

# Injury and Illness Reporting Instructions

**\*\*Important Note\*\***

**You must use Google Chrome when logging into eSLA**

Injury and Illness reports are submitted electronically through the Department of Safety and Professional Services' Electronic Safety Licensing Application (eSLA). This guide is to assist you in completing the report. Injury and Illness reports are due by March 1<sup>st</sup> each year. The report portal opens on January 1<sup>st</sup> of each year. If you already have an eSLA profile linked to your reporting account, please proceed to the first step on the next page. If you have any questions or issues, please contact your Public Sector Safety Inspector from the map located at the end of the guide. If you are a new injury and illness reporter or already have an existing eSLA profile from a prior employer, please follow one of the following steps:

1. **I am a new injury and illness reporter and do not have an eSLA profile. The email address I use at my employer is unique to me. Example (name@nameofemployer.com).**
  - Create an eSLA profile by visiting this link: <https://esla.wi.gov/PortalRegistration>
  - Use the option "I am a representative of a local or state government" regarding the SSN.
  - Once you have created your profile, email your area's safety inspector to be linked to your reporting account. You will not be able to complete the report until this process has been completed.
2. **I am a new injury and illness reporter and do not have an eSLA profile. The prior reporter used the same email that I plan to use. Example (clerk@nameofemployer.com).**
  - Contact your area's safety inspector for further instructions. The prior reporter's profile will need to be unlinked before your profile can be established.
3. **I have reported in the past for a former employer.**
  - Contact your area's safety inspector to assist with updating your profile's email address and linking to the reporting account for your new employer.

A few helpful notes:

- If you are new to injury and illness reporting or need a reference to assist with the report calculations our SBD10710 form contains all relevant information including a flow chart to determine if the injury or illness is reportable. The packet can be found here:  
<https://dsps.wi.gov/Documents/Programs/PublicSafety/SBD10710Packet.pdf>
- Ensure that you have the average number of employees, total hours worked, and any relevant injury and illness information ready before starting the report.
- Anyone who would be covered under the employer's worker's compensation program is counted in this report. This includes clerks, treasurers, elected officials, election workers, volunteer fire department members, and anyone within the employer covered under the worker's compensation program.
- If you encounter any errors or need assistance, reach out to your area's safety inspector. Their contact information can be found at the end of this guide on the Public Sector Safety District Map.

# Submitting your Injury and Illness Report

**\*\*Important Note\*\***

**You must use Google Chrome when logging into eSLA**

1. Login with your eSLA profile information in the Existing eSLA Users Login on the right side of the page. Login link: <https://esla.wi.gov/>. If you forgot your email or password, use the link below the login area to view your email or reset the password.

**First Time eSLA User**

Create Account

If you have previously conducted business with the Department but are new to eSLA, please activate your eSLA login with the DSPS CUSTOMER button below.

**DSPS CUSTOMER**

If you have never conducted business with the Department, please create a new eSLA login with the NEW DSPS CUSTOMER button below.

**NEW DSPS CUSTOMER**

**Existing eSLA Users**

Login

\* Email

\* Password

**LOGIN**

[Forgot Password?](#)  
[Forgot Email?](#)

How to Use eSLA - To set up your eSLA account, complete the First Time eSLA User section above and then associate any business accounts(see the Help page). Once you complete the First Time eSLA User section above, log in as an existing user to the right of the eSLA Customer Portal page every time you return.

Visit our [Help](#) page for eSLA user guides and FAQs.

2. Once you have successfully logged in click on the “+ New Application” button.

**Welcome to your eSLA Dashboard**

Permit Fire/Municipality

**+ NEW APPLICATION** **+ MY ITINERARIES** **MY HISTORY**

Please click on the "My History" button to view previously submitted payments, permits, credentials and service requests such as revisions, components and compliance statements.

Are you trying to add a business or renew a cross connection control assembly? Click here to add a business or renew your assembly.


**New Permit Applications**

To edit or withdraw an application, please click on the Options button.

[View and Search all Applications](#)

**SORT BY**

3. Complete the dropdowns as seen below. If you do not have an account created or do not have the correct account listed, please contact your area's safety inspector. Once complete, click "Save and Continue".

