

Section



Administrative

FOREWORD

The KANSAS WORKERS RISK COOPERATIVE for COUNTIES (KWORCC) Loss Control program represents a commitment to safety. It sets forth philosophy and policy goals, organizational authority, safety program components and methods of injury prevention. The full implementation of the loss prevention program for all employees at every level is the goal established by the Board of Directors of KWORCC. The guidelines outlined in this manual are considered minimums and should not be construed to limit individual initiative to implement more comprehensive procedures to reduce or prevent injuries.

NOTE: The guidelines in this manual are specifically aimed at reducing work related injuries covered under the KWORCC policy. KWORCC does not intend this manual to be “all inclusive” or to provide specific legal advice. Readers should seek legal advice on specific concerns from their own legal advisors. KWORCC attorneys are available to help our Member Counties understand and interpret the workers compensation laws and rules and give general guidance on other matters.

KWORCC LOSS PREVENTION POLICY STATEMENT

The Board of Trustees of the Kansas Workers Risk Cooperative for Counties considers the health, safety and well-being of employees of member counties to be of paramount importance. Therefore, the Board actively promotes and supports the implementation of a loss prevention program aimed at reducing work related injuries and illnesses to an absolute minimum.

The loss prevention program adopted by the Board of Trustees will be administered by the KWORCC Administrator, but will require the involvement of all levels of county employees. Every elected official or appointed person, director, commissioner, manager, supervisor, administrator and employee is strongly encouraged to make loss prevention and safety a matter of continuing concern.

The KWORCC Board does hereby go on record as pledging their support and commitment to the implementation and administration of this policy.

Signed and dated this 14th day of July, 2016

Gary Caspers, President, Board of Trustees

Stan McEvoy, Vice President, Board of Trustees

Michelle Garrett, Secretary, Board of Trustees

Linda Buttron, Controller, Board of Trustees

Sandy Barton, Member, Board of Trustees

Steven Garten, Member, Board of Trustees

Rob Roberts, Member, Board of Trustees

James W. Parrish, Administrator

RISK MANAGEMENT POLICY STATEMENT FOR KWORCC MEMBER COUNTIES

A risk management policy statement that is adopted by the County Commissioners will demonstrate that the county is committed to handling risks and preventing injuries. The statement should be short and to the point; avoid policy statements longer than one page. Save the detailed explanations for a directive or procedural manual. All employees should receive a copy of the policy statement and should be held accountable for their actions. The following risk management policy statement can be used as a model for writing your own statement.

Risk management policy statement example:

_____ County recognizes that its employees are its most valuable asset.

_____ County is dedicated to managing the risks of providing services for its citizens. Recognizing that injuries will inevitably occur, the county considers no injury to be acceptable and will make every effort to identify and address all loss exposures.

The risk management committee is empowered to make decisions concerning all operations of the county that effect the safety and well-being of employees, elected officials and citizens and the financial well-being of _____ County.

Every employee and elected official will adhere to the policies and practices established by the risk management committee.

Chair, County Commission

County Manager/Administrator
or County Department Head

Date of Issuance: _____

Org. 2001

What is Workers Compensation?

Workers Compensation is an insurance plan provided by the employer (by law) to pay employee benefits for job-related disability or death. Benefits are paid at the employer's expense. Coverage begins the first day on the job and covers virtually all employees, including temporary workers and non-citizens.

The present law covers all Kansas employers except for those in certain agricultural pursuits and employers with gross annual payroll of less than \$20,000. All payroll is taken into account, including that paid in Kansas and elsewhere. If the employer is a sole proprietor or a partnership, the wages paid to such employer(s) and any family members are included in the \$20,000 gross.

Employees who are disabled due to a job-related injury or disease are entitled to: (1) medical expenses to treat job-related injuries or illness; (2) income benefits to replace part of wages lost due to disability and (3) survivors' benefits if death results.

PURPOSE OF THE LAW

Kansas passed its first Workers Compensation law in 1911. By regulating litigation and benefits, the law is designed to protect the interests of both the employer and employee. Employers benefit by substituting a known expense (premium) for the risk of large, unbudgeted expenses in the event of serious employee disabilities. Employees benefit because everyone is guaranteed some compensation, regardless of one's ability to pay attorney fees. While initially aimed at hazardous jobs, the law now covers virtually all workers.

EMPLOYERS RESPONSIBILITIES

Employers must post written notice in both Spanish and English describing the Workers Compensation coverage. Free posting notices and other posters are available by calling the Kansas Division of Workers Compensation (Division) at 1-(800)-332-3636.

All employee injuries and deaths must be reported to the Division within 28 days from the date of injury or death or the date of employer notification. Failure to do so carries legal and financial penalties.

All reporting of claims to the Division will be handled by the KWORCC claims staff at CORnerstone Risk Solutions (CRS). CRS is KWORCC's insurance adjusting and advisory firm. (See *Section A-page 16.*)

Immediately upon learning of an employee's injury or death, employers must furnish written information to the employee or employee's beneficiaries describing available benefits and the claims process and identifying a contact person for workers compensation claims and other information. Employers may obtain informational material either from KWORCC or from the Division.

ACCIDENT PREVENTION PROGRAMS

Workplace safety and accident prevention is a key element of the Kansas Workers Compensation Act with the idea of reducing claims and losses that will hold down premiums for employers. (See *section 44-5.104 of the Workers Compensation Act effective May 15, 2011.*) Because rates are based on losses, prevention of employee accidents through enhanced safety measures is one of the best ways employers can help keep rates down.

