WORK-RELATED INJURY/ILLNESS

The purpose for this procedure is to assist District workers who incur a work-related injury or illness while on the job. The four (4) major objectives are: (a) To assist employees in receiving prompt, appropriate medical treatment for a work-related injury/illness so the person may return to work as quickly as possible; (b) To facilitate the timely reporting and claim processing of work-related injuries and illnesses; (c) To assist in the prompt and complete investigation of work-related injuries/illnesses in order to implement preventative steps to avoid future, similar occurrences; and (d) to assist in the timely reporting to the Workers’ Compensation Commissioner and/or OSHA officials, according to the guidelines established by those agencies, on the specifics of serious or severe accidents/incidents, especially those resulting in death or serious injury.

I. DEFINITION
Work-related illnesses or injuries are those that occur, or are suspected to have occurred, as a result of fulfilling the job duties assigned by District personnel.

II. RESPONSIBILITIES OF THE EMPLOYEE
It is the responsibility of the employee injured on the job to immediately inform his/her supervisor or designee of the incident. It is also the responsibility of the employee to report the incident using the OnCall Nurse 24-Hour Work Injury Nurse Hotline at (844) 322-4668 regardless of whether immediate medical treatment is being sought. Upon receiving guidance from the registered nurse with the OnCall Nurse program regarding the need for medical treatment, the employee shall keep appointments made with the designated healthcare professionals.

III. RESPONSIBILITIES OF THE DISTRICT’S WORKERS’ COMPENSATION COORDINATOR
The District’s Worker’s Compensation Coordinator or designee is responsible for scheduling medical appointments, completing any documentation required by OSHA, maintain workers’ compensation records, processing Loss of Work Time Benefits records, coordinating light duty assignments, community with supervisors regarding work restrictions and working directly with the District’s Workers’ Compensation insurance carrier on all relevant matters.

IV. THE EMPLOYEE’S RETURN TO WORK
When a work-related injury/illness occurs, the objective is to have the employee appropriately recover and return to District work. When the physician states that the employee has not recovered sufficiently to return to his/her regular assignment or identifies restrictions which would keep the employee from fulfilling his/her regular assignment, the employer may have the employee return to modified duty, or to be reassigned on a temporary
basis to another job classification until it is possible to return to one's regular assignment. The Workers’ Compensation Coordinator or designee shall inform the employee’s immediate supervisor and Building/District Administrator of any modifications as soon as possible. When the employee is given modified duty or is reassigned on a temporary basis, the person’s pay will be at the rate of pay received prior to the incident. The District reserves the right to review each case and act accordingly.

As soon as the employee returns to full duty, he/she must complete the Workers’ Compensation – Loss of Work Time Benefits form and submit it the District’s Workers’ Compensation Coordinator.

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