

INJURY & DEATH BENEFITS

STANDARD NO(S):

NYSLEAP 43.7

DATE:

May 29, 2009

REFER TO:

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I. OBJECTIVE:

To establish guidelines for compassionate and effective assistance to be rendered to the family and dependents of any member who loses one's life or suffers serious injury while engaged in the performance of one's duty.

II. POLICY:

In the time-honored practice of police agencies everywhere, it shall be the policy of the SCSO "to take care of our own." There is no more suitable occasion for the exercise of such care than when one of our members is seriously injured or killed while in performance of one's duty. The procedures set forth herein will be administered conscientiously, with an absolute minimum of delay, while keeping the appropriate next-of-kin fully informed of the progress made toward resolution of any questions or problems they may have.

III. DETAILS:

- A. The appropriate provisions of paragraph III (A)(1) in the section entitled "Notifications", this Manual, shall be implemented as soon as possible.
- B. The Undersheriff, or an experienced officer as designee, shall undertake the responsibility for liaison with the stricken member's family. This relationship shall commence as soon as possible, with assurances given that the resources of the SCSO will be available for any and all assistance as needed.
 1. In the event of hospitalization, family needs for funds, transportation, childcare, etc. shall be examined and accommodated, if possible.
 2. In addition to the above, in death cases, assistance with funeral arrangements, notification of out-of-town relatives, and help with housing may be required.
- C. The liaison officer shall immediately become acquainted with the various benefits, which may be secured on behalf of the member, and be prepared to work closely with the family in obtaining the necessary documentation to support any claims, which are to be made. This includes having access to any otherwise confidential information from personnel files; actively following requests for information or pursuing steps to be taken by other departments, such as the Personnel Officer,

the Medical Examiner, etc.; and, rendering assistance to survivors in the actual execution of the required forms.

- D. Workers' Compensation** - Benefits from this source are administered by the Workers' Compensation Board, which has a district office covering Seneca County at 155 Main Street West, Rochester, NY 14614. Circumstances will dictate the degree of assistance needed in submitting the various forms.
- E. General Municipal Law § 207-c - Separate and distinct from the benefits allowed by Workers' Compensation, New York State's General Municipal Law § 207-c provides that an officer "injured in the performance his duties" shall be paid by the employer the full amount of regular salary or wages for the duration of the disability and is covered for all medical treatment and hospital care necessitated by reason of the injury.
- F. New York State Retirement - Benefits from this source may be obtained through the Seneca County Personnel Officer who notifies the New York State Employees' Retirement System (NYSERS) by submitting a form entitled "Notification of Death." This is accompanied by a certified copy of a New York State Department of Health "Certificate of Death". It is the Personnel Officer's procedure to request that NYSERS contact the survivor concerning what action should be taken.

In an Application for Accidental Death Benefit, NYSERS requires a statement covering the accident and any other accident sustained by the member for a period of one year prior to the member's death, together with a schedule of lost time due to each and the reasons for each absence.

If a report was filed with the Workers' Compensation Board, NYSERS requires a copy of the report, plus a complete description of the member's activities for the three-day period prior to death. NYSERS also wants a copy of the autopsy report, the death certificate and any public safety laboratory report concerning blood alcohol content.

- G. Public Safety Officers' Benefits Program - Administered by Bureau of Justice Assistance (BJA), U. S. Department of Justice, Public Safety Officer's Benefits Office, Washington, DC, this program provides a cash benefit to the survivor(s) of a police officer killed in the line of duty. The amount is presently fixed at \$315,746.00. Each October 1st, the benefit rate is adjusted to reflect the percentage of change in the Consumer Price Index. Claims may be filed through the SCSO or directly on line to the BJA at www.psob.gov. For further information call 1-888-744-6513. In order to apply for this benefit, two forms must be submitted.

- 1. The Report of Public Safety Officer's Death form is signed by the Sheriff and must include the following documentation:
 - a. Detailed statement of circumstances from the initiation of the incident to the pronouncement of the officer's death.
 - b. A copy of the investigation, incident or accident report signed by the investigating officer and notarized. If an investigation was not conducted,

there must be a detailed statement of the circumstances, signed by the Sheriff and notarized.

- c. A copy of the autopsy report, signed by the pathologist who performed the autopsy and either notarized or with the county coroner's raised seal. If an autopsy was not performed, a notarized statement to that effect, signed by the county coroner or the Sheriff will suffice.
- d. A copy of any toxicology report (blood/urine analysis) signed by the toxicologist of record, either notarized or bearing the coroner's raised seal. If a toxicology analysis was not performed, a notarized statement to that effect, signed by the county coroner or the Sheriff will suffice.
- e. A copy of the death certificate, bearing the raised seal of the county coroner or the Department of Health.