PLAN REVIEW STATUSDASHBOARDMINE SAFETY TRAININGINSPECTOR LOOK-UPPUBLIC LOOK-UPHELP0TESTER, ESLA

### Application Selection

Select the Area. Next, based on the area, select either the Program Area, Permit/Plan Review, and Application Type or the Application Type, Credential and Credential Type as applicable.

To add an account, select the account name from the drop down. If you do not see an account, please add the business via the [Manage Business](#) page.

Select Area

Permits

Select Program Area

Public Sector Employee Safety

Select Permit Type/Plan Review

Injury and Illness Report

Select Application Type

Public Sector Employee Safety

Please select an Account [\(Create new account\)](#)

IIR Report Account

### Application Instructions

Provide the information necessary for the application. Once finished, click which type of Save option desired.


Per SPS 332.205, all Wisconsin public employers must report work-related injuries and illnesses to the department for the previous year by March 1 of each year.


Within 8 hours after the death of any employee from a work-related incident or the in-patient hospitalization of 3 or more employees as a result of a work-related incident, the employer shall orally report the fatality or multiple hospitalization by telephone or in person to the department.

When reporting a public sector employee fatality or 3 or more hospitalizations, contact the department at (608) 267-9420 during regular business hours. The State of Wisconsin Division of Emergency Management can be contacted at (800) 943-0003 outside of regular business hours.

CANCEL SAVE AND CONTINUE

4. The next page will contain the report data. The personal information will be automatically filled in from your profile contact information.

PLAN REVIEW STATUSDASHBOARDMINE SAFETY TRAININGINSPECTOR LOOK-UPPUBLIC LOOK-UPHELP0TESTER, ESLA



## New Application

Injury and Illness Report DIS-102317064

Injury Details

Review + Submit

### Personal Information

First Name

\* eSLA

Last Name

\* Tester

Email Address

\* eslatester@wisconsin.gov.invalid

Phone

\* 111-111-1111

5. Below is the address information. This should automatically populate from the prior year's reports on the account. If an address is displayed and is correct, click the check box under the public column. This will then save the address on the report. Once saved you will be given a confirmation of “address saved successfully”. If you need to add a new address, see step 5B.

**Public Address**

Select a public address by clicking the appropriate checkbox to the right (this is the address that will be viewable by the public). To add a new address, click Add Address, complete the required fields, and click Save

Public	Address
<input type="checkbox"/>	4822 Madison Yards Way Madison WI 53705 Dane United States

[+ ADD ADDRESS](#)

- 5B. To add an address, click on the “+ Add Address” button. When entering the new address check “Use this address as Public”. When complete, click the “save” button.**

**Public Address**

Select a public address by clicking the appropriate checkbox to the right (this is the address that will be viewable by the public). To add a new address, click Add Address, complete the required fields, and click Save

☒ Use this address as Public

Address Format  
US Address

Street Address Line 1  
\* 4522 Madison Yards Way

Street Address Line 2

City \* Madison State \* WI Zip Code \* 53705

County \* Dane

[CANCEL](#) [SAVE](#)

- 5C. Once the address has been saved, it may be validated. You may be given a choice like the validation process seen in this step. Select the address that is correct by clicking the address in the Street Address column.**

#### Geo Validated Address Options

Multiple addresses have been found based on the information you provided. Please select the correct address from the options below.

Street Address	City	State	Zip Code	County	Validated
<a href="#">4822 Madison Yards Way</a>	Madison	WI	53705	Dane	✓
<a href="#">4822 Madison Yards Way</a>	Madison	WI	53572	Dane	

6. Once the address has been saved, your screen will look like the image seen in this step. If you get an error, delete the listed address with the garbage can icon and enter the address through the new address process in steps 5B and 5C.

## Public Address

Select a public address by clicking the appropriate checkbox to the right (this is the address that will be viewable by the public). To add a new address, click Add Address, complete the required fields, and click Save

✓ ADDRESS SAVED  
SUCCESSFULLY

✎ USE DIFFERENT ADDRESS

4822 Madison Yards Way  
Madison WI 53705  
Dane  
United States

7. Once the address has been saved, continue down to the report information. If you are unsure how to complete the report, see the link to the SBD10710 Packet on the first page. The first section is employment information. This is the average number of employees and the total hours that all employees worked during the reporting year.

