



Little Caesars®

RISK MANAGEMENT INCIDENTS

LCE RETAIL TRAINING GUIDE

Welcome to the LCE Retail new Risk Management Information System (RMIS).
This platform will allow for fast & simple incident reporting online.

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Accessing the Site

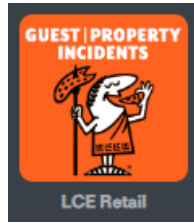
Visit [Gateway](#)

Click the:

GUEST | PROPERTY INCIDENTS

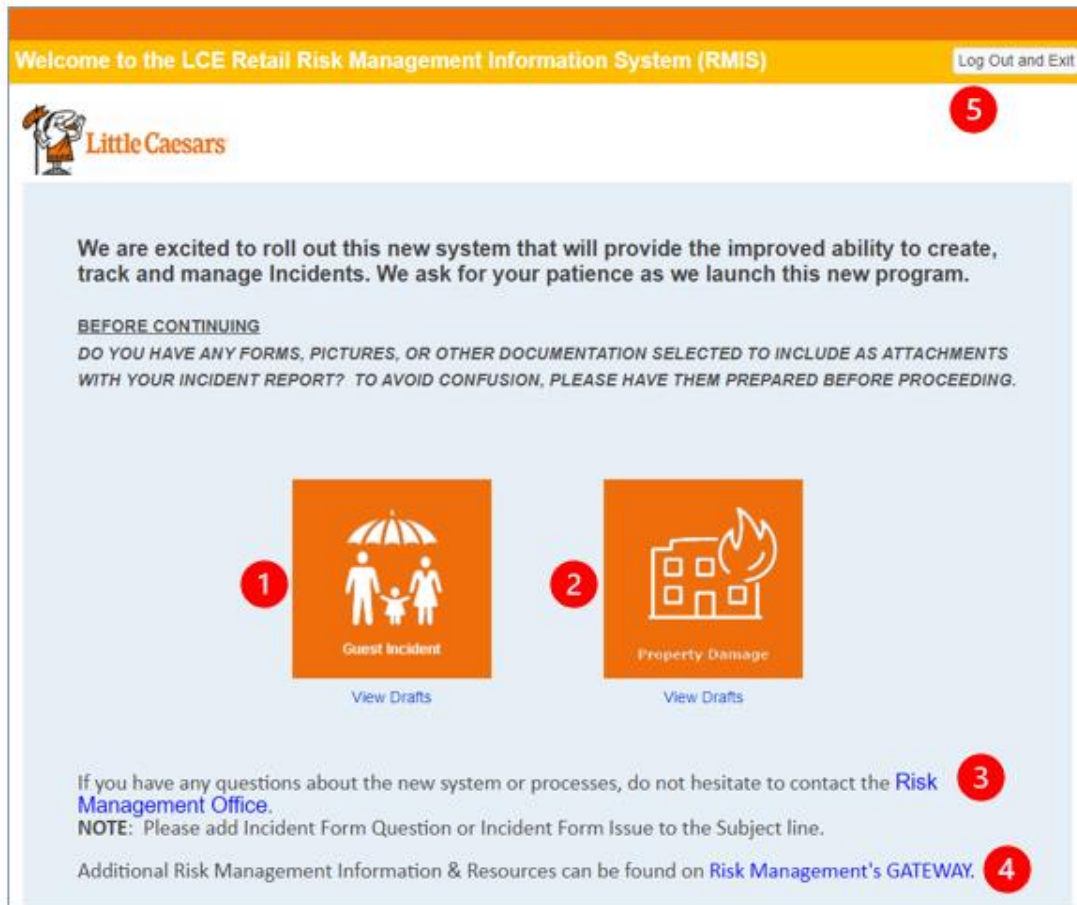
LCE Retail

HELPFUL LINK



Welcome Page

Below is the LCE Retail portal Welcome Page, which includes details, helpful links as well as icons to select the incident type to be reported.