By law, insurance carriers and group-funded plans must make accident prevention programs available to their insureds. Notice of such accident prevention programs must appear on the front page of every policy issued after July 1993. Accident prevention programs will be supervised by the Division of Labor Management Relations and Employment Standards in the Department of Human Resources. At least once a year, each insurance carrier or group-funded plan must submit the type of program offered to the Division of Workers Compensation for review.

ALLOCATION OF RESPONSIBILITIES

Employee	Employer
<p>Oral or written notice to employer's designated individual within 20 calendar days of injury or 20 calendar days after seeking medical attention or 10 calendar days after last day of work for the employer.</p> <p>_____</p> <p>Occupational disease: written notice to employer within 90 days of disability's onset; written claim to the Division of Workers Compensation within one year.</p> <p>_____</p> <p>Notice must include time, date, place and particulars of injury and must be apparent that employee is claiming benefits under workers' compensation act for a work-related injury.</p> <p>_____</p> <p>Written claim in death cases to employer or insurance carrier within one year of employee's death.</p> <p>_____</p> <p>Application for hearing within three years of injury, or within two years of last compensation payment or last medical treatment</p> <p>_____</p>	<p>Designate an individual to handle workers' compensation claims. Indicate to employee who the individual is in writing and post the individual's name and contact information with all the other work related notices.</p> <p>_____</p> <p>Written accident report filed with insurance carrier within 28 days from the date of injury or employee notification</p> <p>_____</p> <p>Information delivered to employee or legal beneficiary to assist in the claims process.</p> <p>_____</p> <p>Notify carrier immediately if a work related accident or injury results in death of an employee.</p> <p>_____</p> <p>Post Form 40 in employee work areas.</p> <p>_____</p> <p>Give injured worker Form 27 (or 270 for Spanish)</p> <p>_____</p>

44-5,104. Accident prevention programs; requirements and reports; inspections; duties of secretary of labor; failure to maintain, penalties. (a) Each insurance company or group-funded self-insurance plan providing workers compensation insurance coverage in Kansas shall maintain and shall provide accident prevention programs upon request of the covered employer as a prerequisite for authority to provide such insurance or coverage. The accident prevention programs shall be adequate to furnish accident prevention services required by the nature of the operations of the policyholders or other covered entities and the accident prevention services shall include surveys, recommendations, training programs, consultations, analyses of accident causes, industrial hygiene and industrial health services to implement the program of accident prevention services. The accident prevention programs shall be staffed with field safety representatives. Each field safety representative shall be a person who is (1) a college graduate who has a bachelor's degree in science, industrial hygiene, safety or loss control, or engineering, (2) a registered professional engineer, (3) a certified safety professional, who has attained the designation from the board of certified safety professionals, (4) a certified industrial hygienist, who has attained the designation from the American board of industrial hygiene (5) an individual with five years of experience in occupational safety and health, (6) a person who is working under direct supervision of a person who meets the qualification requirements of this section (7) a person who has attained the designation of associate in loss control management or associate in risk management from the insurance institute of America, who has attained the designation of occupational safety and health technologist from the board of certified safety professionals, or who has attained any other comparable designation or certification by a recognized organization as determined by the secretary of labor, or (8) an individual who has completed a certified training program in accident prevention services approved by the secretary of labor. The insurance company or group-funded self-insurance plan may employ qualified personnel, retain qualified independent contractors, contract with the policyholder to provide qualified accident prevention personnel and services, or use a combination of such methods to fulfill the obligations imposed by this section. Accident prevention personnel shall have the qualifications required for field safety representatives.

(b) The secretary of labor may conduct such inspections as the secretary deems necessary to determine the adequacy of the accident prevention services required by subsection (a) for each insurance company and group-funded self-insurance plan providing workers compensation insurance coverage in Kansas, including, but not limited to, random inspections and those based upon employer complaints. Documented employer complaints shall be appropriately investigated and the results shall be reported to the commissioner of insurance. The secretary shall not be required by this section to inspect each insurance company or group-funded self-insurance plan.

(c) A notice that accident prevention services are available to the policyholder from the insurance company shall appear in no less than ten-point boldface type on the front page of each workers compensation insurance policy delivered or issued for delivery in this state.

(d) At least once each year, each insurance company or group-funded self-insurance plan providing workers compensation insurance in Kansas shall submit to the director of workers compensation detailed information on the type of accident prevention programs offered to the policyholders by the insurance company or to the covered entities by the group-funded self-insurance plan, as the case may be. The information shall include:

- (1) The amount of money spent by the insurance company or group-funded self-insured plan on accident prevention services;
- (2) the names, number and qualifications of field safety representatives employed;
- (3) the number of site inspections performed;
- (4) any accident prevention services made available under a contractual arrangement;
- (5) a specification and listing of the premium size of the risks to which accident prevention services were actually provided;
- (6) evidence of the effectiveness of and accomplishments in accident prevention; and

(7) any additional information required by the director of workers compensation.

(e) If the insurance company or group-funded self-insurance plan does not maintain or provide the accident prevention services required by this section, the director of workers compensation shall notify the commissioner of insurance. Upon receiving such notification, the commissioner of insurance shall presume the insurance company or group-funded self-insurance plan knew or reasonably should have known of the violation and shall assess the penalty prescribed therefore pursuant to K.S.A. 40-2,125 and amendments thereto. The secretary shall send the information and results obtained pursuant to subsection (d) to the insurance commissioner who shall widely disseminate information about the program.

