

S.A.F.E. Newsletter

INCIDENTS & INJURIES

How to complete an Incident & Injury Form:

1. After an incident, injury, or near-miss has occurred, if needed, **seek emergency medical care** at Student & Employee Health (during office hours) or Emergency Department (after hours).
2. Immediately, **inform your supervisor** and **complete the Incident & Injury (I&I) Form**, use desktop icon or link:
 - a. **Blood or Body Fluid Exposures:**
Immediately call the On-Call Nurse at 501-398-8636.
3. **Click to continue** to the I&I Form.
4. **Complete all fields** in Step 1 and use your Workday #.
 - a. Except if as a patient/visitor.
5. **Complete all fields** in Step 2.
 - a. Indicate any witnesses, if applicable.
6. **Submit the I&I.**
 - a. Receive any follow-up medical care.
7. **Complete Follow-up email** from Occupational Health & Safety Staff.



What is Incident & Injury Reporting?

Incident & Injury (I&I) reporting is a **Required Process** where the **Employee reports:**

- Injuries,
- Illnesses,
- and Near-Misses

during employment to their employer for follow-up and investigation.

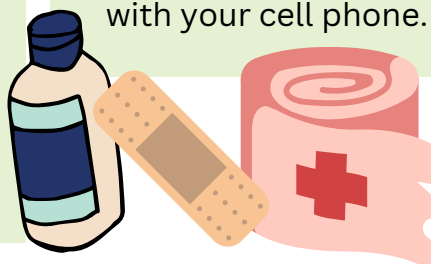
I&I reporting helps by **documenting your incident for healthcare, supervisors, etc.** I&I reporting also identifies the root cause of safety issues, which **prevents severe accidents in the future.**

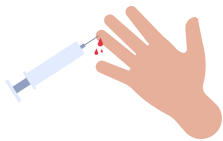
UAMS Policy

The most current policy can be found in UAMS Compliance 360 and outlines the procedure for completing an I&I for students, employees, patients, visitors, and contract workers. The I&I must be completed within 48 hours.

Incident & Injury Form

On your UAMS desktop or scan the QR code with your cell phone.





Reminders & Examples

Incident reporting is important as it creates a culture of safety and ensures that you receive appropriate care and the safety hazard is mitigated. Incident reporting also keeps us aware to potential hazards and creates a culture of improvement.

UAMS Injury & Incident Report

Step 1: Initiate the Injury & Incident Report (must complete within 48 hours).

Note: Can use Desktop Icon or Internet Link.



Step 2: Begin the report.

Note: In this example, we are simulating a fall with no blood or sharps exposure.

Incident / Injury occurred while I was: Employee Student Contractor Visitor / Patient

Last Name of Injured	Emp/Student # of Injured	Date of Injury	Time of Injury	AM/PM
Example	123456	5/15/2023	3:00	PM

Is this incident a sharp object injury?

If needlestick or sharps injury, had the instrument involved been used on a patient?

If needlestick or sharps injury, was the sharp medical device a "safety design" with a shielded, recessed, retractable or blunted needle or blade?

Select type of exposure to someone else's blood or body fluids:

Continue to Step 2

Step 3: Once all fields are complete, Click Continue to Step 2.

UAMS Injury & Incident Report



Step 2 of 2

Injured Information	Manager / Instructor Information	
Incident / Injury occurred as an: Employee	Name:	
Name:	Phone:	
Phone:	Employee ID #:	Email:
Email:		

Date and Time of Incident / Injury: 5/15/2023 3:00 PM

Job title Employee	Category which best describes employee's type of work Office, professional, business or management staff		
Building where injury happened Central Building	Floor 1	Room / Area 101	Other location N/A
Started work 0800	AM / PM AM	Incident occurred during shift	Incident type Fall on same level

Name of object or substance which directly injured the employee

Tripped over crack in floor.

You have 369 of 500 characters left.

What was the employee doing just before the incident occurred? (Describe the activity as well as the tools, equipment or material the employee was using. Be specific.) Examples: "Climbing a ladder while carrying roofing materials." or "Daily computer key entry."

Walking down the hallway.

You have 369 of 500 characters left.

What happened? (How did the injury occur?)

I was walking down the hallway from my office to the clinic and tripped over a crack in the floor and fell onto my hands and knees.

You have 369 of 500 characters left.

Primary injury type Contusion/Bruise	Primary injury area affected Multiple body parts
Other injury type	Other injury area affected

Witness Name

Witness Address

I DID

I DID NOT see a doctor about the injury.

[Submit Injury / Incident Report](#)

Step 4: Continue on the Second Step of the Report.

Note: In this example, we are simulating a fall with no blood or sharps exposure.

Step 5: Document what happened in detail & if applicable, add a witness.

Note: Ensure to include the location and your injuries.

Step 6: Once all information is complete, **Click** submit.

Step 7: Complete Email Follow-Up from the Safety Team

Note: Email follow-up is **required** to complete the I&I Report.

Hi (employee name).

It's Alexander from the Occupational Health & Safety Department. I wanted to take a minute to check on you and follow up on the (insert injury type) you reported back on (insert report date).

Did you seek any medical treatment as a result of this incident? If so, did you have any issues with obtaining treatment?

To ensure compliance with the OSHA recordkeeping regulations, please provide a response within 5 business days so that we can complete our injury and illness reporting process. If I do not receive a response from you I will follow up with your supervisor to complete my report.

Thanks in advance,

