NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
329

EMPLOYEE WORK-RELATED ILLNESS/INJURY
OR OCCUPATIONAL DISEASE

Supersedes: AR 329 (08/13/10); and AR 329 (Temporary, 08/11/14)
Effective Date: 09/16/14

AUTHORITY:

NRS Chapters, 212, 616, and 617; NRS 209.131; NAC 284.600,
284.718; NAC Chapter 617; OSHA 29 CFR 1910.1030; SAM 0524

RESPONSIBILITY

The Department is responsible to provide emergency medical care, including
transportation, to injured employees.

The Department is responsible to prepare and submit mandated workers’ compensation
forms to the insurer.

The Department is responsible to display the Department of Business and Industry,
Department of Industrial Relations’ D-1 poster.

The Department is responsible to advise its employees of the name, business address and
telephone number of its insurer or third party administrator’s adjuster for their workers’
compensation claims that is located nearest to the Department’s place of business for
their workers’ compensation.

The Department is responsible to schedule physical examination for those employees
defined in NRS 617.135. The Department shall pay for the physical examinations and
any additional diagnostic testing related to the physical examination.

The Department shall inform in writing the employee, any warning from the examining
physician, determined by the employee’s physical examination, indicating that the
employee has a predisposition to the contraction of a disease of the heart and/or lungs.

The Department is responsible to develop a written exposure control plan to eliminate or
minimize occupational exposure to bloodborne pathogens.
The Department is responsible to make the hepatitis vaccine available to all employees who are identified at risk for an occupational exposure to blood or other potentially infectious materials.

The Department shall participate in the Governor's Early Return to Work Program.

The Department's loss control coordinator is responsible to administer, coordinate, manage and supervise the work related illness/injury program.

The Department's disease control specialist is responsible to ensure inmate blood testing has been performed post exposure.

329.01 REPORTING PROCEDURES

1. An injured employee is responsible for completing a "Notice of Injury or Occupational Disease", (C-1) within 24 hours of the incident. The injured employee shall provide the form to their supervisor.

2. An injured employee is responsible for completing the "Leave Choice Option" form and providing the completed form to their supervisor within 24 hours of the incident.

3. The supervisor shall complete the "Employer's Report of Injury", (C-3). This form shall be faxed to the insurer and the department's loss control coordinator within 24 hours of their knowledge of an occupational injury/disease. The supervisor, after faxing the document, shall provide the C-3 to the worker's compensation liaison in their facility.

4. The supervisor is responsible for investigating the incident/accident and completing the workers' compensation investigative report and faxing it to the insurer and the Department's loss control coordinator within 24 hours of their knowledge of an occupational injury/disease. The supervisor, after faxing the document, shall provide the report to the workers' compensation liaison in their facility.

5. After the injured employee has completed the C-1 and Leave Choice Option form, the supervisor shall fax the forms to the insurer and the Department's loss control coordinator within 24 hours of receiving the forms.

6. An injured employee shall provide their supervisor with a copy of the "Doctor's Report of Injury", (C-4), or the "Physician's Progress Report" no later than three (3) days after the medical evaluation.

7. The supervisor shall correctly code the injured employee's timesheet.

329.02 TOTAL TEMPORARY DISABILITY (TTD)

1. Employees injured on the job determined to be temporarily incapable of working, have the option of:
A. Using accrued leave time, sick, annual or comp, or a combination of accrued leave time.

B. Placement on Leave Without Pay (LWOP) and receiving disability directly from the insurer.

2. The Leave Choice Option form is used for this purpose.

A. Employees eligible to use leave time may use their accrued leave time during their absence. This allows the employee to continue to receive a paycheck from the Department.

   (1) The workers' compensation insurer will send the disability check to the Department. The Department payroll section processes the disability check, which puts a portion of the employee's accrued time used back into the employee's leave balance. This process is known as a "buy back".

   (2) Once the "buy back" is processed, the Department payroll section will send a memo to the injured employee with the disability check attached. The memo advises the employee of the amount of time "bought back" and advises the employee that the amount of the disability check will be deducted from future Department paychecks. Employees using their accrued leave time while incapacitated are not allowed to receive a paycheck from the Department and a disability check from the insurer without having the amount of the disability check deducted from a Department paycheck.