(f) The secretary of labor shall employ the personnel necessary to enforce the provisions of this section and shall employ sufficient safety inspectors to perform inspections at job sites or other work places and may audit accident prevention programs of each insurance company or group-funded self-insurance plan which is subject to this section to determine the adequacy of the accident prevention services provided. The safety inspectors shall have the qualifications required for field safety representatives by subsection (a).

(g) The insurance company or group-funded self-insurance plan, and any agent, servant, or employee thereof, shall have no liability with respect to any accident based on the allegation that such accident was caused or could have been prevented by a program, inspection or other activity or by a service undertaken or not undertaken by the insurance company or group-funded self-insurance plan for the prevention of accidents in connection with operations of the employer. This immunity shall not affect the liability of the insurance company or group-funded self-insurance plan for compensation or as otherwise provided in this act.

**KANSAS DEPARTMENT OF ADMINISTRATION
STATE AGENCY ACCIDENT PREVENTION PROGRAM
K.S.A. 44-575 (f)**

(f) There is hereby established the state workplace health and safety program within the state workers compensation self-insurance program of the department of administration. The secretary of administration shall implement and administer the state workplace health and safety program for state agencies. The state workplace health and safety program shall include, but not be limited to:

1. Workplace health and safety hazard surveys in all state agencies, including on site interviews with employees.
2. Workplace health and safety hazard prevention services, including inspection and consultation services.
3. Procedures for identifying and controlling workplace hazards.
4. Development and dissemination of health and safety informational materials, plans, rules and work procedures.
5. Training for supervisors and employees in healthful and safe work practices.

CLAIMS HANDLING PROCEDURES

INTRODUCTION

The Kansas Workers Risk Cooperative for Counties (KWORCC) is a state-qualified workers' compensation program designed to offer its members a powerful mechanism for controlling and minimizing workers compensation expenses. KWORCC provides its Member Counties with up-to-date cost control approaches that offer bottom-line performance that are better than those of the "traditional" insurance companies.

Careful, energetic claims handling is part of the KWORCC cost control approach. In fact, effective claims management is a key to the overall success of the program and its ability to deliver long-term savings to its members.

KWORCC maintains a contract with CORnerstone Risk Solutions (CRS), a professional, Kansas-based third-party claims adjuster for claims services. Beyond this professional service support, the program will depend on the attention and input of Member Counties, with an involvement that some will find different from their "traditional" insurance company environment. By necessity – and for maximum benefit within the self-insured program – Member Counties must become involved in the claims process and must be knowledgeable about their claims.

Close, ongoing communication between KWORCC's administrative office, its Member Counties and the claims adjuster is paramount to KWORCC's success. The quality of service provided to Member Counties by the claims adjuster will depend heavily on the information provided by the county. To be effective, the claims adjuster must know everything about the circumstances surrounding a claim. Most, if not all, Member Counties welcome this chance for meaningful input in the claims handling process.

To help ensure effective claims adjusting, KWORCC has established uniform procedures to be followed by all Member Counties.

CLAIMS REPORTING

Time Requirements

1. All claim forms should be submitted electronically within 48 hours of an occurrence that will or may give rise to a claim (or within 48 hours of the county's first knowledge of such an occurrence).
2. In the event of a serious loss such as a death, amputation, head injury, etc., county officials should call the claims administrator's office immediately and follow up with the necessary forms later.
3. The KWORCC program has provided for legal representation as part of the program cost when required; therefore, if the county receives certain demand letters, requests for information concerning a filing with the Workers Compensation Division, notice of hearing, petitions

or other such documentation, do not delay in sending them to KWORCC's claims adjuster at CRS.

Where to Report

All claims, suits, injuries or losses are to be reported directly to KWORCC's claims adjuster at CORnerstone Risk Solutions as follows:

CRS %Tina Cox
8200 SE. 32nd Street North
P.O. Box 2992
Wichita, Kansas 67201-2992
1-800-288-6732
Emergency Claims Line: 1-316-266-6524
tina.cox@corisksol.com

Employers Report of Accident

Online accident report can be found at <https://www.cornerstoneclaims.com/>

SENDING ADDITIONAL INFORMATION

All information and documentation such as hospital/ doctor reports, inspection reports or interval investigations may not be available in time to send the information with the claim form.

As a claim matures and you develop or receive additional information such as doctors' reports, medical bills, applications for hearing or suit papers such as summonses and petitions, send these to KWORCC's claims adjuster at CRS.

When sending this information, it must be properly identified so that it will be matched to the correct file and handled promptly. In order for the claims adjuster to promptly find the correct file, he or she must know the name of the claimant, the date of loss, and the Member County involved.

CLAIMS MANAGEMENT

Introduction

The reporting of claims is only a small part of the procedure required to properly handle claims; KWORCC's claim procedures would not be complete without a section on claims management. Although the claims adjuster will ultimately administer and pay claims, there are many things the Member County can do to help assure proper management.

It is KWORCC's policy to pay only those claims for which the member is legally obligated as promptly as possible, after adequate investigation. In order to accomplish this, the following claims management procedures are divided into three parts.

