
CITY OF WATERBURY
&
WATERBURY BOARD OF EDUCATION



WORKPLACE SAFETY
&
EMPLOYEE INJURY LOSS CONTROL MANAGEMENT PROGRAM

2021 – 2022
PROGRAM EXPECTATIONS
&
RESOURCE GUIDE

Issued April 29, 2021

Workplace Safety & Employee Injury Loss Control Management

2021-2022 Program Expectations

Beginning May 1, 2021, CIRMA will be administering the City's Workers' Compensation Program

We are requesting your ongoing engagement in the City & Board of Education's

"Workplace Safety & Employee Injury Loss Control Management Program"

and ask that you comply with the following Program Expectations.

1. Create, monitor & maintain a safe working environment:

- a. *Perform periodic facility walk-through inspections; Ensure that safety issues are addressed;*
- b. *Review incidents and job functions to determine if additional safety trainings are needed; determine if work safety policies need modification; determine if additional safety attire/equipment is necessary and mandate when such safety attire/equipment should be used.*
- c. *Utilize available resources, review safety protocols, mandate trainings.*

2. Hold monthly safety committee meetings:

- a. *Safety meetings should be chaired by a Department Head, Director or Principal and include participation from your managers/supervisors along with rotating employee representation.*
- b. *Immediately notify Director of Public Works or School Inspector (BOE) of any building/property safety issues that could result in risk of injury to employees/visitors; set a date for follow-up.*
- c. *City Departments - email monthly safety meeting minutes to Safecity@sp.waterburyct.org*
- d. *BOE Schools, etc. – email monthly safety meeting minutes to Safeschools@sp.waterburyct.org*

3. Properly Complete First Report of Injury (FROI):

- a. **Department Head, Principal or Authorized Designee** are expected to properly & fully complete all "First Reports of Injury" prior to submitting the FROI to CIRMA;
- b. *Contact your CIRMA adjuster, Mike LeBlanc, Don LoRusso, Linda Wihbey, Rona Nickerl, Scott Morgan or Lisa Dunn if you have any questions or concerns regarding the FROI or incident.*

4. Investigate All First Report of Injury (FROI) & Complete Supervisor's Accident Review:

- a. **Department Head, Principal or Authorized Designee** are required to investigate each incident, and complete, sign & submit a Supervisor's Accident Review Form fully documenting, validating and evaluating each FROI accident/incident.

5. Monitoring your out of work employee(s) & employee(s) in restricted light-duty status:

- a. **Department Head, Principal or Authorized Designee** should be communicating at least weekly with your employee(s) who are out of work or on restricted light-duty to discuss the employee(s) return to work status and if any issues need to be addressed.
- b. *All employees released into a restricted light-duty work status are expected to be placed in a light-duty assignment, preferably in the employee's home department.*
- c. *CIRMA's Adjusters will meet with you on a regular basis to review the work status of injured employees who are out of work or on restricted light-duty.*

6. Utilize Available Resources:

SafePersonnel Training Online Course Library: <https://waterbury-ct.safepersonnel.com/login>

CIRMA Risk Management : Joey Barbera (203) 946-3745, jbarbera@ccm-ct.org

National Safety Council (NSC) – Defensive Driver Training: smorgan@waterburyct.org

Workplace Safety & Employee Injury Loss Control Management

2021-2022 Program Resource Documents

1. FIRST REPORT OF INJURY INSTRUCTIONS & GUIDELINES

- a. Instructions & Guidelines
 - i. CIRMA's online *ClaimCentral Reporting Portal*
 - ii. *When an at-work injury occurs...*
 - iii. *Important things to consider when completing the First Report of Injury (FROI)*
- b. *CIRMA Injury Reporting Worksheet (keep on file – do not submit to CIRMA)*

2. SUPERVISOR'S ACCIDENT REVIEW FORM INSTRUCTIONS & GUIDELINES

- a. Instructions & Guidelines
 - i. Submission of completed forms
 - ii. If you suspect workers compensation fraud
- b. Supervisor's Accident Review Form

3. CIRMA – RESOURCES

- a. *CIRMA Client Team Contact List*

4. SAFE-PERSONNEL TRAINING – ONLINE COURSE LIBRARY

- a. *SafePersonnel Training Course Library: <https://waterbury-ct.safepersonnel.com/login>*

5. SAFETY MEETING REQUIREMENTS

- a. *Submission requirements*
- b. *Sample Agenda*

6. OSHA RECORDKEEPING GUIDELINES

- a. *Overview, Recordkeeping Reminders, Websites*
- b. *Recording Criteria Decision Tree*
- c. *Completing OSHA Log – Form 300*

7. WORKERS COMPENSATION MEDICAL CARE PLAN - CIRMAcare

- a. *Notice to All Employees*
- b. *Frequently Asked Questions*
- c. *Medical Care Plan Provider Specialty Index*
- d. *City of Waterbury and Waterbury Board of Education Medical Network*

FIRST REPORT OF INJURY INSTRUCTIONS & GUIDELINES

a. Instructions & Guidelines

- i. CIRMA's online ClaimCentral Reporting Portal*
 - ii. When an at-work injury occurs....*
 - iii. Important things to consider when completing the First Report of Injury (FROI)*
- b. CIRMA Injury Reporting Worksheet (keep on file – do not submit to CIRMA)*

First Report of Injury Instructions & Guidelines

Proper and full completion of the first report of injury is most important and required of every incident resulting in the filing of a first report of injury.

The first report of injury should be submitted as soon as possible following the injury, preferable no later than 24 hours following the accident/incident. The description of the accident/incident is the single most important aspect of the first report of injury. Authorized Department Head/School Principal users should log onto CIRMA's online *ClaimCentral* reporting portal at:

cirmaclaim.org

Help us help you

Report loss as soon as possible. The earlier you report a loss to CIRMA, the earlier they can help. First reports of injury can be reported 24 hours a day, 7 days a week.

When an at-work injury occurs...

1. Employee immediately reports injury to his/her Supervisor.
2. Employee is referred for initial medical treatment to:

Saint Mary's Occupational Health and Diagnostic Center

1312 West Main Street, Waterbury, CT (203) 709-3740

3. Department Head/School Principal promptly reports the injury to CIRMA.

Important things to consider when completing a First Report of Injury (FROI):

1. Event Date/Time
2. Report and Location Information
3. Claimant (injured employee) Information
 - a. Be sure to list a valid phone number for the employee so that he/she may be contacted by the assigned CIRMA adjuster
4. Department Head/Principal Contact Information
 - a. Be sure to list a valid phone number for the Department Head/Principal of the injured employee so that he/she may be contacted by the assigned CIRMA adjuster
5. Incident Information
 - a. Description of Injury, Cause, Body Part, Nature Code
6. Additional Information
 - a. Job Classification Code
 - b. Time the employee began work on the day of the injury
 - c. Supervisor notice date

CIRMA Injury Reporting Worksheet

Keep this worksheet for your own records – do not submit to CIRMA.

