

POLICY

Return to Work

PURPOSE

This policy ensures (Your Name) provides meaningful work activity for employees who are temporarily unable to perform all, or portions, of their regular work duties or assignments. This policy applies to workers suffering from either work- or non-work-related illness or injury. The goal is to allow valued company workers to return to regular, productive work as soon as possible. By providing temporary modified or transitional work activity, injured and recovering employees remain a vital, active part of the company. Studies have shown that a well-constructed Return to Work Policy reduces lost time days, allows workers to recover more quickly, and creates a more positive work environment.

SCOPE

All active employees who become temporarily unable to complete their regular job duties because of a compensable work-related or non-work-related injury or illness may be eligible for transitory work duties within the provisions of this program. Return to work tasks may be in the form of:

- Altered duties within the scope of the employee's current position
- Other applicable jobs for which the employee qualifies, outside of the purview of his or her current position
- A modified schedule of work hours

DEFINITIONS

- Transitional duty is a therapeutic tool used to expedite an injured employee's return to work by addressing the emotional, physical, attitudinal and environmental factors that otherwise inhibit a quick return to work. These assignments are meant to be temporary and may be limited to 90 days, though (Your Name) permits multiple 90-day assignments back-to-back if it is medically warranted.
- Alternate duty is a part of (Your Name)'s Return to Work policy. The policy is designed as a placement service for workers who have reached maximum medical improvement (MMI) and are still incapable of performing the essential functions of their pre-injury jobs.

APPLICABILITY

Length of Duty

- If work is available that meets the restrictions or limitations prescribed by the employee's attending practitioner, that employee may be assigned modified or transitional work for a period not to exceed 90 days unless (Your Name) permits additional 90-day assignments based on medical necessity. Transitional or light duty is a temporary program, and an employee's eligibility in these reduced assignments will be based strictly on recovery progress and medical documentation.

Daily Application

- Any worker who fails to follow his or her restrictions may delay healing or may further aggravate the condition. Employees who disregard their established restriction may be subject to disciplinary action, up to and including termination. Where applicable and as allowed by law, a disregard for restrictions may also jeopardize disability benefits.

Location:

Effective Date:

Revision Number:

Qualification

- Transitional or modified duty will be available to all employees on an equitable and fair basis with temporary assignments based on abilities and skill. Eligibility will be based upon completion of the Return to Work Evaluation Form by the worker's attending medical professional. An employee on modified duty will be considered part of the normal shift staffing, with recognition of the employee's limitations in the department.

RESPONSIBILITIES

The following responsibilities are applicable to various levels within the company.

- Senior management will make sure that the policy is enforced among all levels at (Your Name) and will actively support and promote this policy and the Return to Work Program as a whole.

- Supervisors will support the employee's return to work by identifying appropriate modified tasks and ensuring the worker does not exceed the medical professional's established restrictions. Supervisors will also maintain regular contact with absent

workers and plainly communicate (Your Name)'s attendance expectations. They also must report any problems with employees and this policy to the program supervisor or return-to-work manager.

- Injured workers will notify their supervisors promptly when their condition necessitates an absence. Injured workers should also remember that state laws often require employees to report illnesses and injuries within specific time frames to qualify for certain benefits and protections. Injured employees will also strictly follow their medical professional's treatment regimen and actively participate in (Your Name)'s Return to Work Program, which includes following all the guidelines in this policy. Injured employees will also help supervisors determine potential options for transitional duties. While supervisors are responsible for maintaining regular communication with the injured worker, the employee also has the obligation to maintain contact with (Your Name) about his or her status and condition. The injured worker will complete all required paperwork promptly.

- Return to Work Program Manager will be trained in comprehending the psychosocial and physical aspects of disability and will understand the nuances of (Your Name)'s Return to Work Program, policies, and all associated forms. If necessary, this person will be able to testify in court as a vocational expert. He or she will provide program leadership by facilitating communication between union employees, officials, managers, and medical providers. This manager will hold the responsibility of developing the (Your Name) Job Bank and will assist supervisors with on-site problem solving.

PROCEDURE

Work Schedule

- (Your Name) will do everything in its power to tailor the restricted work schedule to the injured employee's normal, pre-condition work schedule. However, depending on the job limitations, the employee may need to take on a specifically developed, temporary schedule to accommodate these restrictions.

Payment of Wages

- If qualified authorities determine an employee's injury is work related, (Your Name) will pay out benefits and wages in accordance with the state workers' compensation statute and with the company's human resources policies. These benefits will be coordinated with all applicable company, state, and federal benefits.

- Employees performing modified tasks on a restricted workweek will receive wages for hours worked from the company. For work-related injuries or illnesses, workers may be eligible for benefit payments through workers' compensation.