1. **Pre-occurrence.** Pre-occurrence handling procedures deal with those things the county can do before an incident occurs in order to be prepared for the handling of a claim. This includes such things as informing all employees to report all incidents and to whom (designated individual or department), no matter how minor, and establishing procedures to investigate and process all reports.
2. **Occurrence.** Occurrence handling procedures deal with those things the county must do once an incident occurs, in order to obtain the necessary facts and data, avoid additional liability or damage, set the injured employee at ease and properly process the claim. This will include such things as the use of proper forms, obtaining police reports, supervisors' investigation and legal counsel.
3. **Post-occurrence.** Post-occurrence handling procedures deal with those things the member must do after the claim has been reported in order to maintain contact with the claims adjuster, continue the flow of the new or additional information, further control costs and obtain updated information concerning the status of the claim.

Workers Compensation

Pre-occurrence. Files should be maintained on every employee to include: (1) employment application; (2) group health and disability claims; (3) prior workers compensation claims; (4) violations of safety rules and (5) attendance information.

Pre-select a local medical facility for proper treatment and diagnosis. The employer has the right to choose the physician, not the employee. The employee may go to a physician of his or her choice, but at the employee's own expense. (Subject to the law's allotment of \$500 in unauthorized medical).

At the employee's orientation, he or she should be informed to report all incidents – no matter how minor – immediately, including to whom the injury is to be reported.

Occurrence

1. Medical treatment:
 - a. Administer first aid on site.

- b. Refer to competent doctor or medical facility. Consider the use of a “Med-Stop” or “Med-First” type facility for minor injuries.
2. Reporting of the claim:
 - a. Submit a claim electronically at <https://www.cornerstoneclaims.com/>
 - b. Call KWORCC’s claims adjuster at CRS immediately for claims involving serious injuries.
 - c. Never accuse an employee of malingering or faking.
 - d. Notify the family in the event of serious injury.
 - e. Preserve evidence.

Post-Occurrence

1. Discuss with the employee:
 - a. Present condition or progress
 - b. Return-to-work date
 - c. Complaints on treatment
 - d. Bills received or not paid
2. Discuss with the doctor:
 - a. Status
 - b. Return-to-work date
 - c. Employee’s job description
 - d. Light duty
3. Communicate with KWORCC’s claims adjuster at CRS:
 - a. All of the above information
 - b. Return-to-work notification
 - c. Any additional claim investigation facts

GETTING STATUS INFORMATION

During the life of a claim, you may need to know its current status. There are three ways to obtain information regarding the status of a claim.

1. Review the quarterly Loss Claims Report provided to each Member County by KWORCC. If there has been activity such as opening a file, closing a file, payments made or reserve changes, the claim will be listed individually in these reports. If you only want to know if the claim is open or closed this is the best way to check on it.
2. If the Loss Claims Report does not tell you what you want to know, write a short letter and send it to the claims adjuster. The adjuster handling the claim will respond to your questions. If a claim has been open for some time with no apparent activity and appears to be dormant, this is the best way to be brought up to date.
3. If you need information more promptly than by using the above procedures, call the claims office and ask to speak to the adjuster who is handling the claim. If a bill has not been paid and you want to know why, this is the best way to find out.

WHERE TO GET FORMS

All forms may be obtained from the KWORCC office at:

KWORCC
700 SW Jackson, Suite 200
Topeka, KS 66603
Phone: (785) 357-1069 • Toll Free: 1-877-357-1069
FAX: (785) 233-5440

or KWORCC's claims adjuster, CRS, at:

CRS %Tina Cox
8200 SE. 32nd Street North
P.O. Box 2992
Wichita, Kansas 67201-2992
1-800-288-6732
Emergency Claims Line: 1-316-266-6524

or by printing them directly from the "Forms" page of the KWORCC website.

MEDICAL CASE MANAGEMENT

FIRST AID TREATMENT

It is strongly recommended all employees be given the opportunity to become certified in first-aid/CPR techniques. The other key area of medical training for county employees is bloodborne pathogen safety procedures. In either case, proper first-aid and biohazard cleanup kits need to be readily available in every county building and vehicle. If proper first-aid is given at the time of an injury, the effect of the injury can be minimized and further medical treatment may not even be necessary. If treatment by a physician is necessary, the following areas should be considered.

MEDICAL AUTHORIZATION

Instruct employees to get authorization from their immediate supervisor prior to seeking medical attention, unless it is an emergency situation. Instruct employees that if they are unable to contact a supervisor and feel they need to seek treatment by a physician for a work-related injury, they need to inform their supervisor as quickly as possible thereafter. A form the employee could take to the treating physician with him or her may be used for authorization purposes, if the county so desires. A copy of that form is provided at the end of this section.

DESIGNATED PHYSICIAN

Kansas employers have the right to direct medical care for employees. Exercise of such control immediately upon notification of an accident is a significant part of a medical case management program. A KWORCC claims adjuster will work with each Member County to establish a designated physician or physicians. The designated physician, or group of designated physicians, will be the first point of medical contact for an injured employee. The designated medical provider will be able to provide a high quality of medical care at a reasonable cost while maintaining a clear understanding of the county's need to return the injured employee to work as quickly as possible, in compliance with any medical restrictions deemed necessary by the treating physician.

As long as the State of Kansas allows employers to select the physician for initial treatment, they must exercise this element of control. Employees should be advised to seek the initial care from their county's designated physician prior to seeking care from a chiropractor. The physician may or may not believe it is necessary to refer the employee to a chiropractor. If a county chooses to allow injured employees to go to the doctor they wish, lost time from the job and certain associated costs may be increased.

