

Incident Checklist for Supervisors

1. Complete the following:

- a. Date of incident:
- b. Time of incident:
- c. Date immediate supervisor was notified:
- d. Date Unit Safety Coordinator was notified:
- e. Date Branch Safety Coordinator was notified:

2. Do the following within 24 hours of the incident:

- a. Have the involved employee(s) complete an "Employee's Statement" (NCDOT Form I-1) and sign it.

3. Do the following within 48 hours of the incident:

- a. Provide a copy of the "Employee's Statement" to the Unit Safety Coordinator for each involved employee.
- b. Provide a copy of the "Employee's Statement" to NCDOT Safety and Loss Control for each involved employee.
- c. Submit the original "Employee's Statement" to the Branch Safety Coordinator for each involved employee.

4. Was an employee injured? (check one)

- YES - proceed to step 5.
- NO - skip to step 10.

5. Do the following within 24 hours of the incident:

- a. Complete the "Employer's Report of Employee's Injury or Occupational Disease" (NCIC Form 19) for each injured employee.
- b. Provide a copy to each injured employee.
- c. Provide a copy to NCDOT Safety and Loss Control for each injured employee.
- d. Provide a copy to the Unit Safety Coordinator for each injured employee.
- e. Provide a copy to the Branch Safety Coordinator for each injured employee.
- f. Submit the original and one copy to the NCDOT Worker's Compensation Unit for each injured employee.

6. Provide all injured employees with the following:

- a. "Medical Authorization/Return to Work" form (Form MARTW2004)
- b. "Employee Use of Leave Options Election" form (NCDOT Form FR-26)
- c. "Workers' Compensation Employee Handbook" (OSP Publication)
- d. "NCDOT Release of Medical Information Form" (Form WC-93RI).

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7. Do the following within 24 hours of the incident:

- a. Have the injured employee(s) sign the "Handbook Receipt" form that they received the "Workers' Compensation Employee Handbook" (OSP Publication).
- b. Provide a copy to the Unit Safety Coordinator for each injured employee.
- c. Submit the original to the Branch Safety Coordinator for each injured employee.

8. Do the following within 5 days of the incident:

- a. Provide a copy of the "Employer's Report of Employee's Injury or Occupational Disease" (NCIC Form 19) to the North Carolina Industrial Commission.

9. Do the following when injured employee(s) return to work:

- a. Complete the "Supplemental Report of Injury" form (NCDOT Form 19-S).
- b. Provide a copy to the Unit Safety Coordinator.
- c. Provide a copy to the Branch Safety Coordinator.
- d. Fax a copy to the NCDOT Worker's Compensation Unit.
- e. Submit the original to the NCDOT Worker's Compensation Unit.

10. Was an involved employee operating a motor vehicle? (check one)

- YES - proceed to step 11.
- NO - skip to step 14.

11. Was the driver cited for a moving violation? (check one)

- YES - proceed to step 12.
- NO - skip to step 14.

12. Was any involved individual transported for medical treatment? (check one)

- YES - skip to step 15.
- NO - proceed to step 13.

13. Was any involved vehicle disabled and removed from the scene by other than its own power? (check one)

- YES - skip to step 15.
- NO - proceed to step 14.

14. Was someone killed? (check one)

- YES - proceed to step 15.
- NO - skip to step 17.

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15. Do the following within 2 to 8 hours of the incident:

- a. Have a post-crash alcohol test performed on the employee operating the motor vehicle.
- b. If a post-crash alcohol test can not be performed within 8 hours, it should not be done.
- c. If a post-crash test can not be performed within 8 hours due to circumstances beyond the employee's control, it must be documented with a copy to the Branch Safety Coordinator and the original to NCDOT's Controlled Substance and Alcohol Program.

16. Do the following within 32 hours of the incident:

- a. Have a post-crash controlled substances test performed on the employee operating the motor vehicle.
- b. If a post-crash controlled substances test can not be performed within 32 hours, it should not be done.
- c. If a post-crash test can not be performed within 32 hours due to circumstances beyond the employee's control, it must be documented with a copy to the Branch Safety Coordinator and the original to NCDOT's Controlled Substance and Alcohol Program.

17. Was a piece of equipment involved? (check one)

- YES - proceed to step 18.
- NO - skip to step 19.

18. Do the following within 48 hours of the incident:

- a. Complete the "Equipment Accident and Property Damage Report" (NCDOT Form 140).
- b. Provide a copy to the Unit Safety Coordinator.
- c. Provide a copy to NCDOT Safety and Loss Control.
- d. Submit the original to the Branch Safety Coordinator.

19. Do the following within 10 days of the incident:

- a. Assemble an Incident Investigation Team.
- b. Complete Parts I, II, and IV of the "Incident Investigation" form (NCDOT Form I-2).
- c. Submit the original of the "Incident Investigation" form (NCDOT Form I-2) to the Branch Safety Coordinator.
- d. Submit the original of this form ("Incident Checklist for Supervisors") to the Branch Safety Coordinator.

Supervisor's Name: _____ Signature: _____

Date: _____