

VEHICLE ACCIDENTS AND EMPLOYEE INJURY INVESTIGATIONS

1.0 Purpose

To establish accident reporting and investigation procedures which are thorough and easily understood by all employees.

2.0 Scope

This directive covers all City employees.

3.0 Responsibility

The supervisor responsible for the operation/activity being performed by an injured worker or driver involved in an accident is responsible for conducting the investigation and completing accident reports.

All occupational injuries or vehicle accidents resulting in property damage and/or personal injury or illness **MUST** be reported immediately after the occurrence by the employee involved and investigated by the appropriate supervisor.

4.0 Investigation must begin immediately after the occurrence or immediately after learning of the occurrence. The supervisor/investigator should expect to:

1. Make a personal inspection of the physical location of the accident area and/or working conditions.
2. Ask questions of those involved, witnesses, and co-workers, concerning the events immediately prior to the accident and what they may have actually seen or not seen.
3. Inspect the tools, material, equipment or vehicles involved in the accident.
4. Take pictures, written statements, material samples, etc.
5. Complete all necessary reports.

5.0 Completion of the accident report requires compilation of the essential information to answer all of the following questions: **WHO, WHAT, WHERE, WHEN, WHY and HOW.**

1. Clearly identify all individuals involved, including witnesses and property owners.
2. Determine direct causes and contributing factors.
3. List methods of preventing reoccurrence.
4. Complete all required paperwork in ink and submit to the Director of Human Resources for submittal to IRMA within five work days.

6.0 The extent of investigation required will depend upon the severity, potential or actual, of the accident or injury. A scratched finger will require a shorter investigation than an amputated arm.

6.1 NEAR-MISS accidents/incidents resulting in no property damage or injuries should be investigated to determine cause and prevention procedures.

6.2 Worker injuries or illnesses resulting from employment-related occurrences should be investigated using one or more of these forms:

- A. Incident/First Aid Report.
- B. Supervisor/Investigation Report.
- C. Employer's First Report of Injury.

6.3 Motor vehicle accidents, property damage (theft, burglary, vandalism, etc.), and general liability accidents (citizen complaints, slip, trip, fall, etc.) shall be investigated using the following forms:

- A. IRMA Non-Workers Compensation Accident Report Form

7.0 Reporting Motor Vehicle Accidents

7.1 Accident Definition

Whenever a municipal vehicle comes into contact with any person, animal, other vehicle or other inanimate object in a manner which results in death, injury or property damage in any amount, including damage to the municipal vehicle, an accident will be considered to have occurred.

When an accident occurs, the police **WILL** be called to the scene to investigate the accident whenever other persons, property or injuries are involved. The police shall conduct an investigation, which shall include photos, witness statements, etc.

7.2 Employee and Supervisor Report

The **EMPLOYEE** is responsible for giving his/her supervisor enough information for the supervisor to complete all applicable sections of the Non-Workers Compensation Accident Report form during an employee/supervisor interview concerning the circumstances surrounding the accident. The supervisor shall sign the form in the appropriate location.

The **SUPERVISOR** shall respond to the scene and take photographs of the scene, damage, vehicles, and/or equipment involved in the accident.

The **SUPERVISOR** shall obtain a copy of the Police Accident Report as soon as it is available, ensure that the Non-Workers Compensation Accident Report form is complete and forward all copies of all reports to the Department Safety Coordinator, who will forward them to the Director of Human Resources for submittal to IRMA within 5 days of the accident.

The **SUPERVISOR** shall work with Fleet Maintenance to obtain an estimate for repairs of the municipal vehicle and for any municipal property damaged and include such information with reports forwarded as noted above.

If the employee involved in the accident claims that equipment malfunction, (such as brakes) contributed to the accident, the **SUPERVISOR** shall immediately have the vehicle examined and checked for defects.

The Human Resources Director will forward the accident reports to the IRMA Claims Representative and will respond to requests for additional information and investigation.

