

KSU Incident Report Review

1

To review an incident. Click "CLICK HERE" in the email to be taken to that specific incident.

submit the incident report for further processing by Human Capital Services and Environmental Health and Safety.

reported as an on-the-job incident and requires the employer to confirm and submit the details of the incident to Human Capital Services through the **Electronic Incident Report**. Once you review and submit, the incident will be routed to Human Capital Services.

[CLICK HERE](#)

you and/or your department or unit regarding their work-related injury.

emergency medical facility. The supervisor or HCS liaison should inform the SSIF at 785-296-2364 as soon as possible.

medical treatment for an injury they must have authorization from the SSIF for the treatment. You can call the SSIF at 785-296-2364.

2

This first page will show the status of the incident, who submitted it, and the date of submittal. Click "Assessment Questions" or next to move to the next page.

EHSA Utility / Edit Assessment Edit Labels Modify Questions

Instructions Assessment Questions Review Questions/Answers Review

Incident Reporting Form

Kansas State University seeks information about the safety of the university environment. Please help us ensure that our campus provides a safe learning and working environment by answering the following questions. Your participation is valued and extremely important for these efforts.

Please note - University employees are required to report work-related incidents.

For a medical emergency, seek treatment as needed prior to submitting an

Assesmet ID: 220526002

Status: In Review

Performed By: laglaser

Performed

3

At any point in these sections you can click the icon below. This will bring up the option to ask the submitter a question. Or add a comment that will only be seen by reviewers.

Save

Provide information about any injuries or exposure
How response.

medical

Yes

No

Unknown

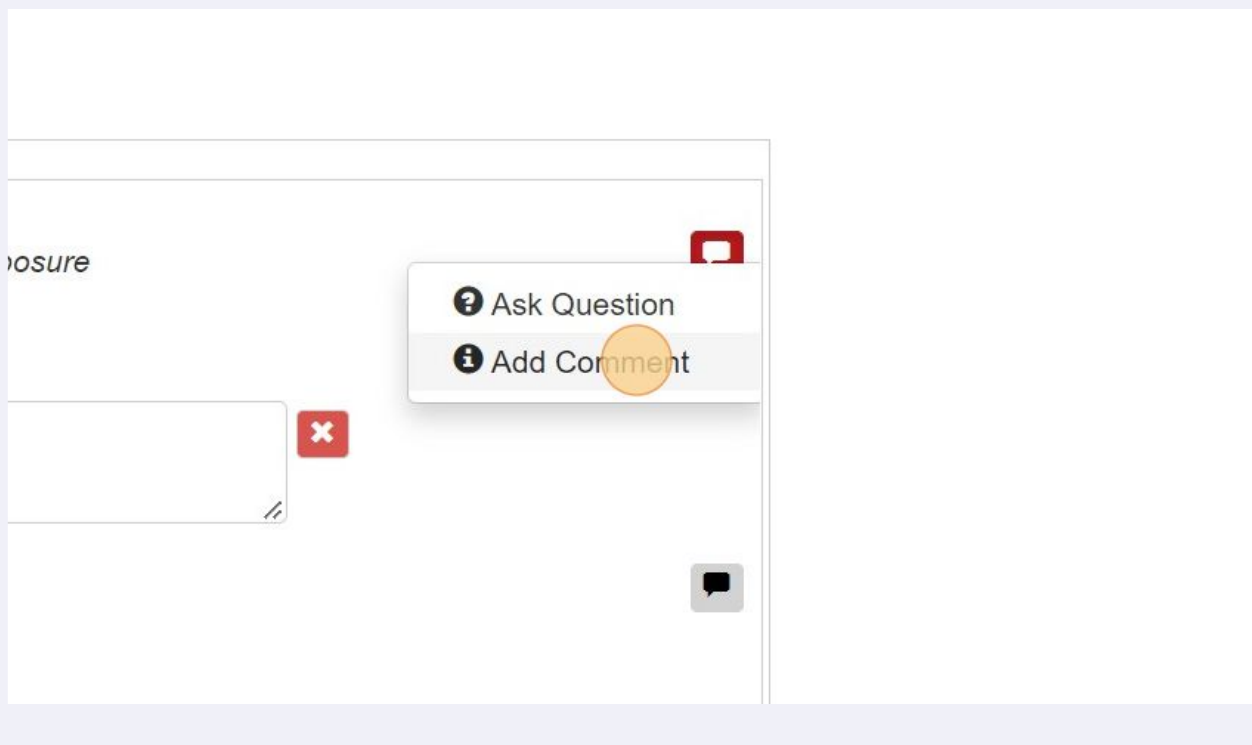
When the injured employee's supervisor or HCS Liaison should complete
The injured employee will submit this report to the State Self Insurance Fund (SSIF) on
The injured employee should be provided further guidance to the injured employee and their
In the event of a medical emergency, go directly to the nearest emergency facility for treatment.
The injured employee should submit the incident report as soon as possible of the injury and

Save Cancel

4 Use "Ask Question" for clarification from the submitter.



5 "Add Comment" is only seen by Reviewers.



