Chapter 44
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SUBJECT: ADMINISTRATION OF WORKERS' COMPENSATION PROGRAM

I. PURPOSE

To provide for the uniform administration and monitoring of the City's workers' Compensation Program and to insure that employees injured on the job receive all benefits to which they are legally entitled.

II. SCOPE

The procedure is applicable to all permanent employees, part-time employees, temporary employees and employees participating in the City's volunteer program. Additionally, the City has agreed to provide Workers' Compensation coverage for individuals assigned by the court to work off fines through an assignment at the City. Temporary employment agency workers and individuals on grant programs funded by the Federal Government are not covered by this procedure.

III. AMENDMENTS

The City Administrator may amend this procedure as required.

IV. GOALS

The goal of this Workers' Compensation Program is to insure that employees having valid claims receive all benefits to which they are entitled and to return ill/injured employees to work as soon as possible. This goal may be realized through the achievement of the following objectives:

- l. Complying with applicable State and Federal laws and City policy.
- 2. Informing the employee of rights and benefits under the Workers' Compensation Program.
- 3. Considering the special needs and problems of the ill/injured employee.
- 4. Arranging prompt and appropriate medical treatment.
- 5. Communicating with the employee throughout the period of disability.
- 6. Documenting the accident and return to work records.
- 7. Defending the City against improper claims.
- 8. Maintaining claims experience and financial records.
- 9. Participating in training sessions regarding handling on-the-job injuries and Workers'

Compensation claims.

V. DEFINITIONS

Industrial Injury - A personal injury arising out of and in the course of employment with the City of Lompoc.

Occupational Illness - A disease caused by certain hazardous conditions or materials when there is a direct cause or relationship between the conditions under which the work is performed and the occupational disease.

Temporary Disability - A physical incapacity which is expected to be completely cured or improved with proper medical attention.

Temporary Total Disability (TTD or TD) - When disability produces complete or substantially complete cessation of earning power. A disability is con-sidered to be total if the employee is physically unable to return to work in his regular employment.

Temporary Partial Disability - When the employee has recovered to the extent that he/she can perform some work but not his/her full normal duties, Temporary Partial Disability (TPD) refers to reduced level of earnings rather than a total loss of earnings. Modified employment can involve a return to work for less than a full work day. The employer may or may not, afford the employee the opportunity to return to work on this basis. Where the employee is willing and able but the employer restricts his/her employability, the employee's disability continues to be compensable as a total, not partial disability.

Waiting Period - Noncompensable Disability - The initial three (3) days of disability following the last day worked.

Permanent Disability - Medical disability which permanently adversely affects the employee's ability to work at any employment of his/her choice.

Permanent Total Disability - The disability produces a rating of 100%. The employee may still be able to do some type of work, but he/she has effectively lost his/her ability to compete with non-disabled job applicants for almost all employments.

Permanent Partial Disability - Any disability which rates 99 3/4% or less. The employee's competitiveness in the labor market is reduced, but still exists.

Job Analysis - A detailed listing of the physical tasks and demands of a job. This information has value in assessing the appropriateness of rehabilitation services as well as the nature and extent of the employee's permanent disability.

VI. CITY'S SELF-INSURED WORKERS' COMPENSATION PROGRAM

A. The City has been legally self-insured for the purpose of Workers' Compensation benefits since 1977. This means that instead of contracting with an insurance company to pay Workers' Compensation benefits, the City has established its own fund to pay these benefits.

B. Fleming and Associates has contracted with the City to administer benefits of the self-insured Workers' Compensation Program. These services include paying State-mandated compensation, medical bills, arranging doctors appointments, coordinating vocational rehabilitation services, coordinating litigated cases, etc.

