

Supervisor/Manager and HR Checklist for Workers' Compensation

This checklist outlines the steps Supervisors/Managers and District Office HR Leaves and HR Contacts should take to document a work-related injury, illness or accident and/or a potential work-related incident for purposes of Workers' Compensation. MCCC's third-party Workers' Compensation Administrator is Tristar Risk Management. Supervisors and Managers must ensure that their staff are informed of the [Injured Worker Reporting requirements](#).

Please note:

In the event of a life-threatening medical emergency, **first call 911** and then call your colleges Public Safety Office.

All work-related injuries, illnesses and accidents must be reported as they may require regulatory reporting immediately. Immediately notify DO Risk Management Safety & Risk Control Manager, 24 hours, 7 days per week at 480-731-8947 if any one of the following occurrences:

- Fatalities;
- Any inpatient hospitalization;
- Any amputation or loss of an eye.

Not reporting a work-related injury, illness or accident within the required time periods may result in fines to the College where the injured employee works.

When Notified of a Work-Related Injury, Illness or Accident SUPERVISOR/MANAGER Action Items	
<input type="checkbox"/>	Help the employee receive first aid or seek medical attention, if necessary, by contacting Triagenow togetherwith the injured employee at 1-844-332-5221.
<input type="checkbox"/>	Complete the Supervisors Report of Injury (SRI) and submit to the RM Safety & Risk Control Manager within 24 hours of the incident. via email: lisa.laird@domail.maricopa.edu
<input type="checkbox"/>	Contact Risk Management immediately if an employee is admitted to the hospital, has an amputation or loses an eye within 24 hours post-incident. Contact Risk Management immediately if informed an employee died within 30 days of an incident.
<input type="checkbox"/>	Notify the employee of the following: <ul style="list-style-type: none"> • He/she will receive an Acknowledgement email with instructions from Risk Management regarding the claim. • If medical treatment isn't sought within the first 24 to 48 hours after injury it may impact his/her potential workers' compensation benefit.
<input type="checkbox"/>	Conduct an incident investigation & complete the Accident Investigation Report (AIR) . Include: <ul style="list-style-type: none"> • Witness statements if applicable • Photos and or video of the location of the incident • Root cause of the incident • Corrective measures Submit the completed report to lisa.laird@domail.maricopa.edu w/in 7 days of the incident
<input type="checkbox"/>	If restricted work is prescribed by the medical facility; determine: <ul style="list-style-type: none"> • Whether you can accommodate the restrictions within the injured workers current job position and/or department. • Whether you need to work with College HR for modified duty in another department. • Whether you need to work with District HR for modified duty at another college.
<input type="checkbox"/>	Complete the written light duty job offer and present to employee for acceptance/declination. Send signed/dated copy to RM; keep copy on file. <ul style="list-style-type: none"> • If employee declines, notify Risk Management immediately
<input type="checkbox"/>	Continue to periodically check in with the injured worker to determine if the modified duty work is causing an exacerbation of the injury.

	<ul style="list-style-type: none"> • If modified duty is aggravating the injury; re-evaluate duties and adjust accordingly.
<input type="checkbox"/>	<p>If “no work” is prescribed by the medical facility, notify Risk Management immediately. The supervisor must enter the employees time as “WC Industrial Leave”.</p> <ul style="list-style-type: none"> • Employee is not permitted to return to work without a Dr.’s release to “light” or full duty.
<input type="checkbox"/>	<p>Use the documentation provided by the injured worker to code the employees time (up to 2 hours) as “WC Industrial Medical Appt” for each doctor’s appointment for the work-related injury. If the employee fails to provide documentation; they must use their accruals to cover the time.</p>

When Notified of a Work-Related Injury, Illness or Accident
College HR & DO HR Leaves Action Items

<input type="checkbox"/>	Work with the employee and his/her Supervisor/Manager to determine how to accommodate the employees work restrictions.
<input type="checkbox"/>	If notified by the injured employee and/or Risk Management about required WC Industrial leave, send FMLA instructions and Eligibility Form to the employee <ul style="list-style-type: none">• Respond to employee (copy Risk) of approval/denial of FMLA
<input type="checkbox"/>	Assist Risk Management in investigating potential fraudulent claims, if applicable.
<input type="checkbox"/>	If the employee's claim is denied remind employee he/she may be eligible to submit a Short-Term Disability (STD) if the injury, illness or accident is not considered work-related and the claim is denied.
	Discontinue FMLA when notified by Risk Management that the employee has been released back to work.