

Southeast Coast Network

National Park Service
Inventory and Monitoring Division



Standard Operating Procedure 3.1.01

Reporting of On-Duty Injury and Illness—Version 4.1

Please cite this as:

Corbett, S. L., B. D. Smrekar, M. Moore, and J. Pressnell. 2017. Reporting of on-duty injury and illness—Version 4.0. Southeast Coast Network Standard Operating Procedure NPS/SECN/SOP—3.1.01. Southeast Coast Network, Athens, Georgia.

Summary

This standard operating procedure (SOP) explains the steps involved in handling an on-duty or job-related injury or illness. Read this SOP prior to implementing fieldwork, review it annually, and keep a copy in all vehicles for quick reference.

Revision Log

Revision Date	Author	Changes Made	Reason for Change	New Version #
4/20/2011	MM, JP	First Draft	--	N/A
5/12/2011	Sarah Corbett	Additions to content	Earlier omissions	1.1
12/10/2012	Sarah Corbett	Additions to SMIS instructions	Response to comments from reviewer	1.1
2/27/2015	Briana Smrekar	Added templates for injury and tick logs	No printable version for the field	2.0
12/15/2016	Wendy Wright	Editorial review	Protocol publication	3.0
8/16/2017	Brian Gregory / Eric Starkey	Updated reporting, removed first aid information	Improve organization and usefulness of instructions	4.0
9/18/2017	Lisa Baron	Added info for Rx	Missing information	4.1

Overview of Procedure

Safety Information

Safety information for all office and field work, including risks and abatement procedures, is provided in task-specific Job Hazard Analyses (JHAs). To minimize the risk of on-the-job injury or illness, please read and understand these JHAs before beginning field work, and review them each year. These JHAs are located on the SECN shared drive at <S:\Safety\Job Hazard Analyses\SECN JHA Library>.

Worker's Compensation Procedures

Always file a worker's compensation claim if injury or illness occurs while on the job. "Injury" is defined broadly as any harm, hurt, or damage inflicted on the body by an external force or environmental factor. Err on the side of caution, and report all injuries, even minor ones, either into SMIS or an official log. If in doubt, use SMIS.

1. Report the injury or illness immediately (via phone, fax, or in person) to the employee's supervisor. E-mail a written memo to the supervisor detailing how the injury occurred by the end of the day on which the injury occurred, if possible.
2. If medical attention is required, get it immediately. If possible, obtain a CA-16 form, which allows for direct billing to the government for incurred medical expenses, prior to treatment. The form can be obtained from the Southeast Coast Network (SECN) program manager (mark_gregory@nps.gov, 706 352-9441), the regional safety point of contact, John Nance (john_nance@nps.gov, 662-680-4046) or the safety officer for the park where the injury occurred. This form is controlled property and requires the signature of the supervisor or someone else with signatory authority (e.g., superintendent, deputy superintendent, in some cases the park safety officer). Given the nature of fieldwork, it is possible that in some cases this form will not be easy to access at the time of injury or illness. Do not delay medical attention to obtain this form. If necessary, handle the billing or reimbursement for medical costs after the injury or illness, during the workers' compensation claim process.
3. As soon as possible, the employee must go to the DOI Safety Management Information System (SMIS) at <https://www.smis.doi.gov> to file a report online about the specifics of the injury/illness to report the injury. Ideally this is done before treatment.
 - a. Select the **Employee** button under **File Your Workers' Comp Claim**.
 - b. Enter your last name in the **Last Name** field and the last four digits of your social security number in the **DOI User Validation** field, then press **Enter** or click **Employee Login**.
 - c. On the next page, verify your email address. Press **Enter** or click **Verify**.
 - d. You should receive an email shortly with your claim ID. Enter the claim ID in the **ClaimID** field then press **Enter** or click **Continue**.