VII. SUPERVISOR'S REPORT OF ON-THE-JOB ACCIDENT

- A. Supervisors are responsible for completing the Supervisor's Report of On-The-Job Accident as a result of their investigation of the incident. This form may be hand-written as long as it is legible. (See Appendix A)
- B. On-the-job injuries or illnesses shall be investigated by the supervisor of the person injured as soon as possible after the occurrence. The following investigative steps shall be adhered to as closely as possible:
- 1. Check the scene
- 2. Make notes on all facts
- 3. Collect any evidence
- 4. Interview any witnesses
- 5. Interview the injured employee
- 6. Weigh the evidence
- 7. Determine the cause
- 8. Take corrective measures to prevent reoccurrence
- C. In conjunction with the Supervisor's Report, the supervisor must provide the injured employee with the DWC-1 Employee's Claim for Workers' Compensation Benefits (See Appendix B) within one working day of knowledge or notice from the injured employee. Failure to do so can result in substantial administrative penalties for the City.
- 1. The supervisor should complete section #10, "Date Claim Form Was Given To Employee" and request that the employee complete the upper Employee Section of the form and return it to the supervisor without delay. If the employee is unable to immediately return the form, the supervisor should document that the DWC-1 was provided on the Supervisor's Report of On-The-Job Injury/Illness and note that the form has not yet been returned by the employee.
- 2. Upon receipt of the DWC-1, the supervisor completes the bottom section and gives the second copy (pink) to the employee.
- D. City policy provides that employees will also complete a more detailed Statement of On-The-Job Injury/Illness (See Appendix C) to assist in accident investigation and prevention. Witnesses to the accident should also complete this form when deemed necessary.
- E. Any supervisor's report that is illegible, incomplete or indicates an incomplete investigation will be returned to the Division Head for correction, and must be returned to the Human Resources Department within 24 hours of receipt.
- F. The report of on-the-job accident must be submitted to the Human Resources Department within 24 hours from the occurrence of the accident.

G. Supervisors shall not provide information to anyone concerning the injuries of their employees. All such inquiries should either be referred to the Human Resources Department or the Claims Administrator.

VIII. EMPLOYER'S REPORT OF OCCUPATIONAL INJURY OR ILLNESS

A. The Human Resources Department shall be responsible for preparing the "Employer's Report of Occupational Injury or Illness" - OSHA Form 5020, upon receipt of the supervisor's report of on-the-job accident. Reports shall be completed on all injuries or illnesses which require the services of a physician or result in lost time beyond the date of injury.

The original report and one (1) copy shall be submitted to the Claims Administrator, Fleming and Associates, and the third copy retained in the Workers' Compensation files in the Human Resources Department.

- B. The employer's report should not be held for a report from the doctor or for the employee to return to work. The details of the accident should be given in a simple statement of fact. In regards to Question 19A on the form, the nature of the employee's injury as observed by the supervisor should be provided in response. The Claim Administrator will rely upon the physician's report for an accurate medical description diagnosis.
- C. In the case of fatal accidents, the Human Resources Department shall immediately telephone the Claims Administrator upon notification from the Division Head.

IX. OCCURRENCE OF DISABILITY FROM A PREVIOUS INJURY

- A. Should employees experience continued problems or recurrence of a previously reported injury, they shall report it to their supervisor immediately.
- B. The department of the injured employee shall notify the Human Resources Department by memo immediately. The memo should indicate the original date of injury if the employee is losing time, and what physician is treating the employee.
- C. If the employee re-injured the same part of the body as previously reported, but did so from a new incident, it should be treated as a new injury and the procedure for filing a supervisor's report of accident should be followed.

X. MEDICAL TREATMENT

Treatment for an industrial injury or occupational illness as defined in Section V is outlined below and each department shall insure compliance.

A. Emergency Medical Treatment

- 1. Life threatening injuries or illnesses requiring immediate emergency treatment, such as profuse bleeding, unconsciousness, shock, etc., shall warrant emergency treatment. The injured person shall be transported to the Emergency Room, Lompoc Hospital District, East Hickory Avenue, Lompoc 735-3351, Ext. 245.
- 2. For all serious emergencies requiring immediate treatment and/or transportation, dial 911.

- 3. If qualified, administer first aid as necessary until help arrives.
- 4. Fatalities, injuries and illnesses within this emergency category shall be reported by telephone to the Human Resources Department during duty hours immediately after the emergency is under control, or at the beginning of normal duty the next morning. Provide the name of the victim, when, how, and where the accident occurred, and the nature of the condition causing the accident. The Human Resources Department will in turn, contact the Claims Administrator by telephone. This does not eliminate the need for written reports described previously.
- B. Injuries Not Constituting An Emergency That Require Physician's Care
- 1. These injuries shall be initially treated by a physician at Valley Medical Group, 136 North 3rd Street, Lompoc 736-1253.
- 2. After-hours injuries (shift workers) shall be treated at MediCenter, 1307 N. "H" Street, Lompoc.
- 3. Upon notification that an employee has been injured on the job, the supervisor shall insure that:
- a. First aid is administered, if qualified human resources are available.
- b. If treatment by a Medical Doctor is required, furnish the employee with a Medical Service Order Form. (See Appendix D).
- c. An employee may go to his/her own physician if the doctor has been listed with the Human Resources Department as the designated treating physician prior to injury. (See Appendix G). If the injured employee has not previously registered a physician with the Human Resources Department, the employer has the right to control medical treatment for 30 days. Following this period of time, the injured employee may choose his own treating physician, should he/she so desire, and upon notification to the Claims Administrator.

