

 D - Personnel No. 14
 D14

 Page 1 of 1
 Attachment(s): 1 additional page

 Revised February 14, 2012

REPORTING WORKERS' COMPENSATION INJURY/ILLNESS

DISTRICT RESPONSIBILITY:

Texas Workers' Compensation Act

The law requires all employers to file a DWC-1, **Employer's First Report of Injury Form**, when an employee initially receives workers' compensation benefits due to a compensable work-related injury/illness. State law strictly governs Workers' Compensation reporting procedures and claims. State penalties not to exceed \$500.00 per violation and not to exceed \$10,000 for repeat violations may be assessed to employers for non-compliance with this mandate.

EMPLOYEE RESPONSIBILITY:

Report of Accident

All work-related injuries/illnesses should be reported to the immediate supervisor/designee at the earliest opportunity on the day of the incident and no later than 24 hours from the date the injury/illness occurred. The *Report of Accident* [FORM D14-A] can be accessed from the Employee Benefits, Risk Management and Safety department website, from the District's Administrative Procedures Intranet, or by calling 554-8540 and requesting a copy of the form.

Failure to timely and accurately report a work-related injury/illness may result in the delay or denial of workers' compensation benefits in part or in whole.

SUPERVISOR/DESIGNEE RESPONSIBILITY:

Submit Report and Provide Support

The employee must complete and submit to the campus/department immediate supervisor/designee a *Report of Accident* [FORM D14-A]. Upon notice of injury/illness, the employee's immediate supervisor <u>MUST</u> review and sign the employee's completed *Report of Accident* [FORM D14-A], The campus/department secretary **MUST** ensure the report is timely faxed to the Employee Benefits, Risk Management and Safety department at 228-3107.

Non-Life Threatening Injuries/Illness

If the employee requires or requests medical attention please call the Employee Benefits, Risk Management and Safety department at 554-8540 for immediate assistance. An Occupational Health and Safety (OH&S) Specialist will immediately contact the employee and assist him/her with obtaining medical treatment. The OH&S Specialist will report the injury/illness to the District's Workers' Compensation Third Party Administrator (TPA).

Life Threatening Injury/Illness

If the employee's injury/illness is deemed life threatening, immediately call 911 and provide detailed information about the employee's injury/illness and the exact physical address where the employee can be located. Stay with the employee until help arrives. After calling 911, immediately call the SAISD Police

Department at 271-3124 and the Employee Benefits, Risk Management and Safety Department at 554-8540. A Police Officer and an OH&S Specialist will be deployed to provide immediate assistance to the employee.

REPORTING PROCEDURES AFTER HOURS OR ON DISTRICT HOLIDAYS:

All work-related injuries/illnesses should be reported to the District's Police Department at 271-3124. The Police Department will ensure that the OH&S Specialist on call is notified. The OH&S Specialist will immediately contact the employee and assist him/her with obtaining medical treatment, if necessary, and will also provide assistance with the accident reporting process.

Attachments: FORM D14-A: Report of Accident

References: CRE (LEGAL), DEC (LEGAL), and DEC (LOCAL)

Questions regarding this procedure should be addressed to the Employee Benefits, Risk Management and Safety Department, 141 Lavaca, San Antonio, TX 78210-1095 / 210-554-8540.