1.1. External Claim Registration

Purpose
The purpose of this transaction is to lodge a claim for Occupational Injury claim (WCL 2) using the CompEasy System.

| Business Scenario |
|---|
| In this scenario the Employer , in this example, lodges an Occupational Injury claim in the CompEasy System.

 The Compensation for Occupational Injuries and Diseases Act applies to:

 All employers with casual or full-time workers who sustained a workplace accident or contracted a work-related disease. |

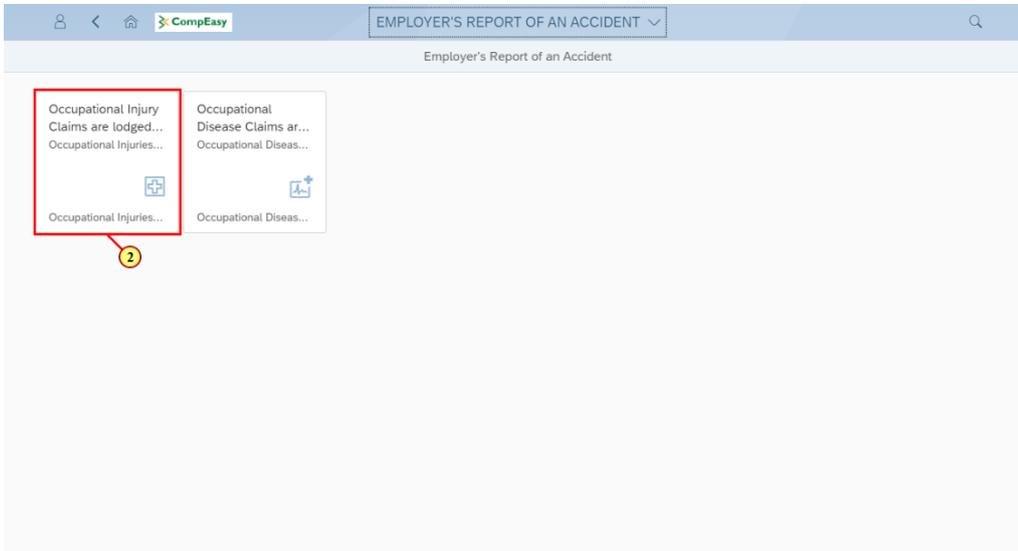| Prerequisites |
|---|
| The following prerequisites are applicable when processing this transaction:

 • Registered Business Partner.
 • Authorised user access to CompEasy.
 • Proof of Identity. |

1.1.1. Home - Google Chrome
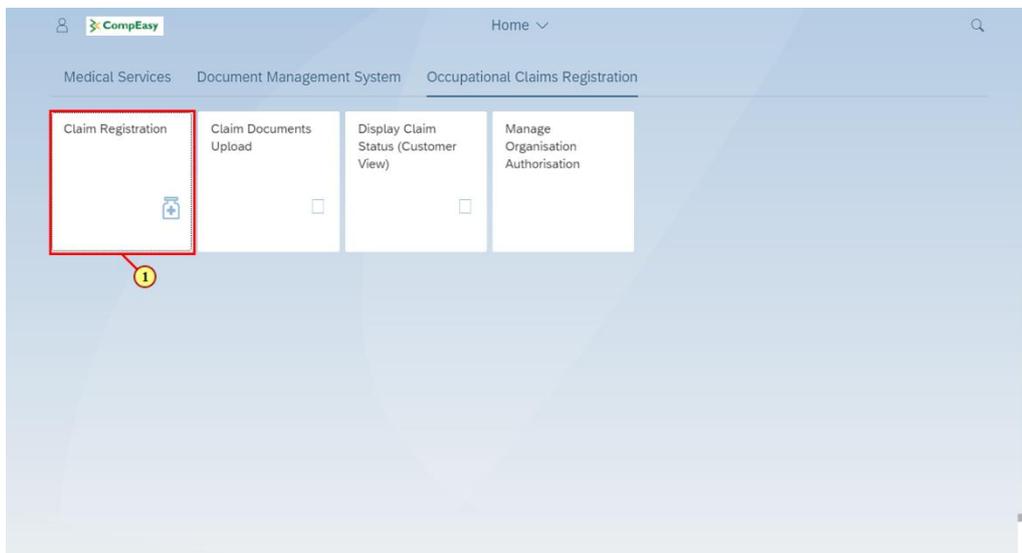
Step	Action
[1]	Click the **Claim Registration** Claim Registration tile to access the transaction.

1.1.2.   EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[2]	Click the **Occupational Injury Claims are lodged** access the transaction. Occupational Injury Claims are lodged... tile to