## Employment Information

\* Average Number of Employees

\* Total Hours Worked

8. Next enter the number of cases (if applicable). Note: the number of cases must match the number of injury and illness types in Step 10. This information is different than workers comp reporting. Please refer to the SBD10710 packet for more information.

## Number of Cases

Enter the total number of cases for each category.

Please note: The Total Number of Cases must equal the Total Number of Injury and Illness Types reported below.

\* Deaths

\* Cases with Days away from Work

\* Cases with Job Transfer or Restriction

\* Other Reportable Cases

9. Next enter the number of days away from work and days with job transfer or restriction (if applicable).

## Number of Days

Enter the total number of days for each category.

\* Days away from Work

\* Days of Job Transfer or Restriction

**10. Enter the injury and illness types for the reported number of cases from Step 8 (if applicable). Once complete, click the “Save and Continue” button at the bottom of the screen.**

## Number of Injury and Illness Types

Enter the total number of Injury and Illness Types for each category.

Please note: The Total Number of Injury and Illness Types must equal the Total Number of Cases reported above.

\* Injuries

\* Skin Disorders

\* Respiratory Conditions

\* Poisonings

\* Hearing Losses

\* All other Illnesses

**11. The next step is to ensure the report has all the correct information and to submit the report. The application review will show a checkmark and say completed once all data has been completed. If any portion of the report needs to be corrected the items will be displayed in the application review area. Once complete, check the “I accept” box and then type your name as it appears on the account to electronically sign the report. Your account name is displayed under the input box for your signature. Once done, click the “Submit” button.**



## New Application

Injury and Illness Report DIS-102317064

Injury Details

Review + Submit

## Application Review

✓ Completed

## Attestation

By attesting below, the report submitter swears that all information provided on this report is true, accurate, and that the submission requirements are met.

Consent to Electronic Signature



☒ I accept

Type your First Name and Last Name as they appear on the application to sign electronically



eSLA Tester  
(eSLA Tester)

12. Your report has now been submitted; an email will be sent with a PDF attachment of the required summary posting. The posting is required to be displayed in the employee areas from February 1 to April 30.

13. If you have changes to make to your report, you can edit the report through June 30<sup>th</sup>. From your eSLA dashboard, click on the permits tab and then locate the report. On the right-hand side click the “Options” button and select – “Edit Application”.

Welcome to your eSLA Dashboard

Permit Fire/Municipality

+ NEW APPLICATION + MY ITINERARIES MY HISTORY

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SORT BY ▾

	INJURY AND ILLNESS REPORT YEAR	STATUS	EXP DATE	
Injury and Illness Report SFY-102302265-SFT	2022	Submitted		<b>OPTIONS ▾</b>
Injury and Illness Report SFY-102302265-SFT		Submitted		<b>OPTIONS ▾</b>

Options menu:

