

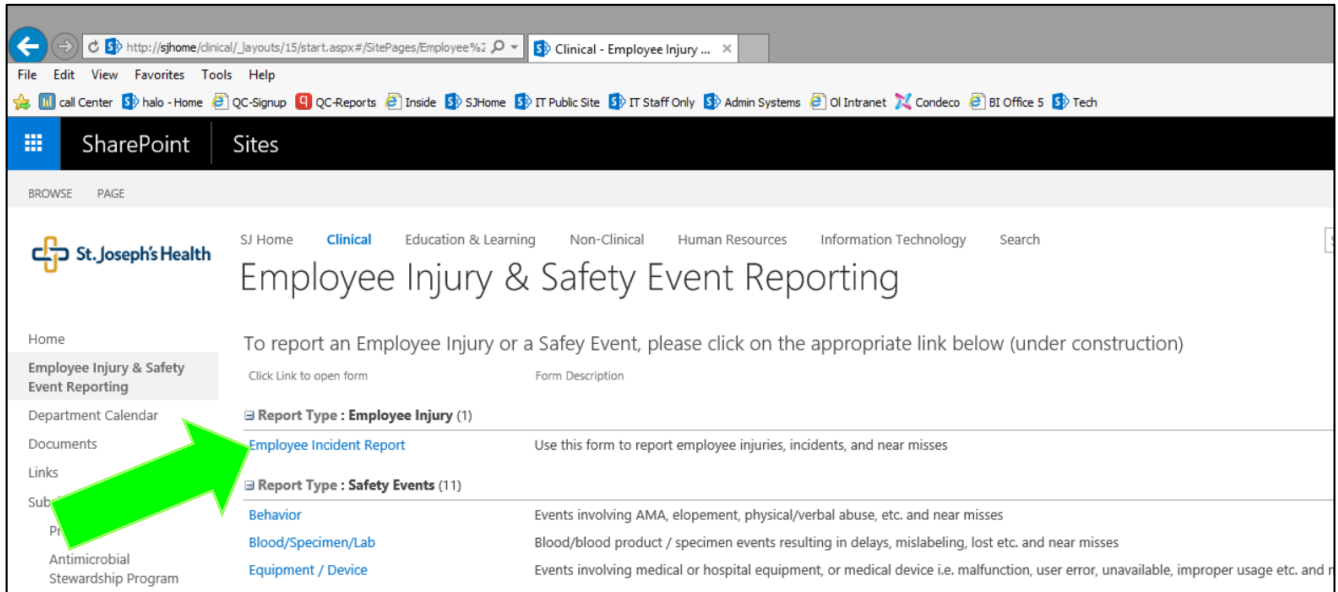
Completing an Employee Injury Report on Midas

1. Access the Midas Employee Injury Report link on St. Joseph's intranet home page.



The screenshot shows the 'INSIDE St. Joseph's Health' intranet home page. The top navigation bar includes links for Home, Professional Services, Clinical Services, Education & Learning, Human Resources, and Information Technology. A sidebar on the left contains 'QUICK LINKS' with the following items: SJHALERT (COVID-19 Updates), Employee Town Hall, Covid Staffing Support, Mission, Benefits, Food & Nutrition Services, Halo, Hygrade EZ-Order, Relias Learning Portal, In-House Directory, Kronos, Marketing & PR, and Midas - Employee Injury & Safety Event Reporting. A large banner in the center features a photo of healthcare workers in scrubs and masks, with the text 'St. Joseph's Health ALERT Communications Hub for COVID-19' and 'Introducing SJHALert: COVID-19 Updates... Anytime, Anywhere!'. A green arrow points to the 'Midas - Employee Injury & Safety Event Reporting' link in the sidebar.

2. Under **Employee Injury**, select the Employee Injury Event link. **Do not** use the forms under Safety Events.



The screenshot shows the 'Employee Injury & Safety Event Reporting' page. The page title is 'Employee Injury & Safety Event Reporting'. Below the title, there is a message: 'To report an Employee Injury or a Safety Event, please click on the appropriate link below (under construction)'. The page is organized into a table with two main sections: 'Report Type: Employee Injury (1)' and 'Report Type: Safety Events (11)'. Under 'Report Type: Employee Injury (1)', there is a link for 'Employee Incident Report' with the description 'Use this form to report employee injuries, incidents, and near misses'. Under 'Report Type: Safety Events (11)', there are links for 'Behavior', 'Blood/Specimen/Lab', and 'Equipment / Device'. A green arrow points to the 'Employee Incident Report' link.

3. The Worker's Compensation event reporting form will appear

EMPLOYEE INCIDENT REPORT FORM

Employed or Contracted:

Injured Employee Name:

Name of Manager / Direct Supervisor:

Cell Phone #:

Personal Email:

Shift when injury occurred:

Incident Location:

Date of Incident:

Approximate Time of Incident:

Time of Incident AM PM

Injury Type:

Briefly describe how you got hurt:

Code	Description
7	Burn
6	Burn, Chemical
43	Caught Between Objects
2	Combative Patient/Assault
12	Contact Dermatitis
14	Exposure, Bodily Fluids / Splash
44	Exposure, COVID
15	Exposure, Infectious Disease
H	Hearing Loss
8	Insect/Spider Bite
24	Lifting Injury

Body parts affected (select all that apply)

Have you had treatment in the past for this injury?

Buttons: Save, Update, Save & Print, Qual. Crit., Cancel, Help, Completed:

- A. The name of the form will display on the first line.
- B. In the Date field, enter the date you are completing the event report.
- C. Click on the first gray box and choose if the person is a St. Joseph's employee or a contracted employee (i.e. agency nurse).
- D. If you choose that this is a St. Joseph's employee, the Injured Employee Name field will appear. Enter either the employee's last name or a few letters of the last name and hit the **Tab** key. A list of employees will appear matching the information you entered and choose the correct employee name.
- E. Enter the employee's Manager's name using the technique listed in "D" above.
- F. Enter the employee's current cell phone number with voicemail and personal email. It is important we have an email address in case the employee is out of work and HR or the Workers' Compensation carrier needs to get in contact with the employee.
- G. The Incident Location is sorted by Cost Center.
- H. Chose the appropriate Injury Type. Use the scroll bar to see additional Injury Types.
- I. Complete all fields. Use the scroll bar to navigate.
- J. If the question or field label is in bold, the question is required and the form cannot be saved without an answer.

- K. Any gray box with dots is a “search field”. Click on the box to see a drop-down list of available values.
- NOTE: for fields with a long list of values, enter the first letter or two of the name or value in the field and hit the Tab key. Your choices will be limited to only those names that fit the criteria you typed in.
 - If you enter a [with a few letters and hit the tab key, you will be provided with all the names that contain the letters that come after the bracket. For example, “[dez” will list all employees with a last name of Hernandez and Fernandez, and any employee who has a dez in their first name.
4. Complete all questions, then click Save on the right side of the screen. After clicking Save you *WILL NOT* be able to go back and review or revise the information you entered. If you have additional information to add, please contact the Workers’ Compensation Specialist at 973-754-8435.
5. After saving the form, a message will display saying that you have successfully saved a Focus Study for WORKERS COMPENSATION, click on OK to exit.
6. For each event submission the manager/direct supervisor entered for the employee will receive notification of the event entry.