

# The Bureau of Labor Statistic's Annual Survey of Occupational Injuries & Illnesses (SOII): Wisconsin Respondent Guide Part 4 of 4





# Part 4: Submitting Case Detail Information Guide

# **Before You Begin**

To complete this section as quickly as possible, it is helpful to gather all of these materials in advance which pertain to the requested year:

- OSHA 300 log
- OSHA 301 forms
- WKC-12 forms (Worker's Compensation claim form)
- Doctor's reports
- Insurance reports
- Any other documentation available relating to the year's work injuries and illnesses.



### **Before You Begin**

You are responsible for submitting the case detail information for your lost time cases (Column H). Certain industries are **also** responsible for submitting case details on job restriction cases (Column I). These industries include **NAICS** codes that begin with 238, 311, 444, 481, 493, or 623 for the 2013 collection year. **NAICS** codes beginning with 312, 452, 492, 562, 622, and 721 will be responsible for submitting their column I cases in the 2014 collection.

You are only required to submit up to **15 cases total** per establishment. If you have more than 15 cases to report and would like to submit online, a sub-sample will be generated for you by the IDCF system.

If you are submitting your case information using the PDF form or other hard copy, please contact us. Our staff is able to generate a subsample for you.

#### Step 1: The Case

Most of the information requested in the first fields will come straight off your OSHA 300 log or other internal documentation:

- -Name
- -Job title
- -Date of injury
- -Days away from work (DAFW)
- -Days of job transfer/restriction (DJTR)

**Keep In Mind:** Be as specific as possible when providing a job title and use common terms. **Example:** "Core Operator" should be used as opposed to "CO-49".

#### 180 Day Cap

Per OSHA recordkeeping standards, you can stop counting once an employee reaches **180 days**, whether considering days way, days on job restrictions, or a combination of the two.

#### **Special notes:**

We understand that employers may be hesitant to provide information regarding their employees. By law, we are required to keep all personally identifiable information strictly confidential. When examining individual cases, we often have specific questions pertaining to certain cases and can find the answers by viewing the employee's claim in the Worker's Compensation database through the State of Wisconsin. Employers can use "privacy case 1", "privacy case 2", etc. in lieu of names if necessary, so as long as they can identify the case if the State calls with follow-up questions.

# **Step 2: The Employee**

#### Tell us about the employee's:

- Type of work
- Race (optional)
- Date of birth **or** age
- Date if hire **or** length of service
- Gender



Each field represents important demographics that, with analysis, can identify characteristics of employees injured or made ill within specific industries.

**Keep In Mind:** The "type of work" field is used to describe the job duties performed by the employee. If none of the listed categories apply to the employee, please select "other" and provide a brief job description.

## **Step 3: The Incident**

#### Please provide the information as listed in the following fields:

- Was the employee treated in an emergency room (includes Urgent Care)? Y/N
- Was the employee hospitalized overnight as an in-patient? Y/N
- What time did the employee begin work on the date of injury?
- What time did the event occur?
- Did the event occur **before**, **during or after** the work shift?

When entering the shift starts and times of injuries, please be sure to denote AM or PM.

### **Step 4: The Narrative**



The information provided here gives a clear picture of what happened. The components of a narrative can be broken down into four categories:

- Nature of injury/illness
- Part of body
- Source of injury/illness
- Event

Your narrative should address all of these categories, but it does not have to be more than a couple of sentences which can all be included in one field. The next slide gives a few examples.

# **Sample Narratives**

Incorrect Narrative	Correct Narrative
John was working when he fell and landed on his ankle.	John was standing on an extension ladder when he slipped and fell 6 feet to the ground. He was diagnosed with an ankle fracture.
Kathy hurt her back while working with a patient.	Kathy was lifting a patient onto a bed when she sprained her lower back.
Gary was shot by a robber while working behind the register.	While working behind the register, Gary was shot in the thigh by a robber using a hand gun.

Each of these corrected examples specifies what the injury was, what part of the body was affected, the cause of the injury and a description of what happened.

#### **Before You Submit...**

#### Make sure you:

- ✓ Reported for requested location(s) only.
- ✓ Included your name and contact information.
- ✓ Calculated an annual employment number reflects an average, not a total, and includes temporary, contract, and volunteer workers.
- ✓ Verified that all of your injuries are OSHA recordable.
- ✓ Verified that columns G-J are equal to M1-M6.
- ✓ Crosschecked that columns K and L correspond to your individual case information.
- ✓ Included the 4 components of an injury in your narrative (nature of injury, part of body affected, source of injury, and event).

#### **Links and Resources**

To request a fillable PDF form for submitting your survey: <a href="http://www.bls.gov/respondents/iif/adobeforms.htm">http://www.bls.gov/respondents/iif/adobeforms.htm</a> and click on Wisconsin.

For an 8 page sample survey mailing:

http://www.bls.gov/respondents/jif/forms

http://www.bls.gov/respondents/iif/forms/soii2012.pdf

For OSHA recordkeeping forms:

https://www.osha.gov/recordkeeping/new-osha300form1-1-04.pdf

For the Bureau of Labor Statistics Injury, Illness, & Fatality homepage: <a href="http://www.bls.gov/iif">http://www.bls.gov/iif</a>

### **Need Help?**

If you still have questions on any component of the survey, or even if you need help with OSHA recordkeeping, give us a call. We enjoy talking with our respondents!

**Toll free:** 

1-800-884-1273



We are available Monday through Friday, 8 AM to 5 PM. If we miss your call, please leave us a message, and we will respond within one business day.

For more detailed information about the Bureau of Labor Statistics and the Survey of Occupational Injuries & Illnesses, please visit <a href="http://www.bls.gov/respondents/iif/">http://www.bls.gov/respondents/iif/</a>.