7.3 How to Complete Non-Workers Compensation Accident Report Form

The Non-Workers Compensation Accident Report form must be completed within 24 hours of the loss. When the form is entirely completed, it shall be forwarded to the Human Resources Department.

The Non-Workers Compensation Accident Report form should be accompanied or followed shortly thereafter by a police report and estimate of repair if the damages incurred are under \$1,500. If damages are over \$1,500, an independent appraiser will be assigned to inspect the vehicle in order to perform an appraisal of damages for use by the claims adjuster.

In the event that the vehicle is a potential economic total loss, the insurance adjuster should be notified immediately.

- 7.4** The Supervisor responsible for investigation of any employee's accident SHALL NOT consider the simple filling in of the blanks as having investigated an accident. Supervisors must **examine the accident scene**, probe for **details**, and attempt to determine the **DIRECT CAUSE(S)** and **CONTRIBUTING FACTORS** that resulted in the accident.

8.0 Reporting Damage to Property and General Liability Accidents/Damages

8.1 Damage to Property

Whenever any real or personal property owned by or under the care, custody and control of the municipality is accidentally damaged, the incident must be investigated and reported on the Non-Workers Compensation Accident Report form.

This report should be utilized in the following instances.

1. Direct loss to property resulting from natural hazards (i.e., lightning, wind, etc.).
2. Direct loss to property resulting from fire.
3. Theft, burglary, vandalism or other crime losses.
4. Direct loss to property resulting from an auto accident damage caused by a third party.
5. Boiler and/or machinery losses.

The Non-Workers Compensation Accident Report form should be accompanied by a police report, newspaper account, photos, repair estimates and/or bills, and any other supporting materials to aid IRMA in the investigation and prompt handling of these types of losses. In the event of an extensive/serious loss, IRMA must be notified immediately.

Property loss that is a result of damage to City property or equipment caused by an employee where the damage is \$2,500 or less must be reported on the Non-Workers Compensation Accident Report form, but it will not be submitted to IRMA. Repair or replacement costs will be borne by the Department's budget.

8.2 General Liability Accidents/Incidents

Municipal supervisors and employees are to insure that all **GENERAL LIABILITY** accidents or incidents are properly reported and investigated. Citizens involved in adverse incidents are to be encouraged to complete the Non-Workers Compensation Accident Report form.

Citizens are to be instructed to contact the Human Resources Department so a form can be completed, or they can be completed by the supervisor at the scene.

The safety coordinator shall assign a supervisor having responsibility over the area where the incident occurred to conduct an investigation and complete the Non-Workers Compensation Accident Report form. The Police Department may also be required to conduct an investigation of the incident.

Whenever a municipal supervisor becomes aware of an accident or incident of a GENERAL LIABILITY nature, he/she shall investigate and report same using the Non-Workers Compensation Accident Report form. This report form shall be used to report any number of incident/accident situations, such as:

1. Public fall down occurrences, i.e., person alleges to have been caused to trip and fall due to defect in the public sidewalk; slip and fall due to ice and snow; slip, trip, or fall on stairs; slip and fall on wet floor, etc.
2. Police-related activities e.g., alleged police brutality or violations of the individual's civil rights; damage to property resulting from the apprehension of a criminal suspect; injury to an innocent bystander during the apprehension of a criminal suspect, etc.
3. Damage to private property as a result of sewer back up or flooding.
4. Third party alleges damage and/or personal injury as a result of striking a pothole, sewer drain, open drain, open manhole, or unbarricaded construction area, malfunctioning traffic controls, etc.
5. Accidents and injuries arising from park and recreational activities.

9.0 Reporting On-the-Job Injuries

9.1 Incident/First Aid Only Report

The injured employee and his/her supervisor shall immediately complete Form SI-001 whenever an injured employee required on-the-job first aid or complains of minor pain resulting from work activities (treatment away from the job site is not required). In the process of completing Incident/First Aid Only Report, the supervisor shall evaluate the injury/complaint and determine if medical facility care should be obtained.

