After Action Reports

Overview: This job aid provides Emory University **supervisors** on how to complete Supervisor After Action Reports in the HOME (Health and Occupational Management at Emory) Portal.



EMORY

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To access HOME, log in to Self-Service (http://leo.cc.emory.edu) with your Emory Network ID and password. Then, click on the Workplace Health tile.



2

You will be prompted to log in again with your Net ID and password.

Login to AttributeContract		
Network ID		Login is Emory's authentication tool for logging into multiple web systems and applications. If you have any questions, problems, or comments about Login, please contact the University Service Desk at (404)
NetID		727-7777 or the Emory Healthcare Call Center at (404) 778-HELP. You may also submit an IT support request at http://help.emory.edu/.
Password		
Password		
Logia		
Login		
Forgot Password?		

As a manager, you will be given a choice between portal access or supervisor access. Click **Supervisor Access.**



QUESTIONN	AIRES		\sim
	EMPLOYEE	QUESTIONNAIRE	ACTIONS
11-07-2018	First November	OIM Supervisor After Action	begin
11-07-2018	First November	OIM Supervisor After Action	begin
11-01-2018	First November	OIM Supervisor After Action	begin

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Read-only direct report injury reports are listed at the top. Scroll down.

QUESTIONNAIRE-REPORT INJURY OR ILLNESS

Author: First November Date: 11-09-2018 12:51

Demographics

Please complete the following questions to report a workplace injury, illness, or incident.

Accident/Injury
test
test
test
No
test

Fill in the required answers. Click **Submit** when finished, or **Save for later** to save your answers and finish the questionnaire at a later date.

Describe specific task being performed at time of incident: *	
Describe safety equipment, personal protective equipment (PPE) in use at the time of the incident: *	
Description of incident from eye witnesses (if applicable):	
Description of incident from additional employees with knowledge of the incident (if applicable):	
What was the injury and part of the body affected (e.g. sprained right ankle, cut on left index finger, etc)?	
What action or event caused the incident to occur (root cause)?	
Describe corrective actions taken to prevent incident recurrence:	
Part 5: ADDITIONAL INFORMATION / COMMENTS	
Additional Comments:	
What is your best contact number?	
Save for later	SUBMIT