Incident Types

Current types of incidents that can be reported through LCE Retail portal are:

1. Guest Incident
 - Hover over icon for pop-up help: Report an incident involving a third party that includes one or both – bodily injury, non-bodily injury, or damage to other's property.
2. Property Damage
 - Hover over icon for pop-up help: Report an incident involving damage to company owned property. This is not for reporting damage to property owned by others.

Links

3. Risk Management Office – opens an email addressed to the Risk Management team.
 - Subject – include Incident Form Question or Incident Form Issue to route to correct team.
4. Risk Management GATEWAY – links to Training Guides & documentation located on the Gateway.

Exit

5. Click Log Out and Exit button to leave the LCE Retail portal.

Tips for all Incident Forms

Use the “tab” key to move through the incident forms.

Auto Fill Fields

Auto fill fields are filled by the system. Any grayed-out field will be automatically filled. You can’t add or edit information to these fields. Some fields that will be populated when you:

1. Open the incident.



This screenshot shows two fields in a form. The first field is labeled 'Submitted Date' with an information icon (i) and contains the date '09/27/2023'. The second field is labeled 'Employer/Entity:' and contains a dropdown menu with the text 'LITTLE CAESAR ENTERPRISE'.

2. Do a lookup.

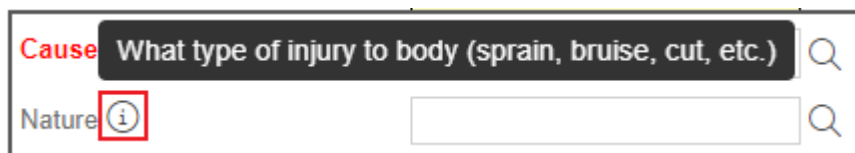


This screenshot shows two fields in a form. The first field is labeled 'Store Manager: *' and contains a search icon (magnifying glass). The second field is labeled 'Area Supervisor Email:' and contains a search icon (magnifying glass). Below the fields, there is a red text message: 'Once Store Manager is selected - Area Supervisor will be auto filled'.

3. Select Complete Incident or Click the Save and Continue button when attaching a file will auto fill the Incident Number.

Tool Tips

Tool tips (i) provides information on fields. Hover mouse over (i) and tips will display.



This screenshot shows two fields in a form. The first field is labeled 'Cause' and contains the text 'What type of injury to body (sprain, bruise, cut, etc.)'. The second field is labeled 'Nature' and contains an information icon (i). Both fields have search icons (magnifying glass) to their right.

Description/Text fields – field expansion

For fields that have lines in lower right corner, click and drag the corner to expand the field as needed:



This screenshot shows a single field in a form labeled 'Describe Incident' with an information icon (i). The field has a red square handle with a diagonal line in the bottom right corner, indicating it can be expanded.

Required Fields

4 Fields are required on both Incident Forms: Location – Cause -- Are there file attachments? and Reported By Name.

All required fields are marked in **bold, red font**, and followed by a **red asterisk ***.

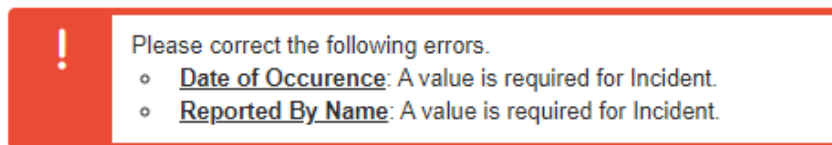
A form field with a red border. On the left, the text "Location: *" is displayed in red. To the right of the text is a white input box. Further to the right, within the same container, is a blue magnifying glass icon.

You will not be allowed to Complete Incident or Save and Continue attachments without all required fields.

