

Title: Work-related Illness or Injury

Control Information

Control Item	Details
Owner/Curator	Melissa Harris
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Consult and Notify	ICP, ED, HT, AA, All Staff

Revision History

Revision	Date	Revision Description	Originator
A	2/12/2015	Initial Release	Melissa Harris

1.1. Objective:

The objective of this policy is the following:

- 1.1.1. Outline the procedure for reporting work-related injuries and illnesses.
- 1.1.2. Educate administrators and employees on the steps they should take to report and respond to work-related injuries and illnesses.
- 1.1.3. Ensure that injuries and illnesses are reported based on the requirements of the law and the insurance provider.

1.2. Reporting Work-related Injuries and Illnesses

- 1.2.1. All injuries and illnesses sustained by an employee while in the actual performance of duty, occurring on school premises, at school-sponsored activities, or involving staff members performing school business should be reported immediately to the Executive Director.
- 1.2.2. The Executive Director and/or Administrative Assistant will work with the employee to create a written record including the details of the events leading to the employee's work-related injury or illness.
- 1.2.3. This written report must be completed and filed within 24 hours of the employee's report.
- 1.2.4. If the work-related injury or illness to an employee results in overnight hospitalization for medical treatment other than first aid, the Executive Director will inform the Oregon Occupational Safety and Health Division (OSHA). Fatalities or catastrophes shall be reported within eight hours. The Executive Director will ensure that injuries and illnesses are reported based on the requirements of the law and the insurance provider.

1.3. Investigating Work-related Injuries and Illnesses

- 1.3.1. All injuries and illnesses sustained by the employee while in the actual performance of duty will be promptly investigated.
- 1.3.2. Corrective measures will be taken if the results of the investigation indicate such measures should be taken.
- 1.3.3. The Executive Director will inform the Board of any serious injuries or illnesses, including accidents involving school property or employees, students or visitors and outline corrective measures being taken to prevent future injuries or illnesses.

INJURY/ILLNESS REPORT FORM

Employee Information

Name: _____

Occupation: _____

Address: _____

Phone #: _____

Injury/Illness Information

Date of Injury/Illness: _____

Time/Hour: _____

Description of Injury/Illness: _____

Description of Circumstances Leading to the Injury/Illness: _____

Name(s) of any Witnesses: _____

Medical Treatment Provided: _____

Injury/Illness Reported To: _____

Date of Report: _____

Time/Hour of Report: _____

Signature of Employee

Signature of Individual Receiving Report