FAIRFAX COUNTY FIRE AND RESCUE DEPARTMENT STANDARD OPERATING PROCEDURE

SUBJECT: PERSONAL INJURY REPORTING

S.O.P. 02.03.01 PAGE 1 OF 8

SUBCATEGORY: CATEGORY:

Occupational Health and Safety Personnel

EFFECTIVE DATE: January 26, 1990 APPROVED BY: REVISION DATE: September 1, 2008

Ronald L. Mastin FIRE CHARLES

FIRE CHIEF, FIRE AND RESCUE DEPARTMENT

FORMS REQUIRED:

Forms Required for All Injuries

Employer's First Report of Accident on-line (except volunteers)

Employee's Supervisor Report of Work Related Injury/Illness (FRD-071)

Battalion Chief Injury Investigation Report (FRD-315A)

Narrative Statement (FRD-317) (if needed)

VFIS – Accident/Sickness Claim Report (for volunteer injuries only)

May be Required for Injuries Requiring Medical Treatment

Medical Status Report (FRD-074)

Therapy Report Form (if applicable) (FRD-091)

Authorized Physicians Panel for Worker's Compensation

NOTE: Forms are located on the Department's Intranet at Documents/Safety Forms and Risk Management's Infoweb

PURPOSE:

To establish uniform procedures for reporting personal injuries of career, civilian, and volunteer personnel.

I. **PREFACE**

These procedures are derived from the Fairfax County Risk Management Manual and Personnel Regulations and are adapted for Fire and Rescue Department (FRD) use. They are established to meet county, state, and federal requirements and to expedite the settlement of Workers' Compensation and insurance claims. The department cannot determine whether an injury or illness claim is compensable; however, the processing and management of injury reports and the administration of injury leave shall be managed by the Health and Safety Division (HSD).

Procedures to be followed in reporting a job-related occupational exposure to infectious disease are listed in the department's Exposure Control Plan, Chapter 7.

II. **PROCEDURES**

- Reporting Job-Related Injuries/Illnesses for Personnel Who DO NOT Require Medical A. Treatment
 - Responsibilities of Injured Employees Shall Include: 1.
 - a. Immediately report all job-related injuries or illnesses to his or her immediate supervisor.



SUBJECT:	EFFECTIVE DATE: January 26, 1990	S.O.P. 02.03.01
PERSONAL INJURY REPORTING	REVISION DATE: September 1, 2008	
CATEGORY:	SUBCATEGORY:	PAGE 2 OF 8
Personnel	Occupational Health and Safety	

- b. If the employee decides that medical treatment is required, they shall follow the procedures outlined in Section II.B.1.
- 2. Responsibilities of Supervisors The officer in charge (OIC) shall be the employee's immediate supervisor whose responsibilities shall include:
 - a. Immediately notify the battalion chief, uniformed fire officer, and the duty safety officer of the injury.
 - b. Ensuring that the <u>full legal name</u> of the employee and the location where the injury/illness occurred are recorded in the work location's logbook.
 - If the injury occurs during an emergency incident, it also shall be documented on the appropriate incident report.
 - Specific medical diagnosis shall not be recorded in the logbook or incident report.
 - c. Assist in the investigation of the circumstances of the injury/illness.
 - d. Completing the *Employer's First Report of Accident* on-line (using Documents/Safety Forms on department's intranet). After submission of the form, a copy shall be printed (showing the confirmation number at the top).
 - e. Completing the *Employee's Supervisor Report of Work-Related Injury/Illness* (FRD-071) form.
 - f. Ensuring a completed *Employer's First Report of Accident* form and the *Employee's Supervisor Report of Work Related Injury/Illness* (FRD-071) form is forwarded to the battalion chief by the end of the scheduled work day.
- 3. Responsibilities of Battalion Chief The department's investigating officer's responsibilities shall include:
 - a. Investigate the circumstances of the injury.
 - b. Complete FRD-315A.
 - c. Collect all documents, review for accuracy, and forward to the Safety Office by the end of the scheduled work day (Fax: 703-569-0231).
- 4. Responsibilities of Injured Volunteers Shall Include:
 - a. Immediately report all job-related injuries or illnesses to his or her immediate supervisor.
 - b. Ensuring that the Volunteer Firemen's Insurance Services (VFIS)

 Accident/Sickness Claim Report and the Employee's Supervisor Report of

 Work-Related Injury/Illness (FRD-071) form is completed by his or her
 supervisor and forwarded to the battalion chief by the end of the scheduled

 work day. Note: Volunteers are not required to complete the Employer's First
 Report of Accident form.
 - c. Leaving a voice mail message with the Volunteer Liaison indicating who was injured and whether medical treatment was sought or not.