If an injury reported as First-Aid only later results in lost-time, the supervisor must advise the Director of Human Resources (Safety Coordinator) and file an updated Form 45.

9.2 Injuries Requiring Medical Treatment

1. The injured employee shall immediately report to their supervisor any injuries requiring medical treatment.
2. The EMPLOYER'S FIRST REPORT OF INJURY, Form 45, shall be completed by the supervisor immediately upon learning of an industrial accident/injury that requires medical treatment (non-first aid) and shall be part of the basic investigation conducted by the supervisor. **This form must be signed by the Supervisor, not by the injured employee.** The supervisor must also complete a Supervisory Investigation form.

The Safety Coordinator should be contacted immediately for assistance whenever the injury appears severe. Whenever the accident involves a municipal vehicle, use the Non-Workers Compensation Accident Report form.

3. Prior to returning to work (and each time the employee visits the doctor) the City's assigned medical services provider must complete a Duty Status Report, reporting employee ability to perform various work functions.

9.3 All completed employee injury reports are to be immediately distributed to the Human Resources Department.

Human Resources shall review the reports for completion and accident prevention possibilities and forward them to the Insurance Claims Department. The claims adjuster will evaluate each injury report and, if appropriate, file a copy with the Illinois Industrial Commission on behalf of the municipality.

All compensation drafts for Temporary Total Disability (TTD) benefits will be sent directly to the municipality by the insurance adjuster for disbursement to the employee. This process prevents overpayment to employees who have returned to work and all such overpayments should be returned to the insurance adjuster.

All MEDICAL EXPENSES will be paid directly by claims adjustment adjusters to the vendor.

9.4 Reports submitted to the insurance adjuster for an employee injury resulting from auto accidents, arrests, animal bites, etc. should be accompanied by the **POLICE REPORT**.

The insurance adjuster will attempt subrogation to affect reinstatement of Work-Comp payments.

9.5 INJURY LOG

Each department shall maintain an Injury Log on which all employees reported injuries (regardless of extent of injury) are recorded. These logs will be kept separate from the members personnel file, and can be secured with the medical files of that department.

9.6 Filing Reports with IRMA

Work related injuries that require medical/hospital treatment require that the **Illinois Industrial Commission's First Report of Injury** (Form 45) be immediately forwarded to the insurance claims administrator with other required reports for processing of workers' compensation benefits for the injured employees. These injuries must be recorded on the **OSHA Log 300**, which is maintained by the Human Resources Department and which will provide the required annual posting.

9.7 If the employee refuses treatment by the designated medical facility, intending instead to visit a doctor of his/her choice, the employee should be advised by the supervisor of the employer's right and need for a medical evaluation by the City's designated medical facility.

1. The supervisor should, if practical proceed to have the injured employee examined and evaluated, either before or immediately after the visit to his/her doctor, by the designated medical facility.
2. The supervisor shall advise the injured employee that he/she may not return to work until the designated medical facility has completed a Restricted Duty Status Report and that no Temporary Total Disability (TTD) payments will be made until such examination has been made.
 - a. Sub-paragraph 2 is temporarily waived for any employee that is hospitalized or so temporarily incapacitated as to make visiting designated medical facility a hardship and would remain waived until such time as it is reasonable for the injured employee to report for a medical evaluation.
 - b. Individuals on long-term restricted duty may be required to submit to medical evaluations for possible Restricted Duty work from time to time as each individual case dictates. (See Adm. Dir. 2-6, Limited Duty)
 - c. When the employee is required to submit to a "Return to Work" medical evaluation and follow up evaluations/treatments are necessary, the frequency of such evaluations will be determined by the treating physician and the next evaluation will be scheduled at each such treatment/evaluation.

10.0 Distribution

Employee Information Site, www.citylf.org under HR/Administrative Directives/Safety Directives.



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