

	HARRISONBURG POLICE DEPARTMENT General Orders	Policy Number: 810
	Chapter: Personnel	Total Pages: 4
	Section: Work/Non-Work Related Illness, Injury, and Death Reporting	Issue Date: 01/14/2022
	Issued By: Kelley Warner, Chief of Police	Effective Date: 01/14/2022
	Replaces: All General Orders Previously Issued Relative to Subject	
VALEAC Standards:		

A. POLICY AND PURPOSE

The purpose of this policy is to provide guidance regarding timely reporting of work-related and non-work-related injuries, illnesses, occupational diseases and death. See supporting documents from City policy:, Workers Compensation Memo and Workers Compensation Policy.

The Harrisonburg Police Department will address injuries, illnesses, occupational diseases and deaths appropriately, and will comply with applicable state workers' compensation requirements (Va. Code § 65.2-100 et seq.) and the City of Harrisonburg Safety Program.

B. ACCOUNTABILITY STATEMENT

All employees are expected to fully comply with the guidelines and timelines set forth in this policy. Responsibility rests with the supervisor to ensure that any violations of policy are investigated and appropriate training, counseling and/or disciplinary action is initiated. This directive is for internal use only and does not enlarge an employee's civil liability in any way. It should not be construed as the creation of a higher standard of safety or care in an evidentiary sense, with respect to third party claims. Violation of this directive, if proven, can only form the basis of a complaint by this department, and then only in a non-judicial administrative setting.

C. DEFINITIONS

Non-work related injury/illness - An accidental injury or illness **not** arising out of and in the course of employment with the Harrisonburg Police Department.

Work-related injury - An accidental injury or occupational disease arising out of and in the course of employment with the Harrisonburg Police Department. An occupational disease does not include an ordinary disease of life to which the general public is exposed outside of the employment with the Harrisonburg Police Department ([VA Code § 65.2-101](#); [VA Code § 65.2-400](#)).

D. RESPONSIBILITIES (WORK-RELATED)

a. EMPLOYEE RESPONSIBILITIES

Any employee sustaining any occupational disease or work-related injury shall report such event as soon as practicable, but within 24 hours to a supervisor, and shall seek medical care when appropriate.

b. SUPERVISOR RESPONSIBILITIES

A supervisor learning of any work-related injury or occupational disease should ensure the employee receives medical care as appropriate.

Supervisors shall ensure that required documents regarding workers' compensation are completed and forwarded promptly to the Senior Program Support Specialist. Any related City-wide injury or illness-reporting protocol shall also be followed.

Supervisors shall determine whether the Incident Notification policy applies and take additional action as required.

c. SENIOR PROGRAM SUPPORT SPECIALIST RESPONSIBILITIES

The Commander who receives a report of an occupational disease, work or non-work related injury should review the report for accuracy and determine what additional action should be taken. The report shall then be forwarded to the Chief of Police or his/her designee, the City's safety committee and the Senior Program Support Specialist to ensure any required Virginia Occupational Safety and Health (VOSH) Program reporting is made as required in the illness and injury prevention plan. The Chief of Police or his/her designee shall review and forward copies of the report to the Human Resources Department. Copies of the report and related documents retained by the Department shall be filed in the employee's confidential medical file.

d. PEER SUPPORT AND MENTAL HEALTH PROFESSIONALS

The Department should make peer support available for officers whether or not there is a specific incident and should also refer officers seeking services for mental health to an appropriate mental health professional, as required by Va. Code § 65.2-107.

E. RESPONSIBILITIES (NON-WORK RELATED)

A (290-Off- Duty Injury Illness Report) will be completed by the first line supervisor when an employee is out for more than 3 consecutive days as per City policy. The completed form and original illness/injury notes will be forwarded to the Program Support Specialist office and Administrative

Commander, through the respective chain of command, for distribution to Human Resources and the employee's personnel file.

F. OTHER DISEASE OR INJURY

Diseases and injuries caused or occurring **on duty** that do not qualify for workers' compensation reporting shall be documented on the designated report of injury form, which shall be signed by a supervisor. A copy of the completed form shall be forwarded to the Senior Program Support Specialist.

Unless the injury is extremely minor, this report shall be signed by the affected employee, indicating that he/she desired no medical attention at the time of the report. By signing, the employee does not preclude his/her ability to later seek medical attention.

G. SETTLEMENT OFFERS

When an employee sustains an occupational disease or work-related injury that is caused by another person and is subsequently contacted by that person, his/her agent, insurance company or attorney and offered a settlement, the employee shall take no action other than to submit a written report of this contact to his/her supervisor as soon as possible.

a. NO SETTLEMENT WITHOUT PRIOR APPROVAL

No less than 10 days prior to accepting and finalizing the settlement of any third-party claim arising out of or related to an occupational disease or work-related injury, the employee shall provide the Chief of Police with written notice of the proposed terms of such settlement. In no case shall the employee accept a settlement without first providing written notice to the Chief of Police. The purpose of such notice is to permit the City to determine whether the offered settlement will affect any claim the City may have regarding payment for damage to equipment or reimbursement for wages against the person who caused the illness or injury, and to protect the City's right of subrogation, while ensuring that the employee's right to receive compensation is not affected.

H. OSHA DEATH REPORTING

- a. All employers are required to notify OSHA when an employee is killed on the job or suffers a work-related hospitalization, amputation, or loss of an eye.
- b. A fatality must be reported within 8 hours.
- c. An in-patient hospitalization, amputation, or eye loss must be reported within 24 hours.

Reference [29 CFR §1904.39](#) (reporting fatalities, hospitalizations, amputations, and loss of an eye)