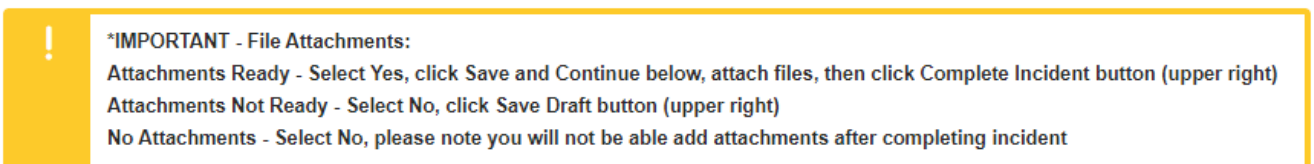
EXCEPTION: Incident Number is automatically filled by the system when you Complete or Save Incident.

Messages

If you don't fill out all required fields prior to Completing or Saving, the system will display an Error message. You will not be able to continue until the required fields are populated.

A red rectangular box with a white exclamation mark icon on the left. To the right of the icon, the text reads: "Please correct the following errors." followed by two bullet points: "◦ Date of Occurrence: A value is required for Incident." and "◦ Reported By Name: A value is required for Incident."

In addition to the Error messages, there are Information messages. Information messages supply important information or step-by-step instructions.

A yellow rectangular box with a white exclamation mark icon on the left. To the right of the icon, the text reads: "*IMPORTANT - File Attachments:" followed by three lines of instructions: "Attachments Ready - Select Yes, click Save and Continue below, attach files, then click Complete Incident button (upper right)", "Attachments Not Ready - Select No, click Save Draft button (upper right)", and "No Attachments - Select No, please note you will not be able add attachments after completing incident".

Look up Fields – Magnifying Glass

Fields with a magnifying glass  are search & autofill features. Examples include:

- Guest Incident** – Location, Name, Type of Claim (if Type of Claim is Bodily Injury, then Cause, Nature & Body Part fields are displayed with magnifying glass), Reported By Name.
- Property** – Location, Cause, Store Manager, Reported By Name.

There are 3 types of look up fields (see examples below):

Location – Store Location Information, found in both Guest Incident & Property Damage.

Name – Employee Information.

Property Damage – Store Manager

Guest Incident – Name

Both - Reported By Name

List – Descriptions that identify the Incident. Example: Cause – Slip or Trip : Cut : Burn.

Guest Incident – Nature, Body Part (Type of Claim is Bodily Injury)

Both – Cause

Location Look Up

When you click the magnifying glass next to the Location field it will open a selection box listing all the LCE Retail stores. This will allow you to search & select the correct store, which will populate the Location field on the Incident form.

Locations																										
Name	All	#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
Location Number ▲	Name					Street1										City					State					

In the search dialog, all columns are sortable. Click on any column title to sort in ascending order. Click it again to sort in descending order.

Location search tips From the Location Filter By section: Location Number – if known enter the 13-digit number. Name - enter Store Name, if known. You could type in Store # (the store's number) or just the number itself. City – enter City the store is located in i.e. Detroit. State – use drop-down arrow to choose from a list of states. Is Active – use drop-down arrow to choose Active Only, Inactive only or Any. Active Only filters out all Inactive locations. Once done -- Click the Search button to see filtered results. Click the Clear button to clear all filter criteria. Hit Search to get the full list again	Filter By Location Number Name City State Michigan ▼ Is Active [Select to filter] ▼ Search Clear
--	--

Name Look Up

When you click the magnifying glass next to a Name field, such as Name-Store Manager-Reported By Name, it will open a selection box listing all the LCE Retail employees. This will allow you to search & select the correct employee, which will populate the Name fields on the Incident form.

Employee																						
Last Name All		#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	
Employee Number		Last Name		First Name		Location															Company	

In the search dialog, choose a letter along the top to filter on last name (i.e. A-Z). If you click D it will list only last names that start with D.

Also, all columns are sortable. Click on any column title to sort in ascending order. Click it again to sort in descending order.

Name search tips

From the **Employee** Filter By section:

Employee # – if known enter Employee number. You can enter a partial number (2817) and it will return only employee number that starts with 2817.

Last Name - enter Employee's Last Name, if known. This will return all employees with that name. You could also type in the beginning of the name (McC) & it will return all employees whose last name starts with McC.

