How to report an accident, near miss or ill health in Awaken

To report an accident you need to log into the Awaken system here: <u>https://abdn.awaken-be.com/</u>

From the home screen select "Incident Submission" from the list on the left side of your screen

	Good morning, Emily	
 ABERDEEN Emily Blake emily.blake@abdn.ac.uk My Dashboard My Account Privacy Notice 		Welcome to BeOnline , the e-l platform brought to you by Av
じ Sign Out BeOnline &Learn	Learner Profile	
 My Training Course Library 	Your learner profile is 100% com	plete.
 Management Overview Learners 	Online Training	
 Training Assignments Referral Cases 	You currently have no online trai	ning that requires your attention.
 Training Reports Training Administration 	<u>View compl</u>	eted training
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The next page gives 3 options, to report either an accident, ill health (e.g. ill health that is not caused by work activities, such as a faint or seizure) or a near miss

Report an Incident or Near Miss	
Form Selection	
Please select from within each selecti	the options below the situation you would like to report. For additional information on each, please refer to the help text ion.
Report an Acciden	t (meeting the standards required by HESA)
Use this form to rep	port an accident, event or fire that results in:
Death or injury	
Ill-health that is rela	ated to work/study activities
Damage of loss to p	roperty or plant
Report Ill Health	
Use this form to re	port:
An incident that is r	not related to work/study activities
Whether or not a fi	rst aider attended
Report a Near Mis	s (including incidents such as noise complaint)
Use this form to re	port:
An incident that did	I not cause an injury or damage but had the potential to do so
A fire alarm activati	ion (genuine or false) where no injury or damage resulted

This guide is an example of an accident submission; the ill health and near miss reports are very similar

Step 1 asks for details about when and where the accident happened. When you select a locaiton from the drop down, a box will appear to allow you to give more specific details e.g. room number

Form Submission - Step 1 of 5	
About when the incident happened	
Date and Time	Use the calendar and clock icons to select from or enter the data manually in the space provided.
About where the incident happened	
Was the incident on residential premises?	Yes No
Which School / Directorate does the injured person work / study in?	People
	To change department please type the new name in the box or enter any 3 letters to select from the available options.
Location	- Select Location -
Next 🔶	

Step 2 asks you to categorise the incident. The categorises listed align with HSE reporting categories, don't worry if you think you have mis-categorised, we can amend the details after submission if required

Categorisation of incident		
Select the category that the incident fits into best	Other Types of Incidents	•
Specify the incident subcategory		•
	Contact with electricity	
🖕 Back 🛛 Next 🛶	Contact with material being machined	
	Contact with moving machinery	
	Cuts or lesions caused by object	
	Drowned or asphyxiated	
	Electrical fault	
	Electrical items left unattended	
	Fall from height	
	Hit something fixed or stationary	
	Injured by an animal	
	Lifting and handling injuries	
	Physical assault	
	Slip, trip and fall on stairs	
	Slip, trip, fall same level	
	Struck against	
	Struck by moving object	
	Struck by moving vehicle	
	Trapped by something collapsing	

Step 3 asks for details about the incident. A free text box is provided for you to give details about:

- what happened, and
- what has been done (or is planned) to prevent the incident from reoccuring

Please give as much detail as possible as the person reading the report may not be familiar with your work activities.

Form Submission - Step 3 of 5		
Extra incident information		
Did the incident have a potential to cause death or serious injury?	O Yes	O No
Can you provide information about the process and activities involved?		
Please note, if you click no the default values will be used for reporting purposes.	O Yes	O No
Describe what happened and any remedial action taken.		
Give as much detail as you can, including i) the events that led to the incident. ii) the oper Describe any action taken to prevent similar incidents occurring	ration or activity	in progres
beschbe any action taken to prevent similar incluents occurring.		
Did the Emergency Services attend?	O Vos	O No
Did the Emergency Services attend:	U les	0110
Did a First Aider attend?	O Yes	O No
	-	
Was there a witness?	O Yes	O No
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Step 4 asks for details about the injured person. The system will autofill with your details if the accident happened to you. You can enter "unknown" if you do not have all the details at the time of the incident, they can be added in after the report has been submitted if necessary,

Form Submission - Step 4 of 5 About the ill or injured person	
No person was injured during this inc	ident 🗆
The accident happened to	Myself Staff Member Student Other Person
Title	
First Name	
Last Name	
Student/Staff ID	

Step 5 asks for detials of the injury (if you selected in the previous step that nobody was injured, the system will skip this step). Please answer to the best of your ability with the information you have at the time, an accident may later become RIDDOR reportable which you would not know at the time of making the report – this is not a problem and can be amended later if the situation changes.

Form Submission - Step 5 of 5	
Did the injury result in a death (fatality)?	○ Yes
Does the person have an occupational disease? Occupational diseases include: carpal tunnel syndrome, cramp of the hand or forearm, occupational dermatitis, hand arm vibration syndrome, occupational asthma, tendonitis or tenosynovitis.	⊖ Yes (i) No
About the person's injuries	
Was the injury	Multiple Single *
Side of the body injured	○ Both Sides ○ Left ○ Right ○ Centre/Other *
Main type of injury	- Select an injury -
Description / examples (provides help on the injuries selected)	Choose the most severe injury from the list.
Main part of the body that was injured	- Select an injury first - 🔻 🔻
About the severity of the person's injuries	
Please help us to determine the severity of the injury	
Was the injury one of these in the list below (as specified under RIDDOR)?	⊖ Yes
- bone fracture exclusing inger, thumb or toe - amputation of arm, hand, finger, thumb, leg, foot or toe	
 - binding or permanent sight reduction - crush injuries leading to brain damage or internal organ damage 	
- serious purns - scalping requiring hospital treatment	
 loss of consciousness caused by head injury or aspnyxia injuries associated with working in an enclosed space leading to hypothermia or heat- induced illness, resuscitation, hospitalisation for over 24 hours 	
If no, the injury prevented the worker from carrying out their routine work for more than 7 calendar days or	O Yes No
The RIDDOR reportable injury was to a member of the public or student taken directly to hospital from the location of the injury.	○ Yes
As a reminder, episodes of mental health issues, self harm or ill health are NOT RIDDOR reportable injuries. Episodes of sporting injuries or where the referral to hospital occurred from another location (such as GP practice the following day) are also NOT RIDDOR reportable.	
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The final page asks you to submit the report for submission. The health and safety department will be notified and your local accident investigator. They may be in touch later if they need more information from you, or you can get in touch with them if you think of something that was missed.

Form Submission - Completion
Submit Completed Form
You have now succesfully completed all the steps of this form.
Should you be at all uncertain about what you have entered, you can go back by clicking the Back button and make any required changes before submitting.
Click on the Submit button below for final submission.
🖕 Back Submit 🖌

Summary:

- All accidents and near misses must be reported as soon as possible in most cases this will be within 48 hours
- Complete the form to the best of your ability with the information you have at the time submissions can be amended and further information added after the report has been submitted
- One the report has been submitted the Health and Safety team and your local accident investigator will be notified. If necessary then they will get in touch with you
- Please contact your Local Safety Coordinator, Line Manager or the Health and Safety team if you have any issues

Please login using your University username and password.

Username	s03eb2	
Password	•••••	
	Login	