Event Date/Time

Incident Date: _____ Incident Time: _____ Employer Notified: _____

Reporter and Location Information

Reported By: _____ Title: _____ Phone: _____

Location Code: _____ Location Name: _____ Address: _____

Claimant Information

Claimant Name: _____ Social Security Number: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____ Date of Birth: _____ Gender: Male Female

Marital Status: Select Status From List

Job Title: _____ Work Status: Select Status From List

Claimant's Supervisor: _____ Title: _____ Phone: _____

Incident Information

Description of Injury: _____

Cause: Select Cause From List Body Part: Select Body Part From List

Nature Code: Select Nature Code From List

Medical Provider: _____ Name of Doctor: _____
(if known) (if known)

Medical Provide Address: _____

Witness Information (if any): _____

Lost time from work: _____ Return to work date: _____
(if known)

Lost Location Entity: _____

Address: _____

Contact Person: _____ Phone: _____ Email: _____

Additional Information

Job Classification Code: _____

Time the employee began work on the day of the injury: _____

Supervisor Notice Date: _____ Claim Incident Number: _____



***SUPERVISOR'S ACCIDENT REVIEW FORM
INSTRUCTIONS & GUIDELINES***

a. Instructions & Guidelines

i. Submission of completed forms

ii. If you suspect workers compensation fraud

b. Supervisor's Accident Review Form

Supervisor's Accident Review Form Instructions & Guidelines

Proper and full completion of a first report of injury Supervisor's Accident Review form is now required of every accident/incident resulting in the filing of a first report of injury. The expectation is that the Supervisor's Accident Review Form will be completed promptly as part of preparing the first report of injury or immediately thereafter.

Email Rona Nickerl at rnickerl@waterburyct.org to request a PDF fillable Supervisor Accident Review Form. Enclosed is a copy of the fillable PDF form for reference purposes.

Submission of Completed Supervisor Accident Review Form

For each first report of injury, the completed and signed Supervisor Accident Review Form shall be PDF emailed to:

CIRMA:	Sean Gaffney at sgaffney@ccm-ct.org
Corporation Counsel:	Rona Nickerl at rnickerl@waterburyct.org
CITY HR:	Scott Morgan at smorgan@waterburyct.org
BOE HR:	Lisa Dunn at ldunn@waterbury.k12.ct.us
Finance:	Don Lorusso at dlorusso@waterburyct.org

Contact your CIRMA Adjuster or Rona Nickerl in the City's Corporation Counsel's Office if you have any questions or concerns regarding the FROI accident/incident, completion of the Supervisor's Accident Review form or to discuss obtaining witness statements.

Rona Nickerl
Investigations Specialist
Office of the Corporation Counsel
rnickerl@waterburyct.org
T: 203.574.6731 x7047

If you suspect workers compensation fraud

Call CIRMA's Special Investigation Unit at [203.946.3797](tel:203.946.3797) or email cirmasiu@ccm-ct.org.

City of Waterbury



SUPERVISOR'S ACCIDENT REVIEW FORM

(To be completed by employee's Department Head/School Principal or other designated administrative official)

Location where accident occurred: _____ Date of accident or illness: _____ Time of accident or illness: _____ a.m. p.m.

Who was injured? _____ Employee Non-employee Employer's Premises? Yes No Job site? Yes No

Length of time with organization: _____ Job title or occupation: _____ Name of department normally assigned to: _____

How long has employee worked at job function where injury or illness occurred? _____

What was employee doing when accident/illness occurred? _____

What machine or tool was being used? _____ What type of operation? _____

How did the injury/illness occur? List all objects and substances involved: _____

Which body part(s) affected/injured? _____ Any prior physical conditions? Yes No

If prior physical conditions, describe: _____

Nature and extent of injury/illness and property damaged (be specific): _____

Please check off any of the following conditions which contributed to the accident or illness.

- Failure to lockout Improper instruction Physical or mental impairment Unsafe arrangement or process
- Failure to secure Improper protective equipment Poor housekeeping Other (please explain below)
- Horseplay Inoperative safety device Poor ventilation _____
- Improper dress Lack of training or skill Unsafe equipment _____
- Improper guarding Operating without authority Unsafe position _____

Supervisor's corrective action to ensure this type if accident does not recur: _____

Was the employee trained in the appropriate use of Personal Protective Equipment and proper safety procedures? Yes No

Was the employee cautioned for failure to use Personal Protective Equipment and proper safety procedures? Yes No

Did the employee promptly report the injury/illness? Yes No

Supervisor's Name: _____

Phone: _____

Supervisor's Signature: _____

Date: _____

CIRMA – RESOURCES

a. CIRMA Client Team Contact List

CIRMA Claims Team Contact List

CIRMA Adjusting Team and Department Assignments

Name	Role	Phone	Email
Michael Gillon	Account Manager	203-946-3729	mgillon@ccm-ct.org
Sue DeSorbo	BOE	203-498-3084	sdesorbo@ccm-ct.org
Gail McClellan	Gen Govt Departments (except Police & BOE)	203-946-3721	gmcclellan@ccm-ct.org
Fred Greene	Police Dept.	203-946-3732	fgreene@ccm-ct.org
Anthony Cerra	Medical Only – All Depts.	203-946-3742	acerra@ccm-ct.org

Main Switchboard:

(203) 946-3700 or (800) 526-1647

www.cirma.org



SAFE-PERSONNEL TRAINING – ONLINE COURSE LIBRARY

- 1. Online program access to safe personnel trainings and other resources:**

<https://waterbury-ct.safepersonnel.com/login>

- 2. All City & BOE employees have access to safety training programs and other employee safety resources.**
- 3. Contact Don LoRusso at (203) 574-6756 if you need assistance with login.**

 **safePERSONNEL TRAINING** (<https://waterbury-ct.safepersonnel.com/training/assignments>)

Powered By  **VECTOR**
(<http://www.vector-solutions.com/>) Suite ▾



EMERGENCY MANAGEMENT	Author	Length	Available in Spanish	Coming Soon
Active Shooter (<i>Staff</i>)	Dorn & Nguyen	36 mins		
Active Shooter (<i>Supervisors</i>)	Dorn & Nguyen	41 mins		
Emergency & Disaster Preparedness	Michael Dorn	33 mins		

EMPLOYMENT PRACTICES/SUPERVISORY	Author	Length	Available in Spanish	Coming Soon
Conducting Job Interviews	Catherine Mattice	24 mins		
Discrimination: <i>Avoiding Discriminatory Practices</i>	Catherine Mattice	29 mins		
Managing Difficult Behaviors	Catherine Mattice	18 mins		
Performance Evaluations	Catherine Mattice	24 mins		
Reasonable Suspicion for Drug & Alcohol Use in the Workplace	Patrick Hancock	27 mins		
Retaliation Liability	Catherine Mattice	29 mins		
Sensitivity Awareness	Catherine Mattice	32 mins		
Sexual Harassment: <i>Policy & Prevention</i>	Staff	70 mins		
Termination: <i>Practice and Procedure</i>	Patrick Hughes	22 mins		
Working Alone: <i>Policy and Practices</i>	R. Joy Jackson	19 mins		