6

The next steps will be to go through the assessment questions and sections to see if clarification is needed on any of the submitted fields.

7

Click "Incident Details"

The screenshot shows a web interface for editing an assessment. At the top, there is a navigation bar with the text 'Utility / Edit Assessment' and two buttons: 'Edit Labels' and 'Modify Questions'. Below this is a tabbed interface with three tabs: 'Instructions', 'Assessment Questions', and 'Review Questions/Answers'. The 'Assessment Questions' tab is active. On the left side, there is a vertical menu with three items: 'Who is Reporting', 'Incident Details', 'Witness Details', and 'Injury or Exposure Detail'. The 'Incident Details' item is highlighted with a grey background and has an orange circle around it. To the right of this menu, there are two radio buttons labeled 'Yes' (which is selected) and 'No'. Further to the right, there is a question: 'Is this report for you'. Below this, there is another question: 'What best describes...'. This second question has five radio button options: 'KSU Faculty/St', 'KSU Student/G', 'KSU Student (n', 'KSU Volunteer', and 'Visitor/Vendor/C'.

8 Click "Witness Details"

EHS Utility / Edit Assessment Edit Labels Modify Questions

Instructions Assessment Questions Review Questions/Answers Review

Who is Reporting

Incident Details

Witness Details

Injury or Exposure Detail

Date/Time of incident

Date/Time work started day of the incident

Location of incident

Specific location of incident (View Camp
stairs of Edwards Hall B wing

9 Click "Injury or Exposure Detail"

Instructions Assessment Questions Review Questions/Answers Review

Who is Reporting

Incident Details

Witness Details

Injury or Exposure Detail

Click Add Witness to pr
+ Add Select 'Add' t

← Previous Save Progress Next →

10 Click "Review Questions/Answers"

EHSA Utility / Edit Assessment [Edit Labels](#) [Modify Questions](#)

Instructions **Assessment Questions** **Review Questions/Answers** Review

Who is Reporting

Incident Details

Witness Details

Injury or Exposure Detail

Click Add Injury or Exposure to provide information about any injuries or exposure
+ Add Select 'Add' to create a new response.

Question Asked:
05/26/2022
Ukena, Adam

Could you click the green "+Add" button above this comment and add an exposure please?

Does the injury or exposure require medical attention?

Yes

No

Unknown

For non-life threatening medical care, the injured employee's supervisor or HCS Liaison should complete an incident report. The benefits team will submit this report to the State Self Insurance Fund (SSIF) on behalf of the employee then reach out to provide further guidance to the injured employee and their department. For a life-threatening emergency, go directly to the nearest emergency facility for treatment. The supervisor or HCS Liaison should submit the incident report as soon as possible of the injury and emergency medical treatment.

[← Previous](#) [Save Progress](#) [Next →](#)

11 Click "Review"

by Questions

ns **Assessment Questions** **Review Questions/Answers** **Review**

Injury or Exposure Detail *Click Add Injury or Exposure to provide information about any injuries or exposure*

Question Asked:
2022 3:55 PM
a, Adam

Could you click the green "+Add" button above this comment and add an exposure please?

No Response

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The "Review" section will show any of the assigned reviewers for this particular submittal. If everything looks correct on the previous steps and this page click the "Status" dropdown box to change the status to reviewed.

Instructions Assessment Questions Review Questions/Answers **Review**

Assign Reviewer(s) Edit Delete **Assigned Reviewer** Options

Reviewer ↑	Due Date	Reviewed	Secondary Reviewer	Review Date
Bridges, Ronald	06-02-2022	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Linck, Lisa	06-02-2022	<input type="checkbox"/>	<input type="checkbox"/>	
Ukena, Adam	06-02-2022	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewed By: Ukena, Adam (abu66535) Reviewed: []

Status: In Review (highlighted) Closed [] Next Review: []

Comment: []

Recommended Actions

Workers: [] Worker on Permits: []

Permit Number	Action	Worker ID	Name
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Click "Reviewed"

Reviewed By: Ukena, Adam (abu66535) Reviewed: []

Status: In Review (dropdown open) Closed []

- In Review
- Pending
- Reviewed** (highlighted)
- Denied
- Closed

Comment: []

Recommended Actions

Workers: [] Worker on Permits: []

Permit Number	Action	Worker ID	Name
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14 Click "Save" to keep your changes.

Worker ID	Name

Save

Cancel

