

PROCEDURES FOR WORKERS' COMPENSATION

HOW TO REPORT AN ACCIDENT?

Employee needs to:

Notify your immediate Supervisor that you have had a work related injury, even if you do not want medical treatment at the time.

All accidents and incidents must be reported to Management within 24 hours of the injury and/or illness.

WHAT HAPPENS NEXT?

Supervisor needs to:

Thoroughly complete Palm Beach County's Injury/Illness Report located on the common drive.

If no treatment is required, the employee can report back to work.

If the employee's injury and/or illness is serious (life-threatening), call 911 immediately so that the employee is taken to nearest emergency room.

If the employee's injury and/or illness is nonlife-threatening, the employee should be transported by Staff or Supervisory personnel to the Palm Beach County Occupational Health Clinic located at 100 Australian Avenue, West Palm Beach, Florida 33406.

Hours of operation: Monday through Friday from 7:30 a.m. to 4:00 p.m.

Closed on Wednesdays 12:00 p.m. to 1:00 p.m.

Phone Number: (561) 233-5450.

After hours, weekends or holidays, transport the employee to one of the Urgent Care Centers listed below and then call (561) 233-5450 (Palm Beach County Occupational Health Clinic), and leave a message with the following information:

- Employee's Name
- Date incident/accident occurred
- Time incident/accident occurred
- Brief description of incident/accident
- Facility where employee received treatment medical treatment

URGENT CARE CENTERS

Concentra Urgent Care

M - F 8:00 am - 6:00 pm
4455 Medical Center Way
West Palm Beach, Florida 33407
(561) 881-0066

Helix Urgent Care

M - F 8:00 am - 8:00 pm, Sat and Sun 8:00 am - 6:00 pm
2720 10th Avenue North
Palm Springs, Florida 33461
(561) 540-4446

MD Now Sun - Sat 8:00 a.m. - 8:00 p.m.

7035 Beracasa Way Suite #105, Boca Raton (561) 361-1515
2272 N Congress Ave, Boynton Beach (561) 737-1927
601 Linton Blvd, Delray Beach (561) 276-2270
6868 Forest Hill Blvd, Greenacres (561) 967-8771
4570 Lantana Rd, Lake Worth (561) 963-9881
9060 N Military Trail, Palm Beach Gardens (561) 622-2442
11551 Southern Blvd, Suite #4, Royal Palm Beach (561) 798-9411
6699 W Boynton Beach Blvd, Boynton Beach (561) 734-4210
2007 Palm Beach Lakes Blvd, West Palm Beach (561) 688-5808

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Note: If the employee is being treated somewhere other than the Palm Beach County Occupational Health Clinic, please give the hospital staff one of the "In the event of work related injury/illness" Cards.

If the employee is taken to a hospital, and the treating physician issues a Return To Work Notice Without Limitations, the employee can return to work. The employee must also go to the Palm Beach County Occupational Health Clinic, bringing any paperwork, within 2 business days from the date of the treatment.

If the employee is taken to a hospital, and the treating physician issues a Return To Work Notice With Limitations, the employee cannot work. The employee must bring any paperwork to the Palm Beach County Occupational Health Clinic the next business day, and will not be able to work until seen by the Clinic and given a clinic slip.

SUPERVISOR'S RESPONSIBILITY

- If the employee requests to seek medical attention, the Supervisor must accompany the employee to the hospital or the Palm Beach Occupational Health Clinic.
- If adequate coverage is available the Supervisor must remain with the employee until the employee is released.
- If the employee is out more than (ninety) 90 days, the Supervisor must inform Human Resources and Safety Sensitive employees if a return to work Drug Test and DOT Physical is required.

Things to Remember

- *The Supervisor shall make every effort to remain with employee at hospital or Palm Beach County Occupational Health Clinic until the employee is released or admitted.*
- *If the employee is unable to drive, the Supervisor must drive the employee home.*
- *Code ATU employees in timekeeping software in accordance to the LMA.*

EMPLOYEES RESPONSIBILITY

- The employee must take all doctor's notes and/or hospital paperwork to the Palm Beach County Occupational Health Clinic. If released to return to work without limitations during non-clinic hours, the employee must notify immediate supervisor of these limitations.
- The employee must return Clinic slip received from the Palm Beach County Occupational Health Clinic to their immediate supervisor.
- The employee must keep all scheduled appointments.
- If the employee is out more than ninety (90) days, Safety Sensitive employees must receive approval from the Drug and Alcohol Coordinator prior to returning to work.
- If the employee is out more than ninety (90) days, Safety Sensitive employees must have a new/valid DOT physical prior to returning to work.
- The employee must contact Human Resources if released to light duty for assignment

