Worker's Compensation Guidelines

1. First Aid

- a. Render immediate attention to employee
 - 1) CALL 911 for LIFE THREATENING EMERGENCY
 - 2) If non-emergency medical attention is necessary
 - a. Send employee to nurse if minor injury
 - b. Send to District clinic for examination

2. Medical Treatment

- a. Give employee the following (immediately or no later than 24 hours)
 - 1) **DWC-1 Form**
 - 2) Medical Authorization Form
 - 3) List of District Clinics
- b. <u>If</u> employee refuses treatment, issue *Claims Withdrawal Form*; the employee has one (1) year from date of injury to follow-up, if necessary

3. Reporting

- a. Complete the following within 24 hours of incident
 - 1) Worker's Compensation Incident/Injury Report Worksheet
 - 2) *ISTAR*
 - 3) Refer to Worker's Compensation Incident/ Injury Worksheet to report to Sedgwick 1-800-582-7392
 - 4) FAX Injury Accident OEHS—(213) 241-6816; if necessary

4. Investigation

- a. Obtain witness statements
- b. Submit to AFSS and HR

5. Unable To Return To Work

- a. If employee is unable to work, the employee will:
 - 1) Submit Work Status Report from doctor
 - a. AFSS/HR work together to determine if restrictions can be accommodated
 - b. Remind employee to continue to send updated Work Status Report after each appointment
- b. Send FMLA paperwork (sent by FSM)
 - 1) FMLA Acknowledgement of Receipt
 - 2) FMLA Employee Eligibility & Entitlement
 - 3) FMLA Health Care Provider Certification
- c. Send Leave of Absence paperwork; if absence from work more than twenty (20) days
 - 1) PC Form 5006, six (6) page document

6. Able To Return To Work

- a. If employee remains off work due to recommendation by doctor
 - 1) Receive *Work Status Report* stating cleared to return to work
 - 2) Treatment Authorization Form
 - a. completed by FSM
 - 3) Health Appraisal Form
 - a. completed by District clinic doctor

7. Contacts

a. Contact your manager, AFSS, HR, principal (if applicable)