

TOPEKA POLICE DEPARTMENT POLICY AND PROCEDURE MANUAL

3.1 EMPLOYEE INJURY ILLNESS AND EXPOSURE

SUBJECT: Employee Injury Illness and Exposure		
3.1	EFFECTIVE: 9-3-2025	<i>Chris G. Vallejo</i> Chris G. Vallejo, Chief of Police
	REVISED: 8-27-2025	
	TOTAL PAGES: 4	

3.1.1 PURPOSE

To outline policies and procedures as they relate to employee illnesses, injuries and blood borne pathogens.

3.1.2 POLICY

The Department shall comply with established City Personnel and Workers Compensation procedures for reporting employee injuries and illnesses, and for providing medical assistance to employees.

3.1.3 EMPLOYEE INJURY/EXPOSURE/ILLNESS ON DUTY

The Injury Call Center will direct proper medical care for the injured employee, usually to **Cotton O'Neil Work Care, 1516 SW 6th Ave. Topeka, KS 66606, (785) 270-8605**. Hours of Operation are Monday through Friday, 8 a.m. – 5p.m. If services are needed outside of these hours please use **Stormont-Vail Emergency, 1500 SW 10th Ave, (entrance: 8th & Horne) Topeka, KS 66604**.

Life threatening and serious illness/injuries should seek immediate attention at Stormont-Vail Emergency.

A. Supervisors shall complete and/or compile the following reports when applicable:

1. On duty injury through Blue Team;
2. A phone in report of the accident to Corvell Employee Injury Call Center (877-764-3574);
3. The medical facility's recommended work status report. To include if employee is released to FULL DUTY, LIGHT DUTY or NO DUTY/OFF WORK;
 - a. If FULL DUTY: employee should report for duty.
 - b. If RESTRICTED/LIGHT DUTY: employee should report to HR with their work status report for approval of LIGHT DUTY. (See City of Topeka ARR115)
 - c. If NO DUTY: Employee should notify supervisor and Risk Management.

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4. The employee's vehicle accident report, if applicable.

3.1.4 Employee Injury and Illness Off-Duty

Injuries and Illnesses Requiring Absence from Duty

1. Supervisors of employees involved in a major incident resulting in injury or death must contact Human Resources to initiate all benefits and support due the employee.
2. HR must release all employees back to duty;
3. Employees will report all injuries and/or illness requiring:
 - a. Absence from regular duty; and
 - b. Continued treatment or short-term disability.
4. The supervisor shall direct the employee to Human Resources within 24 hours of notification on the injury. Human Resources can then determine / work with the employee if (1) LIGHT DUTY approval is needed; (2) OFF WORK \geq 5 days, then Return to Work process; or (3) OFF WORK \geq 10 days, notification to KPF/KPERS of Disability.
5. Employee's returning after absences of four (4) consecutive days or more will not be allowed to return to work without a "release back to duty" from the treating physician. This form must be taken to Human Resources, where he or she will receive a "return to work permit".
6. The Chief of Police may require a second opinion from a physician or care facility of his or her choosing, in cases of lengthy absence, before allowing an employee to return to duty.
 - a. The second opinion will be at the City's expense.
 - b. The City will reinstate the employee's time away from work taken as a result of the City's request for a second opinion.
7. All requests for a medical leave of absence shall be directed through HR.
8. The Chief of Police may request an evaluation of the employee's condition during such absence.

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9. The employee shall enter into a medical leave of absence agreement with the Chief of Police. The agreement is handled through Human Resources.
10. If medical leave is approved by Human Resources, the employee will notify the Topeka Police Department Training Director within 7 days so they can submit a Status Update with KSCPOST.

3.1.5 Injured Officer Advocate (IOA)

Purpose:

To provide information to injured officers during their recovery process regarding the options available concerning their on-duty injury.

1. Requesting an Injured Officer Advocate
 - a. Any officer may contact an IOA to request an advocate be appointed to them following an on-duty injury,
 - b. A request for an IOA may be made through the chain of command or directly to the IOA Program Director,
 - c. A list of IOAs will be posted for review by all employees of the Department in areas such as PowerDMS.
2. Notification
 - a. The IOA Program Coordinator should be notified by the Watch Commander or Bureau Commander of the following incidents:
 - i. Serious illness or injury of an employee of this agency resulting in an employee being admitted into a hospital (only with the employee's express permission; HIPPA compliance),
 - ii. Any incident where an officer has been injured,
 - iii. Other critical incidents of various nature which might require the assistance of an IOA.
 - b. The IOA Program Coordinator will receive notification of an officer's injury through HR personnel notification following their receipt of a new case.
 - c. The IOA Program Coordinator will contact the injured officer to offer them services of the program.
 - d. Individual officers' choice:
 - i. Refuse guidance from an IOA;
 - ii. Accept an IOA be appointed to them and all information remains in confidence between the employee and the IOA, or;
 - iii. Accept an IOA be appointed to them and agree that the information gained from their case may be shared within

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the IOA program for collective experience and development of the program.

