

**ANTRIM COUNTY**  
**ACCIDENT AND INJURY REPORT POLICY**  
**Policy # 1999-8**

**General Statement**

Antrim County is dedicated to the provision of a healthy and safe working environment for its employees. It is the County's first priority to prevent accidents from happening. However, in the event an accident does take place, it is the intention of the County to make the proper identification of the injury or illness along with proper care and treatment the number one priority. Employees must report all accidents and injuries involving County employees or County buildings, vehicles or equipment to their immediate supervisor and submit the appropriate reporting form. A copy shall be given to the Clerk Office within 24 hours of the accident, or by the next working day. Failure to report an accident or injury may result in discipline up to and including discharge.

**Work Related Injuries**

1. If the employee requires medical attention the Clerk's office shall authorize treatment with the appropriate medical caregiver using the "Medical Treatment Authorization" form, (except in an emergency and after hours when it shall be the Supervisor's responsibility).
2. All work related injuries/illnesses shall be documented using the "Report of an Injury to an Employee" form (CMI-14) which can be obtained at the County Clerk Office. The completed form shall be returned to the Clerk Office.
3. The department supervisor shall document the incident and related circumstances using the "Supervisor's Incident Report" form by the end of the workday of the time of occurrence. The completed form should be forwarded to the Clerk Office.
4. An employee must provide a written statement by the physician estimating the length of disability. Before an employee returns to work, a written release from the doctor must be submitted to the supervisor. All documentation must be forwarded to the Clerk Office. The Clerk Office will forward a copy to the Coordinator/Planner Office.
5. Once an incident has been reported, the Clerk Office will complete the M.I.O.S.H.A. log, as required. If additional information is needed, a questionnaire will be sent to the employee or, the employer will contact the employee personally.
6. Pay for days missed due to a work related injury will be governed by the applicable collective bargaining agreement and the statute governing worker's compensation.

## Department Head Meeting - Worker Compensation

Date: May 13, 2009

When an injury from an accident takes place:

1. Follow the **Accident and Injury Report Policy**
2. The employee is to report the injury/accident to you. Keep the injury/illness confidential (to the extent possible).
3. Assist your employees through the process. Help them to make contact with the Clerk Office and get the proper paperwork, as well as an appointment for medical evaluation and treatment (see #1 of the Accident and Injury Report Policy).
4. The "Medical Treatment Authorization" form goes with them to the medical care provider. There is a portion that must be completed by the physician and sent back to the Clerk Office.
5. Make sure (offer assistance if necessary) the **employee** completes the "Report of Injury to the Employee".
6. Be sure to complete the Supervisor Report form.
7. Return to work: No employee can return to work without a physicians release.