RETURN TO WORK PROGRAM

Modified return-to-work programs can substantially reduce the amount of time an employee is off work and thereby reduce the indemnity portion of a workers compensation claim. It is in the best interests of the Member County to have the injured employee return to work as quickly as possible. It is a well established fact that this practice reduces the chances of long-term dependency and abuse of the workers compensation system. (A modified duty form and letter are on the Forms page of the KWORCC website.)

All county supervisors should be made aware that a full release from a doctor is not necessary to return an employee to work if work is available within the limits imposed by the doctor. To reduce the costs of the claim, and keep the experience modification factor of the Member County down, it is important to try to provide some type of meaningful work for an injured employee. A full release from the treating physician will be necessary before returning the employee to FULL duty.

The return-to-work program begins with a detailed job analysis which breaks each job down into its component parts. Consideration should be given to lifting requirements, standing requirements, hours of sitting, changing of positions, repetitive motions required, etc. The job analysis should then provide a basis for comparison to restriction levels the doctor may place on employees following an injury.

The treatment process of the claimant must be continually monitored to determine his or her physical ability to perform the temporary job assignment. Remember, this is a temporary position and is not intended to become a permanent, light-duty work position for an injured employee.

Your main approach with the employee in regard to this program should be that you, as an employer, do care about the employee's progress, and you want the employee to know he or she is an important part of the operation, even if the employee is not able to perform at 100 percent of their physical capabilities.

INJURY FOLLOW-UP

A KWORCC claims adjuster will be making periodic contact with injured county employees. However, it is also important for the employee's supervisor and/or department head to make periodic contact with an employee who is off work due to a workers compensation injury. Such contacts are to let the employee know he or she is missed at work and his or her services are needed back as quickly as possible and to help the employee understand that workers compensation benefits are available automatically, without legal counsel. You can comfort the employee by letting him or her know you are checking to see if the medical treatment is satisfactory and generally let the employee know you care about him or her.

IMPORTANT: It is extremely important that a department head, supervisor or the county workers' compensation coordinator notify the KWORCC claims adjuster immediately when an injured worker returns to work!

INCIDENT INVESTIGATION

Investigation of any accident is an invaluable tool in controlling losses. Each incident must be considered a total loss unless its true causes are objectively determined and all contributing deficiencies are corrected. Thorough investigation, recording and correct follow up of each accident can be time consuming, but these steps are critical if we are to learn anything from the experience.

As quickly as possible after an incident occurs, while the facts are still fresh in everyone's mind, the KWORCC Injury/Incident Investigation form should be completed. (**A copy of this form is included on the Forms page of the KWORCC website.**) The back side of the form should be reviewed prior to filling out the front page. The back of the form helps you to remember what types of questions need to be asked in the investigation process. Also included in this section is a guide for conducting the investigation and a supervisor's self-rating sheet.

Below are several questions that should be considered in most injury investigations:

1. What was the injured person doing at the time of the accident? Was he or she performing his or her assigned task? Was he or she assisting another worker?
2. Was the injured employee working on a task he or she was authorized to do? Was he or she qualified to perform the task? Was he or she familiar with the process, equipment and machinery?
3. What were other workers doing at the time of the accident?
4. Was the proper equipment being used for the task? What was the condition of the equipment?
5. Was the injured person following approved procedures?
6. Was the process, operation or task new?
7. Was the injured person being supervised?
8. Did the injured person receive hazard recognition training prior to the accident?
9. What was the location of the accident? What was the physical condition of the area when the accident occurred?
10. What permanent action could have prevented the accident or minimized it's effect?
11. Had corrective action been recommended in the past but not adopted?

NEAR-MISS REPORTING

Accident investigation does not only apply to injuries and/or property damage—it can and should also be used to learn from “near misses.” A near miss means there is a problem in the

work system which surfaced, but no one got hurt as a result. However, someone might have gotten hurt had it not been for a fraction of a second or some other factor.

Injury analysis proves, in the average case, for every injury accident there are many other similar accidents that do not result in injuries. One study of the problem revealed for every major injury there is an average of more than 300 other opportunities to identify and eliminate the problem. This means a typical group of employees, either because of their repeated unsafe actions or repeated exposure to unsafe conditions, on the average, suffer 300 non-injury accidents and 29 minor injuries before a major, lost-time injury occurs.

Near misses are strong indications that something is wrong. If the causes of non-injury accidents are not remedied in time, they may well result in major injuries. Near misses will have the same causes as injury accidents and therefore can be prevented in the same ways. Both kinds of incidents need to be reported and investigated in the effort to prevent future losses.

The KWORCC Injury/Incident Investigation form can and should be used for reporting near misses as well as injuries. The form has a place to designate whether the report is for an injury or a near miss. The form is located on the "Forms" page of the KWORCC website.

SUPERVISOR'S INVESTIGATION REPORT

Instructions

1. Investigate each accident immediately after it occurs.
2. Return the completed form (found under files/forms and then forms on the website) to the personnel department no later than the work day after the accident occurs.
3. Keep one copy for your department's file.

Using the Form

What Happened?

1. Get all the facts by studying the job and conditions where the accident occurred.
2. Tell what the employee was doing when injured. **BE SPECIFIC.** If the employee was using tools or equipment or handling material, name them and tell how the employee was using them.
3. Tell how the accident occurred. Describe fully the events which resulted in injury. Tell what happened and how it happened. Name any objects or substances involved and tell how they were involved. Give full details on all factors which led or contributed to the accident.
4. Tell what thing directly injured the employee. Name the object that was struck against or struck by. If strain or hernia, name the object that was lifted, pulled, pushed, etc. If injury resulted solely from bodily motion, state the stretching, twisting, etc. that caused the injury.

