

## Injury & Illness Reporting: Reporting an Employee Injury or Illness

This user guide is to provide instructions on how to report an employee injury or illness.

## **Reporter Types & Permissions**

Туре	Role	Permission
Injured Person	<ul> <li>The employee who sustained a job-related injury or illness</li> </ul>	<ul> <li>Create an employee injury/illness report</li> <li>Review/edit own employee injury/illness report(s)</li> </ul>
Supervisor	<ul> <li>The direct supervisor of the injured/ill employee</li> <li>Another supervisor in the injured/ill employee's department</li> </ul>	<ul> <li>Create an employee injury/illness report</li> <li>Review/edit an Employee Injury/Illness Report for any employee they supervise</li> </ul>
Bystander	<ul> <li>Neither the injured/ill employee nor the injured/ill employee's supervisor</li> </ul>	<ul> <li>Create an Employee Injury/Illness Report</li> </ul>

## Navigating the reporting process

- Log-in with your credentials at: https://app.riskandsafety.com/
- Select **Report Employee Injury or Illness** from the **Quick Links** on the right-side of the RSS Platform homepage.
- The report follows a 'wizard' driven process, delivering questions and responses relevant to the person reporting the Injury/illness
- Click Start to begin
- If a location has an associated organization/domain (i.e. Medical Center), the choices are presented here for accurate routing.



- If known, enter as much information as possible related to employee
- Once a **blue action** button is selected, the entered information is saved.
  - The back button can be used to return to any completed report section for edits prior to submission.
- Select Continue to proceed
- All questions and sections indicated by a red asterisk are required by the reporter in order to proceed
- Enter the **Date and Time** the injury/illness occurred. If uncertain, please estimate.
- The calendar and clock icons will facilitate entry. Both selectors will default to current date/time.
- Provide any location details for where the incident occurred. For events occurring outside, please include nearest building or physical landmark in the description
- Building search/selector displays location's facilities database information
- Incident details are required including any possible exposure, injury/illness description and general area(s) of body injured or affected. If known, enter as much information as possible.
- Enter if injured person received medical treatment. Hover over the information bubble for definition of "medical treatment"
- When selected, medical treatment and treatment provider options specific for the location are provided in the dropdown
- If no medical treatment is obtained, no further information is required for this section.
- Indicate if any other person(s) were injured in the incident. If so, please enter the individual(s) names. This is a free text field and does not have search functionality nor is restricted to employees only.
  - **<u>Note</u>**: All injured person(s) are responsible for reporting their own injury/illness.
- Enter names of any witnesses to the incident. This is a free text field and does not have search functionality nor is restricted to employees only.



- If no other person(s) were involved, no further information is required for this section.
- The employee injury/illness report is now complete. Please review the information displayed for errors or missing entries.
- If needed, the **Back** button may be used to correct or revise previous sections before submission
- Select **Submit** to complete the injury/illness report
- A confirmation message will display, including an active **hyperlink** to the report and will be routed to the appropriate representative for further processing.
- Submitted employee claims can be viewed in the **Workspace** section located on the RSS Platform homepage.

For questions regarding the injury/illness reporting process or specific employee claims, please contact your location Workers' Compensation office for assistance.