

MANAGEMENT OF INJURIES ON DUTY

POLICY AND PROCEDURE

1. AIM

The aim of this policy is to ensure the uniform implementation of the Procedure for the handling of Injuries on Duty within Nurses on Call.

This policy will serve to ensure the proper implementation of this procedure and thereby prevent that undue financial losses are sustained by Nurses on Call as a result of the incorrect reporting and handling of injuries on duty.

2. BACKGROUND

Nurses on Call has a legal obligation in terms of the Occupational Health and Safety Act 1993 (Act 85 of 1993) and the Compensation for Occupational Injuries and Diseases Act 1993 to properly manage all accidents relating to injuries on duty.

The management of injuries on duty includes the reporting, investigation and documentation of injuries on duty. In order to adhere to these requirements a policy and procedure has to be implemented to ensure legal compliance.

3. SCOPE

The following aspects constitute the scope of this policy:

3.1. Incident

An incident arising out of and in the course of an employee's employment and resulting in a personal injury, illness or the death of the employee.

3.2. Occupational Injury

A personal injury sustained as a result of an incident.

3.3. Workplace

Any premises or place where a person performs work in the course of his employment.

3.4. Employee

Any person who is employed by or who works for an employer and who receives or is entitled to receive any remuneration or works under the direction or supervision of an employer or any other person.

3.5. Injury on duty

An injury will be deemed to be an injury on duty when an employee is injured during working hours and in the execution of his/her normal duties or any other legal order given to him by his supervisor.

3.6. Special conditions

3.6.1. Incidents on the way to/from work

Any incident that happens to an employee who is conveyed free of charge to and from his place of employment for purpose of his employment by vehicle driven or provided by his employer shall be deemed to have taken place in the course of his employment and will be considered for IOD compensation.

3.6.2. Incidents during training or performance of Emergency Services

Only incidents that an employee incurs

- while he/she is engaged in or about his employers work or premises in organised first aid, ambulance or rescue work, fire fighting or any other emergency service;
- while he is, with the consent of his employee, engaged in any organised first aid, ambulance or rescue work, fire fighting or other emergency service on any works or premises other than his employer's will be considered for IOD compensation.

3.6.3. Incidents during sport activities

Sport activities that happen during working hours

- which form part of an official fitness programme
- where regular fitness evaluation takes place
- in which it is compulsory for every employee in a particular category of post to take part
- where there is a policy and procedure to deal with those who do not fulfil the fitness requirements will be considered for IOD compensation.

3.6.4. Other incidents

Any injuries sustained while performing an activity in the interest of the employer will be considered for IOD compensation.

3.7. Personnel 24 incidents

3.7.1. The following incidents constitute a Personnel 24 incident:

3.7.1.1. When a person

- dies
- becomes unconscious
- suffers the loss of a limb or part thereof or is otherwise injured
- becomes ill that he could either die or suffer permanent injury

- be unable to work, for a period of not less than 14 days; or
- is permanently unable to continue with activities for which he was employed.

3.7.2. A major incident occurred.

3.7.3. The health and safety of any person is endangered where:

- a dangerous substance was spilled
- the uncontrolled release of substance under pressure took place
- machinery or part thereof fractured or failed resulting in flying, falling or uncontrolled moving objects; or
- machinery ran out of control.

3.8. HIV/Hepatitis B Exposure

- 3.8.1. All incidents where exposure to blood or any other body fluid from any other person, by way of broken skin or mucus membranes took place, during the execution of their normal duties, must be dealt with in accordance with the Policy on the Prevention and Management of Needlestick and BBVs.
- 3.8.2 All costs in respect of HIV or Hepatitis B tests or prophylactic medication are covered by Nurses on Call and not by the Compensation Commissioner.
- 3.8.3 Cost incurred by employees not adhering to the abovementioned policy and procedure will not be paid by Nurses on Call. Costs relating to examinations and treatment at an unauthorised private institution shall be regarded as private costs.