3. Confidentiality:
 - a. IOAs should inform the injured officer, prior to discussion, of the confidentiality limitations and exceptions,
 - b. IOAs should consult with the IOA Coordinator in those cases where a concern or question regarding confidentiality arises,
 - c. In the event an injured officer accepts the assistance of an IOA, and wants to maintain strict confidentiality, the IOA is bound by KSA 60-473 which holds the communication between the IOA and employee the same privilege communication as attorney-client, physician-patient, or marital privilege.
4. Injured Officer Advocate Program Coordinator
 - a. The Injured Officer Advocate Program Coordinator shall be designated by the Chief. He/she will act as the primary liaison between the IOAs, IOA programs, and the Chief of Police or designee.
 - b. The Injured Officer Advocate Program Coordinator reports to the Commander designated by the Chief of Police on business pertaining to the operation of the program.
 - c. Major responsibilities of the Injured Officer Advocate Program Coordinator include:
 - i. Daily oversight of the program;
 - ii. Recruiting and coordinating the screening of IOA applicants;
 - iii. Coordinating training of the IOAs;
 - iv. Developing resources to assist employees when problem areas are identified;
 - v. Offering guidance and support to IOAs, as needed;
 - vi. Maintaining and distributing to all employees a current IOA list, and;
 - vii. Maintaining records associated with the program.
5. Injured Officer Advocate Personnel
 - a. All interested employees who choose to volunteer as an IOA must submit their written request through his/her chain of command to the IOA Program Coordinator.
 - b. Applicants must:
 - i. Agree to maintain confidentiality within the guidelines provided in the confidentiality section of this procedure;
 - ii. Have no restrictions regarding psychological stress;
 - iii. Not be the subject of an investigation or pending disciplinary action;

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- iv. Have written endorsement by his/her immediate supervisor;
 - v. Be empathetic and possess strong interpersonal and communication skills;
 - vi. Attend and successfully complete:
 - i. Training provided by HR on the functions and capabilities of internal and contracted providers;
 - ii. Be willing to attend follow-up and continuing education training.
 - c. The IOA Program Coordinator, other IOA Team Members, and the Chief's Office shall select candidates suited for appointment as an Injured Officer Advocate.
 - d. IOAs responsibilities will include:
 - i. Providing support and assistance on a voluntary basis to fellow employees and/or their families in time of physical recovery from injuries;
 - ii. Convey trust, anonymity, and assure confidentiality within this policy to employees who seek assistance from the IOA Program;
 - iii. Assist the employee by referring him/her to the appropriate outside resource when necessary;
 - iv. Maintain contact with the IOA Program Coordinator regarding program activities;
 - v. Be available to be contacted and, if practical, to respond at any hour; and
 - vi. Attend trainings unless the IOA Coordinator approves their absence.
 - e. IOAs may voluntarily withdraw from participation at any time. They are, however, required to notify the IOA Program Coordinator in writing.
 - f. IOAs may be removed from participation in the program by the IOA Program Coordinator or the Chief's Office for any of the following reasons:
 - i. Conduct inconsistent with the program policy;
 - ii. Failure to fulfill training requirements and/or attend regularly scheduled meetings;
 - iii. Unsatisfactory work performance;
 - iv. Become involved in an internal investigation or disciplinary action inconsistent with the goals of the Injured Officer Advocate Program.
- 6. Injured Officer Advocate Program Structure
 - a. Under the direct supervision of the IOA Program Coordinator, the following positions will be voluntarily filled by one or more IOA Team Member:

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- i. Training Officer: Responsible for keeping track of and scheduling training necessary to accomplish the purpose of the program;
- ii. Secretary: Responsible for tracking active cases, significant events within cases and dispositions. Maintain a database used for collective knowledge;
- iii. Recruiter: Communicates further personnel needs to the IOA Program Coordinator and conducts campaigns to fill those positions.

3.1.6 Exposure to Dangerous Chemicals, Hazardous Materials, or Blood borne pathogens

1. Exposure to the following must be reported to the supervisor:
 - a. A contaminated needle stick injury
 - b. Blood/Other Potentially Infectious Materials (OPIM) in direct contact with the surface of the eye, nose or mouth
 - c. Blood/OPIM in direct contact with an open area of the skin
 - d. Cuts with a sharp object covered with blood/OPIM
 - e. Human bites that draw blood
2. When an employee is exposed to hazardous chemicals, except as noted in Clandestine Lab Procedure 4.28, he or she will do the following:
 - a. If there has been no direct contact and no symptoms have occurred, the employee's supervisor will complete the on duty Blue Team Report.
 - b. If there was no direct contact, but the officer has exposure symptoms, a supervisor will complete the on-duty injury through Blue Team Report and call CorVel.
 - c. If direct contact has been made, complete the on-duty injury through Blue Team Report and call CorVel as stated in 3.1.3 A1-3.
3. The Chief of Police or designee may require the employee to undergo a medical examination. Such an examination may be immediate or may be at the next regular hours of the City health care provider and shall be at the discretion of the Chief of Police, or designee.
4. The Department shall follow the prescribed protocol as set forth in the City of Topeka's Blood borne Pathogen Exposure Control Plan (which is in accordance with the KS Department of Human Resources and OSHA Guidelines 29CFR 1910.1030).

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5. Any employee who may be exposed to blood borne pathogens during the performance of duty shall be provided with Personal Protective Equipment (PPE). A PPE package will include at a minimum latex glove, mask with attached splash shield, disposable gown and one-way resuscitating valve.
6. Communicable disease concerns resulting from exposure to lice, fleas, and etc. while on duty are to be handled the same as any other injury or illness.

All employees shall promptly report duty-related injuries or illnesses to their immediate supervisor. Timely reporting of injuries allows for prompt and appropriate medical care, investigation, reduces the seriousness of impairment, provides for starting managed treatment and initiates regulatory documentation. In turn, supervisors must promptly report work-related injuries or illnesses to CorVel and the chain of command.



SCAN TO CALL

Employee Injury Call Center
(877) 764-3574

Registered Nurses | Immediate Care | Bilingual Nurses Available

At anytime, you can call and speak with a registered nurse to evaluate the nature of your incident and determine immediate care. All nurses specialize in occupational injuries and will ensure you get the care you need.

Call 911 for Medical Emergencies