Why Did It Happen?

1. Describe in detail the condition responsible for the accident. It will always involve one or more of the twelve operations control factors. (**See page 27.**) Be specific in identifying the equipment, material and people involved and how they contributed to the accident.

What Should Be Done?

1. Determine what corrective action is needed to prevent a similar accident in the future. The operations control factors should help determine what should be done.

What Has Been Done Thus Far?

1. State what corrective action has been taken or recommended to the supervisor.

How Will This Improve Operations?

1. State how the corrective action that has been taken or recommended will help prevent accidents.

**A Guide to stimulate questioning in determining the
DIRECT and INDIRECT cause of the accident.**

IF IT APPEARS TO BE

ASK	UNSAFE CONDITIONS	UNSAFE ACTIONS
WHY	<p>did it exist?</p> <p>had no one noticed and corrected it?</p>	<p>was it being done?</p> <p>was it being done this way?</p>
WHAT	<p>caused it to exist?</p> <p>caused it to be involved?</p>	<p>was its purpose?</p> <p>other way could it be done?</p> <p>details could be eliminated?</p> <p>instructions were not followed?</p>
WHERE	<p>was it?</p> <p>was its source?</p> <p>else does it exist?</p> <p>can I find out?</p>	<p>should it be done?</p> <p>else is it being done?</p>
WHEN	<p>did it occur?</p> <p>do similar conditions occur?</p>	<p>should it be done?</p>
WHO	<p>was responsible for it?</p> <p>can give me answers?</p> <p>should take corrective action?</p>	<p>is best qualified to do it?</p> <p>can give me answers?</p> <p>can show me what was being done?</p>
HOW	<p>should it be corrected?</p> <p>can it be avoided in the future?</p>	<p>is the best way to do it?</p> <p>can it (job or detail) be improved?</p>

PAYROLL DATA

Member Counties will need to submit estimated payrolls prior to the beginning of a policy year, on forms provided by KWORCC. The following classifications of employees will be used for these purposes.

National Council on Compensation Insurance Workers Compensation Classification Codes

January 2012 (updated 6/26/2013)

Appraiser's Office

Assistant County Appraiser	9410
CAMA Systems Operator	9410
Chief Appraisal Clerk.....	8810
Clerk I	8810
Clerk II.....	8810
County Appraiser	9410
Data Collector.....	9410
Field Appraiser.....	9410
Field Supervisor	9410
Personal Property Clerk.....	8810
Real Estate Clerk	8810
Sales Verification.....	8810

Clinic & Health Department

Clinic	8832
Home Health (Homemaker Service).....	8835

Commissioners

Administrative Aide.....	8810
Commissioners.....	8810
Mail Room Clerk	8810

Community Corrections

Administrative Aide.....	8810
Clerk I	8810
Department Secretary.....	8810
Director.....	7720

Sergeant – DARE.....	7720
Surveillance Officer	7720

County Attorneys

Assistant Attorney	8820
County Attorney	8820
Diversion Coordinator	8820
Legal Secretary	8820
Office Supervisor.....	8820
Restitution Officer.....	8820
Secretary	8820
Victim Assistance Coordinator	8820

County Clerk

Bookkeeper	8810
Clerk II	8810
Clerk III – Control	8810
Computer Operator	8810
County Clerk	8810
Deputy County Clerk	8810

Emergency Management

Ambulance Attendant.....	7705
Ambulance Service	7705
Assistant Director.....	9410
Clerk II	8810
Emergency Management Director.....	9410
Emergency Medical Technician (EMT).....	7705

General Service

Administrative Aide.....	8810
Assistant County Mapper.....	8810
County Administrator.....	8742
County Cartographer/GIS Coordinator.....	8810
Intern.....	8810
Personnel Director	8810
Planning and Zoning Director	9410
Secretary	8810

Juvenile Corrections

Juvenile Corrections Officer	7720
Sergeant – Juvenile Detention Center	7720

Landfill

Refuse Collection (Transfer Station Operators).....	7590
Sanitary Landfill.....	7590

Park/Noxious Weed Department

Administrative Aide.....	8810
Clerk III.....	8810
Maintenance Assistant	9102
Mechanic B Maintenance Mechanic	9102
Mowers.....	9102
Noxious Weed Laborer	9102
Park Event Assistant.....	9102
Park/Weed Director.....	9102
Senior Chemical Applicator	9102
Sprayer Operator Truck.....	9102
Utility Maintenance Mechanic	9102

Register of Deeds

Clerk II.....	8810
Deputy – Register.....	8810
Register of Deeds	8810

Road & Bridge Department

Administrative Aide.....	8810
Asphalt Foreman.....	5506
Bridge Foreman & Crew	5222
Dump Truck Driver	5506
Engineering Tech II.....	5506
Engineering Tech III	9410
Excavation & Drivers.....	5506
Heavy Equipment Operator.....	5506
Heavy Equipment Operator II	5506
Labor Foreman	5506
Maintenance Supervisor	5506
Mechanic A	8380
Oiler Operator	5506
Public Works Director	9410
Quarry Operators.....	1624
Service Manager	5506
Sign & Traffic Assistant.....	5506
Sign & Traffic Control Coordinator.....	5506
Truck Foreman	5506
Welder/Mechanic A.....	5506
Yard Inventory Clerk.....	5506

