San Diego County Probation Department

Policy Manual

On Duty Injuries

923.1 PURPOSE AND SCOPE

The purpose of this policy is to provide for the reporting of on-duty injuries and occupational illnesses, to ensure proper medical attention is received, and document the circumstances of the incident.

923.2 APPLICABILITY

This policy applies to all Department employees and public service workers assigned to work projects.

923.3 POLICY

The Probation Department is committed to the safety of their employees. Injuries that occur while on duty shall be reported and when appropriate, shall receive a medical evaluation.

923.4 WORKER'S COMPENSATION FUND REPORTS

923.4.1 INJURIES REQUIRING MEDICAL CARE

All work related injuries and work related illnesses requiring medical care must be reported to the Department of Human Resources and a claim form shall be provided to the injured employee within 24 of the incident.

923.4.2 ACCIDENT DEFINED

Accident - is defined as any occurrence from which bodily injury or property damage may result, regardless of whether any injury or damage actually does occur (e.g., exposure where no immediate injury is apparent).

923.4.3 EMPLOYEE'S RESPONSIBILITY

Any employee sustaining any work-related injury or illness, as well as any employee who is involved in any accident while on duty shall report such injury, illness or accident as soon as practical to his/her supervisor or, if the injury occurs during training, the training instructor.

Any employee observing or learning of a potentially hazardous condition is to promptly report the condition to his/her immediate supervisor.

Any employee sustaining a work-related injury or illness that requires relief from duty is required to be examined/treated by a doctor. If an employee or other eligible person is seriously injured, and such condition is a true emergency, such person shall be taken to the nearest emergency room for medical care. If the condition is of a non-emergency nature, such person shall go to one of the contracted medical providers listed on the medical providers notice available at all facilities or through Probation Human Resources. A personal physician can treat injured employees only when a written form requesting treatment by that physician is on file with the Worker's

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San Diego County Probation Department

Policy Manual

On Duty Injuries

Compensation office prior to the injury or illness. This form may be obtained from Probation Human Resources.

Any employee sustaining a work-related injury or illness that requires relief from duty is also required to comply with departmental policies and directives relating to the duty to periodically call in during absences, as well as the duty to notify the Department of any change in condition or anticipated duration of the absence.

An injured employee or employee who has suffered a work-related illness shall report as soon as practical to his/her immediate supervisor the medical findings concerning the injury and the extent, and duration of any work restrictions if they are known. In addition, such employees are required to promptly submit all medical releases, whether partial or full releases, to their supervisor.

923.4.4 SUPERVISOR'S RESPONSIBILITY

A supervisor or instructor learning of any work-related injury, illness or accident shall promptly prepare the appropriate forms as outlined in this policy. Updated copies of forms with instructions for completion can be obtained from Probation Human Resources.

When an employee reports a job-related injury, but medical treatment is not required, the supervisor shall provide the employee with the "Employee's Claim for Worker's Compensation Benefits" (DWC Form 1). This form will only be submitted to the Probation Human Resource office if the employee decides to seek medical treatment. If that occurs, the form will be delivered to the Probation Department Human Resource office within 24 hours following supervisor's notification from the employee that they wish to seek medical attention for their injury or illness. A copy of this form shall be provided to the employee. The person giving the DWC1 to the employee will complete the Proof of Service form and submit to the Probation Human Resource office. The "Supervisor's Accident Investigation Report" (Form RM-3) must also be submitted.

When an employee reports an injury and medical treatment is required, the same procedures as stated above apply. In addition, the General Claim Worksheet Form RM10 is to be submitted to the Probation Human Resource office within 24 hours after notification of injury or illness. The Authorization to Obtain and Release Information in Connection with An Application for Worker's Compensation Benefits form is also to be submitted to the Probation Human Resource office within 24 hours after notification of injury or illness.

The General Claim From and Authorization to Obtain and Release Information in Connection with an Application for Workers' Compensation Benefits must be completed by the employee.

The Supervisor's Accident Report must be completed by the employee's immediate supervisor based on the information the employee provided to them.

When an injury or illness occurred and the employee is not available to complete the forms, the form "Proof of Service" is required in addition to the forms DWC Form 1, Authorization to Obtain and Release Information in Connection with An Application for Workers' Compensation Benefits, and the General Claim Worksheet for Workers' Compensation. These forms are to be

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Policy Manual

On Duty Injuries

delivered or mailed to the employee and returned to the Probation Human Resource office for further processing.

Copies of any reports documenting the accident or injury should be forwarded to the Division Chief and Probation Human Resources as soon as they are completed.

923.5 INJURY LEAVE

Injury leave is paid leave available to permanent employees and other eligible persons who become disabled and unable to perform their duties because of a work-related injury or illness. Such leave is granted in accordance with the County's Compensation Ordinance.

On Duty Injuries - 3 Adoption Date: 2016/02/11

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