

WC Check List for Location Administrator

Employee Name:	Date of Injury:
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WC cases can be very complex. Ample collaboration and communication should take place between Location Administrators and the Office for Human Resources.

- Contact Matthew Habana at 858-490-8380 or mhabana@sdccatholic.org regarding a WC case.

When you are **first notified of accident/injury/illness:**

1. For a serious accident or injury, call 911 and contact Human Resources immediately. If the work-related injury or illness results in death, or a hospitalization in excess of 24 hours, then a report must be made to Cal-OSHA (619-767-2280) **within eight hours** of the employer's knowledge.
2. For non-emergency accidents/injuries, the employee should be seen at an occupational/medical clinic.
3. Give employee the **DWC1 form**:
 - Employee completes section I of the Form and returns it to the location administrator.
 - Location administrator completes section II of the Form.
4. Provide employee with a copy of the **Tristar MPN Complete Notification**.
5. Provide employee with a **WC pamphlet**.
6. Complete the **5020 form**. Please complete all sections of the form before submitting to TriStar via fax or email **within 24 hours** from the time you knew about the injury.
7. Complete the **Accident Investigation Report** and submits to Human Resources via fax to 858-490-8272.

Date DWC1 form Provided:

Date Tristar notified:

Date HR notified:

If employee **unable to work** due to accident/injury/illness:

1. Contact HR if an accident/injury results in an employee being unable to work for more than 5 consecutive days at 858-490-8283 who will point you in contact with the person who handles leaves.
2. Place the employee on Leave of Absence in Paylocity.
3. Coordinate sick/vacation pay with WC payments (max 33.33% of normal wages)
4. If necessary, make arrangements to collect benefit deductions from employee at the same level as if he/she is working.
5. Location continues to pay the employer portion of all benefits for the first three months of a leave.
6. Send notice of WC leave to EE and status in Paylocity is changed. EE is to be made aware that:
 - They are to regularly update location with work report status/doctor's notes
 - Benefits remain their responsibility while out on WC leave
 - At 12 Weeks, cost for full benefit coverage becomes their responsibility until returned to work
 - At 6 months, benefits will be dropped per policy

Date notified HR:

Date status changed in Paylocity:

Date WC leave notice sent to EE:

Date notified employee of benefit payments:

If **return to work** is permitted:

1. Review the work status report/doctor's note for any temporary accommodations for the injured EE. Location must determine if it can reasonably accommodate.
2. Reactivate EE status in Paylocity.
3. Ensure appropriate sick time was paid for any days missed due to injury.

Date received Dr Note for return to work:

Date notified HR:

<p>When leave ends:</p> <ol style="list-style-type: none"> 1. Employee obtains a doctor's note releasing him/her to work (full time, part time or modified duty) and submits it to the location administrator. Copy sent to HR. 2. Place the employee on active status in Paylocity. <p>Note: If Employee is released to modified or restricted duty, the location must determine if it can reasonably accommodate. If so, employee returns to work with accommodations. If the location cannot accommodate, please notify Human Resources regarding next steps.</p>	<p>Date received Dr Note for release:</p> <p>Date HR notified:</p> <p>Return to work date:</p> <p>Date changed in Paylocity:</p>
<p>Important LOA Dates to Track:</p> <p>First Day of Leave: _____</p> <p>12 Weeks Expire on: _____</p> <p>6 months Expire on: _____</p>	<p>Date 12-Week reminder sent to EE:</p> <p>Date 6-month reminder sent to EE:</p>