



## **WORKERS' COMPENSATION** **PROCEDURE FOR ON-THE-JOB INJURIES**

### **PURPOSE**

To provide a uniform procedure for notification of on-the-job injuries.

### **PROCEDURE**

Procedure for reporting an on-the-job injury or exposure during the course of a workday, the following must be completed:

1. The injury and/or exposure must be reported to the Supervisor immediately. In the event of a serious injury, the Supervisor will then notify the Division Manager or on-call Administrator and the Department Director.
2. If the injury occurs between the hours of 8 a.m. and 5 p.m. Monday through Friday the employee will be sent to Work Wellness, located at 1801 Colorado Ave., Ste 130, Turlock. If the injury occurs before 8 a.m. or after 5 p.m., on a holiday, weekend, or if the injury is serious or life threatening needing immediate treatment, the employee will go to the Emergency Room at Emanuel Medical Center, or other emergency room as required if out of the area. The employee is required to follow up with Work Wellness on the next available business day.
3. Supervisors must provide the injured employees with the "EMPLOYEE'S CLAIM FOR WORKERS' COMPENSATION BENEFITS" form.
4. The employee claim form must be given to the injured employee within twenty-four hours (24 hours) from the time the Supervisor was notified or had knowledge of the injury. The employee must complete their section, and return the form to their Supervisor, keeping the temporary copy (green) for their records.
5. The employee must provide the Supervisor with a doctor's note as to his/her work status. The employee will not be allowed to return to work without this note.
6. The Supervisor must complete the "SUPERVISOR'S CLAIM AND SAFETY REPORT OF ACCIDENT" form and the employer section of the "EMPLOYEE'S CLAIM FOR WORKERS' COMPENSATION BENEFITS." **All completed paperwork should be reviewed and initialed by the department director or designee.** The Doctor's note must be attached and the completed forms are to be forwarded to Human Resources for processing.
7. The affected department will hand deliver the original claim forms and doctor's note to Human Resources immediately, to avoid paying late penalties.
8. Contact OSHA (209-545-7310) for the following injuries that are considered recordable criteria:

#### **Report:**

- Death
- Hospitalization over 24 hours
- Amputation, with the exception of fingernails, tip of finger if no bone shaving was involved.

- 3 or more people being sent to hospital, for same incident. Regardless of length of stay this would need to be reported. Example: Ammonia leak

*If there is a question it is best to call and they will advise if it is reportable.*

### **Modified Duty**

When the injured employee receives a doctor's note releasing him/her back to work with modified duties, the manager/supervisor will need to determine if the employee can be accommodated and modified work is available. The manager/supervisor will then be responsible to report that decision.

Police and Fire manager/supervisors will submit all information and/or documentation, and all subsequent updates, to the Office of the Police and Fire Chiefs. For all other City personnel, the managers/supervisors will:

- 1. Send an e-mail to Jessie Singh in Human Resources confirming whether or not the injured worker will be returning to work.**

To avoid late penalties, it is imperative this e-mail notification be sent to Human Resources the same day the injured worker has been provided a work status from the doctor.

- 2. Meet with the employee to complete the “Modified Duty Authorization” form to determine if modified duty is available.**
- 3. Follow-up with another e-mail to Human Resources to confirm whether modified work is being accommodated and the date it is to begin. The Division Manager and department secretary should also be provided with this information.**

The department will need to follow-up in written form. Attached is the “Modified Duty Authorization” form which will need to be completed by the supervisor. This memo can be found on the S drive under **S:\W.C. File\WC Procedures**. If the doctor has released the employee to modified duty and there isn't modified duty available the supervisor will be responsible to check the box indicating same, sign the memo and return to Human Resources.

If there is modified duty available the supervisor will be responsible to check the box indicating same and list the duties that are available. The employee will then review the modified duty list and if the employee agrees that he/she can do these duties the employee is to sign the memo agreeing that he/she can perform these duties. The supervisor will also need to sign the form. A copy of the memo should be kept by the department the original should be hand delivered to Human Resources.

Should the employee be unable to perform the modified duties because of his/her injury, the employee will need to return to the health care provider for re-evaluation.

When an injured worker who has been released to return to modified duty by his/her physician and the offer of accommodation was made to the injured worker but the injured worker refuses to work, the injured worker is not entitled to temporary disability payments. In such a case the employee will be required to use their accrued sick leave.

If we are unable to accommodate modified duty assignment, the employee is entitled to receive temporary disability payments or 4850 benefits for safety employees.

## **FOLLOW UP DOCTORS VISITS, ETC. & PHYSICAL THERAPY APPOINTMENTS**

### **Released to Work Full-Time With Restrictions**

When an employee is released back to work full-time with work restrictions and the employee must miss work due to a follow-up doctor's appointment and/or physical therapy, the employee should receive worker's compensation benefits for this time off work.

### **Released to Work Full-Time With No Restrictions**

When an employee is released back to work full-time with no work restrictions and the employee must miss work due to a follow-up doctor's appointment and/or physical therapy, the employee will not be eligible to receive worker's compensation benefits for this time off work. In this case, the employee should schedule these appointments on his/her own time. Any accrued time may also be used.

## **INJURIES**

On-the-job injuries are covered under State Workers Compensation STATUTE and cases are reviewed by the City's third party administrator, York Insurance Services Group, Inc., P.O. Box 7245, Stockton, CA 95267. The injured employee is notified of the findings within 14 days by York Insurance Services Group, Inc..

## **COORDINATION OF TEMPORARY DISABILITY PAYMENTS**

### **Part-time employees:**

When an employee has been disabled more than three days for an accepted injury, temporary disability benefits are paid by York Insurance Services Group. A check is mailed directly to the employee after the time loss has exceeded the 3 day waiting period.

### **Full-time employees: Non-safety:**

Per TCEA MOU Section 12:02, Injury Leave:

Any employee incurring a work-related injury or disability shall be entitled to injury leave to the extent provided by the State Workers Compensation Insurance Act. The first twenty-four hours of leave due to an on-the-job injury in any one twelve month period will not be charged to any accrued time and these do not have to be consecutive hours.

When an employee has been disabled more than three days for an accepted injury, temporary disability benefits are not paid by York Insurance Services Group. York Insurance Services Group, Inc. notifies the payroll department of the temporary disability, and payroll coordinates any sick or vacation time to issue the employees regular paycheck. If the employee continues to be disabled after all sick or vacation time has been used, then York Insurance Services Group, Inc. will issue a check directly to the employee.

### **Full-time employees: Safety:**

When an employee has been disabled for one day, 4850 benefits are not paid by York Insurance Services Group. York Insurance Services Group, Inc. notifies the payroll department of the 4850 benefit and payroll issues the employees regular paycheck. 4850 benefits continue for a maximum of one year. If the safety officer remains disabled and eligible for benefits after one year, then temporary disability begins, and payroll coordinates any sick or vacation time to issue the employees regular paycheck. If the employee continues to be disabled after all sick or vacation time has been used, then York Insurance Services Group, Inc. will issue a check directly to the employee.