ENVIRONMENTAL	Author	Length	Available in Spanish	Coming Soon
Accident Investigation Training	Jeremy Norton	26 mins		
Aerial Lift Safety	Jeremy Norton	19 mins		
Asbestos Awareness	Dr. Joseph Guth	20 mins		
Back Injury & Lifting	Vaughan & Sommer	14 mins	SP	
Back Injury & Lifting: <i>Maintenance Staff</i>	Vaughan & Sommer	14 mins	SP	
Chemical Spills Overview	Linda Stroud	23 mins		
Commercial Mower Safety	Staff	23 mins		
Compressed Gas Safety	Mike Peterman	13 mins		
Confined Spaces	Bryan Visscher	20 mins	SP	
Electrical Safety	Bryan Visscher	24 mins		
Eye & Face Protection	James Vaughan	12 mins	SP	
Facility Emergencies	Bryan Visscher	21 mins		
Fall Protection	Bryan Visscher	22 mins		
Fire & Explosion Hazards	John Snider	25 mins		
Fire Extinguisher Safety	Mike Peterman	13 mins	SP	
Flammable & Combustible Liquids	John Snider	19 mins		
Forklift Safety	Jeremy Norton	17 mins	SP	
General Ergonomics	James Vaughan	14 mins		
General Safety Orientation	Steve Lyons	15 mins		
Hand & Power Tool Safety	Jeremy Norton	18 mins	SP	

ENVIRONMENTAL, CONT.	Author	Length	Available in Spanish	Coming Soon
Hazard Communications: <i>Right to Understand</i>	Linda Stroud	26 mins		
Hearing Loss Prevention	Vaughan & Sommer	11 mins	SP	
Heat Illness Prevention	Staff	9 mins	SP	
Heat Illness Prevention for Fire Service Personnel	John Snider	22 mins		
Indoor Air Quality Awareness	Rich Prill	20 mins		
Ladder Safety	Vaughan & Sommer	21 mins	SP	
Lockout/Tagout: Energy Release	Vaughan & Sommer	13 mins	SP	
Mercury Spills	Kurt Poulsen	12 mins		
Office Ergonomics	James Vaughan	13 mins		
Personal Protective Equipment (PPE)	Vaughan & Sommer	14 mins	SP	
Playground Maintenance & Inspection	Susan Hudson	20 mins		
Respiratory Protection	Jeremy Norton	18 mins		
Safety Committee Operations	Jeremy Norton	16 mins		
Safety Data Sheets (SDS)	Linda Stroud	19 mins		
Scaffolding Safety	Jeremy Norton	18 mins		
Scissor Lift Safety	Jeremy Norton	20 mins		
Slips, Trips & Falls	Vaughan & Sommer	17 mins	SP	
Stormwater Management	Samantha Brown	24 mins		
Temporary Traffic Control Safety	Thomas Schauf	19 mins		
Trenching & Excavation Safety	Jeremy Norton	19 mins		
Utility Cart Safety	Staff	17 mins		
Water Damage Prevention	Bryan Visscher	28 mins		
Welding, Cutting & Brazing Safety Awareness	Jeremy Norton	22 mins		

HEALTH	Author	Length	Available in Spanish	Coming Soon
Automated External Defibrillators (AEDs)	Lucinda Mejdell-Awbrey	19 mins		
Bloodborne Pathogens Exposure Prevention: <i>Complete</i>	Vaughan & Sommer	19 mins	SP	
Bloodborne Pathogens Exposure Prevention: <i>Refresher</i>	Vaughan & Sommer	13 mins	SP	
Cardiopulmonary Resuscitation (CPR)	Tibbitts & Eastman	19 mins		
Common Illness Prevention	Lucinda Mejdell-Awbrey	11 mins		
First Aid	Lucinda Mejdell-Awbrey	29 mins		
MRSA Awareness	Lucinda Mejdell-Awbrey	12 mins		
Stress Management	Catherine Mattice	29 mins		

HUMAN RESOURCES	Author	Length	Available in Spanish	Coming Soon
Customer Service Overview	Staff	11 mins		
Discrimination Awareness in the Workplace	Catherine Mattice	14 mins		
Diversity Awareness: <i>Staff-to-Staff</i>	Catherine Mattice	23 mins		
Drug Free Workplace	Jeremy Norton	22 mins		
FACTA: Identity Theft & Consumer Protections	Staff	13 mins		
Family Medical Leave Act (FMLA)	Catherine Mattice	15 mins		
General Ethics in the Workplace	Catherine Mattice	18 mins		
HIPAA Overview	Jonathan Tomes	18 mins		
Sexual Harassment: <i>Staff-to-Staff</i>	Staff	19 mins	SP	
Title VI Overview	Staff	33 mins		
Workplace Bullying: <i>Awareness & Prevention</i>	Catherine Mattice	15 mins		
Workplace Violence: <i>Awareness & Prevention (Employee)</i>	Catherine Mattice	19 mins		
Workplace Violence: <i>Awareness & Prevention (Supervisor)</i>	Catherine Mattice	27 mins		

INFORMATION TECHNOLOGY	Author	Length	Available in Spanish	Coming Soon
Browser Security Basics	Pete Just	15 mins		
Cybersecurity	Pete Just	13 mins		
Email and Messaging Safety	Pete Just	12 mins		
Password Security Basics	Pete Just	5 mins		
Protection Against Malware	Pete Just	15 mins		

NUTRITION SERVICES	Author	Length	Available in Spanish	Coming Soon
Food Safety and Kitchen Sanitation	Art Dunham	13 mins		
Foodborne Illnesses	Art Dunham	16 mins		
Nutrition Basics	Art Dunham	20 mins		

SECURITY	Author	Length	Available in Spanish	Coming Soon
Arson Awareness & Prevention	John Snider	30 mins		
Copper Theft Awareness	Staff	9 mins		
Visual Weapons Screening	Dorn & Shepherd	15 mins		

SOCIAL & BEHAVIORAL	Author	Length	Available in Spanish	Coming Soon
Playground Supervision	Susan Hudson	16 mins	SP	

TRANSPORTATION	Author	Length	Available in Spanish	Coming Soon
15-Passenger Van safety	Staff	19 mins		
City Driving	Patrick Fitzpatrick	15 mins		
Defensive Driving	Patrick Fitzpatrick	22 mins		
Distracted Driving	Patrick Fitzpatrick	12 mins		
Road Rage	Patrick Fitzpatrick	10 mins		
Winter Driving	Patrick Fitzpatrick	15 mins		

Revised 7/28/17

SAFETY MEETING REQUIREMENTS

Monthly Safety Meetings:

To fulfill one requirement of the Connecticut Workers Compensation Commission, departments and schools are required to hold safety meetings.

Meeting notes from your monthly safety meetings need to be submitted promptly via email to:

Government: Safecity@sp.waterburyct.org

Board of Education: Safeschools@sp.waterburyct.org

Sample

School/Departmental Safety Committee

Meeting Agenda

1) Call To Order

- a. Review notes from last meeting;
- b. Introduce any guests.

(2) Old Business

- a. Review status of previously noted issues and recommendations
- b. Set dates for follow-up and completion of outstanding recommendations

(3) First Report if Injury Reviews

- a. Review first report of injuries filed since last meeting; no names & no fault finding; looking for implementation of corrective actions & solutions.
- b. Look for injury trends and review overall injury totals year-to-date. Focus on implementing corrective actions & solutions.
- c. Injury prevention techniques; Discuss what you can use/implement?