- An employee performing transitional duty for a non-work-related illness or injury on a normal work schedule shall receive an hourly rate for all time worked that may not necessarily be the same as the full-duty hourly rate.
- Following a period of short-term disability (STD), employees performing transitional duty on a restricted work week may receive a combination of regular pay and partial disability benefits. The employee and the (Your Name) Human Resources department will collaborate to figure out this combination on a case-by-case basis.
- If there is a holiday or employees take vacation during restricted duty, they are entitled to their holiday pay or regular vacation selection as it would apply to normal, non-restricted duty. [Employers should verify any workers' compensation or disability benefit plan's language having to do with payment adjustments for vacation or holiday pay.]

Communication Expectations

- If an employee is incapable of working in any capacity and the company approves of the absences, the employee must stay in regular communication with the direct supervisor and the Return to Work Program Manager. Each must receive an update of the employee's medical status at least every week. Failure to do so may result in a reduction in available benefits and discipline up to and including termination.

Medical Appointments

- When possible, (Your Name) asks that employees schedule medical appointments at times that are least likely to interfere with work hours. Employees may use any available time off for medical appointments. Workers should inform their superiors of any and all medical appointments as soon as possible. Non-emergency medical appointments that are not scheduled in advance may be cause for denial of time off.
- In order to evaluate the worker's impairment, the employee's medical provider must complete the (Your Name) Return to Work Evaluation Form for each visit. It is the worker's responsibility to inform (Your Name) of his or her medical status after every doctor visit. This applies to any injuries and illnesses, work-related and non-work-related, that interfere with work assignments.

Employee Procedures

1. If an injury or illness is work related, report it to your supervisor as soon as practicable.
2. Complete and sign a Report of Injury Form.

3. Inform your supervisor that you are seeking medical treatment and obtain a Return to Work Evaluation Form. The Return to Work Evaluation form must be completed for each practitioner visit regardless of whether the condition is work related or not and regardless of your choice of physician.
4. As your medical provider and supervisor continuously review your condition, participate in the Return to Work Program on temporary transitional work for up to 90 days. (Your Name) may extend the 90-day period if medically necessary.

REFUSAL TO PARTICIPATE

If you are capable of performing transitional duty but are unable to return to your regular job, you must return to transitional duty. Workers who choose not to follow all regulations in this Return to Work Policy or to participate in the (Your Name) Return to Work Program may become ineligible for state workers' compensation benefits. In some cases, refusal to participate may be a basis for termination. Unpaid family medical leave may apply upon refusal and disability benefits will cease.

FAMILY MEDICAL LEAVE AND OTHER BENEFITS

Federal or state leave laws may afford additional rights and protections during times of injury or illness. If disability benefits are available, lost wages may be reimbursed. Contact the Human Resources department for further details.

Return to Work Policy

Employee Acknowledgement

(Your Name)'s primary goal is to accommodate injured and recovering workers by modifying or identifying jobs to meet their physical capacities and allowing them to return to work as smoothly and quickly as possible. The company is committed to customizing return to work programs to the individual's physical capabilities and will review all task assignments regularly to make sure duties are appropriate.

We are committed to a speedy return to work and recognize that it accelerates the recovery process and reduces the likelihood of permanent disability. (Your Name) workers are expected to exemplify the same commitment to the program by following the Return to Work Policy and all of the guidelines of the Return to Work Program. The Return to Work Program necessitates a team approach, so employees are expected to cooperate with the supervisors, management team, and medical staff if they ever become injured and unable to perform their full job duties.



Have any questions?
Ask An Expert:
(650) 600-6226
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Before working on any (Your Name) job site, each worker is expected to have read the entire Return to Work Policy, which includes the following sections:

- Purpose
- Scope
- Applicability
- Responsibilities
- Procedure
- Refusal to Participate
- Family Medical Leave

If you are uncertain or have questions regarding the content of these policies, you are required to consult your supervisor. This discussion should happen prior to signing and agreeing to the (Your Name) Return to Work Policy.

I am aware of and have read (Your Name)'s Return to Work Policy, and I understand the expectations and requirements of me as an employee. If I become ill or injured and unable to carry out my regular duties, whether it happens inside or outside the workplace, I fully recognize (Your Name)'s expectations of me during my recovery. I also know that (Your Name) reserves the right to pay less than my full-duty rate during transitional work if it is justified.

I also understand that if I refuse to participate in the Return to Work Program or follow this policy's guidelines, I may become ineligible for state workers' compensation benefits, and, in some cases, my refusal may be grounds for termination.

Employee Signature: _____

Date: _____

Prepared by Nine Point Strategies

This Return to Work Policy is a guideline. It does not address potential compliance issues with Federal, State or local OSHA or any other regulatory agency standards. Nor is it meant to be exhaustive or construed as legal advice. Consult your licensed commercial Property and Casualty representative at Nine Point Strategies or legal counsel to address possible compliance requirements.