



SACRAMENTO POLICE DEPARTMENT



254.01 REPORTING ON-DUTY INJURIES 09-28-09

PURPOSE

To establish procedures for reporting on-duty injuries and securing medical assistance for employees who incur these injuries.

POLICY

To grant time off for illness, injury, or emergency that render employees unable to perform their regular duties.

PROCEDURE

A. DEFINITIONS

ON DUTY - The status of employees performing duties and responsibilities during work hours.

B. GENERAL

1. The City's policy is to not accept liability for the payment of any medical treatment provided to employees other than as outlined in this order. When a situation arises which is not covered by this order, contact the Personnel Services Division (PSD) or the Workers' Compensation Unit in the Risk Management Division of the Administrative Services Department (ASD).
2. Employees who receive medical treatment for an on-duty injury or illness must be cleared to return to duty by the attending physician. If treatment is provided by other than a City physician, employees may be required to see a City physician before returning to work. The PSD shall schedule an appointment with the City Physician, if it is required. Therefore, employees must contact PSD before returning to work (unless the medical treatment occurs during the shift when the injury or illness occurs and PSD is not open).

C. EMERGENCY CARE OF MAJOR MEDICAL TRAUMA, INJURY OR ILLNESS

1. When ambulance transport is required for on-duty illness/injury, local health care professionals have established procedures by which a physician will instruct on-scene technicians regarding treatment and available hospital resources. When possible, consultation with the injured/ill employee regarding choice of hospital as part of that process.
2. No other employee shall interfere with this decision making process regarding where and how the injured/ill employee shall be treated.
3. In cases where the employee is not able, due to medical condition, to make a hospital preference known, the supervisor on the scene shall notify the Communications Shift Supervisor of the employee's name and identification number and where the employee was taken.
4. The Communications Shift Supervisor shall then telephone the receiving medical facility and provide the name of the employee's doctor on record. Once the employee has stabilized, arrangements can be made to transfer the employee to a hospital of the employee's choice for treatment by employee's personal physician.
5. All reporting procedures shall apply once the immediate emergency is accommodated.

D. TREATMENT FOR OTHER ILLNESS/INJURY

1. Other on-duty injuries or illnesses shall receive prompt medical attention when required. Injuries may be treated by a City physician or by the employees' personal physician(s) if an Employee Information Card (SPD 552) is on file.
2. If an injury/illness occurs at any time a City physician is unavailable for appointments, the approved medical treatment facilities 24 hour number can be obtained from Communications for directions in securing treatment.

E. REPORTING INJURIES

1. Employees sustaining on-duty injuries, no matter how slight, shall notify their immediate supervisor as soon as possible and provide the information needed to document the

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- injury.
2. Supervisors shall document the incident and forward the documentation to the PSD as follows:
- a. Report of Industrial Injury
- (1) The Report of Industrial Injury form, WC001, shall be used and the proper space checked, indicating:
 - (a) Medical Treatment Required - Mark this box if an employee receives an injury or job incurred illness, and medical treatment is required.
 - (b) Exposure - Mark this box if an employee is exposed to a chemical/infectious health risk, whether or not medical treatment is required.
 - (c) Incident Report - Mark this box if an employee is injured, and no medical treatment is needed.
 - (2) Personnel shall sign Report of Industrial Injury form and forward it to their division manager for signature.
 - (3) A copy of the form shall then be immediately FAXED to the City's Workers' Compensation unit.
 - (4) The completed form(s) shall be sent to the PSD after the injured employee receives a copy. The original shall be sent to the Worker's Compensation Unit via the PSD. A copy shall become a permanent part of the employee's workers' compensation file.
 - (5) In more severe injury cases that cause lost time from work, or where injuries require medical attention, the employees' supervisor shall complete the WC001 as soon as possible. This four part form shall include the name and address of the treating physician, and the hospital or medical service provider.
 - (6) In emergency cases the WC001 shall be completed as soon as practical
- b. Employee's Claim for Workers' Compensation Benefits
- (1) Any supervisor aware of an employee's filing a Report of Industrial Injury, or reporting an industrial injury or illness and the employee is seeking, or intends to seek, medical treatment, shall provide the employee an Employee's Claim for Workers' Compensation Benefits, DWC 1, within 24 hours of the on-duty injury. Failure to provide this form to the injured employee within the specified time frame limit will result in an automatic \$5,000 penalty to the City.
 - (2) Before giving the form to the injured employee the supervisor shall print the employee's name on the form at the top next to the seal of the State of California. The supervisor shall also complete the second half of the DWC1 as follows:
 - (a) Complete item #9 listing the Department, Division, and Section as appropriate.
 - (b) Complete item #10 giving the Department's headquarters building address, 900 8th Street.
 - (c) Complete item #11 with the date you first know of the injury. (This must be the same date that the injury was first reported to the Department as requiring medical treatment.)
 - (d) Complete item #12 with the date you provide the Claim Form to the employee. (This must be no later than the day following the date that the injury was first reported as requiring medical treatment.
 - (e) Complete item #13 only if the injured employee immediately returns the DWC1 at the time you are completing the form.
 - (f) Complete item #14 with "City of Sacramento, Workers' Compensation Unit, 921 10th Street".
 - (g) Under item #15 with "self insured".
 - (h) Under item #16 by clearly sign your name.
 - (i) Under item #17 with your work title.