(4) Building & Property Inspection Reports

- a. Review results of building & property safety inspections;
- b. Discuss findings from current and past inspections.
- c. Follow up with Public Works Director or School Inspector

(5) New Business

- a. Safety suggestions from members
 - i. Brainstorm
 - ii. Suggested by others
- b. Any safety training to report?
- c. Any new safety procedures to report?
- d. Other new business

(6) Goals

- a. Incident reduction/elimination;
- b. Continually promote workplace safety;
- c. Promote safety & loss control education, trainings, directives & reminders

OSHA RECORDKEEPING GUIDELINES

- a. Overview, Recordkeeping Reminders, Websites*
- b. Recording Criteria Decision Tree*
- c. Completing OSHA Log – Form 300*



CONN-OSHA

Connecticut Occupational Safety and Health Administration

OSHA RECORDKEEPING GUIDELINES

QUESTIONS REGARDING THIS FORM?

Call the Office of Research at 860-263-6272 or e-mail CONNOSHASTATS@CT.GOV

OVERVIEW

The Occupational Safety and Health Administration (OSHA) Standard 29 CFR Part 1904 Recording and Reporting Occupational Injuries and Illnesses require employers to record and report work-related fatalities, injuries and illnesses. This handout is a general overview of OSHA recordkeeping. It does not address all the rules and regulations of OSHA recordkeeping, which are periodically updated.

You are responsible for upholding all OSHA regulations regarding the reporting and recording of occupational injuries and illnesses.

RECORDKEEPING REMINDERS

- ◆ Upon request, government representatives must be provided copies of OSHA records within 4 business hours.
- ◆ Enter OSHA recordable cases on your OSHA 300 Log within 7 calendar days.
- ◆ Post your completed OSHA Form 300A from February 1st through April 30th.
- ◆ Retain forms for the past 5 years, updating the OSHA Form 300 as needed.
- ◆ Days Away, Restricted, or Transferred (DART) Rate calculation
$$\text{DART Rate} = (\text{Column H} + \text{Column I}) \times 200,000 \div \text{Total Hours Worked.}$$

WEBSITES

- ◆ Downloadable OSHA Recordkeeping forms in PDF or Excel format are available at U.S. OSHA's Recordkeeping website: www.osha.gov/recordkeeping
- ◆ For the complete recordkeeping standard, Google "OSHA Standard Part 1904" and follow the first link to:
www.osha.gov/pls/oshaweb/owastand.dlisplay_standard_group?p_toc_level=1&p_part_number=1904

RECORDING CRITERIA DECISION TREE

To determine if an OSHA recordable case has occurred, answer these four questions:

1. Has an injury or illness occurred?

Yes → Continue to question 2.

No → An injury or illness has *not* occurred. Do not record this on your OSHA log.

2. Is the injury or illness work-related?

Work-relatedness is presumed for injuries and illnesses occurring in the work environment. *Assume the injury or illness is work-related* unless it is specifically addressed in the exceptions listed below.

Yes → Continue to question 3.

No → A recordable injury/illness has *not* occurred. Do not record this on your OSHA log.

Exceptions. The case is not considered work-related if it falls into one of these categories:

- ◇ Present as a member of the general public.
- ◇ Symptoms arise in workplace but are solely due to non-work related event or exposure.
- ◇ Voluntary participation in a wellness program.
- ◇ Eating, drinking, or preparing food or drink for personal consumption.
- ◇ Personal tasks outside assigned working hours.
- ◇ Personal grooming, self-medication for non-work-related conditions, or intentionally self-inflicted injuries.
- ◇ Motor vehicle accident occurring in a parking lot or access road during a normal commute to or from work.
- ◇ Common cold or flu.
- ◇ Mental illness, unless employee voluntarily provides a medical opinion from a physician or licensed health care professional (PLHCP) that affirms the mental illness is work-related.

3. Is the injury or illness a new case?

If an employee has *recovered completely* from a previous injury or illness, and an event or exposure in the work environment causes the symptoms to re-appear, the injury or illness is a new case.

Yes → Continue to question 4.

No → Do not record a new case. If necessary, update the previously recorded injury or illness entry.

4. Does the injury or illness meet the general recording criteria? Remember to check for rules that apply to special cases.

Yes → A recordable injury/illness has occurred. Record this as a case on your OSHA log.

No → A recordable injury/illness has *not* occurred. Do not record this on your OSHA log.

General recording criteria. A case is recordable if it involves one or more of the following:

- ◆ All fatalities occurring in the United States and her territories
- ◆ Occupational injuries and illnesses that resulted in:
 - ◇ days away from work, restricted work or job transfer
 - ◇ medical treatment (*see page four*)
 - ◇ loss of consciousness
- ◆ Other serious or significant cases diagnosed by a PLHCP
- ◆ Occupational injuries and illnesses that meet special recording criteria:
 - ◇ needlestick and sharps injuries
 - ◇ medical removal under OSHA standards
 - ◇ occupational hearing loss

COMPLETING THE OSHA LOG - FORM 300

New OSHA 300 Forms were established on January 1, 2004. The new form lists Column K as Number of Days Away from Work and has a Hearing Loss category in Column M. If you need a new form, please contact our office or visit www.osha.gov/recordkeeping to download a form.

For every case recorded on your log, you must also complete OSHA Form 301: Injury and Illness Incident Report. *All fields are required:* date of birth, date hired, time employee began work, time of event, etc. You may substitute an equivalent form, such as the Connecticut Workers' Compensation First Report of Injury, if it includes all of the information requested on the OSHA Form 301.

Column G: Death

Each year, nearly five thousand U.S. workers lose their lives to work injuries. **All employers, regardless of size or industry, are required to report these deaths.** Reporting and recording deaths are separate actions – a reportable death may not be a recordable case. Consult the decision tree to determine if a death should be recorded on your OSHA log.

◆ **Reporting**

- ◇ Within 8 hours, you must report any work fatality to OSHA. This includes fatal heart attacks and other incidents that may not be recordable on the OSHA Log.
- ◇ Report to your local OSHA office. If after business hours, call 1-800-321-OSHA (1-800-321-6742).
- ◇ You are not required to report:
 - highway or public street motor vehicle accidents unless they are in a construction work zone.
 - commercial airplane, boat, train, subway, or bus accidents.
- ◇ You are also required to report within 24 hours amputations, loss of eye, and hospitalizations.

◆ **Recording**

- ◇ If appropriate, record the case on your OSHA 300 Log with a check in Column G: Deaths. Do not record any days away from work related to the death (*see example on page six*).
- ◇ Transportation fatalities occurring outside of an employee's normal commute are recordable, even if you have not reported them.

Column H: Days Away from Work

When an injury or illness involves one or more days away from work, you must record the case on your OSHA 300 Log with a check in *Column H: Cases with Days Away from Work*.

- ◆ If a job restriction or transfer is recommended, but the employer cannot offer restricted work or a job transfer, the case will be counted as a day away from work case.
 - ◇ Example: A doctor recommends 3 days of light duty for Gina. There is no light work available, so the employer tells her to stay home instead. This is a recordable case with 3 days away from work.
- ◆ If a case has both days away and job transfer/restriction days, record the case once and only once in *Column H: Cases with Days Away from Work*. Leave *Column I: Cases with Job Transfer or Restriction* blank. This is true even when the job transfer/restriction days exceed the number of days away from work.
 - ◇ Example: Rob falls from an extension ladder to a concrete patio and breaks his arm. He is out of work for 7 days and on restricted duty for 10 days. Check Column H, record 7 days in Column K and 10 days in Column L. Leave Column I blank (*see example on page six*).

