

CAL STATE EAST BAY

Risk Management & Internal Control · SA1600· 25800 Carlos Bee Blvd· Hayward, CA 94542
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Supervisor's Injury and Illness Incident Report

INSTRUCTIONS

1. Report the illness/injury **IMMEDIATELY** to the Workers' Compensation Coordinator.
2. **Within eight (8) hours of the injury or illness:**
 - The employee's direct supervisor or administrator must complete ALL sections of this form.
(Under no circumstances is the injured/ill employee to complete this form.)
 - Forward the original form to the Workers' Compensation Coordinator with a copy to the department.

I. INJURED/ILL EMPLOYEE

Name:		Job Title:					
Address:		City:		State:		Zip:	
Home Phone No: ()		Department:				Ext:	
Work Phone No: ()		Usual schedule:		am / pm. TO:		am / pm	
# hrs Usually works:		Work days: Mon Tues Wed Thu Fri Sat Sun					
Direct Supervisor:				Ext:			

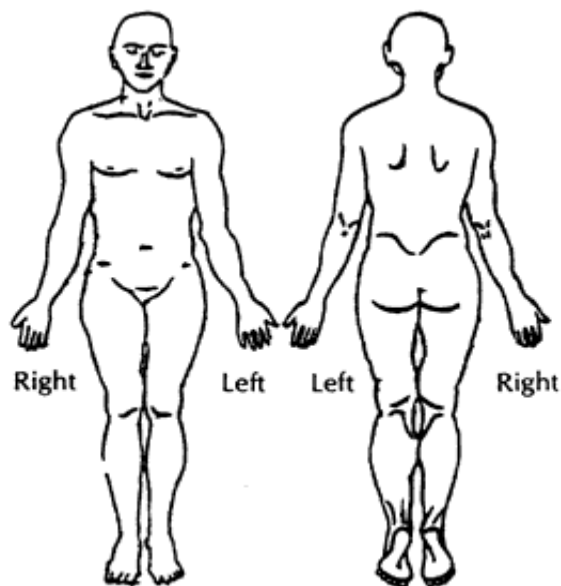
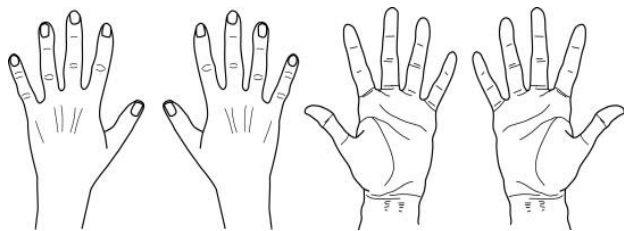
II. FACTS RELATED TO INJURY/ILLNESS

Date/time of injury or onset of illness: / / at : am / pm		Any witness(es)?		No	Yes*
Date/time the employee began work: / / at : am / pm		<u>*Witness Name(s)</u>		<u>Phone No.</u>	
Date of supervisor's knowledge or notice of injury/illness: / /					
Where on campus did injury/illness occur (department/room/location outside):					
Were other employees injured? Yes No If yes, who?		Was an outside agency/person responsible? Yes No If so, who?			
Did injury/illness result in First Aid? Yes No		If employee died, date/time of death:			
Specific injury/illness and part(s) of body affected: (i.e., broken finger on <u>right</u> hand, tendonitis in <u>left</u> elbow, etc.)					
What was employee doing when event occurred? (i.e., lifting, keyboarding, loading boxes on truck, cleaning classroom, driving tractor, etc.)					
What office equipment, chemicals, or tools was employee using when the event occurred (i.e., computer equipment, tools, machinery)?					
Describe how injury/illness occurred. If more space is needed, please attach separate sheet of paper:					
Could anything be done to prevent injuries/illnesses of this type? What course of action do you propose?					
Are you aware of any additional employment? Yes No If yes please explain:					

Signature of Supervisor

Date

Please circle body part(s) affected:



Rev 5/20

Reporting Injury/Illness

Within eight (8) hours of your knowledge of the injury/illness, you must complete the ***Supervisor's Injury and Illness Incident Report***.

Step 1

Complete and Forward Injury/Illness Report

Fill out the **Supervisor's Injury and Illness Incident Report** form with the employee within eight (8) hours of injury. Reporting promptly helps prevent problems and delays in providing benefits, including medical care the employee may need to avoid further injury.

- Your role is to look into the incident by completing the ***Supervisor's Injury and Illness Incident Report including body part section*** with the employee. First aids must also be reported on this form.
- **Do not give this form to the employee to complete. It is the supervisor's responsibility to address concerns, if any, surrounding the injury with the employee.** Addressing safety and training concerns are critical in preventing injuries.
- Inform the employee of their right to seek medical treatment, if needed. (Contact Risk Management immediately if employee requires medical treatment)
- Instruct employee to complete the ***Employee's Injury/Illness Report***
- Forward original copy of the ***Supervisor's Injury and Illness Incident Report*** to Risk Management & Internal Control with a copy to the Originating department.

Step 2

Follow-up with Risk Management & Internal Control

Contact the Workers' Compensation Coordinator immediately. Should this injury result in a Worker's Compensation Claim, the Workers' Compensation Coordinator will provide the injured/ill employee with the ***Employee's Claim for Workers' Compensation (DWC 1)*** form within one working day of the date of knowledge.

Step 3

Accident Investigation

Environmental Health & Safety (EH&S) will evaluate the supervisor's report and dictate if an investigation is necessary. If necessary, the supervisor will be contacted by EH&S to meet.

The Environmental Health & Safety (EH&S) investigation will consist of:

- Interviewing injured personnel and witnesses.
- Examining the injured employee's work area for causative factors.
- Reviewing established procedures to ensure they are adequate and were followed.
- Reviewing training records of affected employee and determine all contributing causes of the accident.
- Taking corrective actions to prevent accident/exposure from reoccurring.
- Recording and reporting all findings and actions taken.