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| Treatment of Injuries and Illnesses | S.O.P. 5C | | Page 1 of 6 |
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| STANDARD OPERATING PROCEDURE | | | |

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I. SCOPE AND PURPOSE

- A. The purpose of this procedure is to provide efficient treatment of occupational injuries and illnesses from the time of initial injury to the final return of the employee to their normal job classification.

II. RELATED PROCEDURES AND RESOURCES

- A. S.O.P. 1A, Incident With or Without Injury Reporting and Investigation
- B. S.O.P. 2C, Project Hazard Control
- C. S.O.P. 5A, Drug, Alcohol and Contraband
- D. S.O.P. 5B, Bloodborne Pathogens
- E. S.O.P. 5I, Temperature Extremes
- F. New Employee Orientation
- G. New Supervisor Orientation
- H. Attachment Form 5C.1a, Bona Fide Offer Letter (Sample)

III. PERSONNEL RESPONSIBILITY

- A. Supervisor:
 - 1. The Supervisor shall ensure that this S.O.P. is followed.
 - 2. The Supervisor shall ensure that employees under his/her direction are familiar with this S.O.P.
 - 3. The Supervisor must ensure that a First Aid Provider is designated and

certified. Contact the Safety Department for First Aid and CPR certification procedures.

4. The Supervisor shall have emergency numbers posted and know location of designated medical clinic. If needed, contact the Safety Department to set up a clinic for your location.
 5. Refer to Drug, Alcohol, and Contraband Procedure for testing requirements of injured employees.
- B. Employee
1. Employees must immediately report all job related injuries, no matter how minor, to supervision.
 2. Employees must follow directions given by the medical provider for on-the-job injuries or illness. Failure to do so may result in termination of Workers' Compensation benefits.
 3. Employees must report any off-the-job injuries or illnesses that may influence their job duties, including any prescription medication they are using.
 4. Employees must be familiar with emergency numbers to call for help with medical emergencies.
- C. First Aid Provider/Qualified Person:
1. Shall not prescribe or give non-prescription medication to any employee. They may tell an injured or ill employee what nonprescription medication is available, but make it clear that it is the employee's option to choose to use the non-prescription medication.
 2. Before allowing the use of non-prescription medication, they must ask if the employee is allergic to any medications.
 3. Hold, at a minimum, a valid American Red Cross Standard First Aid Provider card (good for up to 3 years issuance) or comparable certification.
 4. Maintain a current First Aid Log recording all reported injuries and illnesses on the jobsite.
 5. Use proper protective equipment to minimize any contact or potential contact with bodily fluids
 6. Shall check the contents of the First Aid Kit at least weekly to ensure that it is well stocked

IV. FIRST AID SUPPLIES

- A. An area shall be designated for treatment of injuries that is not located in close proximity to areas where employees may eat.
- B. First Aid Kit.
 1. All jobsites will have at least one 25-man First Aid Kit.
 2. The First Aid Kit must be portable, but large enough to hold all required first aid supplies.
 3. The Kit shall be accessible, yet monitored.

4. First aid kits shall consist of appropriate items and stored in a weatherproof container with individually sealed packages.
 - i. Refer to form 5C.1c, First Aid Supply List, to ensure the first aid kit is complete.
- C. Bodily Fluid Clean-up Kit,
- D. Bio-Hazard Bags.

V. GENERAL REQUIREMENTS

- A. A non-designated employee should not administer first aid; except in cases of severe bleeding or cessation of breathing.
- B. Never move an injured or seriously ill person, unless absolutely necessary.
- C. Each jobsite shall have at least one First Aid Provider available for each working shift.
- D. First aid supplies shall be easily accessible when required.
- E. Where the eyes or body of any person may be exposed to injurious corrosive material, suitable facilities, such as eye wash stations and showers, shall be provided within the work area. Employees shall be informed of these locations.

VI. CLASSIFICATION OF INJURIES OR ILLNESSES

- A. All injuries must be classified to determine extent of treatment and reporting. This classification shall be considered separate from OSHA's recordability classification at this time.
- B. The First Aid Provider shall discuss the severity of the injury with the employee for initial classification of the injury or illness. Injury severity from the injured employee's standpoint may vary from person to person.
- C. Injuries can generally be classified into three categories, minor, moderate, or severe/fatal. First Aid Providers can use the following as guidelines for initial classification of injuries or illnesses:
 1. **Minor:** Any injury or illness, other than listed above that does not meet the criteria for severe or moderate.
 2. **Moderate:** Broken bones, lacerations that may require stitches, burns, muscle strains or sprains.
 3. **Fatal or Severe:** Fatality, profuse bleeding, difficulty breathing, loss of consciousness, choking, electrocution, inability to move, or any other condition deemed severe.