- e. On the next page, select the appropriate report type (CA-1 for injury, CA-2 for illness/disease). The proper names for these forms are: CA-1 (*Federal Notice of Traumatic Injury and Claim for Continuation of Pay / Compensation*), and CA-2 (*Notice of Occupational Disease and Claim for Compensation*). For definitions or instructions, click on the “**Section Help**” buttons. Enter all the required information in the form. Make certain to enter the supervisor’s email address. An email is automatically sent to the supervisor to alert them to fill out the supervisory section of the worker’s compensation claim in SMIS. After entering all the general form data, click **Save** and **Continue**.
 - f. On the next page, enter the injury/disease information requested with as much detail as possible. Make certain to check the appropriate box under the “Employee Certification” section, and click **Complete your Claim Submission**. A workers’ compensation coordinator will contact you shortly if the claim is for continuation of pay (COP; i.e., workers’ compensation).
4. If medications are required and not obtained within the hospital, there are two options:
- a. Use one’s personal insurance and be compensated later **OR**
 - b. Use the following information to process the medication purchase using Workman’s Compensation.
 - i. Worker’s Compensation Code: APXXWC, where XX is the two letter state code. For example, if the injury was in TN, then the code would be APTNWC.
 - ii. Injury date
 - iii. An individual ID 3: social security number
 - iv. Group Number: 572213

NOTE:

It is the employee’s responsibility to report the injury as soon as possible. If the employee cannot make the report, it is expected that a proxy will make it (parent, spouse, or friend). It is not recommended that a supervisor make the report.

****The employee is required to agree to the following statement:**

I hereby authorize any physician or hospital (or any other person, institution, corporation, or government agency) to furnish any desired information to the U.S. Department of Labor, Office of Workers’ Compensation programs (or to its official representative). This authorization also permits any official representative of the Office to examine and to copy any records concerning me. Any person who knowingly makes any false statement, misrepresentation, concealment of fact, or any other act of fraud to obtain compensation as provided by the FECA or who knowingly accepts compensation to which that person is not entitled is subject to civil or administrative remedies as well as felony criminal

prosecution and may, under appropriate criminal provisions, be punished by a fine or imprisonment or both.

****Be aware that this does NOT give the Southeast Regional Office the authority to review your medical records. It does give authority to personnel involved in reviewing the merits of the worker's compensation claim.**

5. The regional safety officer will follow up with any questions or corrections to forms. The Southeast Region (SER) safety manager is John Nance (john_nance@nps.gov, 662-680-4046).
6. Supervisors: The supervisor will receive an email alert from the SMIS with instructions on filling out the supervisory section of the SMIS worker's compensation claim. To login, access the SMIS system at the main "Safety Management Information System" screen, and click **Supervisors**.
 - a. In the **Last Name** field, type your last name.
 - b. In the **DOI User Validation** field, type the last four digits of your social security number.
 - c. Press **Enter** or click **Supervisor Login**.
 - d. In the **Please verify/enter your Internet E-Mail Address below** field, type or verify your email address and click **Verify**.
7. Upon completion of the supervisory portion of the injury/illness report, the claim is sent to the National Park Service (NPS) Southeast Region workers' compensation coordinator. They will further process the claim and forward it to the U.S. Department of Labor Office of Workers' Compensation Programs (OWCP) in Jacksonville, Florida. The claim will be reviewed and the employee will be sent a worker's compensation claim number. Expect this process to take several months.
8. After the worker's compensation claim number is assigned, it is the employee's responsibility to provide all medical documentation supporting the claim to the U.S. Department of Labor. This includes any medical reports, tests, and notes from hospitals and doctor offices where the employee was seen. All documentation should be sent to:

U.S. Department of Labor
Federal Employee Compensation
District 6
P.O. Box 8300
London, KY 40742

If an injury occurs in a park, particularly if the injury involves reporting to SMIS, notify your park contact and ask them to report this up their command chain to the appropriate person, usually a park safety officer and/or superintendent. Park safety officers are held accountable for incidents in their

parks, so alerting them of an incident occurring in their park should be common practice. Specific Reporting Guidance

