

UNIVERSITY OF TOLEDO

SUBJECT: REPORTING WORK RELATED INJURY / ILLNESS Procedure No: S-08-018
FOR EMPLOYEES, STUDENT EMPLOYEES AND STUDENTS

PROCEDURE STATEMENT

In accordance with the Ohio Public Employment Risk Reduction Act (House Bill 308) and Chapters 4167 of the Ohio Administrative Code and Ohio Revised Code, the University of Toledo will maintain the Public Employment Risk Reduction Program (PERRP) 301P form (or equivalent) in order to report, monitor, evaluate and trend injury, illness or other incidents involving employees, student employees and students.

PURPOSE OF PROCEDURE

To ensure University of Toledo employees have a safe and healthy work environment by monitoring job-related injuries and illnesses documentation, evaluation and trending of injuries, illnesses or other incidents at the University of Toledo.

PROCEDURE

Accurate injury and illness recordkeeping is fundamental in maintaining a safe working environment. An Injury/Illness Report Form must be completed for any incident resulting in an injury or illness to an employee, student employee, or student at the University of Toledo; an Injury/Illness Report Form should also be completed for any incident which could have, but did not result in injury or illness to an employee, student employee, or student while on campus (near miss). The PERRP 301P-equivalent form used at the University of Toledo is located at <http://www.utoledo.edu/depts/safety/docs/Misc/EmployeeInjuryIllnessForm.pdf>. The 301P-equivalent form helps the University identify immediate unsafe conditions as well as gather data to evaluate trends of injuries, illnesses, and campus-related hazards. In lieu of the University Employee Injury and Illness Report Form, individuals may complete the PERRP 301P form or the BWC First Report of an Injury, Occupational Disease, or Death (FROI). If more than one individual is involved in an incident, a separate Injury/Illness Report Form must be completed for each individual.

The University of Toledo has six (6) days after being notified of a workplace injury to determine if a case is recordable under PERRP recordkeeping requirements; refer to S-08-022 PERRP 300P Illness and Injury Log Recordkeeping.

Any staff member who witnesses an incident resulting in an injury or illness has an obligation to initiate processing the Injury/Illness Report Form in a timely manner after first obtaining the necessary assistance for any injured or ill person and/or correction of hazardous situations, then immediately notifying the appropriate management staff. Any University personnel can initiate an Injury/Illness Report Form.

The Injury/Illness Form is used to document the correct information related to the incident and the individual completing the form should follow the instructions included with the form. After the form is completed, the injured/ill employee's immediate supervisor should review the Injury/Illness form, gathering any additional information needed to ensure completion of the form. The Supervisor should also complete the Manager's Section on the Injury/Illness Report Form, as well as the Supervisor's Analysis Form. The Supervisor will then send the completed form within 24 hours of the incident (or in a reasonably acceptable timely manner) to Risk Management on the Main Campus at Mail Stop 220, or on the Health Science Campus to Environmental Health and Radiation Safety at Mail Stop 1078.

While PERRP recordkeeping regulations do not apply to students, visitors, and guests, all injuries and illnesses should be reported via the Injury/Illness Report Form for awareness and for the potential to mitigate hazard and provide a safe environment. **Please note: This report form is NOT to be used for incidences involving patients. ONLY UT EMPLOYEES SHOULD INITIATE, COMPLETE, AND SIGN THE INJURY / ILLNESS REPORT FORM.**

In the event of a percutaneous injury, also referred to as a needlestick injury, a PERRP Sharps Injury Form Needlestick Report (SH-12) (or equivalent) must be completed in addition to the Injury/Illness Report Form. This form is included in the Exposure Packet completed in the Emergency Department following an incident involving exposure to blood, body fluid or other potentially infectious materials. This form must be completed by anyone exposed at the University of Toledo, including employees, students and vendors.

The Environmental Health and Radiation Safety Department and Risk Management will maintain all Injury/Illness Report Forms (or 301P-equivalent) as well as the Sharps Injury Form Needlestick Injury (SH-12) for 5 years in accordance with S-08-022 PERRP 300P Illness and Injury Log Recordkeeping.

GENERAL INFORMATION

An injury/illness report form is used for internal purposes only. It documents that an injury/illness incident had occurred and the response taken. The injury/illness report form is utilized to facilitate safe conditions and serve as a source of trending information for review by the Safety & Health Committee. The Injury/Illness Report is not a part of any medical record and no reference to it will be included in any medical record. Completed Injury/Illness Report Forms are sent to the Environmental Health and Radiation Safety Department on Health Science Campus and Risk Management on Main Campus and are not to be placed in personnel files. The Injury/Illness Report is not to be used as a disciplinary tool against employees. Completion of an Injury/Illness Report Form does not initiate a workers' compensation claim; contact Risk Management on HSC at 419-383-4567 and on MC at 419-530-3655.

It will also serve for Attorney/Client communication, in conjunction with determining a means for reducing and eliminating risk where possible.

Workers experiencing an injury or illness on the premises of the University of Toledo may have an examination by a physician in the UT Medical Center Emergency Department or Family Medicine. Responsibility for payment of Emergency Department or Family Medicine services will be determined on a case by case basis by the Risk Management Department. Should anyone decline an examination it should be so indicated on the Injury/Illness Report in the description of event section.

In the event of an UNUSUAL OR SEVERE accident or injury, the Hospital Administrator on call (campus operator on HSC), department chairman, Risk Management and appropriate Environmental Health and Radiation Safety personnel should be notified by telephone as soon as possible. Circumstances of each Injury/Illness Report will be investigated as necessary; refer to S-08-005 Injury and Illness Investigations.

Source: Environmental Health and Radiation Safety Department

Effective Date: 01/01/08

Review/Revision Date: 12/31/10
12/9/13
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