4 Choice of service provider

- 4.1. It is the injured employee's prerogative to which medical institution or doctor they wish to go for treatment. An appeal is however made to all employees to utilise the services of one of the Occupational Health clinics prior to consulting a private doctor, taking into account the extent and nature of the injury and the services available at the clinics.
- 4.2. In the event of an employee sustaining a serious injury and not being fully conscious they must be taken to the hospital closest to where the accident occurred.

5. Contact with Department of Labour

All contact with the Department of Labour regarding Major incidents will be conducted by Nurses on Call.

6. Medical consultations

- 6.1.1. When an Injury on Duty has been reported, all follow up consultations must be adhered to until such time as the doctor has issued a Final Medical Report.
- 6.1.2. The medical practitioner who first treats the patient must provide follow-up treatment until such time as the final medical report has been completed or the injured party is referred to another medical practitioner e.g. a specialist. This is also applicable to cases where the initial treatment was provided at an Occupational Health clinic. If the employee wishes for his treatment to be taken over by another medical practitioner a letter of referral must be obtained from the clinic. Employees will be held responsible for payment of any medical

costs resulting from treatment by a second medical practitioner if an official referral between practitioners has not taken place.

7. Reporting of Injuries on Duty

In accordance with Personnel 14 of the Occupational Health and Safety Act 1993 (Act 85 of 1993) every employee has the duty to report any injury to himself before the end of his shift. Any employee will therefore report any injury to himself before the end of his shift to Nurses on Call. The implementation of this policy and procedure will provide the employee with the means to execute this duty and thereby ensure adherence to the requirements of the said Act.

8. Investigation of alleged Injuries on Duty

Nurses on Call has a legal obligation to investigate all injuries on duty sustained by its personnel. All incident investigations will therefore be conducted under the auspices of the Occupational Safety personnel and within the guidelines as set out in the procedure for the reporting of injuries on duty.

This enables the Nurses on Call personnel to ensure that all reported incidents are properly investigated and that these investigations are properly recorded.

9. Compensation for Injuries on Duty

Even though Nurses on Call is a self ensured entity, paying the compensation for injuries on duty out of its own insurance fund, the decision of whether a claim for an alleged injury on duty will be accepted does not reside within the company.

All alleged injury on duty claims are submitted to the Compensation Commissioner for approval. The Compensation Commissioner evaluates the claim and then accepts or dismisses the claim. Only after receipt of the decision from the Compensation Commissioner are the costs of the claim or any other compensation approved by the Commissioner then paid.

The injured employee remains responsible for all costs with regard to the alleged Injury on Duty until such time as the Compensation Commissioner accepts the claim. Costs of dismissed claims will be deferred to the employee.

It is therefore important that all alleged Injuries on Duty be reported and investigated.

MANAGEMENT OF INJURIES ON DUTY PROCEDURE

1. AIM

The aim of this procedure is to establish a uniform procedure for the handling of Injuries on Duty within Nurses on Call.

2. REPORTING OF AN INJURY ON DUTY

- The injury must be reported telephonically to Nurses on Call personnel at the head office which is 24 hours a day. Number 086 1000 930
- The employee must also inform a colleague, the Health and Safety Representative or his supervisor about the accident.
- The injured employee's supervisor must duly complete an Employer's Report form and hand it in before the completion of his shift (weekends and public holidays excluded) to the designated Personnel Officer of his department.
- A completed Employer's Report form must accompany the injured employee to every place medical treatment will be provided, including the Occupational Health clinic.
- The original *First Medical Report* (WCI 4) must be obtained by the injured employee from the clinic, hospital or doctor that treated the employee and be forwarded to the IOD office.
- If an injury on duty should occur after normal working hours, the injury should be reported to the supervisor. If it is deemed to be a serious accident or Personnel 24 incident the procedure as set out in point 8 (Incidents after hours) should be followed.

3. MINOR INJURIES

- The injured employee receives treatment from the first aid box.
- The first aider must complete the form provided in the first aid box.
- Report the injury telephonically at 086 1000 930

4. INJURIES TREATED AT OCCUPATIONAL HEALTH CLINICS

- The injured employee should be taken to the nearest Occupational Health Clinic.
- The injured employee should not only be dropped off at the clinic. The person transporting the injured employee must remain present, as the injured person might need to be taken to another health care institution or back to work.
- It remains the responsibility of the employer/supervisor to transport the injured employee to a clinic, hospital, doctor, etc, should it be necessary.
- The clinic may refer the injured party to hospital, doctor or for X-rays. Clinic personnel will provide the injured with a referral letter to confirm the IOD.
- If the injured employee is referred to a doctor, hospital or for X-rays, an Employer's Report form must be completed and taken to the relevant institution by the supervisor.