First Name - enter Employee's First Name, if known. This will return all employees with that name. You could also type in the beginning of the name (Deb) & it will return all employees whose first name starts with Deb – Debby, Deborah, etc.

Location/Store/DC – enter information, if known. This will return all employees working at that location. If you start typing a Store number, it will display all Locations associated with that number. Click the one you need.

Once done -- Click the **Search** button to see filtered results. Click the **Clear** button to clear all filter criteria. Hit Search to get the full list again.

Filter By

Employee #

Last Name

First Name

Location/Store/DC

Company

Search

Clear

Location/Store/DC

STORE 1723 (165-425-01723)

List Look Up

When you click the magnifying glass next to the List field, such as Cause-Nature-Body Part, it will open a selection box listing descriptions identifying the type of claim. This will allow you to search & select the correct descriptions & codes, which will populate the List fields on the Incident form.

Cause	
Code	Description
GL48	Age Discrimination
GL50	Civil Rights
GL51	Defamation Of Character
GL52	Discrimination
GL55	False Arrest

List search tips

From the **List** Search section:

Search – enter Cause, if known i.e., Slip – Fall -- Injury.

Once done -- Click the **Search** button to see filtered results.

Search

Drop-down fields

Fields with a drop-down arrow are list fields. These could be simple Yes or No, a multiple choice or a list of items. Select an item from the list.

Reported to Police:	- None Selected -
Fire Department Contacted:	- None Selected -

Note: Other fields may display based on selection.

Reported to Police:	Yes
Police Department Name:	
Police Department Phone:	ext
Enter digits for 'US' or type + for international numbers.	
Police Report Number:	
Fire Department Contacted:	- None Selected -

Reported By Name

Store Emails are automatically populated based on Location selected. Use the magnifying glass to select "Reported By Name".

Reported By
Reported By Name ⓘ * 🔍
Store Email:
Store Email autofills based on Location selected

Attachments

File Attachments message (see Messages) - Details steps if attachments are ready, not ready, or if there are no attachments.

Are there file attachments? *

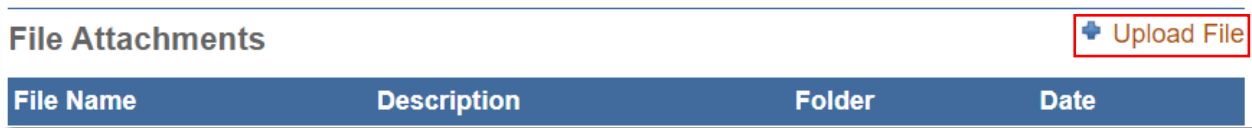
When you choose Yes from the "Are there file attachments?" drop-down, this allows you to add files to the Incident. You can add pictures, documents or forms that are relative to the Incident. It also opens the File Attachments section.

To upload attachments, after following instructions above and selecting Yes, then click Save and Continue in the File Attachments box.

File Attachments
i Incident must be saved before adding new File records.
Save and Continue

Upload Attachments

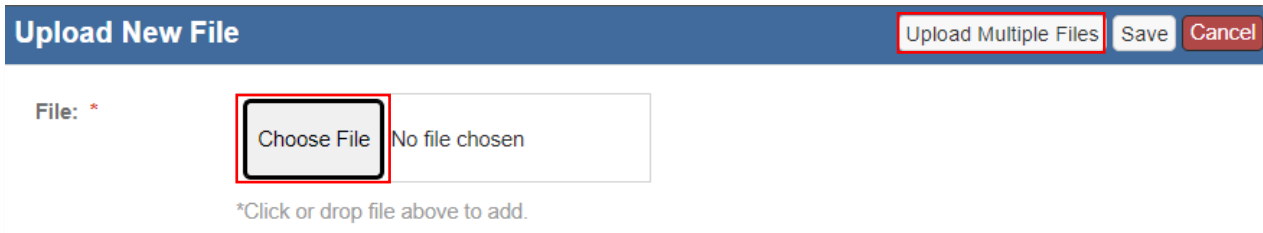
Click **Upload File** (located in upper right of File Attachments section).



