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ADMINISTRATIVE REGULATION

346AR. -- WORKERS' COMPENSATION REPORTING PROTOCOL

All East Stroudsburg Area School District employees who suffer work-related injuries or illnesses shall be eligible for workers' compensation benefits.

Employees have the responsibility of notifying their immediate supervisor of any workrelated incident within twenty-four (24) hours of the incident. Immediate reporting allows for swift identification and correction of safety hazards and prompt medical attention for injuries. It is important to report all work-related incidents that occur regardless of whether you sustained an injury, as an employee may not immediately realize that s/he has been injured.

The following protocols shall be followed by employees for the reporting of all work-related incidents in the East Stroudsburg Area School District prior to seeking medical attention.

- a. <u>Building Employee w/Injury</u> Contact building principal and report directly to the building School Nurse for injury assessment, provided one is on duty at the time of the incident. When a non-life threatening injury is determined, the School Nurse shall be responsible to treat the injury and/or recommend next level of treatment care. The School Nurse shall assist the employee in completing the *Workers' Compensation Packet* and Inservco Online First Report of Injury Form. If the School Nurse is not on duty, report directly to the building principal to complete the *Workers' Compensation Packet*.
- b. <u>District/Department Level Employee w/Injury</u> -- Contact immediate supervisor and report to the nearest building School Nurse for injury assessment, provided one is on duty at the time of the incident. When a non-life threatening injury is determined, the School Nurse shall be responsible to treat the injury and/or recommend next level of treatment care. The School Nurse shall assist the employee in completing the *Workers' Compensation Packet* and Inservco Online First Report of Injury Form. If the School Nurse is not on duty, report directly to the immediate supervisor to complete the *Workers' Compensation Packet*.
- c. <u>No Injury "Report Only"</u> -- If there is not an injury to be treated, you need to document the incident and/or safety hazard, and contact your building principal and/or immediate supervisor to assist in completing a "Report Only Incident" as part of the *Workers' Compensation Packet* and Inservco Online First Report of Injury Form.

NOTE: All life threatening and/or First Responder injury of care shall immediately be referred to 911 Emergency.

WORKERS' COMPENSATION PACKET:

Form to be given to the employee by the School Nurse. (In the absence of the School Nurse, the building principal and/or immediate supervisor will provide the forms below to the employee.):

a. WC-EE012 -- Worker's Compensation Program: Designated Health Care Provider

b. WC-EE015 – Instructions for Prescription Benefit Claims

- c. WC-EE016 Return to Work Status Report (*Employee is responsible to take a*
 - copy of this form to each doctor's visit. Employee must return this form to their building principal and/or immediate supervisor following each doctor's visit.)

Forms to be completed by the employee, signed and returned to the School Nurse, building principal and/or immediate supervisor regardless of whether the injured employee is going to seek medical treatment on the day of the injury or in the future:

- a. WC-EE010 INSERVCO First Report of Injury Form
- b. WC-EE011 -- Workers Compensation Information
- c. WC-EE013 -- Notification to Employee of Their Rights and Duties Under the
 - PA Workers' Compensation Act Section 306 (f.1) (1) (i)
- d. WC-EE014 Medical and/or Hospital Authorization
- e. WC-EE017 Workers' Compensation Medical Treatment Waiver

SCHOOL NURSE/PRINCIPAL/IMMEDIATE SUPERVISOR: All five (5) forms from *Workers' Compensation Packet* must be completed by the injured employee and submitted back to the building School Nurse, building principal and/or immediate supervisor for verification that all required fields have been completed/signed and for assistance in the completion of the INSERVCO Online First Report of Injury Form.

The School Nurse shall be responsible to share copies of all five (5) forms with the building principal and/or immediate supervisor following the incident.

The building principal and/or immediate supervisor shall be responsible for the completion of the *Accident Investigation Report* within 24 hours of the incident.

The originals of the completed *Workers' Compensation Packet* shall be scanned to <u>christina-davidge@esasd.net</u> and sent through interoffice mail to: Christina Davidge--ESASD Central Administration—Human Resources Office.