Tick Bites and Tick-borne Illness

These types of minor injuries are relatively common and do not require reporting unless the employee is allergic and requires immediate attention. Tick bites are common at many of the Southeast Region parks, and contracting tick-borne illness is possible. In 2010, one SECN employee had a confirmed case of Lyme disease and another SECN employee contracted Ehrlichiosis the following year. You do not need to report tick bites (as with bee stings and other recurring incidents) individually. However, keep a field log with the date of bites, number of bites, types of ticks, etc. When a tick-related illness is suspected, the employee should request medical tests to determine the exact nature of the illness so that it can be reported under a worker's compensation claim. Upon confirmation of a medical diagnosis a SMIS record should be created. See Appendix A for bite log example and blank template.

Allergic Reactions, Insect/Arachnid Bites, and Insect Stings

These types of minor injuries are relatively common and do not require SMIS reporting unless the employee is allergic and requires immediate attention. If immediate attention is required, follow the steps outlined in the "Overview of Procedure" as soon as possible. In cases of immediate treatment due to a life-threatening reaction, the CA-16 may not be available. As the CA-16 is only relevant for initial treatment on a worker's compensation injury, it should not be presented during follow-up care. Consult the regional worker's compensation coordinator for record keeping needed for reimbursement or required forms for future treatment using the worker's compensation claims process.

For significant injuries without immediate need for treatment, the SMIS record should be created, the CA-16 obtained, and treatment sought. The formal reporting in SMIS as described in Step 3 in the "Overview of Procedure" section should be followed. Consult with the regional worker's compensation coordinator for guidance on record keeping for the worker's compensation claims process. Treatment for chiggers, spider bites, or large numbers of bites causing severe discomfort may warrant this approach to reporting.

It is good practice to keep a log of all allergic reactions, insect/arachnid bite, or sting injuries, in case future treatment is needed. The log also provides a good insight into risk for this type of exposure for a given park or field activity. Though SMIS reporting is not required, it is good practice to enter a "Near-miss" record in SMIS if the employee notes that any change to the activity could reduce the risk of exposure of insect bite or sting. For example, if after a sting an employee notes that the chance of multiple stings by yellow jackets can be reduced by first carefully surveying the sampling area for nest activity, a "Near-miss" entry would be warranted as it was discovered that an alteration in behavior may prevent future injuries that ultimately could be quite serious. In such incidents, a brief "lessons learned" statement should be forwarded to the network safety officer and program manager before or as soon as the record is entered in SMIS. The network program manager and safety officer should decide whether lessons learned warrant discussion at the next staff meeting and/or safety

tailgate session. It is always good practice to communicate immediate safety concerns with co-workers who may be involved in a similar activity.

Other Injuries

In the event of a minor physical injury such as laceration, abrasion, puncture, break, bruising, muscular strain, joint injury, contact dermatitis, or severe injuries (potentially life-threatening or otherwise requiring immediate medical attention to prevent further injury) the employee should seek immediate medical attention. The formal reporting in SMIS as described in Step 3 in the “Overview of Procedure” section should be followed when possible. In cases of immediate treatment, the CA-16 may not be available. As the CA-16 is only relevant for initial treatment on a workman’s compensation injury, it should not be presented during follow-up care. Consult the regional worker’s compensation coordinator for record keeping needed for reimbursement or required forms for future treatment using the worker’s compensation claims process.

For significant injuries without immediate need for treatment, the SMIS record should be created, the CA-16 obtained, and treatment sought. The formal reporting in SMIS as described in Step 3 in the “Overview of Procedure” section should be followed. Consult with regional worker’s compensation coordinator for guidance on recordkeeping for the worker’s compensation claims process.