VII. GENERAL CASE MANAGEMENT PROCEDURES

- A. Minor
 1. Provide first aid treatment with supplies in first aid kit. If required by client, use their first aid station.
 2. Contact the Safety department before the end of shift.
 3. Document on Weekly Injury Log, appendix form 1A.1c and complete a

- Supervisor's Initial First-Aid/Injury Report, Appendix form 1A.1d.
4. Keep a copy of both forms on site and send originals to the Safety department in the weekly packet.
 5. Follow-up with employee on a regular basis (several times/shift) to ensure the employee's condition does not worsen.
- B. Moderate
1. Provide first aid treatment until the injured can be transported to a medical facility.
 2. Contact the Safety Department immediately.
 3. Keep Client informed.
 4. Follow the Safety department's instructions on transporting the injured employee.
 5. Document injury on the Weekly Injury Report, appendix form 1A.1c and Supervisor's Initial First-Aid/Injury Report, appendix form 1A.1d.
 6. Assist the Safety department in any investigation.
- C. Severe/Fatal
1. Activate the Emergency Medical System.
 2. Contact the Safety department immediately.
 3. Keep Client informed.
 4. Care for the injured until professional help arrives.
 5. Document injury on the Weekly Injury Report, appendix form 1A.1c and Supervisor's Initial First-Aid/Injury Report, appendix form 1A.1d.
 6. Assist the Safety department in any investigation.

VIII. GENERAL FIRST AID PROCEDURES

- A. The First Aid Provider shall only treat injuries up to their level of training.
- B. General first aid:
1. Bruises, sprains, strains - Apply Ice and elevate.
 2. Chemical spill on persons - Flush the affected body part for at least 15 minutes.
 3. Brakes or Sprains - Splint injuries as needed.
 4. Cuts/Lacerations - elevate and apply pressure.
 5. Burns - Flush with cool running water.
 6. Heat/Cold Related Illnesses - refer to S.O.P 5H.

IX. RETURN TO WORK (RTW) PROCEDURES

- A. The purpose of the Return to Work procedure is to ensure the injured employee receives appropriate medical attention while on the job and return them to productive work as soon as medically possible. It is our belief that the sooner an employee returns to work the faster they will fully recover. Therefore, every effort will be made to develop alternative duty for injured employees.
- B. After an employee has been treated medically, the treating physician will determine the employee's work status. There are three (3) types of work status that

the treating physician will assign the employee.

1. *Full Duty* – Employee is released to work without restrictions. This means the employee is healthy enough to return to his/her normal duties and is released from the doctor’s care.
2. *Limited or Modified Duty* – Employee is released back to work with restrictions. This means the employee is still under the doctor’s care and will be scheduled for one or more medical follow-up appointments. The employee is allowed to go back to work and will be given a form that details his/her limitations, e.g., no lifting over ten pounds or no climbing.
3. *No Work* – The employee is not allowed to work under any circumstances. This means that the employee is under the doctor’s care and cannot work until the doctor releases the employee to either “limited” or “full” duty.

C. Responsibilities

1. It is the responsibility of the Safety Director to:
 - a. Establish contact with the treating physician
 - b. Ensure appropriate care is given to the employee.
 - c. Ensure company personnel follow all components of the RTW process.
 - d. Ensure the treating physician is aware of our RTW process.
 - e. Assist the treating physician in scheduling the employee for follow-up appointments, if necessary.
 - f. Inform the treating physician of our Worker’s Compensation payment process.
2. It is the responsibility of the Supervisor to:
 - a. Cooperate with the Safety Director.
 - b. Make appropriate accommodations and develop alternative duty assignments that comply with the physician’s restrictions.
 - c. Assist the employee in meeting his/her scheduled medical or work related appointments.
 - d. Confirm with the Safety Director, or their authorized designated representative, any scheduled appointment prior to allowing the employee to leave the jobsite.
 - e. Communicate with the Safety Director, or their authorized designated representative, on a daily basis as to the status of the injured employee.
3. It is the responsibility of the employee to:
 - a. Cooperate with the treating physician, the Company and the company’s Workers Compensation Insurance provider.
 - b. Work within the treating physician’s prescribed work restrictions.
 - c. Make all scheduled medical and work related appointments.
 - d. Communicate with the Safety Director on a regular basis and be truthful in all dealings with the company.

F. One of the following will apply once the treating physician has made a medical status determination:

1. If the employee has been released to full duty the employee will be either

- sent back to their previous jobsite or reassigned to another jobsite.
2. If the employee has been released to limited duty, the Safety Director will:
 - a. Personally visit with the injured employee about his/her work restrictions, and.
 - b. Make a “Bona Fide Offer”, appendix form 5C.1a, in writing. The injured employee, upon receipt, has 5 days to accept or reject the “Bona Fide Offer”.
 - i. If the employee accepts the offer he/she will be assigned to the position outlined in the “Bona Fide Offer”, or
 - ii. If the employee rejects the offer they will be denied any compensation associated with their workers compensation claim.
 3. If the employee is put on a “No Work” status, the Safety Director will personally visit with the employee and fully explain the employees rights and the “Do’s and Don’ts”.
- G. Fraud will not be tolerated. Workers Compensation claims thought to be fraudulent will be turned into our Workers Compensation Insurance Company’s Fraud Task Force for investigation. **It is the policy of the Company to prosecute to the fullest extent allowed by law all fraudulent workers compensation claims.**