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- (j) Under item #18 with your work phone number.
- (3) The supervisor shall give the fourth (green) page of the DWC1 packet to the injured employee after completing the items listed in paragraph (2) above. The fourth page is the "Employee's Temporary Receipt."
- (4) If the employee completes the DWC1, sections 1-7 at the time the report is made, the supervisor shall:
 - (a) Complete item #13.
 - (b) Immediately send the white, yellow, and pink pages, "Employer", "Claim Administrator", and "Employee" copies, to the PSD. The PSD will forward the documents to the Workers' Compensation Unit.
- (5) If the employee does not complete the DWC1 at the time the report is made, the supervisor shall:
 - (a) make two clear copies of the "Employer" page, one to be immediately sent to the Workers' Compensation Unit, the second to be sent to PSD.
 - (b) Give the employee the entire DWC1 Packet, (completed according to paragraph (2) above). The employee shall retain the "Employee's Temporary Receipt" (green copy).
 - (c) When the employee returns the completed DWC1, the supervisor shall complete item #13, and immediately forward the two pages labeled "Employee" and "Claims Administrator" copies, to the PSD. The PSD shall forward the copies to the Workers' Compensation Unit.
- 3. The Workers' Compensation Unit will process the employee's permanent receipt and route it back to the employee.
- 4. Duty Status Report
 - a. An employee injured on duty and receiving medical attention shall obtain a Duty Status Report form, SPD 165. The form is required for each visit made to a doctor until the employee is released from care. All applicable areas of the form shall be completed and signed by the doctor. The employees shall submit the form to their immediate supervisor, or the on-duty supervisor.
 - b. The supervisor shall ensure the pink copy is placed in the employee's Division or Office file and fax the SPD 165 to the PSD to ensure immediate notification. The original and yellow copy shall be routed, through the chain of command, to the PSD.
 - c. The PSD shall route the yellow copy to the Court Liaison Unit.
 - d. In cases of extended treatment, and/or when the interval between visits exceeds 30 days, the employee shall ensure an SPD 165 is completed by the attending physician and returned to their immediate supervisor at least once every 30 days.
 - e. When serious/incapacitating injuries requiring immediate hospitalization or doctor's care render an employee unable to obtain a copy of an SPD 165, their immediate supervisor shall ensure a copy of this form is completed by the doctor as soon as practical.
- F. MEDICAL CARE OR CONSULTATION BY A CITY PHYSICIAN
A City physician is available for consultation during and after business hours. Employees needing an appointment for a work related injury shall contact a City of Sacramento Workers' Compensation Treatment Facility.
- G. MEDICAL CARE OR CONSULTATION BY A PRIVATE PHYSICIAN
 - 1. Employees who want treatment by their personal physician to treat them for a job-incurred injury shall have an SPD 552 on file designating their personal physician. This notice must have been dated and signed before the date of the reported injury.
 - a. A copy of the form shall be filed in the employee's Division or Office file.
 - b. The original shall be forwarded to the PSD for filing in the employee's permanent file. The PSD shall forward one copy of the form to the Communications Division, and one copy to the Workers' Compensation Unit in the City Risk Management Division of Administrative Services Department (ASD).

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- c. The Communications Division shall maintain an up to date file with the physician's name, address, and phone number. This will ensure the information is available on a 24-hour basis.
- 2. The personal physician shall be one previously directing medical treatment for the employee and who retains the employee's medical records.
 - a. Employees insured through Kaiser may list the Chief of Industrial Medicine for Kaiser Hospital as their private doctor.
 - b. If an employee uses a personal physician for an industrial injury without first notifying the Department, the City may refuse any claims for payment.

NOTE: Employees should ensure that their personal physician handles workers' compensation cases.

- 3. Claims for payment shall be referred to the Workers' Compensation Unit, City Risk Management Division of Administrative Services Department (ASD).
- 4. Employees feeling they are not receiving proper care from a private physician for an industrial injury, shall contact the PSD. The PSD shall arrange for an appointment with the City Physician through the Workers' Compensation Unit. The overriding concern of this order is the provision of quality care to the employee.
- 5. See GOs 251.01 and 255.09 for modified duty procedures.