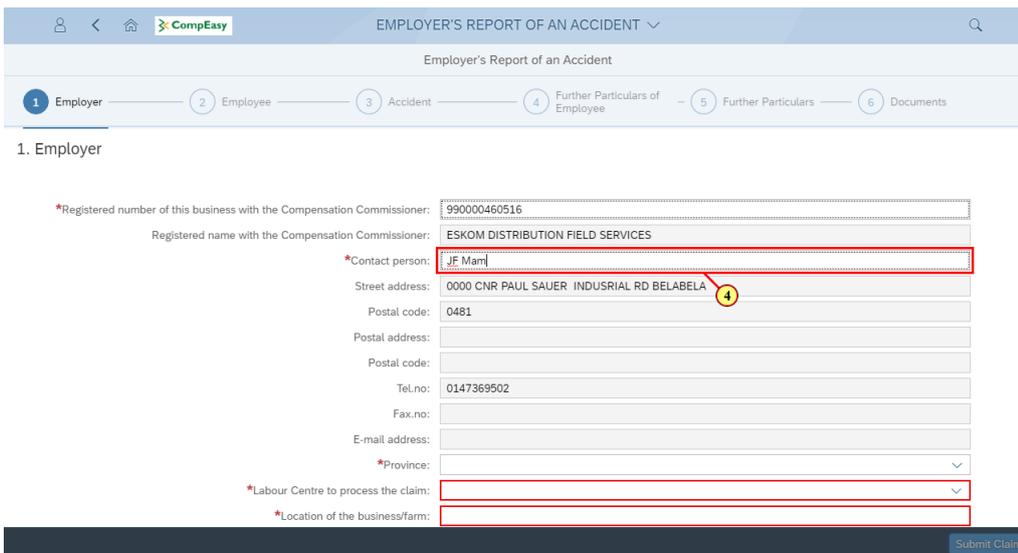## 1.1.3.   EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome
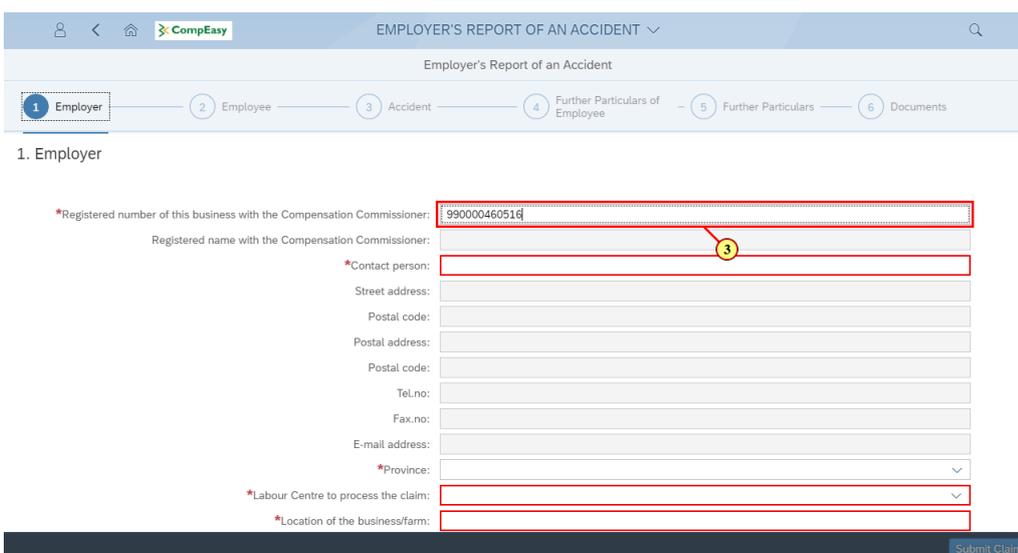
	Enter a valid CF Contract Account number, if the CF Contract Account number is valid it will auto populate all the other filed relating to the Business .

	All fields marked with a red asterisk '*' or red border are mandatory fields.

Step	Action
[3]	Enter **990000460516** in the **Registered number of this business with the Compensation Commissioner** field.

1.1.4. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[4]	Enter **Name of the Contact person e.g. JF Mam** in the **Contact person** field.

1.1.5. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[5]	Click in the **area below the scroll bar** to scroll down.

1.1.6. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[6]	Click the **Province** ⌄ **drop down option** button to display the available list.

1.1.7. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[7]	Click the **Province: Gauteng South** Gauteng South option to select it.

1.1.8. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Based on the proximity, select the Labour Centre based on the selected Province.

Step	Action
[8]	Click the **Labour Centre to process the claim** ⌄ **drop down option** button to display the available list.

1.1.9. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[9]	Click the **Labour Centre: Kempton Park** KEMPTON PARK option to select it.

1.1.10. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	The **Location of the business/farm** is where the Business is located e.g. Midrand.

Step	Action
[10]	Enter **Midrand** in the **Location of the business/farm** field.

1.1.11. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	The **Nature of business, trade or industry** is the type of Business the organization is into e.g. Manufacturing.

Step	Action
[11]	Enter **Manufacturing** in the **Nature of business, trade or industry** field.

1.1.12. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Confirm if the information that is auto populated on behalf of the Employer is correct.

Step	Action
[12]	Click to select the **Yes** ◯ Yes radio button.

1.1.13. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[13]	Click the **Step 2** ![Step 2] button to go to the next page.

1.1.14. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Based on the type of identity document that the employee has, the user can select the relevant Radio button. For example, if the employee holds a passport, the user will select the "**Passport**" Radio button.

Step	Action
[14]	Click to select the **ID Number** ⭕ ID Number radio button.

1.1.15. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Enter a valid ID number, and the information relating to the ID will auto populate.

Step	Action
[15]	Enter **8702170380086** in the **ID No.** field.

1.1.16. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[16]	Click in the **area below the scroll bar** to scroll down.

1.1.17. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

The "**Is the Injured Person a**" field defines the employee's' employment status within the business, for example, Part time or Permanent.

Step	Action
[17]	Click the **Is the injured person a:** ⌄ **drop down option** button to display the available list.

1.1.18. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[18]	Click the **Is the injured person a: Regular Employee (Full-Time)** Regular Employee (Full-Time) option to select it.

1.1.19. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

| | Once the correct identity information has been entered, the employee details fields will be auto populated.

Should any information have changed, when the confirm option appears select No and the fields will be open for editing and updating as per WCL forms. |
|---|---|

Step	Action
[19]	Click the **Occupation** ⌄ **drop down option** button to display the available list.

1.1.20. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[20]	Click the **Occupation** Technician option to select it.

1.1.21. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

ℹ️	Enter the Period the individual is employed for (years/months) e g. 10 years.

Step	Action
[21]	Enter **10** in the **Period in your employ(years/months)** field.

1.1.22. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select the Expected period of disablement e.g. **0-13 Days**.

Step	Action
[22]	Click to select the **0-13 Days** ⭕ 0-13 Days radio button.

1.1.23. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[23]	Click to select the **Yes** ⭕ Yes radio button.

1.1.24. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[24]	Click the **Step 3** [Step 3] button to go to the next page.

