

## **Worker Injury Procedures (Workers COMP)**

### **Dispatcher's Response**

- \_\_\_ 1. Obtain person's name, LSU ID#, location, and nature of injury
- \_\_\_ 2. Notify the officer.
- \_\_\_ 3. If the injury is not life threatening and HR is open, ask the victim to go HR.
- \_\_\_ 4. If life threatening call 9-911
- \_\_\_ 5. If not life threatening they need to go to COMP, to get medical service.
- \_\_\_ 6. If HR is closed and the injury is not life threatening ask the victim to come to the Security office.
- \_\_\_ 7. If transportation to the Security office is needed advise an officer to pick them up.
- \_\_\_ 8. A full time staff Officer should fill out and sign the COPM form.
- \_\_\_ 9. When the victim arrives give them a COMP sheet and have them taken it with them to the COMP.
- \_\_\_ 10. Tell the victim that they need to go to the COMP office in Riverside. (If the victim needs transportation to the clinic, call COMP at 9-951-222-2106 and ask them to pick up the victim. COMP provides transportation.)
- \_\_\_ 11. Notify HR (After business hours, leave detailed a message on their answering machine with the victim's name, LSU ID#, and nature of injury).
- \_\_\_ 12. Log an incident report number.

### **Officer's Response**

- \_\_\_ 1. Pick up the victim (if necessary) and take them to HR or bring them to the Security Office.
- \_\_\_ 2. Fill out the COMP form with: Date, Time, Employee's name, Job Title, and injury Sign it (The form must be sign in order to validate it.) and make a copy of the form. The copy should be included with the incident report.
- \_\_\_ 3. Give the victim the original form and advise them that they must go to the Riverside office located at 4300 Central Ave, Riverside, CA 92506.
- \_\_\_ 4. Ask the victim to go to the HR office the next business day.
- \_\_\_ 5. Complete an incident report.

**Dispatcher should relay the medical emergency using the following example:**

**“My name is \_\_\_\_\_ I’m calling from La Sierra University Security Department. We are currently experiencing a (medical injury / medical emergency) involving \_\_\_\_\_ (name). The incident occurred while working on campus. The victim has suffered \_\_\_\_\_ (nature of injury) and he/she (was/was not) taken to COMP (If not taken to COMP, state the reason why). The following people were notified: \_\_\_\_\_ . They were advised that all information regarding this (incident / emergency) is to remain confidential.”**