B. An injured employee may choose to be placed on LWOP and receive disability directly from the insurer, not utilizing any of their accrued leave time. If this option is chosen:

   (1) The employee does not receive a Department paycheck and

   (2) The employee is responsible for any payments usually deducted from their paycheck, e.g. dependent insurance premiums. The employee must directly pay Public Employees Benefit Program (PEBPS) and/or the appropriate vendor.

3. An injured employee, during their absence, shall contact their supervisor, a minimum of once a week. Their supervisor may require their employee to contact them more frequently than once a week.

329.03 EARLY RETURN TO WORK PROGRAM

1. Employees are to cooperate with the Governor's Early Return to Work program by providing their supervisor with a copy of the C-4 and/or the Physician's Physical
Assessment form. The form shall be provided to their supervisor no later than 3 days of
the medical evaluation.

2. The Department upon receipt of work restrictions, outlined by the health care provider,
will assess the availability of modified duty. To determine if a modified duty assignment
is appropriate, the work restrictions will be compared to the physical requirements listed
in the essential functions of that position.

A. The supervisor upon receipt of work restrictions, outlined by the health care
provider, shall contact the Associate Warden, Department Head and/or loss control
coordinator, to determine if modified duty is available. Modified duty is not
determined by an availability of a “vacant” position.

If it is determined modified duty is not available, in the area/institution the injured
employee is normally assigned, the loss control coordinator will attempt to arrange
modified duty in another Department location or state agency. If the employee is
temporarily placed in another location, to work modified duty, their original budget
number does not change.

B. The injured employee is not allowed to return to work until a modified duty
assignment is available for their review.

C. The supervisor and the employee will review and sign a modified duty agreement
within ten (10) days of starting the modified duty. Both the supervisor and the
employee shall sign the agreement acknowledging the work restrictions, time lines,
and the consequences of exceeding the work restrictions.

D. Temporary modified duty is assigned for ninety (90) days. If after the initial 90
days of modified duty, the doctor continues to provide work restrictions, another 90-
day modified duty assignment will be considered. The determination to provide a
second 90 day assignment is on a case to case basis. However, modified duty cannot
exceed one hundred eighty (180) days (two, 90 day assignments).

E. If a 90 day modified duty assignment is not completed due to a situation related to
the specific work related injury such as a surgery that changes the employee’s work
restrictions, a full 90 day assignment can be provided after the injured employee is
able to return to modified work. Modified duty cannot exceed 180 days total.

329.04 PERMANENT WORK RESTRICTIONS

1. An injured employee no later than three days after a medical evaluation, shall
provide their supervisor with a copy of the C-4 and/or the Physician Physical Assessment
form.
2. The supervisor upon receipt of permanent work restrictions shall contact the Department’s loss control coordinator.

   A. If the employee’s permanent work restrictions are not within the physical requirements outlined in the essential functions of their current position, the employee is not allowed to remain on duty. They are released from duty utilizing their accrued leave time (annual, sick, etc.) or placed on LWOP, per the Leave Choice Option form completed by the employee.

3. The loss control coordinator, the Department Personnel staff, and State Personnel will assess the availability of a position that can be provided to the employee.

   A. This must be an already established position.

   B. The employee must meet the minimum qualifications for that position.

   C. The permanent physical restrictions, outlined by the health care provider, must be within the physical requirements listed on the essential functions of the position.

   D. The employee cannot be placed in a position that will result in a promotion or automatically progresses to a position higher than the employee’s position at the time of the injury/illness. The employee is not restricted from applying for higher level positions or positions that will automatically progress to a position higher than the employee’s position at the time of the injury/illness.

   E. A valid position offer must provide the employee no less than 80% of their gross wages earned on the date of the industrial injury.

   F. The Department may assist the employee with the retirement process if the employee retires in lieu of a job transfer. In some instances, an employee may retire from state service and receive workers’ compensation vocational rehabilitation benefits.

329.05 EXPOSURES – BLOOD BORNE PATHOGENS

1. A supervisor shall immediately release the employee from duty. The employee is to report to the occupational health clinic or nearest medical facility.