User   17

1.1.25. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	The next few steps demonstrate how to answer *Accident related Questions*.
	These questions must be answered as accurately as per possible, as each question informs and determines the next question.
	Some of the questions may require additional documentation, for example, if the incident took place on a public road the form WCL226 will be required as additional supporting documentation on the claim that is critical when the claim is Adjudicated.

Step	Action
[25]	Enter **01.10.2020** in the **Date of accident** field.

1.1.26. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[26]	Enter **12:44:05** in the **Time of accident** field.

1.1.27. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Enter the Place of accident (City/Town) e.g. Midrand.

Step	Action
[27]	Enter **Midrand** in the **Place of accident (City/Town)** field.

1.1.28. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Enter the place where the accident occurred, e.g. Kylami in the **District** field.

Step	Action
[28]	Enter **Kylami** in the **District** field.

1.1.29. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select the Province where the accident occurred.

Step	Action
[29]	Click the **Province** ⌄ **drop down option** button to display the available list.

1.1.30. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[30]	Click the **Province: Gauteng South** Gauteng South option to select it.

1.1.31. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

The date employee reported accident must be in the dd.mm.yyyy format.

Step	Action
[31]	Enter **25.09.2020** in the **Date employee reported accident** field.

1.1.32. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Briefly indicate, **What task was the employee performing at the time of accident?** e.g. Lifting pallets from the truck.

Step	Action
[32]	Enter in the **Time employee reported accident** field.

1.1.33. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[33]	Enter **lifting the pallet from the truck** in the **What task was the employee performing at the time of accident?** field.

1.1.34. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Enter the 'Years and Months' in the Period of experience in the task performed field.

Step	Action
[34]	Enter **5 years** in the **Period of experience in the task performed (years/months)** field.

1.1.35. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[35]	Click to select the **Yes** ⭕ Yes radio button.

1.1.36. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[36]	Click in the **area below the scroll bar** to scroll down.

1.1.37. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

ℹ️	Give the short description of how the accident occurred, e.g. Fell while lifting the pallet. The system will indicate to the user if he has exceeded number of characters required.

Step	Action
[37]	Enter **Fell whilst lifting the pallet** in the **Short description of how the accident occurred** field.

1.1.38. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[38]	Enter in the **Contributing Factors/Causes** field.

1.1.39. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[39]	Click the **Contributing Factors/Courses:** drop down option button to display the available list.

1.1.40. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[40]	Click to select the **Unknown** checkbox.

1.1.41. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[41]	Click in the **area below the scroll bar** to scroll down.

1.1.42. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[42]	Click to select the **Any other contributing factors** ☐ checkbox.

1.1.43. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Specify other machinery or contributing factors that led to the accident e.g. Slippery floor.

Step	Action
[43]	Enter **slippery floor** in the **Specify other machinery or contributing factors** field.

1.1.44. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select No, if the accident was not a Traffic accident.

Step	Action
[44]	Click to select the **No** ⭕ No radio button.

1.1.45. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[45]	Click in the **area below the scroll bar** to scroll down.

1.1.46. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Enter the Nature of injury sustained (for an example, index finger of right hand crushed).

Step	Action
[46]	Enter **back injury** in the **Nature of injury sustained** field.

1.1.47. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[47]	Click the **Mark any of the following when applicable:** drop down option button to display the available list.

1.1.48. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[48]	Click the **Mark any of the following when applicable: Spine Injury** option to select it.

1.1.49. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Select Yes, if you satisfied that the Employee was injured in the manner alleged.

Step	Action
[49]	Click to select the **Yes** ◯ Yes radio button.

1.1.50. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome
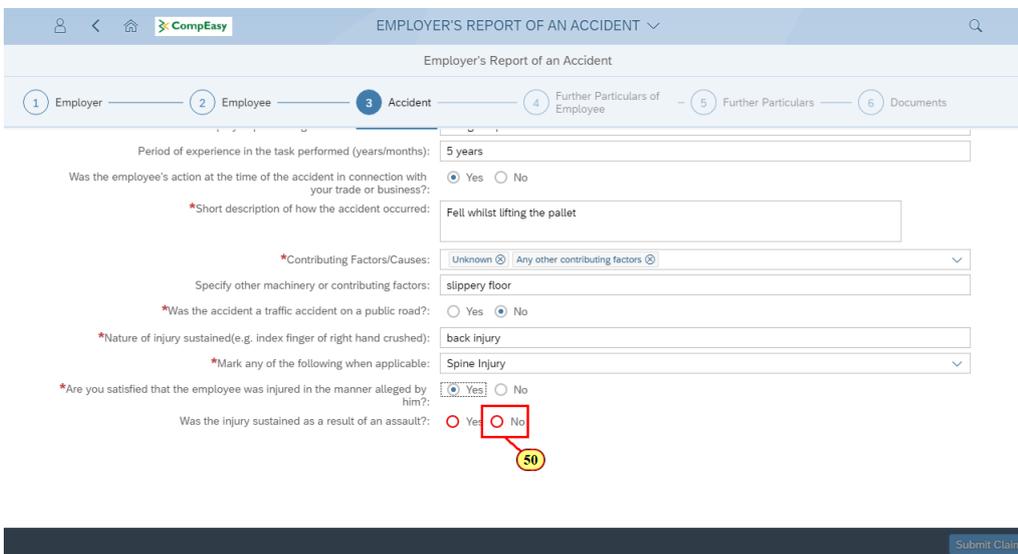
(i)	Select No, if the injury sustained was not as a result of an assault.

Step	Action
[50]	Click to select the **No** ◯ No radio button.

1.1.51. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[51]	Click the **Step 4** ![Step 4] button to go to the next page.

1.1.52. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

ℹ️	Employer can either choose to capture the Earnings either weekly or monthly.

Step	Action
[52]	Click to select the **R/Month** ◯ R/Month radio button.

1.1.53. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

ℹ️	The gross cash earnings including average payments for overtime and/or commission of a constant character R/Month.