The screenshot shows the 'File Attachments' section header with an 'Upload File' button in the top right corner. Below the header is a table with four columns: 'File Name', 'Description', 'Folder', and 'Date'.

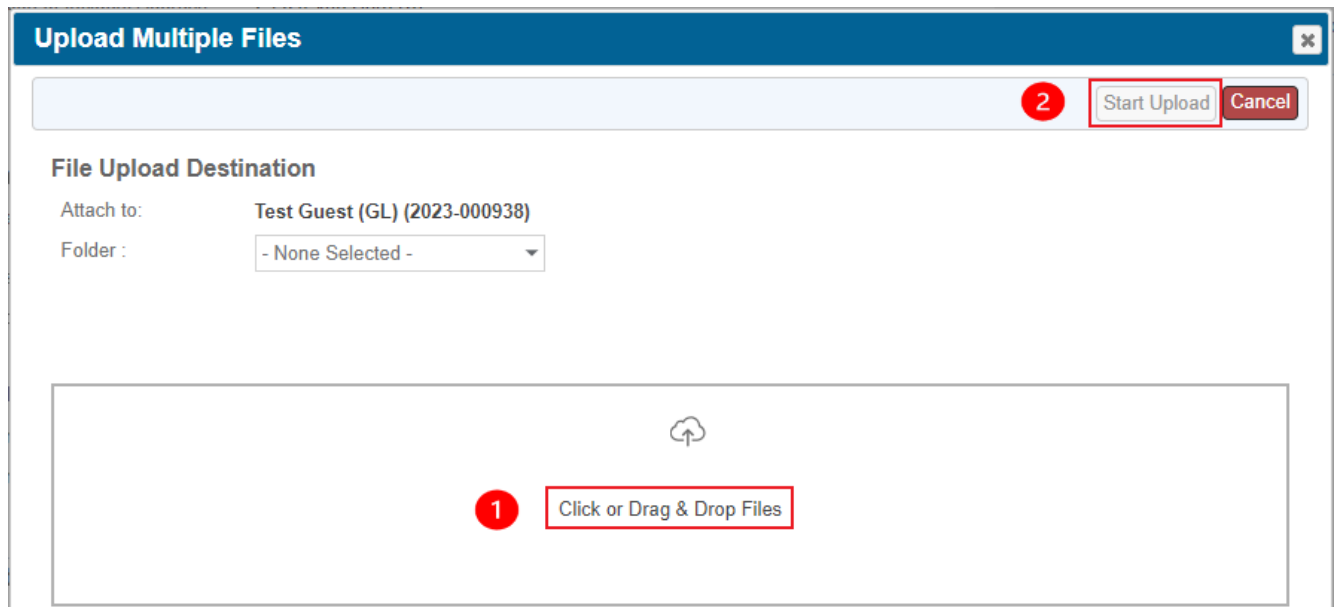
File Name	Description	Folder	Date
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Click **Choose File** to upload 1 file from your computer. When done click the **Save** button.



The screenshot shows the 'Upload New File' dialog box. It has a 'Choose File' button highlighted with a red box. To the right of the button is the text 'No file chosen'. Below the button is a note: '*Click or drop file above to add.' In the top right corner, there are buttons for 'Upload Multiple Files', 'Save', and 'Cancel'.

To upload more than 1 file at a time from your computer, click **Upload Multiple Files** which opens another screen.

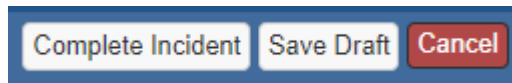


The screenshot shows the 'Upload Multiple Files' dialog box. It has a 'Start Upload' button highlighted with a red box and a red circle with the number '2'. Below the button is a section titled 'File Upload Destination' with 'Attach to:' set to 'Test Guest (GL) (2023-000938)' and 'Folder:' set to '- None Selected -'. At the bottom, there is a large area with a cloud icon and a button labeled 'Click or Drag & Drop Files' highlighted with a red box and a red circle with the number '1'.