Things to Remember

- *Except in the event of a life-threatening emergency it is the employee's responsibility to provide the Palm Beach County Occupational Health Clinic with all doctors notes and to provide clinic slips to their immediate supervisor.*
- *Every effort should be made to schedule Physical Therapy and follow-up Doctor appointments on your off time.*
- *With the exception of mileage reimbursement Physical Therapy and follow-up appointments time are not paid by Palm Tran OR W/C.*
- *Other initial emergency room hospital physician, the employee must have approval from Palm Beach County Occupational Health Clinic or the W/C adjustor before being treated by an outside physician.*
- *The employee should not provide personal medical insurance card information to the hospital. All W/C billing should go directly to Palm Beach County Risk Management as stated on the "In the event of work related injury/illness" card.*
- *ATU employees please refer to the Labor Management Agreement, Article 42, Section 1 "Employees injured while on duty shall receive Workers' Compensation benefits including weekly indemnity payments in accordance with Florida law. Employees may use accrued sick or vacation time to cover the seven (7) day waiting period required by Workers' Compensation prior to the initiation of weekly indemnity payments."*
- *If employee refuses a light duty assignment or fails to show for assignment, employee will not be paid by Palm Tran or W/C.*

PROCEDURES FOR WORKERS' COMPENSATION

CLINIC SLIPS

- Return to full duty--An employee can resume his/her normal job functions without limitations.
- Return to light duty--An employee may or may not resume his/her normal job functions and may be released with limitations (in this case Human Resources will make every effort to accommodate the employee).
- Sent Home--Employee cannot resume his/her normal job functions

WHAT HAPPENS IF I RECEIVE A BILL FROM A HEALTH CARE PROVIDER?

Contact the number on the invoice, advise them that this is a Workers Compensation Case, and have them send the invoice directly to the address below:

Palm Beach County Risk Management
100 Australian Avenue
West Palm Beach, FL 33406
Phone (561) 233-5400

WORK PRODUCT-PREPARED IN ANTICIPATION OF LITIGATION

**PALM BEACH COUNTY
EMPLOYEE INJURY/ILLNESS REPORT**

Preliminary Final

To be completed by employee's supervisor with Dept./ Div Head concurrence. If additional space is needed or photographs taken, please include with original or supplemental reports.

Employee Information: Name: _____ Job Title: _____

Department: _____ Division / Section: _____

Supervisor Completing Report: _____ Tel Number: _____

Incident Detail: Incident Date: _____ Reported to Supervisor Date: _____ Time: _____ AM PM

Was this Incident a result of a vehicle Accident?: Yes No If yes, what is the PBC asset number (if applicable)? _____

Description of Incident including how the incident occurred: _____

Location of Incident: _____

Describe the injury/illness including part(s) of body injured: _____

Witnesses (1) Name (print): _____ Phone #: _____

Witnesses (2) Name (print): _____ Phone #: _____

Did the employee seek medical care? Yes No If yes, what type? First Aid More than first Aid

Where did the employee receive care? Job Site PBC Occup. Health Clinic Other: _____

Action needed to prevent recurrence of this type of incident: _____

If employee was using personal protective equipment what type was he/she using? _____

Are there documented procedures for this task? Yes No Is this a regular work task?: Yes No

Did the employee exercise correct safety procedures for this task? Yes No Comments: _____

Supervisor Completing Report (Print Name/initial): _____ Date _____

Department/Division Head Concurrence (Print Name/initial): _____ Date _____

Department/Division Head Review and Comments: _____

Department/Division Head Concurrence (Print Name/initial): _____ Date _____

Employee Signature: _____ Date _____

Employee Comments: _____

IMPORTANT: After completing this form it MUST be PRINTED and sent to the following distribution:

Clinic Employee Safety/Loss Control Human Resources Employee Dept. Employee

In the event of work
related injury/illness

—NOTIFY—



**Palm Beach County
Occupational Health Clinic**

Monday thru Friday 7:30 a.m. to 4:00 p.m.

(561) 233-5450

Top 3 Things I Need to Remember:

1. Give Carrier Information to the Medical Provider
2. Go to the Palm Beach County Occupational Health Clinic prior to returning to work.
3. Bring all documentation from the Clinic back to my Supervisor.

Carrier Information:

RISK MANAGEMENT

100 Australian Avenue
West Palm Beach, Florida 33406
Phone: (561) 233-5400

**Workers' Compensation
Carrier Information**

Palm Beach County Risk Management
100 Australian Avenue
West Palm Beach, FL 33406

(561) 233-5400

Monday-Friday

7:30 a.m. to 4:00 p.m.

Closed 12:00 p.m. to 1:00 p.m. on Wednesdays