



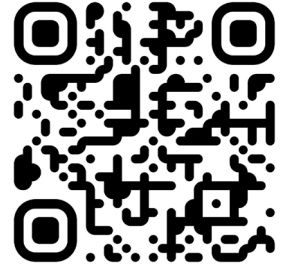
FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## Staff Injury/Illness Reporting Process

### Injured Staff Member -Northern Colorado - Cheyenne

You received this package because you reported to your supervisor an injury or illness directly related to, caused by, contributed to, or significantly aggravated by events or exposures connected to the day-to-day activities of your employment in the workplace.

Any injury experienced during work must be immediately reported to your supervisor and risk management using the QR Code or the Risk Management Portal at [risk.ymcamso.org](http://risk.ymcamso.org).



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#### For Life-Threatening Emergency Injuries:

1. The YMCA will call EMS and follow all established emergency procedures.
2. The YMCA will contact your emergency contact, and a supervisor or leadership may accompany you to the Emergency Room.
3. Follow steps 3 & 4, outlined below, as soon as you are able.

#### For Non-Emergency Injuries:

1. Select a medical provider listed below.
2. Provide the medical facility staff with all detailed information regarding your injury.
  - a. A post-accident drug test may be required for all staff accidents.
3. As soon as possible submit a copy of all **documentation** received from the medical facility staff via email to your supervisor and complete Staff Injury/Severe Illness Report via the Risk Portal ([risk.ymcamso.org/new/](http://risk.ymcamso.org/new/))
  - a. Enter the Subject as: Staff Injury - (Your Name) - (Date of Injury)
  - b. Choose: Risk – Northern Colorado as the Category
  - c. Choose: Staff Injury/Severe Illness Report as the Ticket Option
  - d. Choose: Injured Staff Member as the Reporting Person
  - e. Continue filling in the form with information. Remember to be as detailed and factual as possible.
4. Ensure that your supervisor completes the **Department of Workforce Services Division of Workers' Compensation Report of Injury** form included in this packet. We prefer that this be filled out on a computer/device for legibility. (Must be turned in within 24 hours of the injury, it is best to submit with Staff Injury Report via Risk Portal).
5. Obtain approval from your supervisor before returning to work.
6. Give a copy of all paperwork from the provider to your supervisor after every follow-up appointment.

#### Additional Information:

1. Expect to be contacted within 48 hours by:
  - a. YESS Human Resources Department
2. You must attend all follow-up appointments with an approved Worker's Compensation medical provider.
  - a. Follow-up appointments should be scheduled before or after work.
  - b. Failure to attend your medical appointments may result in a loss of benefits
3. If you do not wish to seek medical care, follow step 2 from the Non-Emergency Injuries section above.
  - a. Choosing not to seek care immediately will not prohibit you from seeking care later if the injury persists.



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## YMCA OF NORTHERN COLORADO CHEYENNE DESIGNATED PROVIDER LIST FOR INJURED WORKERS

**From:** YMCA of Northern Colorado

**Subject:** Nearest Provider List Notification Letter for an Injured Worker

I am sorry to learn that you have been injured. To make sure you receive the care you need, we are filing a claim with the Wyoming Department of Workforce Services Workers' Compensation Division. An adjuster from the State's system will contact you with your claim number and additional information very soon. In the meantime, you should see a medical provider. **The list attached are suggestions as the closest in proximity to the YMCA, but you can visit any provider you choose. Ensure you inform them that your injury is work related.**

NextCare Urgent Care  
2030 Blue Grass Cir  
Cheyenne, WY 82009  
307.635.3500

Express Urgent Care  
7124 Commons Dr.  
Cheyenne, WY 82009  
307.426.4060

HealthWorks  
2508 E. Fox Farm Rd. 1-1A  
Cheyenne, WY 82007  
307.635.3618

BestMed Urgent Care  
1919 Central Ave  
Cheyenne, WY 82001  
307.514.9888

Cheyenne Regional  
Medical Center -West Campus 214 E. 23rd St.  
Cheyenne, WY 82001  
307.634.2273

Please contact one of these medical providers to be seen as soon as possible. After your first appointment, please follow up with me so we can review your medical status and work capabilities.

If you have questions, please contact me. My goal is to ensure that you get the care you need to recover quickly and return to work as soon as possible.

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