RETURN TO WORK (RTW)

[Organization Name] shall make every reasonable effort to provide suitable modified work to any employee who is unable to perform their normal duties as a consequence of an occupational injury or illness.

Modified work is any job, task, function, or combination thereof, which a worker can safely perform without risk of re-injury or risk to others. The purpose of modified work is to progressively integrate injured workers into their regular job wherever possible.

SCOPE

* Employees who have been deemed by a qualified medical practitioner to be temporarily or permanently impaired due to a work related injury or illness, may be eligible for this program.
* The employer will look for ways to modify the regular job so it will comply with the worker’s limitation. If it is not possible to modify the regular job, the employer will consider alternate jobs.
* The work must be productive and have value. Every case will be assessed on an individual basis with the support of the affected employee, insurance provider (workers’ compensation board) and the physician.
* Modified work should be acceptable by all parties.
* A modified work plan with target dates and objectives will be developed for the employee. Extensions will be considered after assessments are done weekly.
* If modified work is not practical, the worker remains off on leave.
* Modified work may include:
* working fewer hours;
* taking more frequent rest breaks;
* obtaining assistance from a co-worker for more difficult tasks;
* job/responsibility sharing;
* physical changes to the work environment;
* assisting devices;
* assignment to another job;
* special project work.
* In the case of permanent impairment, the employer will meet with the worker to consider what additional measures are necessary for placement of that employee.

POLICY

Employee Responsibilities

* Report all accidents or illnesses immediately to their Supervisor;
* Request accommodation if the situation requires;
* Obtain medical attention and advise the doctor of modified work availability;
* Report back to the Supervisor and the Human Resources designate after consulting with the doctor and submit restriction forms filled out by the doctor;
* Assist the Supervisor in completing any required accident investigation reports;
* Cooperate in the return to work process and help the Supervisor and the Health & Safety Coordinator identify suitable work that is available;
* Participate in the modified work activity;
* Provide WCB/insurance providers/[Organization Name] with any information requested concerning return to work.

Employee Representatives and Co-Worker Responsibilities

* Welcome the returning worker and provide support and encouragement;
* Report to the Supervisor any perceived difficulties;
* Provide assistance for specifically designated tasks on a temporary basis.

Supervisor Responsibilities

* Maintain contact with the absent employee;
* Work with the HR designate and the employee to identify suitable work that is safe and within the worker’s functional abilities;
* Ensure that the employee is given the correct duties in accordance with their restrictions;
* Monitor employee progress daily and report any concerns to the Human Resources Coordinator;
* Complete modified work evaluations weekly.

Physician Responsibilities

* Complete the restriction form provided by the employee;
* Clearly identify the functional impairment of the injured employee and the time frame for recovery;
* Support the modified work activity;
* Monitor the physical condition of the employee and recommend modifications.

Designated RTW Coordinator Responsibilities

* Act as the program coordinator to ensure the resources are in place to develop, implement and maintain the modified work activity, including identifying and meeting training needs;
* Determine if regular work can be modified;
* Identify jobs that are suitable for modified work;
* Identify special modified work jobs that can be created for a temporary period, to be used only for the modified work activity;
* Work with the Supervisor and the employee to develop a Return to Work Plan in accordance with the employee’s functional abilities;
* Communicate the goals and objectives of the modified work to the employee;
* Work with the employee to keep him/her actively involved in the rehabilitation plan by setting goals, maintaining continuous contact and monitoring progress;
* Document employee’s progress;
* Maintain weekly contact with absent employees;
* Provide WCB with any information requested regarding the worker’s return to work.

WCB/Insurance Provider Responsibilities

* Provide timely information to help the employer and the employee understand:
* what to expect through the Return to Work (RTW) process
* expectations of the employer and the injured worker
* rights and obligations
* where to go for help
* Provide effective claims management that monitors the activity, progress and cooperation of the employer and the injured worker through the return to work process.
* Obtain and clarify functional abilities information.
* Assess the need for a Labour Market Re-entry (LMR) Plan if early and safe return to work is unlikely.
* Help resolve difficulties and disputes through the RTW and LMR process.
* Provide ergonomic and/or mediation services, and/or site visits to help the employer and injured worker through the RTW/LMR process.
* Make decisions on all claim-related and compliance issues.

PROCEDURE

* Any employee who has a work accident causing injury or illness must report to their Supervisor immediately.
* The Supervisor will attend to the worker’s immediate first aid needs and arrange for escorted transportation to the local clinic. Where possible, the Supervisor will accompany the injured worker. Ambulance cases will go to the hospital.
* The Supervisor will ensure that the employee is given a return to work package which includes written instructions for the employee, a letter to the attending medical staff and a Fitness to Work Form to be completed by the physician.
* The Supervisor will thoroughly investigate the accident and complete the Accident Investigation Report.
* The Supervisor will notify the Human Resources Coordinator who will then complete the appropriate insurance forms.
* The employee will return the completed restriction form.
* The Supervisor, in consultation with the Human Resources Coordinator, will review the physical limitations with the employee and recommend modified work that is available.
* The employee accepts or rejects the modified work.
* On acceptance of modified work, the HR Coordinator and the Supervisor will monitor the employee’s progress.
* In the case of an employee rejecting modification of duties without medical documentation, the employee will be advised that the case will be forwarded to the WCB for resolution.
* A copy of the appropriate forms will be forwarded to the WCB adjudicator. In case of dispute, decisions will be made with the input of the Human Resources Coordinator.

FOLLOW-UP PROCEDURE

* If the physician identifies that a follow-up is required, the Human Resources Coordinator will provide the employee with a second restriction form to be taken to the attending physician and will advise the employee to return the completed form following the assessment.
* When the employee returns with the completed form, the Health & Safety Coordinator and the Supervisor will review the form with the employee and identify the modified work that is available and suited to their restrictions.
* The employee accepts or rejects the modified work.

**PROGRAM CONDITIONS:**

1. The employee must sign a Return to Work Agreement prior to entering the program.
2. While participating in the Return to Work Program, the worker will receive their regular rate of pay for hours worked.
3. The length of the Program will be determined by the initial time frame recommended by the treating physician.
4. Modified work assignments and/or reduced hours will be considered if the medical prognosis indicates that the worker will be unable to perform their regular work duties.
5. If the worker is unable to resume their regular duties after the initial time frame, a referral to an independent medical practitioner may be required.
6. Any modified work placement that goes beyond eight weeks will require Management approval.
7. The employee must report any changes in medical condition to the workplace Supervisor as soon as they are aware of the change.