1. Click and drag multiple files from your computer.
2. When done click the **Start Upload** button.

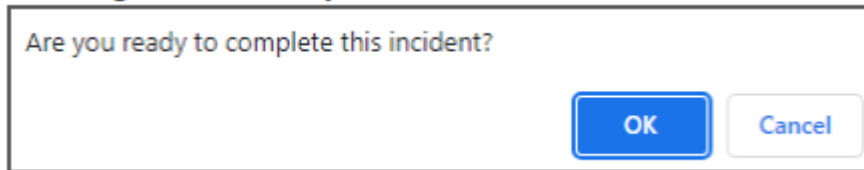
Finish Incidents

There are 3 choices to finish an Incident. These choices are in the top right corner of the form.

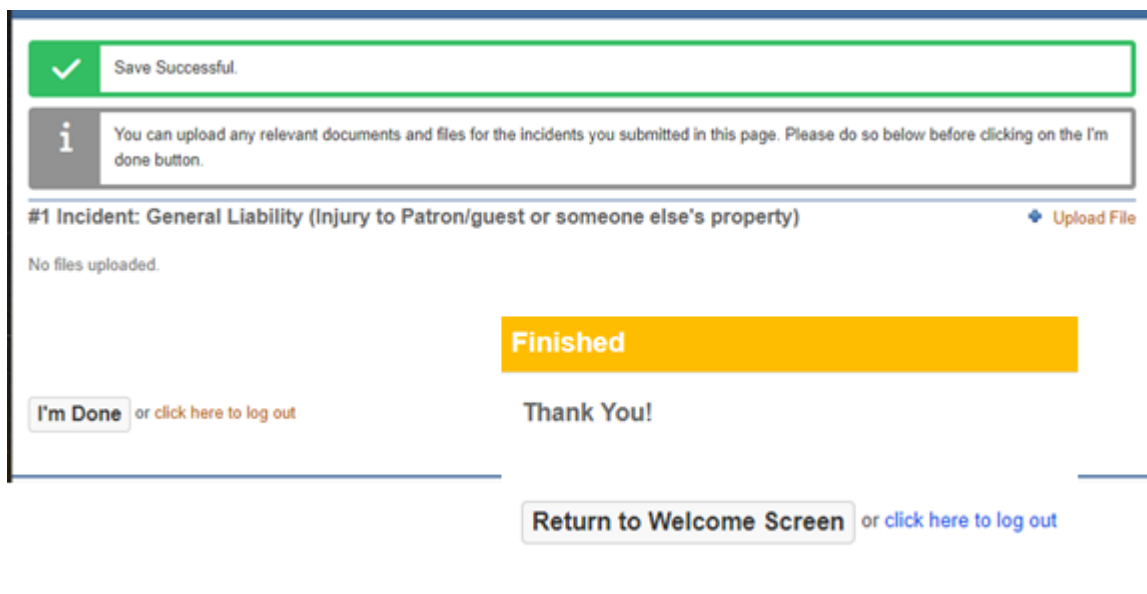


Complete Incident

To complete an incident, make sure all the required fields are filled in. If not, you will receive the warning mentioned in the Messages section above. Please make sure you are ready to save. When you click Complete Incident the message box asking if you are sure displays.

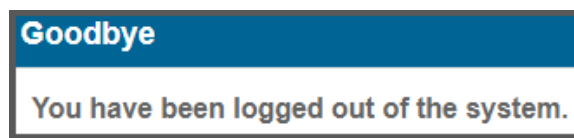


Once you click the OK button it opens the Save Successful window. You no longer have access to the Incident, but you can still add attachments by clicking on the Upload File link.



Clicking I'm Done opens the Finished window. Return to Welcome Screen takes you back to the Welcome Page where you can start another Incident.