Sheriff's Office

Administrative Aide.....	8810
Captain	7720
Civil Process Clerk.....	8810
Civil Process Server	7720
Coroners – Associated with Sheriff's Department.....	7720

Coroners – Separate Operation.....	8832
Corrections Officer.....	7720
Corrections Clerk.....	8810
County Sheriff.....	7720
Court Security Officer.....	7720
Food Service Director.....	7720
Patrol Officer.....	7720
Record & Booking Supervisor.....	7720
Records Clerk.....	8810
Senior Corrections Officer.....	7720
Sergeant.....	7720
Traffic Enforcement Officer.....	7720
Undersheriff.....	7720
Warrants Clerk.....	8810

Treasurer's Office

Accounting Clerk.....	8810
Clerk I – Cashier.....	8810
County Treasurer.....	8810
Deputy Treasurer.....	8810
Tax Clerk.....	8810

Miscellaneous

Airport Operators (not clerks or pilots).....	7403
Auto Garage.....	8380
Buildings (Operations by Owner or Leasee).....	9015
County Employees – NOC.....	9410
Drivers, Chauffeurs and Their Helpers.....	7380
Garbage Works - Solid Waste Disposal.....	7590
Firefighters & Drivers.....	7710
Firefighter – Volunteer.....	7711
Floods – Support Workers.....	9101
Hazardous Household Waste Collecting and Processing.....	7590
Schools – Professionals.....	8868
Sewage Disposal Plant Operation & Drivers.....	7580
Sheriff Reserve.....	7720
Storm Spotters – Volunteer.....	7711

For further information contact the KWORCC office at:

700 SW Jackson
Suite 200
Topeka, KS 66603
Phone: (877) 357-1069
Fax: (785) 233-5440

KWORCC Class Code Descriptions

<u>Description</u>	<u>Code</u>
Accountant	8810
Accounting Clerk	8810
Administration - County	8742
Administrative Aide - Community Corrections	8810
Airport - Groundcrew/Operations	7403
Ambulance	7705
Animal Control/Shelter	8831
Asphalt Foreman	5506
Assistant County Appraiser	9410
Attorneys & All E'ees/Clerical	8820
Attendants - Juvenile Homes	7720
Auditor - Office	8810
Auditor - Traveling	8803
Board - Commissioners	8810
Bridge Foreman	5222
Building Inspector	9410
Building Maintenance	9015
Bus/Van Drivers	7380
CAMA Systems Operator	9410
Captain - Sheriff's Dept.	7720
Cartographer/GIS Coordinator	8810
Cemetery Operations	9220
Chemical Applicator- Parks/Weed	9102W
Civil Process Server	7720
Clerical	8810
Clinic- Medical/No Beds	8832
Clubs - Country, Golf, Fishing	9060
Computer Operator	8810
Cooks - Hospital	9040
Cooks - Jail	7720
Cooks - Restaurant	9082
Cooks - Senior Center	9082
Coroner & Clerical - Separate Operation	8832
Coroner & Clerical - Sheriff's Dept.	7720
Corrections Officer	7720
County Administrator	8742
County Attorney & E'ees/Clerical	8820
County Clerk	8810
County- NOC	9410
Court Security	7720
Crossing Guards	7720
DARE	7720
Data Collector - Appraiser's Office	9410
Detective	7720
Director of Public Works	9410
Director of Recreation	9102
Diversion Coordinator	8820
Doctor- hospital	8833
Doctor ~ clinic/no beds	8832
Dog Catcher	8831
Drivers, Chauffeurs & Helpers	7380
Dump Truck Driver - R&B Dept,	5506
Electrical Inspector	9410

Election Board/Voting Polls	8810
EMT's	7705
Emergency Management Director/ Asst. Director	9410
Engineers	9410
Engineer Tech II - R&B Dept,	5506
Engineer Tech III - R&B Dept.	9410
Excavation/Drivers - R&B Dept	5506
Food Service Director Sheriff's Dept.	7720
Field Appraiser	9410
Firefighters	7710
Firefighters - Volunteer	7711
Garage. Shop/Street & Road	5506
Garage - shop only (police cars)	8380
Garbage Collections	9403
Garbage Dump/Landfill	7590
Garbage Dump - Transfer Station no haul	7590
Garbage Dump - Transfer Station Haul Away	9403
Health Dept - Director in office	8832
Health Dept - Doctor in office	8832
Health Dept - Nurse in office	8832
Health Dept - Clerical in office	8832
Health Dept - Nurse/Doc Away	8835
Health Inspectors	9410
Health Institute	9063
Heavy Equip. Operator- R&B Dept.	5506
Homemaker Services	8835
Hospital - Anesthesiologists	8833
Hospital - Bacteriologists	8833
Hospital - Nurses	8833
Hospital - Nurses Aides	8833
Hospital - Other Employees	9040
Hospital - Physical Therapists	8833
Hospital - Physicians	8833
Hospital - Professional	8833
Hospital - Ambulance Drivers	7380
Household Hazardous Waste	9403
Housing Authority	9033
Information Technologist (IT)	8810
Insect Extermination	9014
Inspectors	9410
Jail - Cooks	7720
Jailer/Prisons	7720
Janitor	9015
Juvenile Corrections Officer	7720
Labor Foreman - R&B Dept.	5506
Laboratory Workers	9410
Landfill	7590
Legal Assistant/Secretary	7720
Library - Librarians/Clerical	8810
Library - Other Employees	9101
Library - Bookmobile Drivers	7380
Lifeguards - Beach	9102
Lifeguards - Pool	9015
Maintenance - R&B	5506
Mapper	8810
Mechanical/Maintenance - Parks/VVeed	9102
Mental Health Administrator	8835