Column I: Job Transfer or Restriction

If a work injury or illness prevents an employee from performing one or more routine functions of his or her job, the case involves days of job restriction or transfer. If the case does not have *any* days away from work, record the case in *Column I: Cases with Job Transfer or Restriction*.

- ◆ A routine function is defined as a task performed at least once per week.
 - ◇ Example: Every Friday, Cindy moves 15-40 lb delivery boxes. A work-related injury prohibits her from lifting over 20 lbs. for five days. The injury is recordable with 5 days of restriction.
 - ◇ Example: The doctor tells Aaron not to lift anything over 40 lbs. His normal workweek does not require any lifting over 15 lbs. The restriction is *not* recordable.
- ◆ If an employee is kept from working a full workday, the days are counted as restrictions.
 - ◇ Example: Todd is injured at work and is told to work only four-hour shifts for 2 days. The injury is recordable with 2 days of restriction.

OTHER RECORDABLE CASES VS. FIRST AID

Column J: Other Recordable Cases

If a case falls into one of the categories below, it is OSHA recordable. If the employee did not have days away from work (Column H), job transfer or restriction (Column I), the case is recorded in *Column J: Other Recordable Cases*. You must also record the appropriate category under *Column M: Injury and Illness Types*.

◆ Medical treatment beyond First Aid:

- ◆ Prescription medication. The use of non-prescription medication at prescription strength as recommended by a physician or licensed health care professional (PLHCP) is considered prescription medication.
- ◆ Immunizations (except tetanus) such as hepatitis B or rabies vaccines.
- ◆ Wound-closing devices such as surgical glue, sutures, staples, etc.
- ◆ Any device with rigid stays or other systems designed to immobilize parts of the body.
- ◆ Physical therapy or chiropractic treatment.
- ◆ Removal of foreign material that is embedded in the eye.
- ◆ Any treatment not specifically defined as First Aid (listed below)

- ◆ **Significant Diagnosed Injury or Illness:** Any serious or significant work-related disorder that is diagnosed by a PLHCP or identified by a positive medical test. These include cases of cancer, chronic irreversible disease, a fractured or cracked bone or tooth, or a punctured eardrum. Specific guidelines on recordable hearing loss injuries may be found online @ www.osha.gov/recordkeeping
- ◆ **Needlestick injuries** and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious materials. Potentially infectious materials include human bodily fluids, tissues and organs, and materials infected with the HIV or hepatitis B virus.
- ◆ **An OSHA standard requires medical removal** of an employee for medical surveillance.
- ◆ **Loss of consciousness** from a work-related injury or illness is recordable. Loss of consciousness due *solely* to personal health conditions (diabetes, epilepsy, narcolepsy, etc.) is not recordable.

Not Recordable

If a case is limited to First Aid treatment AND there are no days away from work, job transfer, or job restriction, do not include the case on your OSHA 300 Log. The case is not OSHA recordable, even if the First Aid treatment is administered at a health clinic, emergency room, hospital, or other medical treatment facility. First Aid treatment is defined as:

- ◆ Visits to a PLHCP solely for observation or counseling.
- ◆ Diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications solely for diagnostic purposes (e.g., eye drops to dilate pupils).
- ◆ Using non-prescription medications at non-prescription strength (per box instructions).
- ◆ Cleaning, flushing or soaking wounds on the surface of the skin.
- ◆ Using wound coverings such as bandages, Band-Aids, gauze pads, butterfly bandages, Steri-Strips, and other similar coverings (Note: wound *closing* devices listed above are medical treatment).
- ◆ Using any non-rigid means of support such as elastic bandages, wraps, non-rigid back belts, etc.
- ◆ Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.).
- ◆ Drilling of fingernail or toenail to relieve pressure, or draining fluid from a blister.
- ◆ Removing splinters or foreign material from areas other than the eyes by irrigation, tweezers, cotton swabs or other simple means.
- ◆ Removing foreign bodies from the eye using only irrigation or a cotton swab.
- ◆ Using eye patches or finger guards.
- ◆ Non-therapeutic massages (spa treatment).
- ◆ Using hot or cold therapy.
- ◆ Drinking fluids for relief of heat disorder.
- ◆ Tetanus immunizations.

Examples

- ◆ Sue cuts her hand and goes to the emergency room. A nurse cleans and covers the wound with a Band-Aid and sends Sue back to work. This is *not* a recordable case.
- ◆ Henry has a piece of metal embedded in his eye. A doctor removes it and sends him back to work. This case should be recorded in *Column J: Other Recordable Cases*.
- ◆ Joan falls at work, bruising her leg. She does not receive medical treatment but the doctor tells her to stay home for two days before returning to work. This case should be recorded in *Column H: Cases with Days Away from Work*.

NUMBER OF DAYS & INJURY OR ILLNESS TYPES

Columns K & L: Number of Days

- ◆ **Start counting with the day after the injury and count calendar days.** Count all the days the person is unable to work, or work with restrictions/transfer, even if the person is not scheduled to work on those days.
 - ◇ Example: An employee's workweek is Monday through Friday. The employee is injured on Thursday morning and goes home for the rest of the day. She stays home on Friday and Monday, but returns to full duty Tuesday morning. This case involves lost time and should be recorded in *Column H: Cases with Days Away from Work*. Also record 4 days (Friday, Saturday, Sunday, and Monday) in *Column K: Number of Days Away From Work*.
 - ◇ Example: On Monday morning, an employee punches in at 8:05 a.m. and is injured at 8:15 a.m. He goes home for the rest of the day but returns on Tuesday to work a complete shift without restrictions/transfer. This injury does not involve lost time. If the injury required treatment beyond First Aid, you would record it in *Column J: Other Recordable Cases*.
- ◆ **A case has days away from work that continue into the next year. Record the case and all related days on the log for the year the injury or illness occurred.**
 - ◇ Example: An employee is injured on December 23, 2012, and does not return to work until January 27, 2013. The case and the 34 days away from work would be recorded on the 2012 log. Do *not* include the case or lost days on the 2013 log.
- ◆ **If an individual case has a large amount of lost time, you may stop counting at 180 days.**
 - ◇ Example: An employee is injured and stays home for 150 days, followed by 120 days of job transfer. You may record 150 days in *Column K: Number of Days Away From Work* and 30 days in *Column L: Number of Days of Transfer or Restriction* for a total of 180 days.
- ◆ **If a person leaves your company for reasons unrelated to the injury or illness, stop counting the number of days.**
 - ◇ Example: A clerk typist falls in the parking lot and breaks her leg. The doctor recommends she stay home for two weeks. After one week, she accepts a clerk typist position at a company with better benefits. Record the case in *Column H: Cases with Days Away from Work* and 7 days in *Column K: Number of Days Away From Work*.
 - ◇ Example: A carpenter's leg is amputated after suffering a work-related accident and will be out of work for 120 days. The carpenter decides to pursue a safer career and leaves the company. Record the case in *Column H: Cases with Days Away from Work*. Since he left because of the injury, the full 120 days are recorded in *Column K: Number of Days Away From Work*.

Column M: Injury and Illness Types

For every case entered in columns G, H, I, and J, there must be a corresponding checkmark in *Column M: Injury and Illness Type*. **The total number of cases (G+H+I+J) must equal the total for Column M (1+2+3+4+5+6).** Examples of each category are provided below.