Step	Action
[53]	Enter **10000** in the **Gross cash earnings:** field.

1.1.54. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[54]	Click in the **area below the scroll bar** to scroll down.

1.1.55. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

i	If no information available, the employer can capture 0.

Step	Action
[55]	Enter **0** in the **Allowance of a recurrent nature: Bonus (13th Cheque)** field.

1.1.56.   EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[56]	Enter **0** in the **Allowance of a recurrent nature: Other allowances (Specify nature) R/Month** field.

1.1.57. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[57]	Enter **0** in the **Cash value of free food R/Month** field.

1.1.58. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[58]	Enter **0** in the **Cash value of free quarters R/Month** field.

1.1.59. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[59]	Enter **0** in the **Other payment in kind (specify nature) R/Month** field.

1.1.60. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[60]	Click in the **area below the scroll bar** to scroll down.

1.1.61. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select Yes, if you are prepared to make further compensation payments after the first three(3) months from the Date of Accident.

Step	Action
[61]	Click to select the **Yes** ⭘ Yes radio button.

1.1.62. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[62]	Enter **N/A** in the **If you have already paid cash (earnings) to the employee, state the total amount R** field.

1.1.63. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Indicate the number of days per week worked by the employee.

Step	Action
[63]	Click the **Mark any of the following when applicable:** ⌄ **drop down option** button to display the available list.

1.1.64. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome
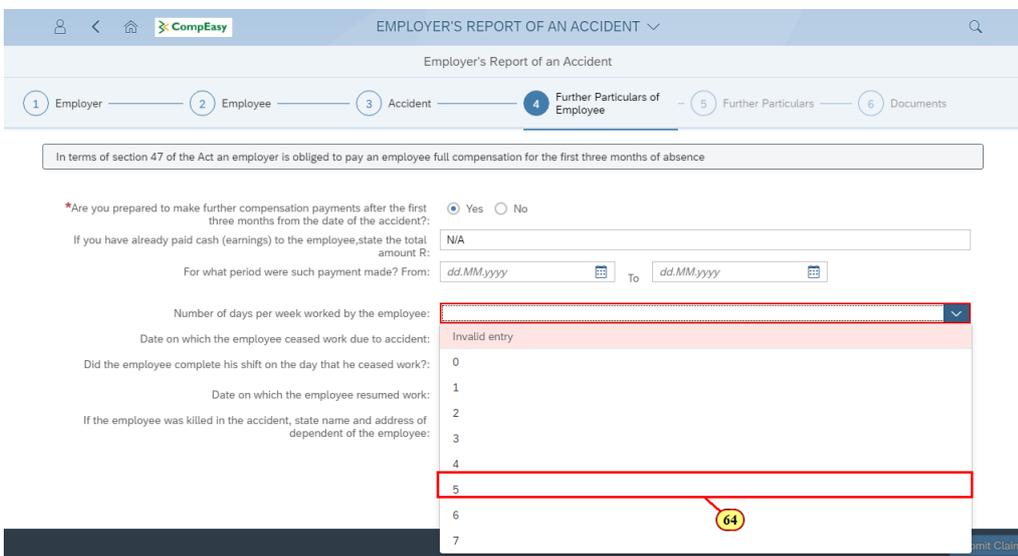
Step	Action
[64]	Click the **Number of days per week worked by the employee: 5** 5 option to select it.

1.1.65. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[65]	Enter **01.10.2020** in the **Date on which the employee ceased work due to accident dd.mm.yyyy** field.

1.1.66. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Select No, if the Employee did not complete his shift on the day that he/she ceased work.

Step	Action
[66]	Click to select the **No** ◯ No radio button.

1.1.67. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[67]	Click in the **area below the scroll bar** to scroll down.

1.1.68.   EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[68]	Click the **Step 5** ![Step 5] button to go to the next page.

1.1.69.   EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select Yes, if the First aid was given or not on the day of the accident.

Step	Action
[69]	Click to select the **Yes** ◯ Yes radio button.

1.1.70. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome
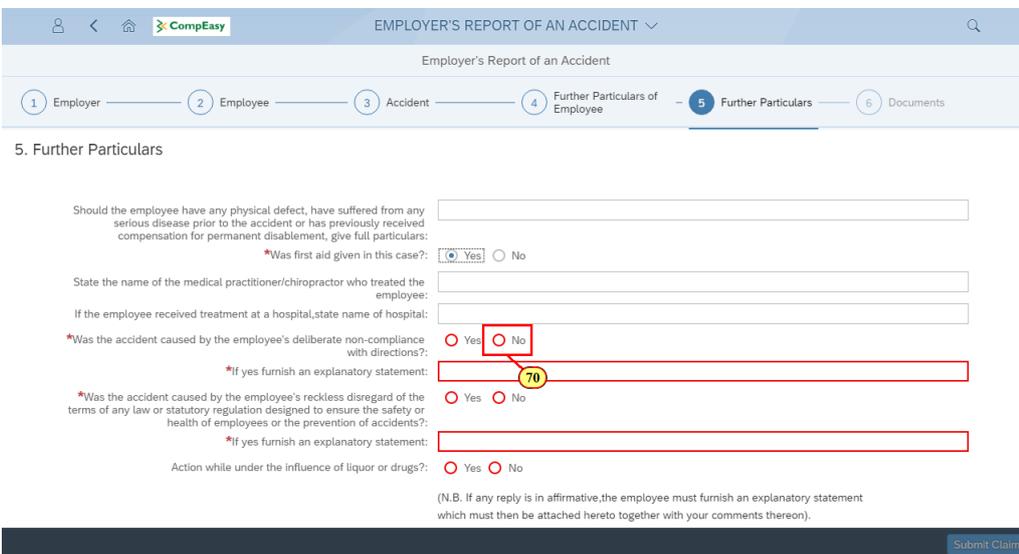
	This is a liability determining question, the Employer must indicate if the accident was caused by the Employee's deliberate non-compliance by selecting either Yes or No.

