Louisiana State University

Office of Facility Services

Operating Instruction 4109

Revision: 3

Effective Date: December 1, 2010

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SUBJECT:

OCCUPATIONAL ACCIDENT/OCCUPATIONAL ILLNESS REPORTING

I. General Information

- A. Every employee performing job duties as a requirement of their employment with LSU is covered by workers' compensation insurance.
- B. The Office of Facility Services is responsible for filing reports with the LSU Risk Management (campus) within a specified period of time (five (5) days, except in the event of serious or fatal injury or illness, which must be reported within 24 hours of the incident. If the reports are not filed within these time periods, the department may be liable for a substantial fine.
- C. All job related (occurring during assigned work shift) injuries must be immediately reported, using the following procedures:

II. Employee Responsibilities

- A. It is the employee's responsibility to immediately report to their supervisor any on the job accidents, illnesses, or recurrence of previous injuries or illnesses.
- B. Medical bills and prescription receipts should be submitted to:

LSU Risk Management 124 Public Safety Building, South Stadium Road Baton Rouge, Louisiana 70803-7907

III. Supervisor/Foreman Responsibilities

- A. Supervisor must obtain necessary emergency medical treatment for the injured/ill employee immediately. If there is time, pick up an Accident Report folder from the Facility Services Human Resources Management office. Use the Authorization for Medical Treatment form for medical care at the Student Health Center. If an illness or injury is life threatening, the treating agency (on campus or off campus) can contact OEHS, the Facility Services department head or the workers' compensation coordinator (578-3285) for authorization to treat the employee under Workers' Compensation benefits.
- B. Complete the Occupational Accident/Illness Report
 - 1. The form must be completed whether or not the employee receives medical treatment or misses work.
 - 2. Do not wait for completion of this form to obtain medical treatment for an injured/ill employee.
 - 3. This form must be completed regardless of doubt as to whether or not an accident occurred. NOTE: The first line supervisor is responsible for filling out and submitting the report in a timely manner.
- C. The Accident Investigation Form should be completed by the first line supervisor. Complete all areas. If some questions do not apply to the incident, mark N/A.
- D. Submit the completed Accident Report packet (Occupational Accident or Illness Report, Accident Investigation Report and a copy of the Authorization for Medical Treatment or report from the treating physician) to the Facility Services HRM office within **24 hours** of the accident/illness or immediately if serious injury/illness occurs.
- E. Upon the employee's return to work, send notification to the Workers' Compensation Coordinator (578-3285).

IV. Safety Officer Responsibilities

A. The Facility Services HRM Office will file an original report with LSU Risk Management for submittal to the Division of Administration, Office of Risk Management. Copies will be forwarded to the Campus Safety Officer and Workers' Compensation Coordinator.

V. Procedures

- A. Notify, in writing, LSU Risk Management the date the employee returns to work if it is not the same day the injury or illness took place.
- B. If an employee misses work for seven (7) full calendar days, including weekends, the employee's file will be referred to the Workers' Compensation Coordinator to coordinate Workers' Compensation benefits for the employee. The Workers' Compensation Coordinator shall be responsible for notifying the LSU Human Resources Office.
- C. Dispensation will be made to the employee or to the University according to the employee's leave records. The Workers' Compensation Coordinator will contact employees to endorse checks to be used for leave re-crediting.
- D. The Facility Services HRM office will be responsible for re-crediting leave to the employee and submitting amount(s) to be paid to the employee for leave without pay.
- E. The Workers' Compensation Coordinator will submit miscellaneous check requests to the LSU Accounting Services office for leave without pay hours.
- F. The Worker's Compensation Coordinator will work with the Louisiana Office of Risk Management and LSU Risk Management to coordinate benefits if the employee is unable to continue working and/or files a re-injury report and must again be placed on leave and under Workers' Compensation.
- G. Accommodation requests for employees to allow them to return to work shall documented on the ADA Accommodation Assessment form and forwarded directly to the LSU Office of Human Resources Management.
- Any accommodation offer shall be made collaboratively by the LSU Office of Human Resources Management and the Facility Services Department Head.

- I. The Workers' Compensation Coordinator shall act as a liaison between Facility Services and the LSU Office of Human Resources Management for ADA and vocational rehabilitation cases that are created due to Worker's Compensation injuries or illnesses.
- J. The Accident Report/Workers' Compensation file will be maintained by the Workers' Compensation Coordinator and the Facility Services Human Resources Management office separate from the employee's personnel file.