



Notification of an Event Involving Injuries - Internal Form

(To be filled by the Safety Unit)

Event no. _____ Date of report _____

1. Injured person's details

First name _____ Last name _____ I.D / Passport no. _____

Status Employee Student Student employed on an hourly basis Post-doctoral fellow

Other (detail) _____

Full Address _____ Healthcare Provider (Kupat Holim) _____

Cellular _____ Position _____ Department _____

Internal phone no. _____ Arrival time to the Institute on the day of the event _____

Starting date of present position ____ / ____ / ____ Date of birth ____ / ____ / ____

2. Nature of the event

Location of the event _____ Date _____ Time _____

Please explain briefly what happened _____

Witnesses 1. _____ 2. _____

Signature of the injured person _____ Date _____

Approval of the division/department

Direct Supervisor (full name) _____ Signature _____ Date _____

Head of department/division _____ Signature _____ Date _____

Essence of the event: The filled and signed form should be sent to the Safety Unit.

3. Comments of the Safety Officer

Signature _____ Date _____

4. For use of the Human Resources Division

A claim was submitted to the National Insurance Institute (Bituach Leumi)

Yes, on date _____ Sick leave for _____ days

No (provide details)

The Ministry of Industry, Trade and Labor was notified The insurance company was notified

Human Resources Comments _____

Signature _____ Date _____



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מכון ויצמן למדע
WEIZMANN INSTITUTE OF SCIENCE

אגף משאבי אנוש
Human Resources Division

Reporting Procedure for an Event Involving Injuries

1. The injured person or his/her superior must report the event to the Safety Unit within 48 hours after the event, using the internal form "Notification of an Event Involving Injuries". (Office of the Safety Unit telephone no. – 3844)
The form must be signed by the head of the research group or the direct manager, as well as the head of the scientific department or of the technical/administrative division. If necessary, enclose a memo with additional comments/remarks.
After completing the form, it should be sent to the Safety Unit.
2. The Safety Officer will add his/her comments and on the event, under section 3 of this form, and will forward the form to the Human Resources Division.

Note:

Students of the Feinberg Graduate School will contact the Feinberg Graduate School in order to check the possibility of receiving reimbursement of expenses for emergency transportation and emergency medical care. (The Safety Unit's approval must be obtained when the event involves a safety violation).

Submitting a Claim to the National Insurance To recognize an injury as a work accident and receive injury allowance

(Relevant only for persons insured by work injury insurance, not for Feinberg Graduate School students)

What should you do?

In order to submit a claim to the National Insurance Institute, follow these steps:

- Complete the internal "Notification of an Event Involving Injuries" form, obtain the supervisor's signature and forward the form to the Safety Unit.
- The Safety Officer will provide the injured person with National Insurance form no. 250.
Use this form to:
 - As a means of payment in case of medical transportation to the hospital – submit at the emergency room. Form submission to the hospital will cover any incurred debt.
 - For the purpose of obtaining an initial medical certificate for a work-related injury from the health care provider (Kupat Holim) – submit to your attending physician. This certificate is needed when a claim will be submitted to the National Insurance Institute (even when the injury does not result in absence from work).
- Keep all the medical documents related to the injury – to be forwarded to the relevant Human Resources partner to submit a claim to the National Insurance Institute.
- Contact your department's Human Resources partner to schedule a meeting in order to complete the National Insurance claim form.

What are the next steps?

- If the National Insurance Institute approves the injury as a work injury/occupational disease:
The injured person is entitled to receive free medical care upon presenting the National Insurance certificate confirming the claim, as well as injury allowance, for absence from work up to a maximum of 91 days (a monthly worker will continue to receive the salary during the period of absence, and an hourly worker will receive the injury allowance from the National Insurance Institute, amounting to 75% of the salary, directly to his/her bank account).
- If the National Insurance Institute rejects the claim:
The number of days of absence resulting from the injury (if such absence occurred) will be deducted from the employee's sick/vacation day balance.



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Please note that a work injury/occupational disease recognized by the National Insurance Institute entitles the person to:

- An injury allowance for insured persons injured at work, at the rate of 75% of the salary, for the loss of wages or income in the period following the injury, during which they became incapable of working (injury allowance for no more than 91 days of absence due to a work injury).
- Eligibility to receive free medical treatment to cover injury-related expenses.
- If the injured person remains disabled as a result of the injury, he/she will be entitled to an allowance or a one-time grant in accordance with the decision of the National Insurance Institute medical committee before which he/she appears.
- Reimbursement of costs incurred as a result of work injury such as parking, taxis, etc. – through the health fund (Kupat Holim) and at its discretion.

After the National Insurance Institute's approval of the injury as a work accident, reimbursement of the expenses connected directly or indirectly to the injury can be claimed from the health fund (Kupat Holim) in which the injured person is insured. In order to file for reimbursement, all original receipts must be maintained.