- Edit Application
- Download Application
- Print Report

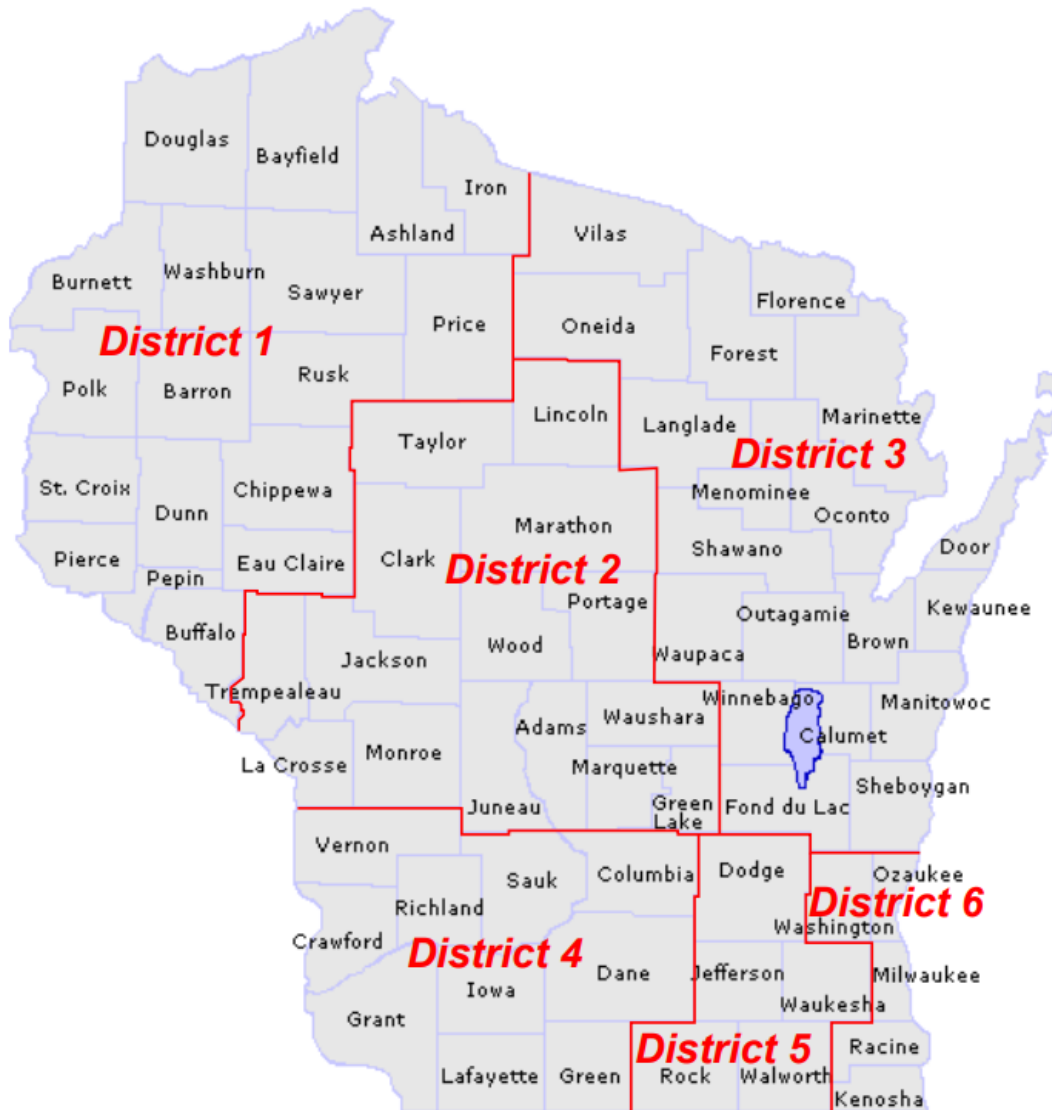
14. If changes to the report are made a new email will be generated with an updated injury and illness summary. Please ensure that the correct report is posted.

**Thank you for submitting your report!**



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## Public Sector Employee Safety Inspection District Map



1 – Jane Dienger	<a href="mailto:Jane.Dienger@Wisconsin.gov">Jane.Dienger@Wisconsin.gov</a>	715-538-3308
2 – Rhonda Kocijan-Klec	<a href="mailto:Rhonda.Kocijanklec1@wisconsin.gov">Rhonda.Kocijanklec1@wisconsin.gov</a>	608-982-6496
3 – Tim Condon	<a href="mailto:Timothy.Condon@Wisconsin.gov">Timothy.Condon@Wisconsin.gov</a>	414-852-3660
4 – Andrew Amacher	<a href="mailto:Andrew.Amacher@Wisconsin.gov">Andrew.Amacher@Wisconsin.gov</a>	608-438-8061
5 – Richard Lampi	<a href="mailto:Richard.Lampi@wisconsin.gov">Richard.Lampi@wisconsin.gov</a>	608-720-0007
6 – Jim Creegan	<a href="mailto:James.Creegan@Wisconsin.gov">James.Creegan@Wisconsin.gov</a>	608-219-7185
Supervisor	<a href="mailto:lucas.dederich@wisconsin.gov">lucas.dederich@wisconsin.gov</a>	608-445-6558
General Questions	<a href="mailto:DSPSSBHealthandSafetyTech@wisconsin.gov">DSPSSBHealthandSafetyTech@wisconsin.gov</a>	