5. INJURIES SUSTAINED IN MOTOR VEHICLE ACCIDENTS (WHILE EXECUTING OFFICIAL DUTIES)

- Report the injury on duty telephonically at 086 1000 930
- No matter how minor the car accident, and even if there are no visible injuries, the employees involved should be taken to an Occupational Health clinic for record of the accident by the clinic.

6. SERIOUS INJURIES

- The injured employee's supervisor and Health and Safety Representative should be notified.
- The supervisor should in turn notify the Manager of the Personnel where the injured employee works and the Occupational Health and Safety Compliance Officer (OHSCO) allocated to the specific department.
- In the case of a serious injury or an emergency, a supervisor should take the injured employee directly to a hospital that has a trauma care unit or an ambulance should be summoned.
- An ambulance should be summoned when the supervisor is not sure of the seriousness of the injury or when he is of the opinion that the patient's injuries are of such a nature that handling the patient may cause more injuries or aggravate existing injuries.
- The supervisor should complete the Employer's Report form and send it with the injured employee to the hospital/doctor.
- If an ambulance is summoned, they should also be supplied with a copy of the Employer's Report form.
- The scene must not be disturbed without the consent of the OHSCO and the Manager of the personnel involved, except where the disturbance is required to safeguard the scene, thereby preventing further injuries, or to assist the injured employee.
- The same procedure should then be followed as set out in point 2 for the reporting of the injury on duty.

7. SECTION 24 INCIDENTS

- In the case of a Section 24 incident the same procedure should be followed as set out in point 6 (Serious Injuries).
- If someone is involved in a Section 24 incident the scene may not be disturbed until the Occupational Health and Safety Inspector of the Department of Labour arrives and inspects the scene, or until the Department of Labour grants permission to do so.

8. INCIDENTS AFTER HOURS

If a serious or Section 24 incident occurs after normal working hours the following procedure should be followed:

- The officer on duty must inform the following people:
 - The Manager of the personnel where the injured employee is working.
 - The OHSCO on standby duty.
- The OHSCO will contact the Department of Labour if the incident is classified as a Section 24 incident.
- The same procedure for handling Section 24 incidents should then be followed.

9. CONTACT WITH BODY FLUID AND OTHER BIOLOGICAL AGENTS EXPOSURE

- When such cases occur during **clinic hours** (Monday-Thursday 07:00-15:30 and Friday 07:00-14:15) the injured employee must report immediately, in person, to his designated Occupational Health Clinic.
- The clinic must be contacted telephonically as soon as possible in order for them to be prepared.
- In the case of **after-clinic hours** exposure the call centre at Nurses on Call must be contacted at **Telephone 086 1000 930** The injured employee will be given information on the health Care Official they must report to for management of the incident.
- The employee must report, in person, to the designated Occupational Health Clinic on the first working day following the incident for follow-up treatment even if the employee is on night duty or off duty.
- The injury/exposure must be reported in accordance with point 2 (Reporting of injuries on duty).

- All follow up examination/consultations must be kept.

NOTE: 1

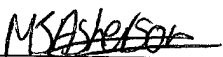
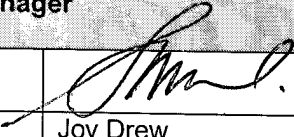
Employees who had a contact with body fluid incident and then makes use of any other medical provider besides the Occupational Health service (or the after hour service available) will be held liable for all costs of blood test and treatment.

Although it is an Injury on Duty the Compensation Commissioner does not pay for prophylactic treatment.

NOTE: 2

Transport of suspected meningitis cases **IS NOT** to be reported as an IOD. Employees should follow the procedure as per the Guideline for Exposure to Possible Meningitis Infection.

Approval / Revised

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