SUBJECT: PERSONAL INJURY REPORTING	EFFECTIVE DATE: January 26, 1990 REVISION DATE: September 1, 2008	S.O.P. 02.03.01
CATEGORY:	SUBCATEGORY:	PAGE 3 OF 8
Personnel	Occupational Health and Safety	

5. Responsibilities of the Duty Safety Officer Shall Include:

- a. Review incident and enter into the Safety Officer Database.
- b. Submitting the completed *Personnel Injury Report Package* to the Light Duty Coordinator (LDC) of the HSD by the end of the next scheduled workday.

B. Reporting Job-Related Injuries/Illnesses for Personnel Who Require Medical Treatment

1. <u>Responsibilities of the Injured Employee Shall Include</u>:

- a. Immediately report all job-related injuries or illnesses to his or her immediate supervisor.
- b. In the event of an injury, obtaining initial treatment at a medical facility or the Public Safety Occupational Health Center (PSOHC). If obtaining initial treatment at the PSOHC, notify them ahead of time by calling 703-246-4949.
- c. Utilizing the *Narrative Statement (FRD-317)* form if the supervisor requires a written statement.
- d. Reporting work status to his or her immediate supervisor and the duty safety officer. Forwarding completed *Medical Status Report* (FRD-074) form to the duty safety officer. If placed on light duty, follow the procedures outlined in Standard Operating Procedure (SOP) 02.03.06, Light Duty.
- e. Continued or follow-up medical treatment shall be obtained only from a physician on the *County of Fairfax Authorized Physicians' Panel for Workers' Compensation* list or PSOHC (up to three visits) unless referred by the county's claim service company to a physician whose specialty is not listed on the approved list.
 - Without this referral, any treatment by a physician who is not on the approved list shall become the employee's responsibility for payment Exception: Any dentist may be used for treatment of job-related dental injuries.
- f. The treating physician shall complete a *Medical Status Report* for each visit. This form shall be forwarded to the LDC of the HSD and should clearly indicate work status as follows:
 - Full Duty no restrictions
 - <u>Modified Duty</u> restrictions
 - <u>Injury Leave</u> totally disabled for work
- g. Following the treatment orders of the attending physician or EMS OIC at all times.
- h. Notifying the treating physician or medical treatment facility that all reports and bills shall be sent to Fairfax County's claims service company.
- i. Notifying the Risk Management Division (RMD) if a claim acknowledgment letter is not received from the claims service company within 15 days after the injury was reported to them.
- j. Cooperating with the claims service company during its investigation of the claim and during the continued handling of the claim.

SUBJECT:	EFFECTIVE DATE: January 26, 1990	S.O.P. 02.03.01
PERSONAL INJURY REPORTING	REVISION DATE: September 1, 2008	
CATEGORY:	SUBCATEGORY:	PAGE 4 OF 8
Personnel	Occupational Health and Safety	

- k. Advising his or her supervisor and the LDC of current duty status (injury leave, modified duty, or full duty) and of any changes while on injury leave or light duty. Contacting his or her supervisor and the LDC at least <u>once each week</u> until released to full duty.
- l. Directing questions about the claim including all medical bills or claim forms received to the claims service company.
- m. Immediately notifying the LDC and the respective battalion chief when released to full and unrestricted duty.
- 2. Responsibilities of Supervisors The officer in charge (OIC) shall be the employee's immediate supervisor whose responsibilities shall include:
 - a. Immediately notify the battalion chief, uniformed fire officer, and the duty safety officer of the injury.
 - b. Ensuring that initial treatment is provided to an injured employee at any appropriate medical facility.
 - c. Ensuring that the <u>full legal name</u> of an employee and the location where the injury/illness occurred are recorded in the work location's logbook.
 - If an injury event occurs during an emergency incident, it also shall be documented on the appropriate incident report.
 - If the employee is severely incapacitated, the employee's supervisor shall be responsible for reporting all injuries/illnesses.
 - d. Assist in the investigation of the circumstances of the injury/illness.
 - e. Completing the *Employer's First Report of Accident* on-line (using Documents/Safety Forms). After submission of the form, a copy shall be printed (showing the confirmation number at the top).
 - g. Ensuring a completed *Employer's First Report of Accident* form and the *Employee's Supervisor Report of Work Related Injury/Illness* (FRD-071) form, and the Narrative Statement (FRD-317) from the injured employee is forwarded to the battalion chief by the end of the scheduled work day.
 - h. Provide the injured employee with a *County of Fairfax Authorized Physicians'*Panel for Workers' Compensation list and a Medical Status Report (FRD-074) form.
- 3. Responsibilities of Battalion Chief The department's investigating officer's responsibilities shall include:
 - a. Serve as the investigating officer, collect witness statements, and take photographs as needed. May coordinate with the safety officer to complete these tasks.
 - b. The battalion chief, in conjunction with the shift leader (or OIC), the safety officer, and the deputy chief will decide if the employee will be allowed to continue to work.
 - c. In certain cases, the battalion chief may consult with the deputy chief who may require a fitness for duty evaluation (drug and alcohol testing). <u>Procedures for</u>

