ALAMEDA COUNTY SHERIFF'S OFFICE DETENTION AND CORRECTIONS POLICY AND PROCEDURE	**NUMBER:** 3.16	**PAGES:** 1 of 2
	RELATED ORDERS: G.O. 3.03, 3.05 MOU Alameda County Sheriff's Office Safety Manual	
	ISSUED DATE: July 1, 1989	
	REVIEW DATE: December 23, 2015	
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CHAPTER: Personnel	**SUBJECT:** Occupational Injury/Illness or Long Term Illness	

I. **PURPOSE:** To establish policy and procedure by which personnel report occupational injury, illness and non-work related long-term illness, to ensure proper and timely issuance of benefits due the employee.

II. **POLICY:** Any occupational injury or illness, regardless of time lost or no time lost, or any illness which is expected to last more than one (1) work week shall be reported to the Administrative/Personnel Lieutenant via the Chain of Command. This includes exposure to contagious diseases such as hepatitis, tuberculosis or AIDS. In the case of industrial injury, the Administrative/Personnel Lieutenant is to immediately submit a 5020 form (Employer's Report of Occupational Injury or Illness) to the Management Services Division Workers' Compensation Unit Manager. This shall be done within 24-hours, or no later than the first work day after the incident.

III. **DEFINITIONS:**

A. LONG-TERM ILLNESS: Any illness/injury requiring more than one (1) work week sick leave.
B. OCCUPATIONAL ILLNESS: Any sickness that occurs as a result of performing your job.

IV. **PROCEDURE:** The Administrative/Personnel Lieutenant will be the liaison between the facilities, Division Commanders and the Management Services Division. The Administrative/Personnel Lieutenant will coordinate and control all industrial injuries/illnesses and non-work related long-term illnesses with the Management Services Division.

A. Any employee who has an occupational injury shall immediately notify his/her supervisor. The supervisor will complete Form 5020 and submit it to the Administrative/Personnel Lieutenant, whether or not time is lost.

B. Any witnesses to the incident will complete Form 5020-W. If the employee will be on temporary, less-than full duty refer to General Order 3.05, "Temporary Assignment to Less than Full Duty."

C. The supervisor shall initiate Form DWC-1 for submission to the Administrative/Personnel Lieutenant.

1. The supervisor shall complete the required areas of Form DWC-1 as outlined on the back of the form and provide the appropriate copies to the employee.

2. The employee completes his/her portion and returns the form to the supervisor.

3. The supervisor shall complete the remaining sections of Form DWC-1 and provide the employee with the copy labeled Employee's Permanent Receipt.

D. Refer to General Order 3.03, "Occupational Injury/Illness or Other Long-Term Illness" for complete details on occupational injury/illness procedures.

E. Logs of industrial illness/injury will be distributed by Risk Management, ***annually***. The logs will be maintained by the Administrative/Personnel Lieutenant for inspection by OSHA inspectors.

1. The log ***shall be*** posted ***for the period of February 1st through April 30th of each year, as designated by CalOSHA.***

2. Logs must be kept on file and only discarded and replaced upon receipt of the next most current log from Risk Management.