   A. A supervisor shall arrange transport for an employee who is unable to transport themself.

2. An employee shall report all work related exposures to their supervisor and complete workers’ compensation forms, C-1 and Leave Choice Option form, within 24 hours of the incident.
3. Supervisors upon notification of an exposure shall complete workers' compensation forms, C-3 and the investigative report. The supervisor is to fax the completed forms to the insurer and the loss control coordinator within 24 hours of their knowledge of the incident. The supervisor shall provide the facility’s workers’ compensation liaison with the original forms.

4. The loss control coordinator shall maintain a log of all exposures.

5. The Department’s disease control specialist and the OSHA compliance officer shall be informed of all work-related exposures.

6. The Department’s disease control specialist shall assure that blood from the source of the exposure is drawn and tested for any infectious disease.

7. The Department’s disease control specialist shall provide the results to the loss control coordinator.

8. Both the employee and the source involved in the exposure will be routinely tested throughout the following year.

329.06 HEART/LUNG INJURIES

1. Employees identified as uniformed police officers in NRS 617.135, may be eligible for workers’ compensation heart and/or lung benefits.

2. The employee must meet the criteria for heart/lung workers’ compensation benefits listed in NRS. 617.455 and 617.457.

3. If, as a result of an employee’s annual physical, the physician indicates the employee is unable to work and refers the employee to a cardiologist and/or pulmonologist to determine if heart and/or lung disease is present, the employee is placed on administrative leave until a diagnosis has been made by the health care specialist.

4. If the physician administering the annual physical outlines temporary work restrictions, the guidelines listed in this AR under Early Return to Work are followed.

5. If heart and/or lung disease is diagnosed by the health care specialist, a workers’ compensation claim is filed.

   A. If a diagnosis of heart and/or lung disease is made by a specialist, any additional time off, after the diagnosis, is coded as workers’ compensation and if appropriate, FMLA.

6. If an employee while working reports symptoms related to their heart, the employee should be released from duty and transported to the nearest medical facility. The
employee should be provided with transportation only if a family member cannot be contacted and transport the employee in a timely manner.

A. If a doctor indicates that an employee is temporarily not able to work, the employee shall use their accrued leave time or be placed in an “unpaid” pay status. (Refer to the completed Leave Choice Option form, if available).

B. If the doctor outlines temporary work restrictions, the guidelines provided in this AR under Early Return to Work shall be followed.

C. If a workers’ compensation claim is accepted and the employee is unable to work per the heath care provider, the guidelines in this AR listed under Total Temporary Disability will be followed.

329.07 CLAIMS MANAGEMENT

1. The loss control coordinator shall routinely review claims for appropriate action and claims costs.

2. Each facility will designate a person, designated by the Warden or Division Head, responsible for obtaining workers’ compensation information and forms. That person shall report workers’ compensation issues to the Department’s loss control coordinator.

3. The Department’s loss control coordinator may attend hearings in order to protect the interest of the department.

4. Any employee who suspects workers’ compensation fraud shall contact the department’s loss control coordinator.

5. Workers’ compensation claim records are confidential and shall be maintained securely and separately from other personnel and medical files.

6. Any employee acting in blatant disregard of safety resulting in injury/illness or resulting in a workers’ compensation claim will be subject to disciplinary action.

329.08 PRESENTATIONS

1. Employees shall be provided workers’ compensation information during the PST academy and refresher classes.

2. Additional workers’ compensation training may be requested by contacting the loss control coordinator.

329.09 OSHA

1. OSHA 300 logs are maintained at each location/facility/camp.
2. OSHA 300A summaries are completed and posted in a conspicuous place once a year, February 1st through April 30th, at each location/facility/camp.

3. OSHA 300 logs and OSHA 300A summaries are to be provided to the compliance supervisor, Safety Specialist 3, no later than January 31 of each year, to be included in the year-end Risk Management’s safety report.

329.10 DEPARTMENT OF LABOR

1. The Department of Labor’s annual report, summarizing the industrial injuries, is completed at the end of the calendar year by the loss control coordinator.

APPLICABILITY

1. This regulation applies to all employees of the Department.

2. This regulation requires an operational procedure.

3. This regulation does not require an audit.

Director

Date

9/17/14