

REU Field Ops Accident and Injury Reporting Procedures

In the event an accident and/or injury occurs while on the job, the following guidelines will enable the Roadside Environmental Unit to respond to the employee, departmental and outside agency requirements. Field Operations Engineer and Field Operations Technicians should utilize the Division support in their respective areas to insure timely reporting of incidents and completion of forms.

NOTIFY YOUR SUPERVISOR IMMEDIATELY OF ANY ACCIDENT OR INJURY.

Note: Disciplinary action to employees for accidents is at the discretion of the supervisor, according to NCDOT policy and procedures.

POST ACCIDENT DRUG TESTING

Controlled substance and alcohol test are to be conducted following ANY ACCIDENT an employee is involved in while on duty where:

- A life was lost
- If operating a motor vehicle, the NCDOT driver was cited for a moving traffic violation and individuals were transported for medical treatment.
- If operating a motor vehicle, the NCDOT driver was cited for a moving traffic violation and a vehicle involved was disabled and removed from the scene by other than its own power.

For equipment accidents only:

*Employee must notify the police or Highway Patrol immediately for any accident involving a private vehicle or private property. Attach a copy of the report from the law enforcement agency to the completed accident report package.

The following forms are required:

- Form 140 Equipment Accident and Property Damage Report (*NCDOT Workplace Safety Manual Chapter 7*)
- Form I-1 Employee Statement (also, one I-1 must be filled out for each witness of the incident)
- Form I-2 Incident Investigation (Investigation team to complete)
 - *As soon as possible after an incident occurs, an investigation team consisting of the Unit Supervisor, employee supervisor, the involved employee and a peer of the employee will review the incident and fill out the Form I-2. Efforts must be made by this team to identify the root cause of the incident to aid in the prevention of similar incidents in the future.*
- Copy of the Police/Highway Patrol Report
- Notify Travelers Insurance (1-800-238-6225) only if damages to private vehicles, private property, or injuries to private parties. Information on the Form 140 will be needed by Travelers for their records. The Division Safety Officer and Division Clerical Staff will be able to assist you in properly completing the forms and in notifying Travelers.
- Take photographs of the accident, damages to DOT and Private vehicles/property, as well as any other relevant aspects of the accident scene.

For Equipment Accidents with Personal Injury, No Lost Time:

Utilize all of the above forms plus the **Form 19 Personal Injury Report** from the Industrial Commission. By law, the Form 19 must be filled out by the supervisor and turned into the Industrial Commission within 5 days of the incident. Form 19 can be faxed by the Division staff through the proper channels and the entire packet submitted as hard copies to follow. Additional forms such as **Work Ability Evaluation** and **Authorization to Return to Work** must be filled out by the Preferred Provider. Since NCDOT pays the bills for WC claims, it has the right to choose the doctor. Each Division will have these forms available as well as a list of local Preferred Providers for you to utilize for treatment of minor injuries. Serious injuries should be treated at the emergency room at a local hospital or an ambulance should be called. **For workplace injuries, never present your State Health Insurance card or private coverage insurance cards. Injury claims are to be handled completely through the Workers Compensation process and are paid by NCDOT.**

For Equipment Accidents with Personal Injury and Lost Work Time:

Utilize all of the above forms with the addition of **Form 19S Return to work Notification (Form RTW)**. Form 19S is to be turned in when the employee returns to work after being absent due to an on the job injury.

Where to find the forms?

Information, instructions and **ALL** of the applicable forms noted above can be found on the Worker's Compensation website at: <https://inside.ncdot.gov/Business/Pages/Workers'%20Compensation.aspx>

- Other related forms such as Form 26, MARTW, WC 94RT, Form 93RI, and Preferred Provider List that may be required can also be found at this location.

Other Helpful sites:

[https://inside.ncdot.gov/Business/Safety%20and%20Risk/Workplace%20Safety%20Operations%20\(SOP\)%20Manual.pdf](https://inside.ncdot.gov/Business/Safety%20and%20Risk/Workplace%20Safety%20Operations%20(SOP)%20Manual.pdf)

<http://www.ic.nc.gov/claimants.html>

<http://www.ic.nc.gov/forms/form19.pdf>

Note: Worker's Comp claims are now managed by the private company "Corvel", however DOT still has a small staff to oversee the program. Call the DOT-WC Staff at (919) 662-3086 ext. 405, if more information is needed or to answer specific questions.

In the case of workplace injuries and Workers Comp claims, employees are recommended to stay abreast of the process and their options. DOT is interested in reducing WC payouts by having employees return to work ASAP either on full duty or limited duty. If an employee is cleared to return to work either on full or limited duty and chooses to remain out of work, the employee would have to use their own sick or vacation leave or other eligible leave. While out of work on WC, employees meet a 7-day waiting period (available leave or LWOP), then the WC salary benefit is 2/3 of regular salary.

ONCE A PACKET OF THE ABOVE FORMS IS COMPILED, THE PACKET IS TO BE SENT TO THE UNIT SUPERVISOR FOR FURTHER PROCESSING WITHIN 5 DAYS FOR ACCIDENT AND 3 DAYS FOR ANY INJURIES.