Step	Action
[70]	Click to select the **No** ◯ No radio button.

1.1.71. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[71]	Click to select the **No** ◯ No radio button.

1.1.72. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Select Yes or No, if the Employee was operating under the influence of Liquor or drugs, this is also a liability question.

Step	Action
[72]	Click to select the **No** ◯ No radio button.

1.1.73. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[73]	Click in the **area below the scroll bar** to scroll down.

1.1.74. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Employer can indicate if the name and address of anybody who witnessed the accident.

Step	Action
[74]	Click to select the ⭕ No radio button.

1.1.75. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

	Employer can indicate if the accident was investigated by SA Police.

Step	Action
[75]	Click to select the **No** radio button.

1.1.76. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[76]	Click the **Step 6** Step 6 button to go to the next page.

1.1.77. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

(i)	Please note that you will not be able to submit the claim until the required documents have been uploaded.

Step	Action
[77]	Click the **Document type** ⌄ **drop down option** button to display the available list.

1.1.78. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[78]	Click on the **SA ID** SA ID * option to select it.

1.1.79. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[79]	Click the **Add** ✛ button to upload a document.

1.1.80. EMPLOYER'S REPORT OF AN ACCIDENT - Google Chrome

Step	Action
[80]	Double click on the **SA ID.pdf** 📄 SA ID.pdf file to select it.

1.1.81. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
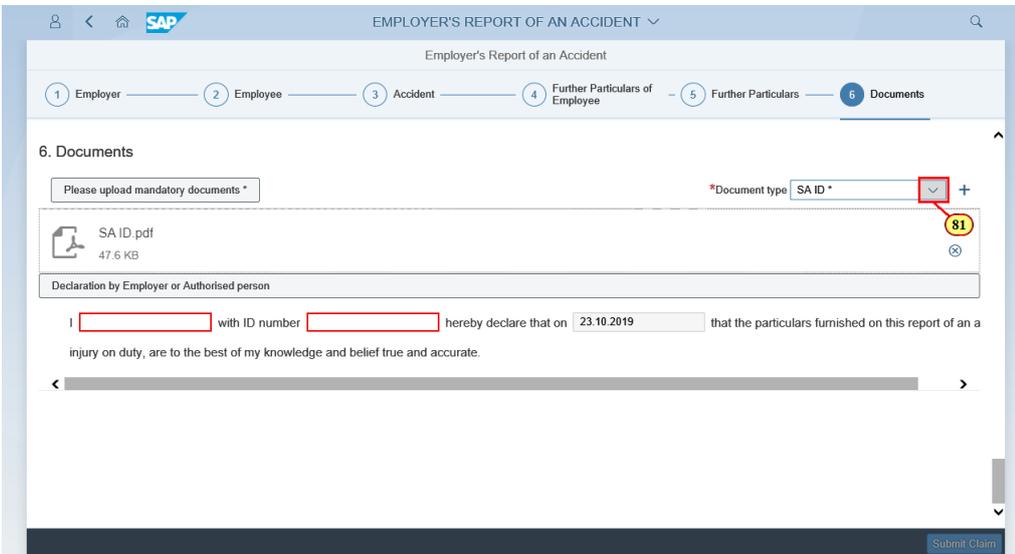
Step	Action
[81]	Click the **Document type** ⌄ **drop down option** button to display the available list.

1.1.82. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
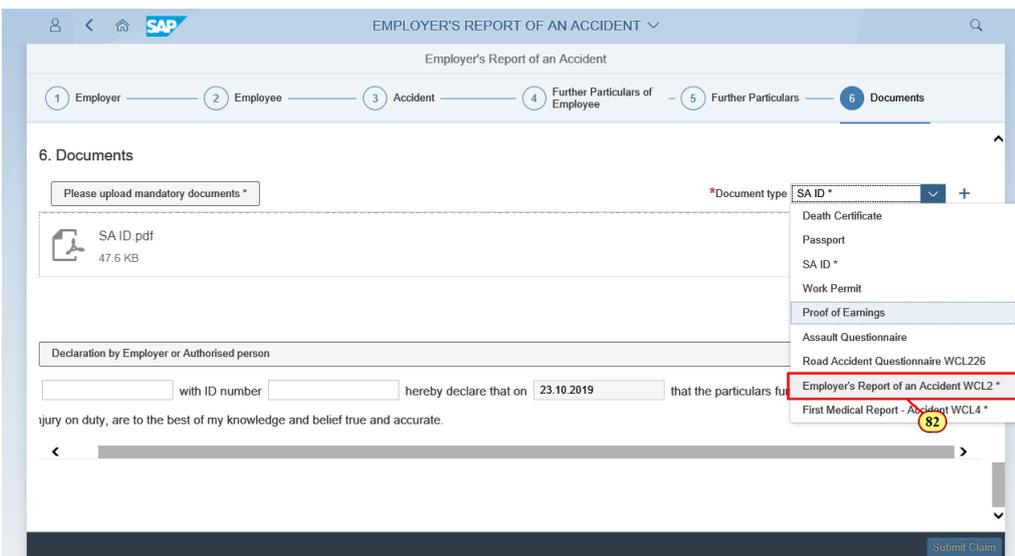
Step	Action
[82]	Click on the **Employer's Report of an Accident** **WCL2** Employer's Report of an Accident WCL2 * option to select it.