****NOTE**** FOR DOCUMENTATION NEEDED FOR HEART ATTACKS OR STROKES, please refer to Section H below, Hometown Heroes Survivor's Benefits Act, or on line at www.usdoj.gov/BJA/grant/psob/psob_main.html.

- 2. The Claim for Death Benefits form is completed and signed by the survivor claimant. If an authorized representative signs for the claimant, an affidavit by the claimant authorizing such action must be included. The following documentation is required:
 - a. A copy of the decedent's current marriage certificate, bearing the raised seal of the issuing office, if applicable.
 - b. Divorce Decrees for all the officer's and current spouses previous marriages, including references to physical custody of any children, if applicable.
 - c. Death Certificates for all the officer's current spouses previous marriages, if any of the marriages ended in death, if applicable.
 - d. A copy of the birth certificate for all the officer's surviving children and step children regardless of age, or dependency identifying the children's parents, if applicable.
 - e. For each child who was between the ages of 19-22 and a full time student at the time of the officers death, a copy of the child's transcript and a statement from the school confirming the child's status as a full time student when the officer passed away.
 - f. For each child who was between the ages of 19-22 and not a full time student at the time of the officer's death a statement from the child that he/she was capable of self support

- g. For each step child who, at the time of the officer's death, was either under the age of 19 or between the ages of 19-22 and a full time student:
 - h. A statement from the child's parent stating that, at the time of the officer's death, the child's principal place of residence was the home of the officer OR a statement that the child did not live at the officer's home, but was dependent on the income of the officer for more than one third of the child's support OR affidavits from two non-family members explaining how the officer accepted the child as his/her own. If one of these conditions applies to the step child who was between the ages of 19 and 22 at the time of the officer's death, a copy of the child's transcript and a statement from the school confirming the child's status as a full time student when the officer passed away.
 - i. For each step child who was between the ages of 19-22 and not a full time student at the time of the officer's death, a statement from the child that he/she was capable of self support.
- H. Hometown Hero's Survivor Benefits Act as of December 15, 2003, establishes a presumption that public safety officers who die from a heart attack or stroke following a non-routine stressful or strenuous physical public safety activity or training, died in the line of duty for benefit purposes.

The Hometown Hero's presumption may be overcome by "competent medical evidence to the contrary."

The Hometown Hero's Act excludes actions of a "clerical, administrative or non manual nature" from consideration.

Claims may be filed through the SCSO or directly on line to the BJA at www.psob.gov. For further information call 1-888-744-6513. In order to apply for this benefit, two forms must be submitted.

1. The completed PSOB Report of Public Safety Officer's Death form to be signed by the Sheriff and will include the following information:
 - a. A statement, on agency letterhead and signed by the Sheriff, accounting for the 24 hours period prior to the onset of the officer's heart attack or stroke. The statement should note the hours the officer was on duty, and give detailed information on the entire officer's on duty actions during that time.
 - b. All investigation, incident and/or accident reports for the officer's on-duty activities in the 24 hours prior to his or her heart attack or stroke.
 - c. All medical documentation about any response to the heart attack or stroke (like an ambulance run sheet) and any treatment of the officer prior to his/her death.
 - d. A copy of the autopsy and toxicology report(s), if available. If these reports do not exist, provide a statement by the head of the agency (or

the medical examiner) explaining that no autopsy and/or toxicology was performed.

- e. A copy of the officer's death certificate.
2. The PSOB Claim for Death Benefits form is completed and signed by the survivor/claimant. If an authorized representative signs for the claimant, an affidavit by the claimant authorizing such action must be included. The following documentation is required:
- a. A copy of the decedent's current marriage certificate, bearing the raised seal of the issuing office, if applicable.
 - b. Divorce Decrees for all the officer's and current spouses -previous marriages, including references to physical custody of any children, if applicable.
 - c. A copy of the birth certificate for all the fallen officer's surviving children and step children regardless of age, or dependency identifying the children's parents, if applicable.
3. Administrators of both of these federal programs have asked that the agency representative assisting the family in the preparation of a claim insure that documentation is complete and properly certified, so that delays in processing the claim will not be incurred. They suggest that both the agency and family material be submitted in one package to the following address:

Public Safety Officers' Benefits Program
Bureau of Justice Assistance
810 7th Street, NW
Washington, DC 20531
FAX: 202-616-0314

- I. The concern and support of friends is of immeasurable help in encouraging the injured or comforting the bereaved. With this in mind, it shall be the responsibility of the liaison officer, within the bounds of good taste and in consideration of the circumstances, to insure that employees of the SCSO are kept current as to the status of any situation in which the officer is required to render assistance. The wishes of the family or caregiver in this regard must be determined and followed.