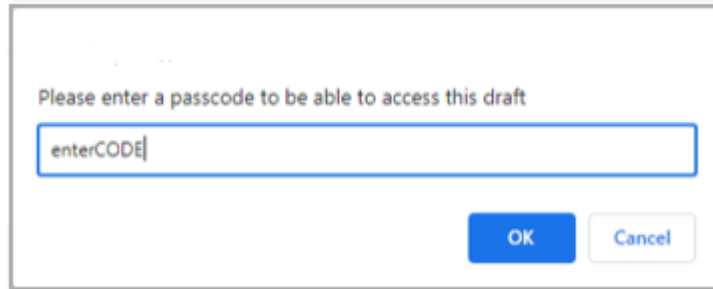
Clicking "click here to log out" in either window does exactly that.



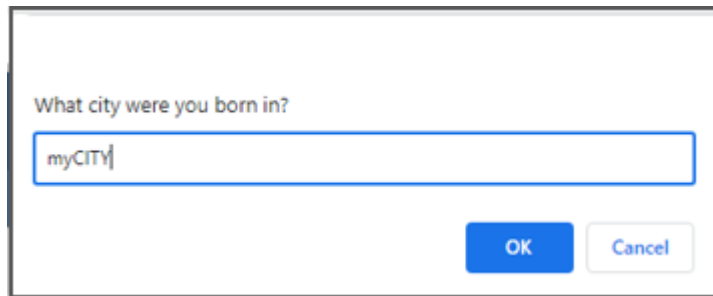
Save Draft

To save a draft of an Incident gives you the opportunity to return later to finish the Incident or add attachments. Only 2 required fields need to be filled in, Location & Date of Occurrence (Guest Incident) or Date of Loss (Property Damage). You will need to assign a passcode and answer a security question to save the draft. This information is needed when you want to access the draft.

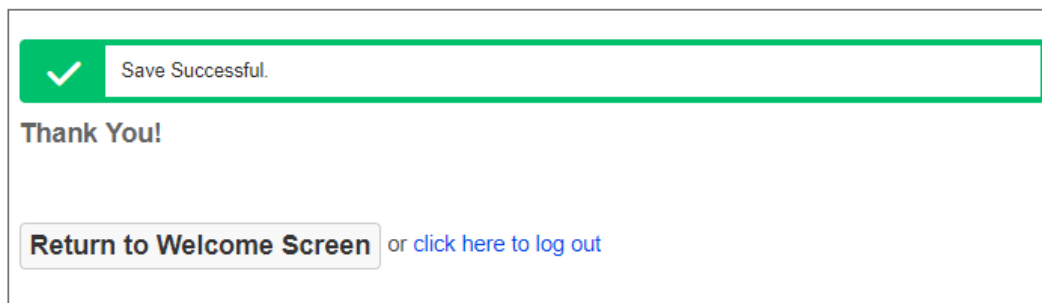
Click Save Draft and the passcode message box opens. Enter a passcode, then click OK.

A dialog box with a light gray border. At the top, it says "Please enter a passcode to be able to access this draft". Below this is a text input field with a blue border containing the placeholder text "enterCODE|". At the bottom right, there are two buttons: a blue "OK" button and a white "Cancel" button with a gray border.

The security question message box opens. Enter the answer, then click OK.

A dialog box with a light gray border. It contains the text "What city were you born in?". Below this is a text input field with a blue border containing the placeholder text "myCITY|". At the bottom right, there are two buttons: a blue "OK" button and a white "Cancel" button with a gray border.

The Save Successful window opens.

A window with a light gray border. At the top, there is a green horizontal bar with a white checkmark icon on the left and the text "Save Successful." on the right. Below this bar, the text "Thank You!" is displayed. At the bottom, there is a button labeled "Return to Welcome Screen" followed by the text "or [click here to log out](#)".

Return to Welcome Screen takes you back to the Welcome Page where you can start another Incident.

Clicking "click here to log out" does exactly that.

Complete Draft

When you are ready to finish your draft, open the LCE Retail Welcome Page.

Click the View Drafts link under the Incident type you saved as a draft.



Enter your passcode, click View Drafts.