SUBJECT: PERSONAL INJURY REPORTING	EFFECTIVE DATE: January 26, 1990 REVISION DATE: September 1, 2008	S.O.P. 02.03.01
CATEGORY:	SUBCATEGORY:	PAGE 5 OF 8
Personnel	Occupational Health and Safety	

testing shall follow Section III of Standard Operating Procedure (SOP) 02.04.03, Fitness for Duty.

- d. Collect the documentation from the unit officer.
- e. Complete the Fairfax County Fire and Rescue Battalion Chief Injury Investigation Report (FRD-315A).
 - The report can be located at Documents/Safety Forms.
 - The report must cite any policies, manuals, or laws that were violated by department personnel.
 - The battalion chief shall print and sign his or her name on the completed form.
- f. Forward all completed documents to the safety officer.

4. Responsibilities of the Injured Volunteer Shall Include:

- a. Immediately report all job-related injuries or illnesses to his or her immediate supervisor.
- b. Obtaining initial treatment at a medical facility or the PSOHC.
- c. Ensuring that the Volunteer Firemen's Insurance Services (VFIS)

 Accident/Sickness Claim Report and the Employee's Supervisor Report of

 Work-Related Injury/Illness (FRD-071) form is completed by his or her
 supervisor and forwarded to the battalion chief by the end of the scheduled

 work day. Note: Volunteers are not required to complete the Employer's First
 Report of Accident form.
- d. Leaving a voice mail message with the Volunteer Liaison indicating who was injured and whether medical treatment was sought or not.
- e. Obtaining non-emergency, continued, or follow-up care from any physician of the volunteer's choice.
- f. Having the physician complete a *Medical Status Report* after <u>each visit</u>. This form shall be forwarded to the Volunteer Liaison.
- g. Ensuring that a copy of the "yellow card" is available for presentation to medical provider when treatment is required.
- h. Notifying the physician or medical facility that all reports and bills are to be forwarded to the appropriate insurance organization. Questions should be addressed to the Volunteer Liaison.
- i. Forwarding any medical bills or claims forms received to the Volunteer Liaison.
- j. Cooperating with the appropriate insurance organization during its investigation of the claim and during its continued handling of the claim.

5. Responsibilities of the Duty Safety Officer Shall Include:

- a. Completing an investigation of the injury/illness incident.
- b. Immediately notifying RMD if there is a significant injury.
- c. Review incident and enter into the Safety Officer Database.
- d. Submitting the completed *Personnel Injury Report Package* to the LDC of the HSD by the end of the next scheduled work day.

SUBJECT:	EFFECTIVE DATE: January 26, 1990	S.O.P. 02.03.01
PERSONAL INJURY REPORTING	REVISION DATE: September 1, 2008	
CATEGORY:	SUBCATEGORY:	PAGE 6 OF 8
Personnel	Occupational Health and Safety	

C. Special Situations

1. Recurrent Injuries

a. Employees who experience what they consider to be an injury related to a prior job-related injury/illness shall contact their previous claims service company adjuster for clarification. The claims service company will determine whether the injury is a new or a recurrent one and whether or not the employee should return to the physician who provided treatment for the original injury/illness.

2. Request for Second Opinions and Changing Physicians

- a. Once an employee has begun treatment by a physician on the *Fairfax County Authorized Physicians Panel*, he or she shall remain under the care of that physician unless authorized to change physicians by the claims service company.
- b. If a second opinion or change in treating physician is desired, the employee shall complete a *Request for a Second Opinion* or *Change of Physician* form stating the reasons for requesting the change and submitting the request to the claims service company.
- c. The employee shall contact the RMD if a reply is not received within ten days.