1.1.83. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
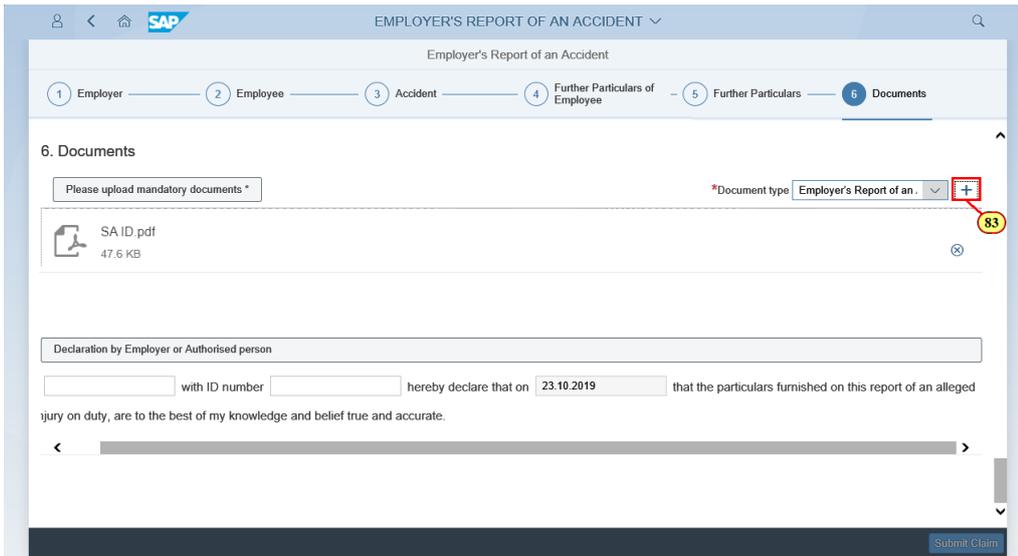
Step	Action
[83]	Click the **Add** + button to upload a document.

1.1.84. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
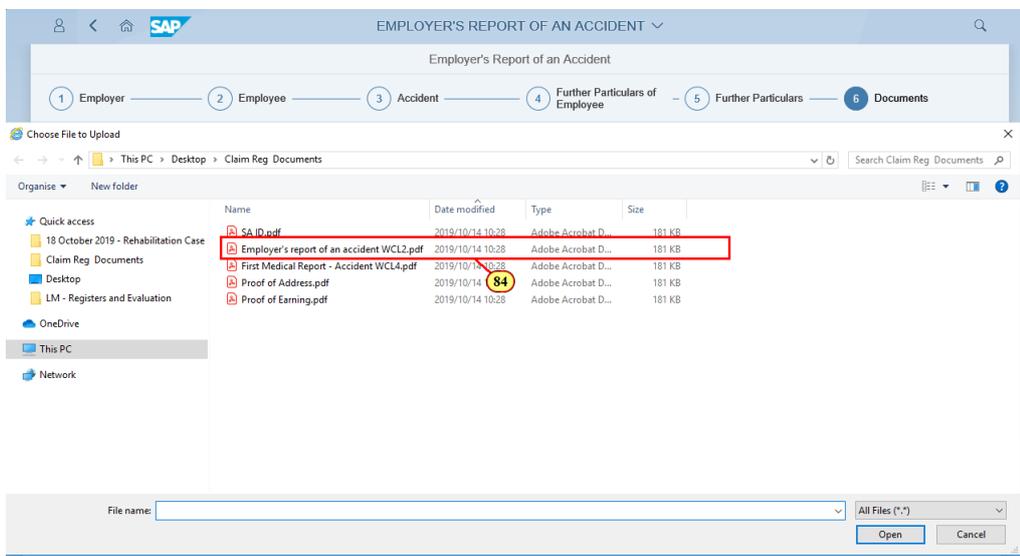
Step	Action
[84]	Click the **Add** 📄 Employer's report of an accident WCL2.pdf button to upload a document.

1.1.85. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
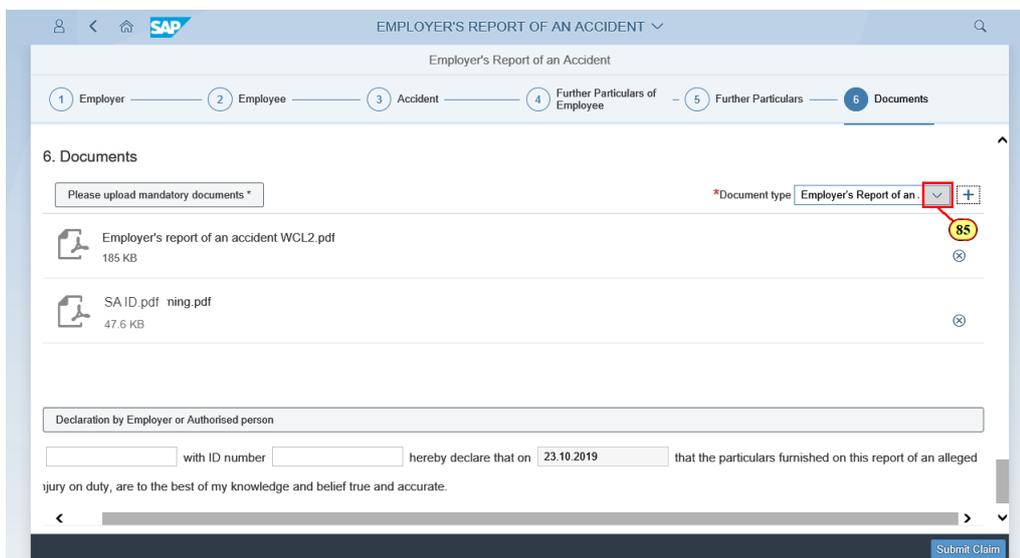
Step	Action
[85]	Click the **Document type** ⌄ **drop down option** button to display the available list.

