MySAFETY – Training Guide

REPORTING AN INCIDENT

CONTACT
Phone: +61 3 6226 6298
Location: Level 3, Corporate Services Building, TT Flynn Street, Sandy Bay Tasmania 7000

Email: health.safety@utas.edu.au
Website: utas.edu.au/work-health-safety
The purpose of this procedure is to guide the user through how to report an incident that could have resulted or did result in harm, injury or damage on either a University of Tasmania campus, or elsewhere.

This process applies to the following:

- Staff
- Students

### Glossary

<table>
<thead>
<tr>
<th>Word</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident</td>
<td>An event that could have resulted or did result in harm, injury or damage</td>
</tr>
</tbody>
</table>


### Quick Link Sections

- [Log in to MySAFETY](#)
- [Report incident](#)

### Log in to MYSAFETY

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Image and Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Navigate to <a href="http://www.utas.edu.au/work-health-safety">http://www.utas.edu.au/work-health-safety</a> through your web browser, and click the “Notify, Incident, Near Miss or Hazard” button.</td>
<td><img src="https://via.placeholder.com/150" alt="Notify, Incident, Near Miss or Hazard" /></td>
</tr>
<tr>
<td>2</td>
<td>Log in using your University of Tasmania credentials. If you have logged into MYSAFETY previously in the same day, the system will automatically authenticate you and you will not see this screen. <strong>Note:</strong> If you are unable to log in to MYSAFETY, or do not remember your login credentials, please contact your Line Manager or the IT Service Desk.</td>
<td><img src="https://via.placeholder.com/150" alt="Log in" /></td>
</tr>
</tbody>
</table>

### Report incident

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Image and Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To report an incident, click on “Hazard &amp; Incident Reporting”.</td>
<td><img src="https://via.placeholder.com/150" alt="Hazard &amp; Incident Reporting" /></td>
</tr>
</tbody>
</table>
2. Select “An Incident” by clicking anywhere on the text link.

3. Select who has sustained the incident:

<table>
<thead>
<tr>
<th>If</th>
<th>Then</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the incident has happened to you</td>
<td>Select &quot;Me&quot;</td>
</tr>
<tr>
<td>If the incident has happened to someone else</td>
<td>Select &quot;Another person&quot;</td>
</tr>
</tbody>
</table>

4. Enter the date and time of the incident using the dropdown options. **Note:** The mandatory field, and must be completed.

5. Please select where the incident occurred using the selector circles.

<table>
<thead>
<tr>
<th>If</th>
<th>Then</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the incident occurred On Campus</td>
<td>Select “On Campus” and use the to select the building or area. Use one of the operator functions for the search which either “Starts with” or “Contains” the search term. Enter the search term into the “Workplace” field, then click &quot;search&quot;. Select your location by clicking on the search result, and it will populate.</td>
</tr>
<tr>
<td>If the incident occurred away from a University of Tasmania campus</td>
<td>Select “Off campus”</td>
</tr>
</tbody>
</table>

Then enter the exact location into the “Location Details” text box i.e. the car park or bathroom on the 1st floor or room number (if known).

For “Off Campus’ provide enough detail to describe the area.
6 Select the what activity was being performed from the “Work Activity Category” dropdown list.

**Note:** If you select “Other (please specify)”, please add your additional content in the text field provided below.

7 Summarise the incident in just a few words into the Incident Title field.

This is so we can easily identify your incident.

Then describe the incident in greater detail, with what happened, what was the outcome, where chemicals or equipment involved?

**Note:** Please refer to the example in the image.

8 Click on the top navigation bar to proceed to the next screen.

9 Enter the details of the person who sustained the incident.

If you selected "Me" Proceed to step 12
If you selected "Another person" Continue this step

Select the person type using the dropdown options, choosing the most appropriate option.

If the other person is an employee, you may search and select the person from the staff database. Otherwise, enter the person’s details in the spaces provided.

Complete all remaining mandatory fields, including “email” and “mobile number” populating them with the persons details as best as you can.

10 Once completed, select the location or business unit where the person is usually located

Click the icon, and select:
   Level 1: University of Tasmania
   Level 2: Select faculty or school
   Level 3: Select area
   Level 4: Select area

Once selected, click the icon to lock in your selection

11 Click on the top navigation bar to proceed to the next screen
12. Please specify whether an injury/illness occurred due to the incident that was experienced by selecting either No or Yes

13. **(Optional)** If there were any witness present at the time of the incident, please select Yes.

   Please enter details of the witnesses, including names, address, phone numbers and other any relevant information.

14. Next, let’s classify the incident.

   Select from the dropdown list what occurred, then select what the most significant cause that directly caused the incident.

   **Note:** If there were more than one significant cause, please select the most applicable.

15. **If** You selected No to step 12  
**Then** Proceed to step 17

   You selected Yes to step 12  
   **Then** Continue with this step

   The injury itself will also need to be classified.

   Select from the dropdown list the type of injury or illness sustained i.e. Loss of movement.

   Then select which part of the body is most affected by this incident.

   **Note:** Please be sure to only select the most severe option that you are experiencing.

16. We will then ask you to describe in greater detail the injury or illness sustained into the “Injury Details” section. For example, a laceration to the shoulder, or a broken leg.

   **Note:** For multiple injuries, please list all injuries sustained.

17. Not everybody wants their manager or colleagues to know what has happened. If you require your incident to remain confidential from your Supervisor/Manager by selecting either No or Yes

   **If** No  
   **Then** Select the most
appropriate person to manage this hazard. The Manager / Supervisor field will be automatically populated with your Line Manager details.

If you need to change or update your Manager / Supervisor, click the icon to locate the Manager/Supervisor. Type in either the first name, Surname or other listed field, then press search to return a list of matches.

Yes  A confidentially statement will appear. Please read and click “Close” to accept the agreement. The Supervisor / Manager field will now automatically change to WHS Manager.

18  **Optional**: Please tell us who you have notified of this incident.

Please enter the name of the person, date and time that they were notified.

If you do not know the name of the person, click the icon and perform the search as covered in previous steps.

19  **(Optional)** You can add an attachment to the incident report by clicking "Click to add an attachment" button.

**Note:** An attachment can be any file, for example a doctor’s certificate, photographic evidence or more. Please also note, that the maximum upload size is 4MB.
If You selected No to step 12  
Then Proceed to step 23

If You selected Yes to step 12  
Then Continue with this step

Please describe the treatment for injury or illness that has been sustained by completing the mandatory fields in this section.

**Note:** If you answer Yes to any of these questions, the “Please provide details” text field will become mandatory.

Please advise us if you are intending on seeking medical treatment for your injury or illness by using the selectors.

Please tell us if your injury or illness has resulted in any time off work by using the selectors.

Note that this can be edited by you later if needed.

Once all fields are complete, click on the top navigation bar to proceed to the next screen.

**Optional:** Describe what immediate action (if any) has been taken

**Optional:** Describe what further action do you recommend.

An example of this could be ‘the step nosing needs to be fixed’, that the ‘leaking plumbing needs to be seen to’ or ‘an ergonomic assessment of my workstation is needed’ and so on

Once all fields are complete, click on the top navigation bar to proceed to the next screen.

That’s it! You are now about to submit your incident report.

To review the information you have entered, click the button on the top navigation button to browse over your entry.

If you are satisfied with the information you have entered, please click on the top navigation bar.
Once the incident has been submitted, you will be provided a reference number and the option to either print, record another hazard or return to the home screen.

END OF PROCESS
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