3. Physical Therapy

- a. If physical therapy is required, treatment <u>shall be obtained</u> only from a provider on the *County of Fairfax Authorized Physicians' Panel for Workers' Compensation* list or the PSOHC physical therapist.
- b. If the employee has a physical therapy appointment scheduled on his or her regularly scheduled day off, he or she shall not be compensated for his or her <u>personal time</u> spent.
- c. If an employee schedules a physical therapy appointment while on duty, it shall be approved by his or her supervisor who shall be notified 72 hours prior to the appointment. The employee shall have his or her supervisor complete the portion of the form that allows leave/absence for physical therapy treatments.
- d. The employee shall have the treating therapist complete his or her portion of the therapy report on the Therapy Report (FRD-091) form after the treatment. The employee shall forward the form to the LDC of the HSD.

4. Thermal Burns

a. As an employee of the FRD and while operating on the emergency incident scene, training, or during other job-related activities, each employee needs to be medically evaluated at the Washington Hospital Center/MedStar Burn Unit or equivalent for a thermal burn injury.

SUBJECT: PERSONAL INJURY REPORTING	EFFECTIVE DATE: January 26, 1990 REVISION DATE: September 1, 2008	S.O.P. 02.03.01
CATEGORY:	SUBCATEGORY:	PAGE 7 OF 8
Personnel	Occupational Health and Safety	

- b. The process of notifications and paperwork will not change from any other job-related injury requiring medical treatment as stated in section B of this SOP.
- c. The intent of this policy will reinforce the importance of evaluating our employees for a thermal burn injury as an occupational injury. Being a firefighter carries a high probability of chronic exposures to thermal insults. By being evaluated at a Burn Unit, this will provide a consultation by a specialist, provide additional follow-up treatments as necessary, and provide adequate recovery time to heal prior to re-engaging into the work force.

D. <u>Injury Leave/Light Duty</u>

The procedures regarding injury leave and light duty listed in *Fairfax County Personnel Regulation 10.20*, *Fairfax County Procedural Memorandum No. 23*, and the department's *SOP 02.03.06*, *Light Duty*, shall be followed.

E. Reimbursements

- 1. Reimbursements for medication, medical supplies, and travel for medical treatment for a job-related injury shall be itemized on the county's claims service company's *Medical Expense Reimbursement* form and forwarded to the company's name and address listed on the form. This form can be obtained from the claims service company.
 - a. Prescription medication receipts submitted for reimbursement shall indicate the date purchased, name of physician, and the name of the medication. The <u>original</u> cash register receipt shall be included with the submission for reimbursement.
 - b. A temporary prescription card can be obtained by going to www.claimline.com/fairfaxcounty. This option prevents the injured employee from incurring out-of-pocket expenses for prescription medicines. A permanent prescription card will be received in approximately 5-7 business days.
 - c. Non-prescription medication receipts submitted for reimbursement shall include an <u>original</u> cash register receipt and proof of the item purchased such as a box top showing the name of the item and the price.
 - d. Larger items directly related to medical treatment for a job-related injury shall include a copy of the prescription and the information in item (c).
 - e. Travel claims submitted for reimbursement to and from medical treatment shall include the date of travel, place traveled to, and round-trip mileage.
- 2. Items submitted for reimbursement that are not appropriately documented and verified will be returned for proper substantiation.

SUBJECT: PERSONAL INJURY REPORTING	EFFECTIVE DATE: January 26, 1990 REVISION DATE: September 1, 2008	S.O.P. 02.03.01
CATEGORY:	SUBCATEGORY:	PAGE 8 OF 8
Personnel	Occupational Health and Safety	

III. FALSE CLAIMS

Any employee who falsifies an injury claim or corroborates in making a false claim of a job-related injury/illness shall be subject to the full penalties provided by the law, as well as disciplinary action to include possible termination of employment.

IV. <u>DENIED CLAIMS POLICY</u>

- A. The following procedures shall be adhered to when submitting bills for payment/reimbursement for denied Workers' Compensation Personal Injury claims:
 - 1. Employees shall submit bills for denied claims to their primary physician/HMO in order to receive reimbursement and/or a denial on a *Statement of Benefits* form.
 - 2. The *Statement of Benefits* form is sent to the claims service company to be considered for payment of fees (other than deductible/co-payment) up until the date the claim was denied.