1.1.86. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
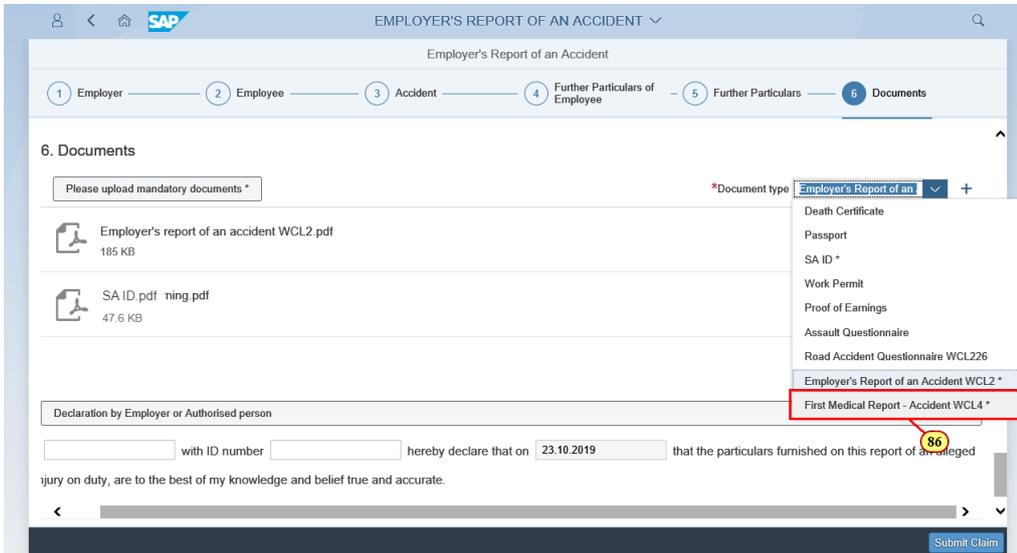
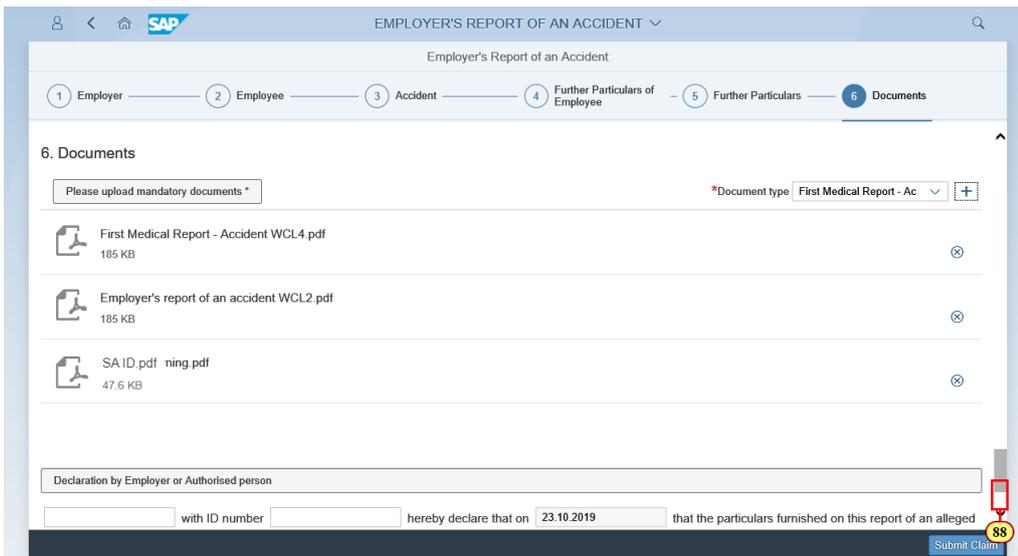| Step	Action
[86]	Double click on the **First Medical Report - Accident WCL4** First Medical Report - Accident WCL4 * option to select it.

1.1.87. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
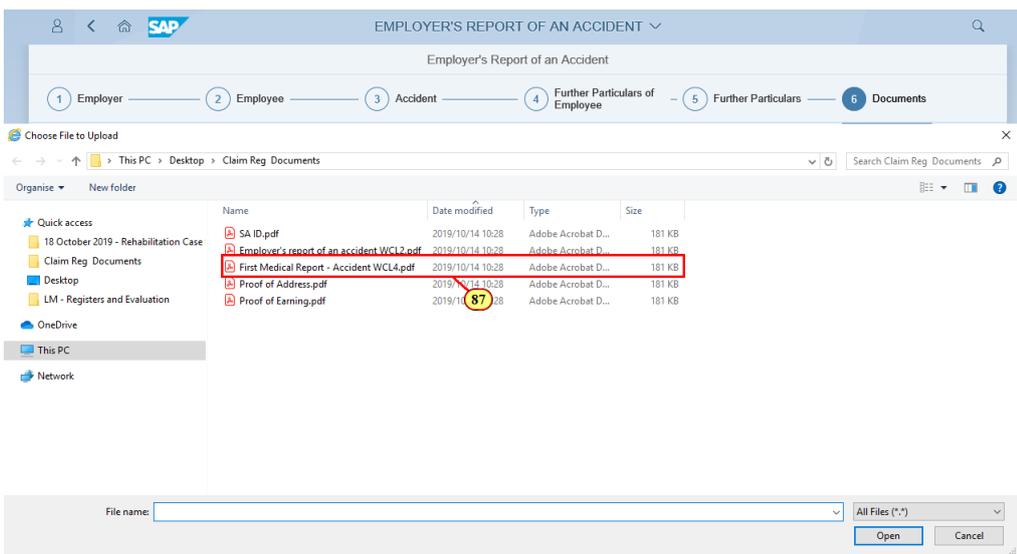
Step	Action
[87]	Double click on the **First Medical Report - Accident WCL4** option to select it.

1.1.88. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer

Step	Action
[88]	Click in the **area below the scroll bar** to scroll down.

1.1.89. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer

(i)	In the Declaration section, enter the name and ID number of the user that registered the claim.

Step	Action
[89]	Enter **Nzwili** in the **I** field.

1.1.90. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer

Step	Action
[90]	Enter **7902026613083** in the **ID number** field.

1.1.91. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer

Upon submitting the claim information, a claim number will be generated.

Step	Action
[91]	Click the **Submit Claim** [Submit Claim] button to submit the claim.