Though SMIS reporting is not required for non-significant injury, it is good practice to enter a “Near-miss” record in SMIS if the employee notes that any change to the activity could reduce the risk of exposure of the physical injury. For example, if after an injury an employee notes that the chance of a fall while wading in rocky streams can be reduced by obtaining felt-soled footwear, that would warrant a “Near-miss” entry, as it was discovered that an alteration in behavior may prevent future injuries that ultimately may be quite serious. In such incidents, a brief “lessons learned” statement should be forwarded to the network safety officer and program manager before or as soon as the record is entered in SMIS. The network program manager and safety officer should decide whether lessons learned warrant discussion at the next staff meeting and/or safety tailgate session. It is always good practice to communicate immediate safety concerns with co-workers who may be involved in a similar activity. Remember, if in doubt, always err on the side of caution and report the injury to SMIS. Always record minor injuries, insect bites, and stings in an official log.

Additional Notes for Supervisors

1. If the employee does not fill out a report or if there is no loss of time, a supervisory report can still be filled out. Fill one out for any incident that requires a doctor's visit. It is advised to do this for injuries that might recur or cause issues later, regardless of whether or not work time was lost.
2. Supervisors should call and conduct boards of review for serious or recurring incidents.
3. Supervisors are held accountable for work injuries of their employees.

Other Circumstances

1. Death on the job due to heart attack is a safety issue that requires investigation. The National Park Service has eight hours to report these deaths to the Federal Occupational Safety and Health (OSHA) office. The safety officer (either park or regional) is responsible for reporting this type of incident and the supervisor should make sure the report is made within eight hours.
2. If OSHA is not notified within eight hours, jurisdiction of the investigation automatically transfers to OSHA, which will essentially shut down operations until the investigation is complete.

Literature Cited

National Park Service Safety and Health for Field Operations, Reference Guide 50B. 2008.
<http://www.nps.gov/policy/RM50Bdoclist.htm> (last accessed 20 November 2015).

EMPLOYEE ACCOUNTABILITY FORM

I certify that I have read and I am familiar with SECN Standard Operating Procedure 3.1.01
Reporting of On-duty Injury and Illness.

I understand that lack of compliance with this SOP may result in disciplinary action.

Name

Date

Date	Employee Name	Park Name	Description of injury and how injury occurred
5/9/2010	John Smith	CUIS	Cut above left eye caused by saw palmetto. First Aid applied/no other immediate medical attention required.
5/11/2010	Jill Jones	CUIS	Poked eye w/ twig. Pain, but no other serious effects.
6/2/2010	John Smith	CALO	Cut thumb with pocket knife while cutting piece of string. No stitches/ medical attention required.
6/3/2010	Jill Jones	CALO	3 Stings from red paper wasps. No immediate medical attention required.
6/5/2010	Jill Jones	CALO	Rash larger than silver dollar on both knees and upper right arm due to exposure to poison ivy.
6/7/2010	Jill Jones	CALO	Enlargement of previous rash and new rashes larger than silver dollar on right leg and left arm due to exposure to poison ivy.
6/8/2010	John Smith	CALO	1 sting by a yellow jacket. No immediate medical attention required.
6/10/2010	John Smith	CALO	Thorn from Smilax lodged under fingernail several days ago, appears to be infected. First aid applied, no other immediate medical attention required.
7/2/2010	Jane Johnson	HOBE	Tripped in woods, landed on rock with left knee causing pretty bad bruising. No other effects at this time.
7/14/2010	John Smith	HOBE	2 stings by yellow jackets. No immediate medical attention required.
7/16/2010	Jill Jones	HOBE	3 stings by yellow jackets. No immediate medical attention required.
7/21/2010	John Smith	HOBE	Serious poison ivy rash on both knees. Rash contained, not seeking medical attention at this time.
7/30/2010	Jane Johnson	HOBE	Fell while crossing stream, landed on stick poking through mud, causing laceration of left leg. Laceration not severe, no immediate medical attention required.

Figure A1. Sample tick bite / minor injury log