C. First Aid Treatment In The Field Or Office

Superficial injuries such as minor cuts, bruises, small punctures, scratches, etc., shall be treated in the field or office when an employee qualified to administer first aid is present and a first aid kit is available. A Supervisor's Report of Injury shall be completed on the injury and submitted to the Human Resources Office. A DWC-1 need not be supplied to the employee for first aid injuries only. An Employer's Report of Injury or Illness will not be filed by the Human Resources Department for first aid injuries.

D. False Industrial Claims

Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying Worker's Compensation benefits or payments is guilty of a felony (California Labor Code 5401.7).

E. Medical Bills

Medical, surgical, chiropractic, including nursing, medicines, medical and surgical supplies, crutches and apparatus, including artificial members, which is reasonably required to cure or

relieve the effects of the injury, shall be provided by the employer - Labor Code Section 4600.

1. After treatment of an industrial injury, bills for medical treatment and medicines are normally sent to the Claims Administrator for payment. However, bills are sometimes inadvertently sent to the employee for payment or a pharmacy will not bill an account. Employees have the responsibility to forward such bills, either to the Human Resources Department or directly to the Claims Administrator for processing immediately upon receipt to avoid unpleasant and unnecessary complications.

F. Establishing An Industrial Claim

It is not necessary to have a physician treat an injury in order to validate an industrial claim. A minor injury, such as a small cut, scratch or bruise, should be treated in the field by someone qualified to administer first aid, as long as the injury is reported to the supervisor and recorded, the employee will be fully covered for medical treatment later, should the need arise.

XI. INJURY COMPENSATION TIME

- A. Time lost because of a new injury is compensable when the Claims Administrator determines it is a valid claim within the meaning of the Workers' Compensation Laws.
- B. Time lost because of a recurrence of a previous injury is compensable only when the disability is confirmed as a recurrence by the treating physician.
- C. If a physician has determined the injured employee to be restricted from working as a result of his/her on-the-job injury, he is entitled to temporary disability benefits after the first three (3) days off work.
- 1. If the employee is off work more than 14 days or is hospitalized, temporary disability benefits are payable retroactive to the first day off work.
- 2. Temporary disability benefits are not payable for the date the injury occurred. This day is considered to be a day worked rather than a day of disability. If the date of injury is a last day worked, the date of injury is counted as -0-, and the first day of disability is the next day of disability which occurs.
- 3. The three-day period refers to calendar days of disability, and these days need not be consecutive. The injury may not produce immediate disability, or the disability may be intermittent. The employee may therefore accumulate three (3) days of disability over an extended period of time.
- D. Each department shall be responsible for closely monitoring injury time lost by their employees:
- 1. Insuring that the employee has been given a signed disability statement by the treating physician authorizing the employee to be off work. The physician statement should be immediately submitted to the Human Resources Department, who will transmit it to the Claims Administrator.
- 2. Insuring that hours reported on the employee's time sheet are consistent with the physicians disability leave statement. If the dates do not agree, due to a physician's early release or extended leave (or other reason), the Human Resources Department must be notified immediately.

Temporary disability overpayments or underpayments or delayed receipt of payments may result if time sheet hours do not agree with the physician's leave statements.

- 3. Periodically checking with injured employee on the progress of recovery.
- 4. Insuring that employees return to work on the date the physician releases them. Injured employees must have a written release to return to work from their treating physician prior to returning on the job. Any disability claimed in excess of the date indicated by the doctor shall be considered unauthorized and the employee shall be carried on vacation or sick leave.
- 5. Attempt to place employees on light duty or modified work when feasible and when authorized by the treating physician. Light duty work could involve restrictions from performing specific regular duties, such as heavy or strenuous labor or work in hazardous areas. Modified employment could involve return to work for less than a full work day. The employee may be able to perform his/her regular duties, but only for half days, etc. Refer to "Temporary Partial Disability" under Definitions for further information.