1.1.92. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
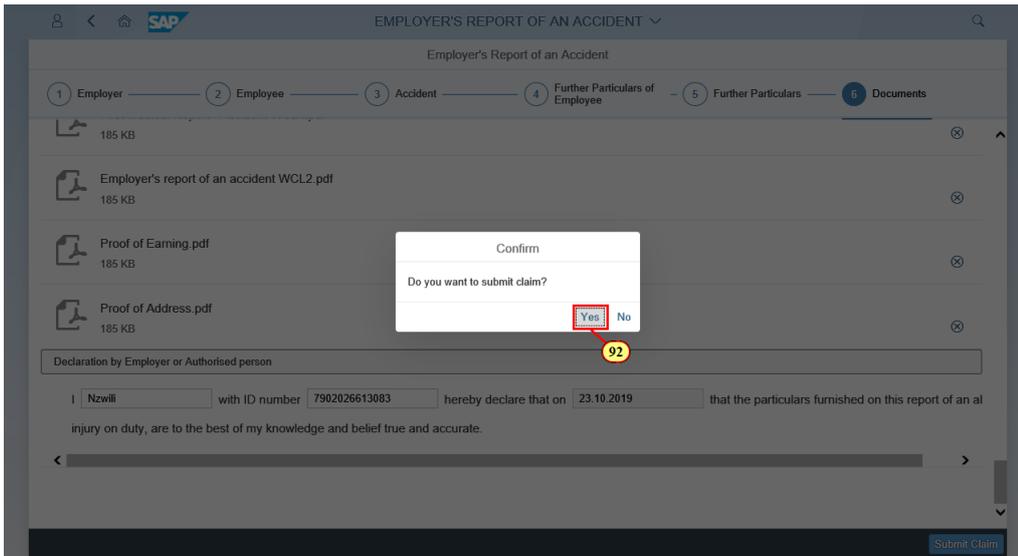
	Please take note of the **Confirm** message displayed in the pop-up window.

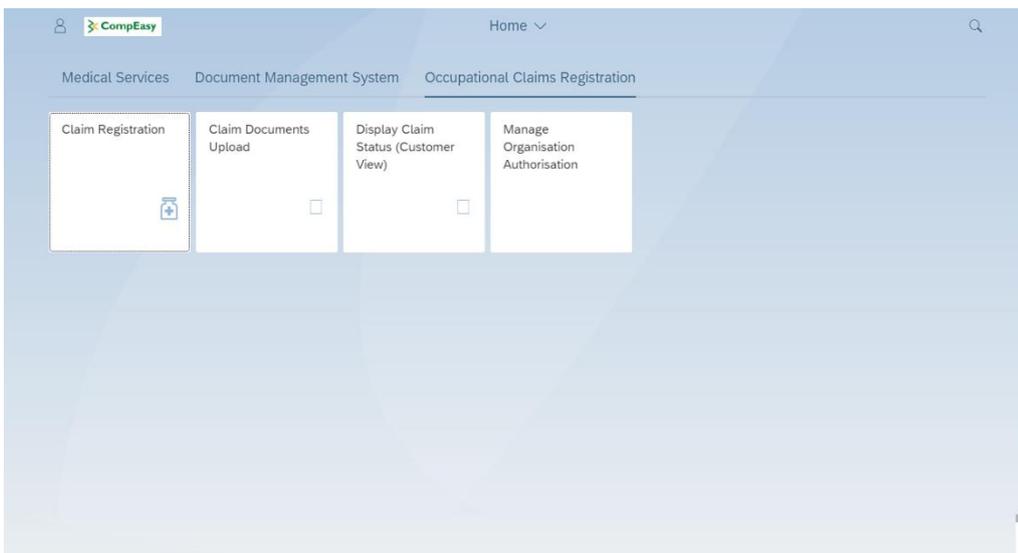| Step	Action
[92]	Click the **Yes** [Yes] button to confirm the submission.

1.1.93. EMPLOYER'S REPORT OF AN ACCIDENT - Internet Explorer
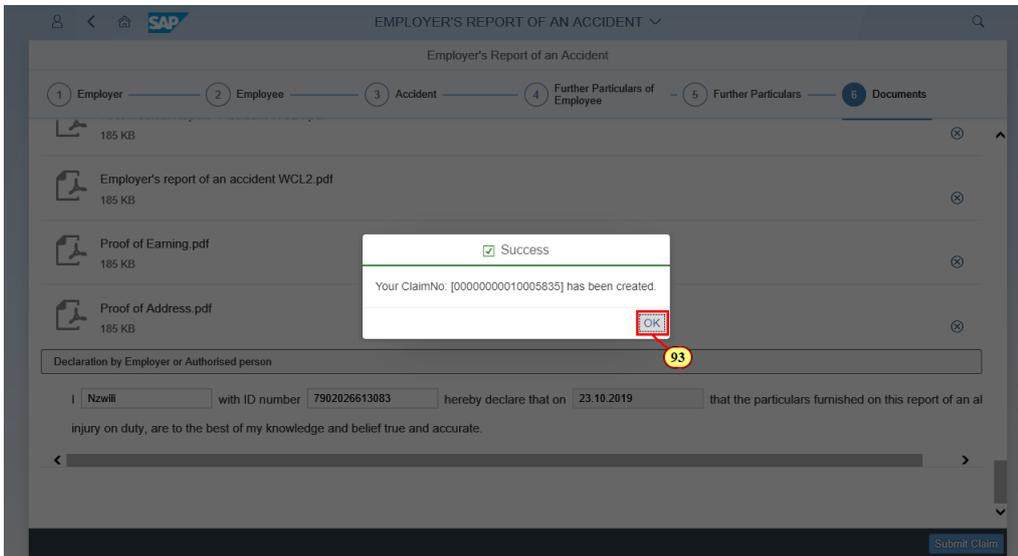
	Please take note of the message displayed in the pop-up window indicating the claim number.

Step	Action
[93]	Click the **OK** button to acknowledge the message.

1.1.94. Home - Google Chrome

Well done! You have successfully completed lodging a claim.