- ◆ Injuries
 - ◇ M1 Injuries: Amputations, animal and insect bites, broken bones, burns, concussions, electrocutions, heat stroke, hernias, lacerations, muscle strains and sprains, etc.
- ◆ Illnesses
 - ◇ M2 Skin Disorders: dermatitis, rosacea, psoriasis, poison ivy, etc.
 - ◇ M3 Respiratory Conditions: avian or swine flu, sinusitis, emphysema, asthma, tuberculosis, etc.
 - ◇ M4 Poisonings: carbon monoxide, lead, or cadmium poisoning, medical removal due to an OSHA standard, etc.
 - ◇ M5 Hearing Loss: Specific guidelines may be found online @ www.osha.gov/recordkeeping
 - ◇ M6 All Other Illnesses: Repetitive motion illnesses such as carpal tunnel syndrome or tendonitis, mental illness, varicose veins, chicken pox, etc.

LOG EXAMPLE, PRIVACY CONCERNS & HEALTHCARE RECOMMENDATIONS

Log Example

For your reference, a sample OSHA 300 Log is provided below. Notice that each case has *one and only one* check mark in columns G-J.

(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Classify the case <i>CHECK ONLY ONE box for each case based on the most serious outcome for that case:</i>				Enter the number of days the injured or ill worker was		Check the "Injury" column or choose one type of illness:						
	Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	Away from work (K)	On job transfer or restriction (L)	(M)						
							Injury (1)	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Zincking loss (5)	All other illnesses (6)	
Fell from extension ladder onto concrete patio. Fractured lower arm.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7 days	10 days	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cut hand on rotary table saw. Received stitches and returned to work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-- days	-- days	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strained lower back lifting 80lb bags of concrete-no lifting over 50lbs for 2 weeks.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	-- days	14 days	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carpal tunnel in wrists due to daily typing.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30 days	15 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rash on arm from exposure to cutting oil - prescription meds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-- days	-- days	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carbon monoxide poisoning-hospitalized 2 weeks before death.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-- days	-- days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Privacy Concerns

If you wish to share your OSHA records with unauthorized persons, you must first remove the employees' names from the records. Authorized persons include representatives from OSHA, Workers' Compensation, Public Health, law enforcement agencies, insurance auditors, or consultants.

Privacy concern cases require the removal of an employee's name and identifying information from OSHA Forms. Instead of the person's name, list "privacy concern". You must keep a separate, confidential list identifying the case number and employee name. Privacy concern cases are:

- ◆ Injury or illness to an intimate body part
- ◆ Injury or illness resulting from a sexual assault
- ◆ Mental illness
- ◆ HIV infection, hepatitis, tuberculosis
- ◆ Needlestick and sharps injuries that are contaminated with another person's blood or other potentially infectious material
- ◆ Employee requests to keep name off of an *illness* case

Healthcare Recommendations

You are not required to obtain the recommendation of a physician or licensed health care professional (PLHCP). However, if a recommendation is available, you must record the case accordingly. This is true even if the employee does not follow the recommendation.

- ◆ Example: George is injured at work and is told not to lift anything over 30 lbs for five days, but he immediately resumes his full job duties. The injury is a recordable case with five days of restriction.
- ◆ Example: Carl slips and falls at work. The plant nurse instructs him to return to work, but he stays at home for two days. The injury is *not* recordable.

Public Sector Employers Only

Electronic Injury & Illness Reporting Requirement Rule

What does the rule do? It requires employers to electronically submit injury and illness data that they already record.

Will my public sector employer be required to submit our records? Yes, public sector employers will be using the U.S. Department of Labor (OSHA) secure website for the electronic submission of information. The website will include web forms for direct data entry and instructions for other means of submission (e.g. file uploads). Again, Connecticut public sector employers will use the same secure web site as the private sector employers.

Information on this web site can be found at www.osha.gov, recordkeeping page
<https://www.osha.gov/recordkeeping/finalrule/index.html>

What is the compliance schedule?

Establishments with 1 or more employees must submit:

- Information from their 2016 Form 300A by December 1, 2017.

What else does the final rule do? In addition, the final rule revises OSHA's regulation on Recording and Reporting Occupational Injuries and Illnesses (29 CFR 1904). In order to ensure the completeness and accuracy of injury and illness data collected by employers and reported to OSHA, the final rule also:

- Requires employers to inform employees of their right to report work-related injuries and illnesses free from retaliation.
- Clarifies the existing implicit requirement that an employer's procedure for reporting work-related injuries and illnesses must be reasonable and not deter or discourage employees from reporting.
- Incorporates the existing statutory prohibition on retaliating against employees for reporting work-related injuries or illnesses.

What are the Anti-retaliation protections? The rule also prohibits employers from discouraging workers from reporting an injury or illness. The final rule requires employers to inform employees of their right to report work-related injuries and illnesses free from retaliation; clarifies the existing implicit requirement that an employer's procedure for reporting work-related injuries and illnesses must be reasonable and not deter or discourage employees from reporting; and incorporates the existing statutory prohibition on retaliating against employees for reporting work-related injuries or illnesses.

If you have questions, call 860-263-6900.

WORKERS COMPENSATION MEDICAL CARE PLAN - CIRMAcare

- a. Notice to All Employees**
- b. Frequently Asked Questions**
- c. Medical Care Plan Provider Specialty Index**
- d. City of Waterbury and Waterbury Board of Education Medical Network**



Connecticut Interlocal Risk Management Agency

City of Waterbury Employees: Welcome to CIRMAcare®

The City of Waterbury and the Waterbury Board of Education has partnered with Connecticut Interlocal Risk Management Agency (CIRMA) as the City's Third-Party Administrator for Workers' Compensation effective May 1, 2021.

CIRMA is committed to providing you with access to high-quality, best in class medical care and compassionate claims handling if you are injured at work.

The enclosed City of Waterbury and Waterbury Board of Education's existing Medical Care Plan has been refiled and reapproved by the Connecticut Workers' Compensation Commission for a seamless transition to CIRMA on May 1, 2021.

If you already have an established and approved Workers' Compensation claim and are currently receiving treatment, there are no changes. You should continue your treatment with your established treating provider.

Helpful Tips:

If you are injured at work, you should report your work-related injury to your supervisor immediately. Your supervisor will complete a First-Report-Of-Injury (FROI) and you should follow up for care as soon as possible.

Your initial care medical provider is:
St. Mary's Occupational Health and Diagnostic Center
1312 West Main Street in Waterbury, CT
(203) 709-3740

In the event of a life-threatening emergency or you become injured when the Center is closed you should dial 911 or seek immediate treatment at the closest emergency room or medical facility.

Once your claim is reported, your CIRMA Claim professional will take it from there and work with you every step of the way.



Connecticut Interlocal Risk Management Agency

Frequently Asked Questions

Who administers my workers' compensation claim?

Effective May 1, 2021, CIRMA is the claims administrator for the City of Waterbury and the Waterbury Board of Education. CIRMA will administer all benefits related to your workers' compensation claim.

Contact CIRMA at 203-946-3700 or 1-800-526-1647 if you have any questions.

I was injured at work. What should I do?

