

PATIENT RESTRICTED

Coalinga State Hospital

OPERATING MANUAL

SECTION - HUMAN RESOURCES
ADMINISTRATIVE DIRECTIVE NO. 935
(Replaces AD 935 dated 8/1/2005)

Effective Date: September 7, 2006

SUBJECT: OCCUPATIONAL HEALTH CLINIC

I. PURPOSE

- A. Return injured or ill employees to their jobs as soon as medically feasible.
- B. Provide quality first aid services to injured or ill employees.
- C. Direct and control medical care, including referral to pre-designated community physicians or medical facilities, for the first 30 days following the date of injury.
- D. Evaluate employees' ability to meet the physical or psychological demands of their position, by pre-employment and periodic medical screening.

II. AUTHORITY

Special Order No 904.1 on State Hospital Occupational Health Clinics; State Administrative Manual (S.A.M.), Section 0190 (State Institution Medical and Hospital Services; Labor Code Sections 4600-4603 (re: medical treatment responsibilities of employers, including state); Government Code Section 19253.5; Nurse Practice Act, California Business and Professions Code, Chapter 6, Article 2, Section 2725; California Administrative Code Title 16, Division 14, Article 7, Section 1470-1474; JCAHO Standards Hospital-Ambulatory Care Services; California Code of Regulations Title 22, Sections 71523, 73525,; State Personnel Board Selection Manual, Article 8 Section 172.3; and Americans with Disabilities Act, Title I.

III. POLICY

First aid care, within the capacity of Coalinga State Hospital (CSH) staff, equipment, and materials, shall be provided to employees who sustain occupationally incurred injuries or illnesses. Employees who become ill on duty may be assessed, upon the supervisor's referral, to determine ability to continue assigned duties. Medical screening shall be provided to prospective and continuing employees.

IV. METHOD

- A. Employees are evaluated in the Occupational Health Clinic (OHC) by appointment and upon written referral of their supervisor.

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- B. Recommended employee work limitations, if any, will be documented, delineated and forwarded to the employee's supervisor. OHC staff will contact the supervisor to review and discuss work restrictions.
- C. The clinic is not equipped to treat emergency situations. Employees with severe occupational injuries and illnesses in the hospital are directed to the Urgent Care Room (UCR) for evaluation and initial treatment. (Initial injury/illness is defined as occurring during that work shift.)

V. PROCEDURES FOR OCCUPATIONAL INJURY OR ILLNESS

- A. Minor injuries that require first aid shall be documented in the work location's first aid log and initialed by the area supervisor. Employees who are referred to the OHC for treatment of an injury, that requires only first aid, will be returned to their work area with instructions for treatment and proper documentation.
- B. Employees with occupational injuries or illnesses that are not serious emergencies requiring more than first aid must be evaluated in OHC or UCR prior to the employee leaving the hospital.
- C. After initial evaluation, should the employee require care beyond the scope of services available through the OHC, they will be referred to the appropriate physician or facility.
- D. Employees who have been evaluated by the medical staff in OHC or UCR and it is unclear if the injury or illness is work related shall be referred to their primary care physician for a Worker's Compensation determination.
- E. The Occupational Health Clinic provides follow-up monitoring of employees for all occupational injuries or illnesses as appropriate. All employees evaluated in the OHC and placed off work, or on duty with limitations, are to contact the OHC the next working day to arrange for a follow-up evaluation.

VI. PRE-DESIGNATION OF PERSONAL PHYSICIANS

Employees may be treated by their pre-designated personal physician for occupational injuries requiring more than first aid, provided the following conditions are met:

- A. The employee is evaluated by OHC or UCR and issued a MSO to his/her pre-designated physician prior to leaving hospital grounds and;
- B. The Designation of Personal Physician form (available in the OHC) is completed and on file in the Occupational Health Clinic prior to the occupational injury or illness and;
- C. The pre-designated physician must agree to be pre-designated in writing and have directed their care in the past.

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VII. PRE-EMPLOYMENT, ANNUAL AND INTERVAL PHYSICAL EVALUATIONS

- A. The clinic evaluates each employee, through the use of pre-employment and annual medical screening, to assure that they are able to perform their essential job functions without increased risk of injury or illness to themselves or others. Refer to Administrative Directive No. 936, "Pre-Employment and Annual Medical Examinations."
- B. Case conferences may be initiated by the Occupational Health Clinic for any employee having a continuing medical problem which may impact their ability to safely perform essential functions of their position.

VIII. RETURN TO WORK EVALUATIONS

- A. Each employee will be evaluated prior to returning to work after an occupational injury or a serious non-occupational injury, prolonged illness, or extended absence. The employee's supervisor must make the return to work evaluation appointment with OHC using Supervisor's Referral for Treatment of Employee Injury/Illness, form.
- B. Employees scheduled for a return to work evaluation will be seen during normal business hours by the OHC prior to the first return shift when the return shift is on the night shift, a weekend, or a holiday. Exceptions can be authorized by the Medical Review Officer.



W. T. VOSS
Executive Director

Cross Reference(s):

- A.D. No. 646 – Central Medical Services
- A.D. No. 936 – Pre-Employment and Annual Health Examinations
- A.D. No. 981 – Limited Duty Assignments