

POLICY NO.: 573-14

WORKERS' COMPENSATION (WORK RELATED INJURY OR ILLNESS) POLICY

A. PURPOSE

To provide the policies and procedures for workers compensation associated with a work related injury and illness and modified duty guidelines and procedures.

B. POLICY

1. It is the policy of the County of Cape May to provide Workers Compensation protection for all employees who become injured or ill due to work related incidents in accordance with provisions of the New Jersey Workers Compensation Law. In order to promote safety in the workplace and to eliminate any hazard that could create a risk of injury to employees and the public, all employees are required to report a work related injury within twenty-four (24) hours of the incident.
2. Any employee who fails to adhere to the following reporting procedures could jeopardize the employee's coverage under New Jersey's Workers' Compensation Laws and may be subject to disciplinary action up to and including termination of employment.
3. Contact the Department of Human Resources & Training with any questions in reference to this policy.

C. PROCEDURES

1. The following steps should be taken when an employee sustains a non-life threatening, work related injury:
 - a. The injured employee will immediately notify his or her manager or supervisor of the injury/illness.
 - b. The manager or supervisor should ask the employee whether he or she needs medical assistance.
 - c. If medical assistance is requested, the employee will be directed to the appropriate treatment facility.
 - d. The manager will instruct the employee to report the incident to the County Workers Compensation Claim Administrator within 24 hours.
 - e. Utilizing the "Supervisors Accident Investigation Report" the manager or supervisor will investigate the injury/illness and fully complete the form.

- f. Utilizing the “Workers Compensation Injury Report” the County Workers Compensation Claim Administrator will investigate the injury/illness and fully complete the form.
 - g. In accordance with the Drug and Alcohol Use and Testing policy, the employee will be required to submit to a laboratory test for the presence of drugs and/or alcohol. Refusal to submit to laboratory testing will be deemed misconduct in violation of this policy.
 - h. If the employee is unable to return to work, he or she is required to follow proper callout procedures. The employee must continue to call-out until they have been approved for a Workers Compensation Leave of Absence, or receive medical clearance to return to work. If the employee returns to work under a modified duty status, he or she must notify his or her supervisor and Department Head of the specific limitation.
 - i. Even if the injured/ill employee declines medical treatment, the “Worker Compensation Injury Report” and “Supervisors Accident Investigation Report” must be completed.
2. The following steps should be taken when an employee sustains a life threatening, work related injury:
- a. A life-threatening injury is defined as an "injury involving a substantial risk of death; loss or substantial impairment of the function of a bodily member, organ, or mental faculty that is likely to be permanent; or an obvious disfigurement that is likely to be permanent." This includes, but is not limited to, injury involving loss of consciousness, difficulty breathing, heart attack, fractures, multiple injuries and/or death.
 - b. The employee should be directed to the appropriate treatment facility. If necessary, call 911 to have the employee transported to the emergency room.
 - c. The employee’s manager or supervisor must also be notified immediately. The manager or supervisor will then immediately notify the Workers Compensation Claims Administrator.
 - d. The employee will contact or report the incident to the County Workers Compensation Claim Administrator the day after being discharged.

- e. The employee will provide the discharge papers to the Workers Compensation Claim Administrator.
- f. The manager or supervisor will investigate the injury/illness utilizing the "Supervisors Accident Investigation Report."
- g. Utilizing the "Workers Compensation Injury Report" the County Workers Compensation Claim Administrator will investigate the injury/illness and fully complete the form.
- h. In accordance with the Drug and Alcohol Use and Testing policy, the employee will be required to submit to a laboratory test for the presence of drugs and/or alcohol. Refusal to submit to laboratory testing will be deemed misconduct in violation of this policy

D. DEPARTMENT MANAGER/SUPERVISORS RESPONSIBILITIES

- 1. Complete the "Supervisors Accident Investigation Report" providing as much detail as possible so that a proper investigation can be conducted.
- 2. Investigate the incident to determine if any measures may be taken to prevent a future incident from occurring.

E. RESPONSIBILITIES OF HUMAN RESOURCES/CLAIM ADMINISTRATOR

- 1. Review the entire incident report for safety concerns.
- 2. Follow up to ensure that any known safety hazard was abated.
- 3. Follow up with the employee's manager or supervisor to determine whether any additional investigation is required.
- 4. Report the incident to the workers compensation insurance company to determine if the claim will be accepted or denied.
- 5. Send a letter to the employee acknowledging the report of their work related injury.
- 6. Keeping track of the lost work days for purposes of the employee's entitlement to a leave of absence.
- 7. Any contact with a medical provider shall be handled by Human Resources or the County Claim Administrator. Under no circumstances will any other County personnel contact the providers.

8. Monitor an employee's medical treatment.

F. RESPONSIBILITIES OF AN INJURED/ILL EMPLOYEE

1. Report the work related injury or illness to a manager or supervisor immediately.
2. Report the work related injury or illness to the County Claim Administrator within 24 hours.
3. Assist and provide information needed to complete the required forms and reports.
4. The employee is obligated to comply with the outlined course of medical treatment.
5. An employee who is authorized out of work or on an approved Workers Compensation Leave of Absence may not participate in any County activities.
6. If an employee is unable to return to work, he or she is required to follow proper callout procedures. The employee must continue to call- out until he or she has been approved for a Workers Compensation Leave of Absence, or receives medical clearance to return to work. If the employee returns to work under a modified duty status, he or she must provide medical documentation to his or her supervisor and Department Head of the specific limitations and the estimated time that the employee will be limited to modified duty.

G. RIGHTS OF AN INJURED EMPLOYEE

1. Under the laws of New Jersey, an employee must use the medical services directed or provided by the County if the employee expects the County to pay for such treatment.
2. An employee cannot choose which medical provider to go to for treatment unless the employee is prepared to assume individually the costs for such treatment. Employees should be aware that the County's health insurance provider may decline to reimburse an employee for costs associated with work related injury or illness. The County may also terminate any temporary disability workers' compensation payments to an injured employee if he or she refuses to follow medical instructions of the physician to which the associate has been referred.
3. There is no cost to the employee for treatment of work related injuries.

H. MODIFIED DUTY OR MODIFIED WORK SCHEDULE FOR WORK RELATED INJURY

1. The County believes modified duty or a modified work schedule enhances both psychological and physical healing by shortening the time period until an employee returns to full capacity in his or her regular job. It reduces the degree of impairment after an injury and assists the injured employee in returning to work. Modified duty or modified work schedule is offered consistent with New Jersey's Workers' Compensation Act.
2. Modified Duty /Schedule may be provided if:
 - a. a treating physician has released and authorized the employee to return to work with temporary restrictions or working hours which would prevent or inhibit the employee from performing his or her normal work related duties; and
 - b. a temporary position has been identified which the employee is able to perform in accordance with the treating physician's documented limitations and restrictions
3. A modified duty position or modified schedule may be approved at the County's discretion, in consultation with the treating physician.
4. A modified duty position or modified schedule will begin on the same day or the next day following the treating physician's approved notice of return to work restrictions.
5. If the employee refuses to accept the modified duty position or modified schedule, the Department Head must contact the County's Claims Administrator.
6. To the extent possible, a modified duty position will be similar to the employee's normal working schedule, including shift and days-off.
7. An employee must comply with any on-going, scheduled medical appointment, medical treatment as well as any independent medical examination.
8. An employee shall be held accountable to all County policies and procedure while on modified duty, including attendance and call-out procedures.