Meter Readers	7520
Mowing - Parks	9102
Mowing - Roadways	5506
Noxious Weed	9102W
Nurse Services	8835
Nurse - Provides Public Training	8835
Nursing Home - all non-clerical	8829
Oiler Operator	5506
Parks & Recreation Activities	9102
Park/Weed Director	9102
Patrol Officer	7720
Personal Property Clerk- Appraiser's Office	8810
Personnel Board	8810
Personnel Director	8810
Planning Board - Officer	8810
Planning/Zoning Director	9410
Playground Aid	9102
Psychologist/Psychotherapist	8833
Probation Officers/Drivers	7720
Public Works Director	9410
Purchasing Board	8810
Quarry Operations	1624
Real Estate Clerk-Appraiser's Office	8810
Records Clerk- Sheriff's Office	7720
Recreation Department	9102
Recycling - Glass & Cans	7590
Refuse Collection/Disposal	9403
Register of Deeds	8810
Rescue Squad - Fire	7710
Reserve Officers	7720
Restaurant NOC - Food/Beverage	9082
Restaurant	9083
Restitution Officer	7720
Sales Verification - Appraiser's Office	8810
Sanitary Landfill Operations	7590
Search & Rescue	7720
Sergeant	7720
Service Manager	5506
Sewage Disposal Plant/Drivers	7580
Sheriff- Officers/Drivers	7720
Sheriff Dispatch: Armed/Other Duties	7720
Sheriff Dispatch: unarmed/no other duties	8810
Sign & Traffic Assist	5506
Sign Installation - Road Signs	5506
Snow Removal/Drivers	5506
Social Workers - Not Police Department	9410
Social Workers - Police-Corrections	7720
Solid Waste (No hauling/collecting)	7590
Sprayer Operator Truck - Park/Weed	9102W
Street/Road. Paving/Repair/Surfacing/Resurfacing	5506
Street/Road - Rock Excavation - Quarry/Drivers	5508
Street/Road - Bridge Work	5222
Storm Spotters	7711
Surveillance Officer - Corrections	7720
Swimming Pool - Public, part of Parks Dept.	9102

Swimming Pool - Public, NOT part of Parks Dept.	9015
Tax Appraiser/ Assessor - Field	9410
Tax Collector - in office	8810
Tax Collector- Traveling	9410
Traffic Director/Enforcement	7720
Traffic Line/Road Marking & Drivers	5506
Transfer Station - Hauling Trash	9403
Transfer Station - No Hauling	7590
Transit Authority	7380
Trash Collection - Hauling Trash	9403
Treasurer's Office	8810
Truant Officer	7720
Truck Foreman - R&B	5506
Undersheriff	7720
Victim Assistance Coordinator	8820
Warrants Clerk paperwork Only)	8810
Warrants Clerk (Serves Warrants, etc.)	7720
Water Operations - Operations/ All Employees	7520
Water Works. Inspector	9410
Weed Department	9102W
Weed Director	9102W
Welder/Mechanic A	5506
Yard Inventory	5506

Kansas Workers Risk Cooperative for Counties (KWORCC) Loss Prevention Program to Increase Advanced Discount

Bronze Discount (1% credit on advanced discount)

- The County shall appoint a Safety Coordinator to coordinate risk management in the county.
- The Safety Coordinator shall conduct, at a minimum, quarterly safety meetings attended by representative(s) from the following departments: Sheriff, Road & Bridge/County Engineer, Noxious Weed, County Attorney, Fire, EMS, County Commissioners, County Clerk, Register of Deeds, Treasurer, Health, Human Resources, Maintenance, Finance and Appraiser. All department heads are expected to attend at least three meetings annually. The department heads are responsible for requiring the appropriate number and types of individuals to attend the meeting. The more, the better.
- The Safety Coordinator, or their designee, shall conduct annual safety inspections of all county owned buildings. The building inspection sheet shall be satisfactory to KWORCC, and the inspection report submitted to KWORCC.
- The county shall demonstrate that corrective action was taken for problems shown during the building inspections.
- The County will have an attorney approved employee handbook with up-to-date job descriptions.

Silver Discount (1 ½% credit on advanced discount)- The County meets the requirements of the Bronze Discount, **PLUS:**

- The Safety Coordinator shall conduct one training program per quarter. The training program shall cover a loss prevention topic pre-approved by KWORCC, and shall have a class size of a minimum of ten county employees. A class roster shall be sent to KWORCC quarterly, which will have the signatures of the participants.
- The County will have a Safety Committee who will meet quarterly to review, evaluate and make recommendations concerning losses. Minutes of the Safety Committee meeting will be sent to KWORCC as soon as completed.
- The County will have an attorney approved policies and procedures manual in place.

Gold Discount (2% credit on advance discount)- The County meets the requirements of the Silver Discount, **PLUS:**

- The Safety Coordinator shall either hold a completion certificate for Associate in Risk Management for Public Entities (ARM-P) OR shall successfully complete two courses for the ARM-P designation during the calendar year. For the second option, a report showing the successful completion of two courses shall be submitted to KWORCC prior to the end of the calendar year. As additional incentive, KWORCC will reimburse one half (50%) of costs for the courses taken to obtain the ARM-P certificate.