RENO POLICE DEPARTMENT GENERAL ORDER

This directive is for internal use only and does not enlarge this department's, governmental entity's and/or any of this department's employees' civil or criminal liability in any way. It is not to be construed as the creation of a particular standard of safety or care in an evidentiary sense, with respect to any complaint, demand for settlement, or any other form of grievance or litigation. Violations of this directive, if substantiated, can only form the basis for intra-departmental administrative sanctions.

Chief of Police: Michael Poehlman /s/
Legal Advisor: Karen Fraley /s/
Approving Deputy Chief:

General Order No: E-330-04  Issued: December 11, 2007  Supersedes: 5/240.000

General Order Title: WORKERS’ COMPENSATION

POLICY

To ensure smooth processing and protection of employee rights, the Reno Police Department provides procedures for the handling of work-related injuries and exposure to communicable diseases.

DEFINITIONS

Employee Notice of Injury or Occupational Disease (C-1): This is a State-required form for employees to report work-related injuries and illnesses (including the instruction sheet and benefit information).

Reno Police Department Health Clinic Exposure Report: This is a required report for any exposure to blood borne or airborne pathogens. The Notice of Injury or Occupational Disease form must be included with this report.

Supervisor’s Accident and Prevention Report of Work-Related Injury: This report is required by the City of Reno and is used by supervisors to report injuries or illnesses.

Employer’s Report of Industrial Injury or Occupational Disease (C-3): This report is a State-required form used by the department’s Workers’ Compensation Representative, or designee, to report accidents and incidents reported by employees.

PROCEDURES

Employee Responsibilities

1. If an employee is injured at work or becomes ill due to an exposure arising out of employment, they must notify their supervisor immediately or in any case no later than 24
hours after the injury/exposure. The employee must complete a “Notice of Injury” form (C-1). The employee should complete the entire injury report at the time of injury or exposure regardless of whether or not they intend to see a doctor. If the injured employee is not able to complete the form, a supervisor or the Workers’ Compensation Representative can complete it.

2. If the employee needs/wishes medical attention, NRS 616 and 617 require that they see a doctor within 90 days of the reported injury. If medical treatment is not sought within 90 days, there will be no claim review and future benefits will be jeopardized.

3. Except in a medical emergency, the employee must seek medical treatment from a primary provider approved by Workers’ Compensation. A list is maintained by the Workers’ Compensation Representative as required, and is posted:

   - On bulletin boards in major work locations (substations and the main station), and
   - On the “J” drive under Workers’ Comp/Risk Management notification.

4. If an employee is critically injured or injured to the extent that immediate medical treatment is necessary, the employee may seek help from the nearest emergency room or trauma center.

5. Injured employees must be examined by authorized providers who will determine work status. Employees may not take time off work under workers’ compensation without first being placed in off-work status by an authorized medical provider, or in the case of major trauma, by the treating trauma center.

6. If the employee seeks medical treatment, the employee and the treating physician must complete a “Claim for Compensation” form (C-4) at the time of the first treatment. The physician must submit this form to Workers’ Compensation within three (3) working days.

7. If the employee does not use a provider contracted by the City to provide workers’ compensation medical and health services, the employee may be responsible for any expenses incurred.

8. If the examining physician recommends treatment, the employee is required to comply with the treatment program and attend all scheduled appointments. Failure to comply with authorized treatment programs can result in loss of benefits. If the treatment program requires a change in work hours or days off to facilitate treatment, employees will be given a work schedule that allows them to attend required treatment appointments and complete the remainder of their designated work hours. This schedule will be provided to the employee in writing by the employee’s supervisor or a member of the Professional Standards staff. Any alteration of the treatment schedule must be approved by the physician or medical provider in charge of the program, and the employee’s supervisor, in
advance of the change. The supervisor will notify the department’s Workers’ Compensation Representative of any change in treatment schedules.

**Supervisor Responsibilities**

1. When a supervisor is notified of or becomes aware of a possible injury or exposure, that supervisor will investigate the cause of injury and ensure that a department “Notice of Injury or Occupational Disease Incident Report” is completed. The supervisor will ensure that the employee reads and completes the form and related attachments. The supervisor may assist with form completion if the employee is injured to the extent that he/she has difficulty filling out the paperwork.

2. The supervisor will complete the “Supervisor’s Accident and Prevention Report of Work-Related Injury.” The supervisor is responsible for investigating the circumstances of the injury based on the injury report and noting all available information about the incident on the form. The supervisor will ensure that this form is completed and delivered to the Risk Management basket in Records within 24 hours after notification of injury or exposure.

3. Supervisors will notify the department’s Workers’ Compensation Representative or Professional Standards Lieutenant in all instances when an injured employee is transported by ambulance to a hospital or trauma center, or if injuries are serious enough to warrant hospital admittance. If the supervisor is unable to complete notification, the supervisor should inform appropriate hospital personnel that the injury is work-related and the forms have been completed.

**Workers’ Compensation Representative Responsibilities**

The department’s Workers’ Compensation Representative will:

1. Distribute the completed forms to the proper authorities in a timely manner.

2. Complete all other forms required by the designated third-party administrator and the Risk Management Unit.

3. Act as liaison between the designated third-party administrator and department personnel.

4. Maintain, compile and post all records as required by State and Federal law, including entry into an approved data base system, and keep these records confidential.

5. Track the status of employees required to be off-duty due to injury or illness. Employees in restricted duty status, off work due to illness or injury, or who have sustained an injury or illness that is required by law to be reported, will be tracked with an individual record number for each separate incident. All treatments and related information concerning the incident will be recorded in the data base under this individual tracking number.
Forms

1. All forms that are required by the State of Nevada and/or the City of Reno Risk Management Office will be maintained on the Reno Police Department computer system. These forms will be maintained and updated as needed by the department’s Workers’ Compensation Representative.

Requirements for Removal from Work/Return to Work

1. If the examining physician recommends that an injured employee be removed from duty, or released to work with restrictions, the employee will obtain written documentation from the doctor indicating the type of injury, anticipated date of return to work, or if working with restrictions, what the work restrictions are, and the anticipated length of these restrictions. The employee will submit this written documentation to the Workers’ Compensation Representative within 24 hours of receipt. Notification is considered to have taken place by putting the written documentation in the Risk Management box in Records, or by faxing the documentation to the Risk Management office. If the off-duty status or restrictions occur when the Professional Standards office is not staffed, the employee must notify a supervisor.

2. Before an employee who is off-duty or on light duty due to an injury can return to full-duty, a written release must be obtained from the authorized medical provider. The release will be delivered to the Workers’ Compensation Representative who will review it and notify the employee’s supervisor. If a full-duty release is obtained when the Professional Standards office is not staffed, the release should be given to the on-duty Watch Commander for review and approval. If the Watch Commander has concerns about the release, the department’s Workers’ Compensation Representative or Professional Standards Lieutenant should be contacted.