A screenshot of the 'Available Drafts' screen. It has a blue header bar with the text 'Available Drafts' on the left and two buttons, 'View Drafts' and 'Cancel', on the right. Below the header, there is a text prompt: 'Please enter the passcode used when the draft was saved'. Underneath the prompt is a yellow rectangular input field.

Enter the answer to your security question, click View Drafts.

A screenshot of the 'Available Drafts' screen. It has a blue header bar with the text 'Available Drafts' on the left and two buttons, 'View Drafts' and 'Cancel', on the right. Below the header, there is a text prompt: 'What city were you born in?'. Underneath the prompt is a yellow rectangular input field.

You can now finish your Incident.

Cancel

Clicking Cancel returns directly to the Welcome Page. There is no warning message and changes are not saved.

Guest Incidents Highlights

Listed are some fields and sections that are exclusive to Guest Incidents.

Names of Employees on Duty -- you must select at least one employee on duty during incident.

Claimant Information section – type in claimant’s information.

Type of Claim -- there are 3 types of claims:

Bodily Injury – a customer/patron sustained physical injury.

Other – a customer/patron who alleges injury other than a physical (bodily) injury.

Property Damage – Damage or loss to property of a customer/patron.

All three types of claims have a Cause field that is required. Select the appropriate cause of the incident using magnifying glass.

NOTE: If you select Bodily Injury as Type of Claim, after selecting Cause, three new fields appear. Select using the magnifying glass or the drop-down:

Nature – What type of injury to body (sprain, bruise, cut, etc.).

Body Part – Which body part was injured (ankle, hand, knee, etc.).

Body Part Position – Which side was the body part (left, right, both, etc.)

Treatment Information

If Yes is selected for ‘Did emergency services come in response to an injury?’, additional fields are displayed.

Did emergency services come in response to an injury? Yes

Urgent: No

Was Claimant Transported to a hospital? No

Did the claimant go for medical treatment: No

Transported to Hospital or go for medical treatment

If Yes is selected for either “Was Claimant Transported to a hospital?” or “Did the claimant go for medical treatment:”, additional fields are displayed.

Was Claimant Transported to a hospital? No

Did the claimant go for medical treatment: Yes

Hospital/Clinic Name: Healthcare system or Facility Name

Hospital/Clinic Street: ex. 123 Main St.

Hospital/Clinic City: ex. Atlanta

Hospital/Clinic State: - None Selected -

Hospital/Clinic PostalCode: ex. 30341

Hospital/Clinic Phone Number: ext. Enter digits for 'US' or type + for international numbers.

Property Damage Incidents Highlights

Listed are some fields and sections that are exclusive to Property Damage Incidents.

A warning message is displayed at the top of Incident.

***IMPORTANT:**
IF EMPLOYEES INJURED, CALL MEDCOR 1-833-919-1779. IF NON-EMPLOYEES INJURED, COMPLETE LCE
RETAIL GUEST INCIDENT.

Type of Claim -- there is only 1 type of claim. The field is automatically filled, you can't change.

Property – Damage or loss to property of a customer/patron.

Type Of Claim: Property

Area Supervisor Email – field is automatically filled, and you can't change.

Store Manager: *

Area Supervisor Email:

Area Supervisor Email is autofilled when Store Manager is selected

Damage Caused by Third Party – If a 3rd party such as vendor, contractor, patron, or other party was involved in the incident, please include their information. When you select Yes from the drop-down, additional fields are displayed.

Damage Caused by 3rd Party: Yes

Contact Name:

Contact Address:

Colleague Phone:

ext

Enter digits for 'US' or type + for international numbers.

Contact Email:

Is Store Closed: No

Is Store Closed – When you select Yes from the drop-down, more fields are displayed.

Is Store Closed: Yes

Store Re-Opened Date:

Property Damaged:

Questions / Support

For Origami questions / support, please email [Risk Management Office](#), and include Incident Form question or Incident Form issue in the subject line.

Additional Risk Management Information & Resources can be found on [Risk Management GATEWAY](#).