- Report the injury immediately to your supervisor
- Seek immediate medical treatment at St. Mary's Occupational Health and Diagnostic Center
- Follow the medical provider's treatment plan and keep your supervisor and CIRMA adjuster apprised of your work status
- If your doctor assigns work restrictions, CIRMA will work with your supervisor to accommodate modified duty transitional work

My medical provider is seeking authorization for medical treatment. What is pre-authorization?

Pre-authorization is a process by which providers request prior approval for medical treatment, diagnostic testing or durable medical equipment prior to care being administered.

Authorization requests can be submitted via fax to CIRMA's Authorization Department at fax number 203-497-2412 or via email at ahotline@ccm-ct.org

How do I obtain prescription medications related to my injury?

CIRMA partners with First Script to provide access to many pharmacies in the state of CT, including but not limited to CVS, Walgreens and Rite Aid.

Using your Workers' Compensation pharmacy benefits card is easy and ensures you don't have to pay any out-of-pocket expenses for an approved claim; simply present your Workers' Compensation prescription drug card to your pharmacy.

Need medication and don't have a card? You can still be reimbursed if your prescription is for a work-related injury or illness that has been accepted by CIRMA. How? Submit a receipt to your CIRMA claim adjuster and your out of pocket cost will be reimbursed directly to you via check.

If you have questions about pharmacy benefits, you may contact First Script at 800-791-2080 or your CIRMA adjuster at 203-946-3700 or 1-800-526-1647.



Connecticut Interlocal Risk Management Agency

What if I need continuing medical treatment?

The City of Waterbury and the Waterbury Board of Education's existing Medical Care Plan has been filed and approved by the Connecticut Workers' Compensation Commission.

If you already have an established and approved Workers' Compensation claim and are currently receiving treatment, there are no changes. You should continue your treatment with your established treating provider.

It is important to note you must select medical providers from those listed and approved in the Medical Care Plan. (Failure to select in network medical providers may delay or jeopardize your right to receive workers' compensation benefits subject to an order from a workers' Compensation Commissioner)

Should your injury require specialty treatment not available in the City's Medical Care Plan, a consultant from an approved list established by the Workers' Compensation Commission may be chosen for your treatment. Your CIRMA adjuster can offer guidance.

I don't agree with the Utilization Review decision regarding my claim. What is the appeal process for disputed medical treatment?

You and/or your medical providers have the right to appeal any decisions made by CIRMA's utilization review program. An appeal can be initiated by calling your adjuster directly or submitting a written request via fax to 203- 497-2412.

We look forward to partnering with the City of Waterbury and Board of Education and providing you with an excellent claims experience during your recovery.

Sincerely,

The CIRMA Claims Team

Easy claim reporting. Compassionate Claim professionals.
The support you need along the way. That's the CIRMA promise.



CITY OF WATERBURY and WATERBURY BOARD OF EDUCATION
Workers' Compensation *CIRMAcare* Medical Care Plan Provider
Specialty Index Effective Date – May 1, 2021

Approved Specialties

- ✓ Represents the core specialties covered within the City of Waterbury and Waterbury Board of Education's customized Medical Care Plan

Allergy/Immunology	✓ Occupational Medicine
Audiology	Occupational Therapy
Cardio Vascular Surgery	Oncology
Cardiology	✓ Ophthalmology
Cardiothoracic	Optometry
Chiropractic Medicine	Oral and Maxillofacial
Dentistry	✓ Orthopedic Surgery
Dermatology	Osteopathy
✓ Emergency Care	Otolaryngology
Endocrinology	
Family/General Practice	✓ Pain Management
Gastroenterology	Physical Medicine & Rehabilitation
General Hospital Services	✓ Physical Therapy
✓ General Surgery	Plastic Surgery
✓ Hand Surgery	Podiatry
Hand Therapy	Psychiatry
Head & Neck Surgery	Psychology
Hematology	Pulmonary Medicine
Infectious Diseases	Radiology
✓ Rheumatology Internal Medicine	Social Work
Nephrology	Surgical Centers
✓ Neurological Surgery	Thoracic Surgery
✓ Neurology	Urology
OBGYN	Vascular Surgery

Should an injury require specialty treatment not covered in the Waterbury Medical Care Plan, a provider from the approved provider list established by the Worker's Compensation Commission may be chosen for treatment. Please contact CIRMA for guidance.

**City of Waterbury and Waterbury Board of Education
Medical Network for Workers' Compensation**



Occupational Health / Walk in Medical Center		
<p>Saint Mary's Occupational Health and Diagnostic Center 1312 West Main Street Waterbury, CT 06708 (203) 709-3740</p>		
Emergency Care		
<p>Saint Mary's Hospital 56 Franklin Street Waterbury, CT 06706 (203) 709-6000</p>		<p>Waterbury Hospital 64 Robbins Street Waterbury, CT 06721 (203) 573-6000</p>
General Surgery		
<p>Trinity Health of New England 590 Middlebury Rd, Ste A Middlebury, CT 06762 (203)709-3572 Macaron, Shady, MD</p>	<p>Alliance Medical Group Surgery 1625 Straits Turnpike, Suite 200 Middlebury, CT 06762 (203) 568-2929 Knight, David MD Shetty, Jayakara MD</p>	<p>Middlebury Surgical, LLC 687 Straits Turnpike Suite 2A Middlebury, CT 06762 (203) 598-0235 Tripodi, Guisepp MD</p>
Hand Surgery		
<p>Active Orthopaedics, PC Turnpike Office Park 1579 Straits Turnpike Middlebury, CT 06762 (203) 758-1272 Carlson, Erik J. MD</p> <p>Neurosurgery, Orthopaedics & Spine Specialists, PC (NOSS) 500 Chase Parkway Waterbury, CT 06708 (800) 463-8764 Manzo, Richard MD</p>		<p>Orthopedic Associates of Hartford PC 499 Farmington Avenue, Suite 300 Farmington, CT 06032 (860) 549-3210 Bontempo, Nicholas MD Burton, Kevin MD Caputo, Andrew MD</p>

Neurology

Associated Neurologists, PC
 1389 West Main Street Tower 1, Suite 212
 Waterbury, CT 06706
 (203) 755-7367

Culligan, Neil MD
Grecco, David MD
Markind, Samuel MD

Neurological Specialists, P.C.
 99 Hawley Lane
 Stratford, CT 06614
 (203) 377-5988

Barasch, Philip M., MD
Beck, Lawrence, MD
Butler, James B., MD
Webb, Lisa B., MD

Neurosurgery

Hartford HealthCare Medical Group
 1781 Highland Avenue
 Suite 106
 Cheshire, CT 06410
 (203) 271-2120
Bauman, Joel MD

HHC Physicians Care, Inc.
 85 Barnes Road
 Wallingford, CT 06492
 (860) 696-2290
Bauman, Joel MD

Neurosurgery, Orthopaedics & Spine Specialists, PC (NOSS) 500
 Chase Parkway
 Waterbury, CT 06708
 (203) 755-6677
Forshaw, David MD
Strugar, John MD
Waitze, Alan MD
Karnasiewicz, Michael MD
Mushaweh, Jarob MD

Neurosurgery, Orthopaedics & Spine Specialists, PC (NOSS) 330
 Bridgeport Avenue
 Shelton, CT 06484
 (203) 755-6677
Gorelick, Judith MD