XII. PAYROLL ACCOUNTING OF INDUSTRIAL INJURY DISABILITIES

A. Leave Accounting

- 1. Employees injured on the job and determined by their physician to be totally disabled to perform their work, shall be placed on injury status (See Appendix E for example of time report).
- 2. Per Personnel Rule 10, Section 3 an employee receiving temporary disability payments under the Workers' Compensation Laws may use a proration of accumulated sick leave in order to continue to maintain his/her regular income.
- a. Additionally, City employees eligible for temporary disability may use accumulated time off, holiday and vacation leave to make up only the difference between their regular City salary and the temporary disability benefit amount. The use of prorated benefit time to provide up to full salary is done automatically by the Finance Department, unless employees notify the Human Resources Department that they do not wish to use paid leave.
- b. Temporary disability checks are prepared by the claims administrator and issued through the Human Resources Department. Prior to issuance of the employee's workers' compensation check, he/she is requested to sign an authorization for the City to reduce their paycheck in the amount of their temporary disability in order to reinstate sick leave (or other paid benefits) used in connection with the disability.
- c. The original authorization and a copy of the employee's temporary disability check is submitted to Payroll. The employee's gross wages are then reduced in the amount of his/her workers' compensation benefit as a one-time deduction and a manual adjustment is made to reinstate sick leave (or other paid benefit) hours.
- d. If injured employees are on an unpaid leave of absence, temporary disability checks are sent directly to the employee from the claims administrator.

B. METHODS OF COMPENSATION

- 1. During temporary total disability as certified by the treating physician, the employee shall receive benefits mandated by the California Labor Code.
- a. State mandated benefits (Labor Code Sections 4650, 4652, 4653)
- 1. These benefits are paid from City funds administered by Fleming and Associates.
- 2. Disability payments begin on the fourth (4th) day after the injured employee leaves work as a result of the injury.
- 3. If the disability lasts more than 14 days or necessitates hospitalization, payment will be made from the first (1st) day the injured employee leaves work as a result of the injury.
- 4. Temporary disability payments will be made no less than twice in each calendar month.
- 5. Temporary disability is paid as a percentage (66 2/3%) of average weekly salary, up to a maximum of \$336.00 per week. Public safety members receive paid leave benefits in lieu of temporary disability in accordance with Labor Code Section 4850.

C. DENIED CLAIMS

- 1. Occasionally a claim for industrial injury is not accepted by the Claims Administrator because of questionable validity, improper reporting or some other technicality. If the employee chooses to protest the denial, a period of time elapses before a hearing can be scheduled and a decision made. In the interim, the disabled employee may be placed on sick leave status until the case is resolved.
- a. If the decision is made in favor of the employee and the claim is accepted, payroll status shall be changed to injury time effective the date following the date of disability.
- b. Upon notification from the Claims Administrator that the claim was accepted, the Payroll section shall reinstate the sick leave used and insure the credit is properly entered the records.

 XIII. EMPLOYEE RETURN TO WORK
- A. Departments shall not allow an employee to return to work after an industrial injury or illness unless they receive a signed authorization from the treating physician.
- B. The department shall send the original release and a memo verifying that the employee did, in fact, return on the authorized date to the Human Resources Department.

XIV. RECORDING KEEPING REQUIREMENTS

A. Industrial Injury Records

l. A log of occupational injuries and illnesses shall be maintained by the Human Resources Department in accordance with instructions given in the OSHA booklet entitled "Record Keeping and Reporting Requirements Under the California Occupational Safety and Health Act". This log shall be maintained on a daily basis using infor-mation from the employer's report of occupational injury or illness.

- a. Minor injuries requiring only first aid treatment need not be recorded on the log.
- b. Injuries are recorded on a calendar year basis.
- 2. Occupational Injuries and Illnesses OSHA Form 200, shall be prepared by the Human Resources Department by February 1st of each year and shall be posted on City bulletin boards accessible to all employees from February 1 to March 1 of each year. The annual summary shall be retained for five (5) years.
- 3. Supplemental Records
- a. A copy of the employer's report shall be retained on file in the Human Resources Department as a supplementary record for a minimum of five (5) years.
- b. A copy of the supervisor's report of accident shall be retained by the Human Resources Department as a record of all injuries reported for a period of five (5) years.

XV. INTERPRETATION AND IMPLEMENTATION

Any questions relative to the intent or application of this procedure shall be made to the Human Resources Department who has the authority to interpret and implement this procedure.

Authorized: City Administrator Effective Date