Supervisor's Injury/Illness/Incident reporting & Workers' Compensation Checklist

The following checklist outlines steps that supervisors should take to document incidents and/or a potential work-related injury or illness for purposes of workers' compensation at Anoka Ramsey Community College. Further information regarding the reporting of work related injuries or the workers' compensation process can be directed to the Workers Compensation Coordinator, Matt Begansky, at 763 433 1969 or matt.begansky@anokaramsey.edu

Please note:

- In the event of a medical emergency, call 911 or follow your agency's emergency medical response procedures.
- Work related injuries may require regulatory reporting. Notify your agency's Workers' Compensation Coordinator (WC Coordinator) ***as soon as possible*** *(but no later than 24 hours)* of any serious, life threatening, or fatal injuries or events that result in multiple hospitalizations. Not reporting within the required time periods may result in monetary penalties. If you do not know your agency WC Coordinator, please contact your agency Human Resources office.
- If you are reporting an event that does not include a reported injury or illness, please only complete items 1 through 4.
- All forms and information are available online at: http://www.anokaramsey.edu/en/about/Employment/Forms.aspx

Immediate Actions

Item	Action
____ 1.	Provide employee with a copy of the ***Workers' Compensation Information and Privacy Statement*** form and ask them to review and sign the statement. Supervisor to forward signed form to WC Coordinator.
____ 2.	Provide employee with ***Employee Statement regarding injury/illness/incident*** form with instructions to complete the statement as soon as possible but no later than 24 hours. Completed form should be returned to supervisor who will forward to WC Coordinator.
____ 3.	Complete ***Incident/Injury/Illness Data Form*** (IDF, this form replaces the First Report of Injury or FRI) with employee and submit to WC Coordinator as soon as possible but no later than 24 hours. (should the employee be out the supervisor should complete the form)
____ 4.	Complete ***Agency Claims Investigation*** and submit to WC Coordinator as soon as possible but no later than 24 hours.
____ 5.	Direct employee to employer's designated clinic. If you are unsure of the designated clinic please refer to your workplace employment postings or contact your WC Coordinator.
____ 6.	Inform your agency WC Coordinator if an employee seeks medical attention for a potential work-related injury or illness or is expected to miss work (including the use of sick or vacation leave) due to the injury or illness.
____ 7.	Secure and isolate any equipment that may have contributed to the injury. The equipment may be evaluated for potential recovery claims.

Ongoing actions until employee has fully returned to work:

____ 8. If the employee doesn't seek medical attention initially, but does so at a later time, notify your workers' compensation coordinator immediately.

Revised for ARCC 10/11