Orthopedic Associates of Hartford
 499 Farmington Avenue, Ste 300
 Farmington, CT 06032
 (860) 549-3210
Lange, Stephan, MD

Ophthalmology

Eye Center - A Medical & Surgical Group, PC
 415 Highland Avenue
 Cheshire, CT 06410
 (203) 272-5494
Swan, Andrew MD
Marks, Peter MD
Murphy, James MD
Masi, Paul MD

Eye Center - A Medical & Surgical Group, PC
 2880 Old Dixwell Avenue
 Hamden, CT 06518
 (203) 248-6365
Swan, Andrew, MD
Marks, Peter, MD
Murphy, James, MD
Masi, Paul, MD

ReFocus Eye Health
 87 Grandview Avenue
 Waterbury, CT 06708
 (203) 574-2020
Kalbag, Neal MD
Tannenbaum, Mark MD
Wandel, Erica MD Tsang, Alexander MD

The Eye Care Group
 1201 W. Main Street, Ste 100
 Waterbury, CT 06708
 (203)597-9100
Peter Branden, MD
Stephanie L. Sugin, MD
Yanina Kostina, MD Joel
A. Geffin, MD Jonathan
E. Silbert, MD
Cynthia Guzman Covey, MD
Danielle S. Rudich, MD
Steven C. Thorquist, MD Nhu-
Y T. Dao, MD Alexander T.
Nguyen, MD Laura Andrews,
MD

Orthopedics

Active Orthopaedics, PC

Turnpike Office Park
1579 Straits Turnpike
Middlebury, CT 06762
(203)758-1272

Carlson, Erik J. MD

Kaplan, Michael MD

CT Spine and Disc Institute

1579 Straits Turnpike, #B1
Middlebury, CT 06762
(203) 758-2003

Raftery, Charles MD

Neurosurgery, Orthopaedics & Spine

Specialists PC (NOSS)
690 Main Street South
Southbury, CT 06488
(203) 755-6677

Flynn, Jr., William MD

Taylor, Glenn MD

Watson, Frederick MD

Neurosurgery, Orthopaedics & Spine

Specialists PC (NOSS)
500 Chase Parkway
Waterbury, CT 06708
(203) 755-6677

Flynn, Jr., William MD

Taylor, Glenn MD

Watson, Frederick MD

Orthopedic Associates of Hartford

499 Farmington Avenue, Suite 300
Farmington, CT 06032
(860) 549-3210

Aronow, Michael MD

Benthien, Ross MD

Bontempo, Nicholas MD

Burns, Jeffrey MD

Burton, Kevin MD

Caputo, Andrew MD

Carangelo, Robert MD

Davis, Stephen L. MD

Dugdale, Thomas MD

Esmende, Sean MD

Grady-Benson, John MD

Judson, Christopher MD

Lena, Christopher, MD

Makanji, Heeren, MD

Mazzara, James, MD

McDonald, Thomas, MD

Memmo, Pietro, MD

Miranda, Michael, MD

**Orthopedic Associates of Hartford
(cont.)**

Nagarkatti, Durgesh MD

Rios, Clifford MD

Shekhman, Mark MD

Sullivan, Raymond MD

Ware, Kristopher, MD

Waskowitz, Robert, MD

Witmer, Daniel, MD

Zhou, Hanbing, MD

Zimmermann, Gordon MD

Waterbury Orthopaedics Associates

1211 West Main
Street Waterbury, CT
06708

(203) 755-0163

Mariani, Michelle MD

Olson, Eric MD Rodin,

Dennis MD

Pain Management

Comprehensive Pain Management of Central CT

440 New Britain Ave
Plainville, CT 06062
(860) 793-0500

Grahling, Eric, MD

Neurosurgery, Orthopaedics & Spine Specialists, PC (NOSS)

500 Chase Parkway
Waterbury, CT 06708
(203) 755-6677

Ghaly, Tamer MD

Johar, Sandeep DO

Orthopedic Associates of Hartford

499 Farmington Avenue, Suite 300
Farmington, CT 06032
(860) 549-3210

Memmo, Pietro MD

Codispoti, Vincent MD

Physical Therapy Services

<p>Access Rehab Centers 1625 Straits Turnpike, #300 Middlebury, CT 06762 (203) 598-0400</p> <p>Access Rehab Centers 305 Church Street, Suite 16 Naugatuck, CT 06770 (203) 723-4010</p> <p>Access Rehab Centers 84 Oxford Road - Route 67 Oxford, CT 06478 (203) 881-0830</p> <p>Access Rehab Centers 690 Main Street South Southbury, CT 06488 (203) 267-4060</p> <p>Access Rehab Centers 131 Main Street Thomaston, CT 06787 (860) 283-4700</p> <p>Access Rehab Centers ** 715 Lakewood Road Waterbury, CT 06704 (203) 759-1122</p> <p>Access Rehab Centers 2154 East Main Street Waterbury, CT 06705 (203) 575-051</p> <p>Access Rehab Centers 134 Grandview Avenue Waterbury, CT 06708 (203)573-7130</p> <p>Access Rehab Centers 22 Tompkins Street Waterbury, CT 06708 (203) 419-0381</p>	<p>Access Rehab Centers 64 Robbins Street Waterbury Hospital Waterbury, CT 06708 (203) 573-6041</p> <p>Access Rehab Centers 650 Wolcott Road Wolcott, CT 06716 (203) 879-6700</p> <p>Peak Physical Therapy 550 Chase Avenue Waterbury, CT 06704 (203)757-0100</p> <p>Physical Therapy & Sports Medicine Center 100 Prospect Street Naugatuck, CT 06770 (203) 723-0722</p> <p>Physical Therapy & Sports Medicine Center ** 18 South Center Street Southington, CT 06489 (860) 621-5054</p> <p>Physical Therapy & Sports Medicine Center 1211 West Main Street Waterbury, CT 06708 (203) 753-6043</p> <p>Physical Therapy & Sports Medicine Center 27 Depot Street Watertown, CT 06795 (860) 274-1487</p> <p>Saint Mary's Hospital Physical Therapy 799 New Haven Road Naugatuck, CT 06770 (203) 720-1750</p>	<p>Saint Mary's Hospital Physical Therapy 1981 East Main Street Waterbury, CT 06705 (203) 709-6232</p> <p>Score Physical Therapy, LLC 51 Sherman Hill Road Bldg. A, Ste 201 Woodbury, CT 06798 (203) 263-3104</p> <p>Score Physical Therapy, LLC 2 Pomperaug Office Park, Suite 303 Southbury, CT 06488 (203) 264-1735</p> <p>Score Physical Therapy, LLC 1579 Straights Turnpike Middlebury, CT 06762 (203) 577-2002</p> <p>Select Physical Therapy ** 117 Sharon Road Mall View Plaza Waterbury, CT 06705 (203) 756-2334</p> <p>Select Physical Therapy 76 Westbury Parkway Suite 201E Watertown, CT 06795 (860) 274-7573</p> <p>Select Physical Therapy 1320 West Main St., Unit #5 Waterbury, CT 06708 (203) 573-9518</p> <p align="right">** Aqua Therapy Available</p>
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Should your injury require specialty treatment not available in the *CIRMAcare* Medical Care Plan, a consultant from an approved list established by the Workers' Compensation Commission may be chosen for your treatment. The City will comply with the Commissioner's decision regarding second opinion requests.