Incident Cause Analysis Method (ICAM) means a systematic incident investigation analysis method that enables identification of systemic health, safety, security or environmental deficiencies, assists investigation teams to identify incident root and causal factors and ensures recommendations are focused on what needs to be done to reduce recurrence.