**Work-Related Illness and Injury Reporting**

**1004.1   PURPOSE AND SCOPE**

The purpose of this policy is to provide guidance regarding timely reporting of work-related conditions such as a physical injury or an occupational illness.

1004.1.1   DEFINITIONS

Definitions related to this policy include:

**Work-related condition** - Any significant medical or mental condition suspected to have been caused by the employee’s service. Any condition that would reasonably require some form of treatment should be considered significant.

**1004.2   POLICY**

Work-related conditions will be addressed appropriately, and in compliance with applicable state workers’ compensation requirements.

**1004.3   RESPONSIBILITIES**

1004.3.1   EMPLOYEE RESPONSIBILITIES

Employees shall report work-related conditions as soon as practicable, but within 24 hours, to a supervisor, and seek medical care when appropriate.

1004.3.2   SUPERVISOR RESPONSIBILITIES

A supervisor learning of any work-related condition should:

1. Ensure the employee receives medical care as appropriate.
2. Review the report for accuracy and determine whether the work-related condition is required to be reported to the state or workers’ compensation entity and whether any additional action should be taken.
3. Forward the report to the appropriate personnel for filing in the employee’s confidential medical file.

**1004.4   OTHER ILLNESS OR INJURY**

﻿﻿Work-related conditions that do not qualify for workers’ compensation reporting shall be documented on the designated report of injury form, which shall be signed by a supervisor. A copy of the completed form shall be forwarded to the appropriate personnel.

Unless the injury is extremely minor, this report shall be signed by the affected employee, indicating no desire for medical attention at the time of the report. Signing does not preclude the employee’s ability to later seek medical attention.

**1004.5   SETTLEMENT OFFERS**

When an employee experiences a work-related condition that is caused by another person and is subsequently contacted by that person or that person’s agent, insurance company, or attorney and offered a settlement, the employee shall take no action other than to submit a written report of this contact to a supervisor as soon as possible.

1004.5.1   NO SETTLEMENT WITHOUT PRIOR APPROVAL

No less than 10 days prior to accepting and finalizing the settlement of any third-party claim arising out of or related to a work-related condition, the employee shall provide written notice of the proposed terms of such settlement to the appropriate legal counsel for the employer. In no case shall the employee accept a settlement without first providing this written notice. The purpose of such notice is to permit the employer to determine whether the offered settlement will affect any claim the employer may have regarding payment for damage to equipment or reimbursement for wages against the person who caused the work-related condition, and to protect the employer’s right of subrogation, while ensuring that the employee’s right to receive compensation is not affected.

**IMPLEMENTATION GUIDANCE**

***The following information is provided to assist you in implementing this policy and should be deleted before the policy is issued to agency personnel.***

**Work-Related Illness and Injury Reporting**

This policy is being provided to contribute to the ongoing discussions and actions regarding COVID-19 (coronavirus disease 2019).

This policy is intended as a starting point for local governments and agencies preparing policies for dealing with the reporting of work-related conditions. This is a national-level policy and does not include applicable state or local requirements.

Lexipol is not your agency's policy maker. Your agency is responsible for reviewing, customizing, and adopting any version of this policy for your agency. Neither the policy nor any information provided should be considered to contain legal advice or opinions. You should contact your legal counsel to obtain legal advice.

This policy addresses the subject of work-related conditions such as physical injury or occupational illnesses. It provides the process for reporting and documenting such illnesses and injuries. This policy outlines the responsibilities of employees and supervisors.

Review any human resources policies you might have on this topic to avoid conflicts.

**CUSTOMIZATION**

You should customize this policy to meet your agency’s practice, paying particular attention to the following sections:

**SUPERVISOR RESPONSIBILITIES** If you have an internal report of injury form that supervisors complete for all injuries, make that change here. The state workers’ compensation injury reporting forms must still be completed in accordance with state law.

**OTHER ILLNESS OR INJURY** This section refers to the report of injury form for reporting a work-related condition that does not qualify for workers’ compensation. Modify the name of the form as needed.

**NO SETTLEMENT WITHOUT PRIOR APPROVAL** This section requires employees to give your legal counsel notice of any proposed settlement agreement to give you the opportunity to determine whether the offered settlement will affect any claim you may have regarding payment for damage to equipment or reimbursement of wages against the person who caused the work-related condition. This also protects any right to subrogation that you may have. Modify if you want notice to go to a different designated person.