RETURN TO WORK PROGRAM

An employee with an occupational injury or illness is often capable of working in a limited or restricted capacity during their period of recovery. A temporary modified duty assignment is defined as the assignment of an injured worker with a temporary medical restriction who is employed in an active status to:

- the usual job classification with select duties excluded to comply with medical restrictions;
- alternative job duties within the same bargaining unit at the same site which accommodate the medical restrictions; or
- alternative job duties within the same bargaining unit at a different site which accommodate the medical restrictions.

Temporary modified duty assignments may be utilized for a maximum of 180 calendar days for the same injury or illness. No individual temporary modified duty assignment may exceed 60 calendar days in duration. Rotation to a new or different temporary modified duty assignment must occur on or before the 61st calendar day of any given assignment.

This program will be directed by the Risk Management and Safety Department.

Procedure

1. Employees who sustain an industrial injury or illness must initially report to an authorized medical professional as directed by the District’s workers’ compensation administrator or a pre-designated personal physician\(^1\) for treatment. The authorized medical professional will be informed that the District has modified duty assignments. The treating physician will then provide the Risk Management Department and workers’ compensation administrator a Return to Work Authorization report detailing the employee’s physical limitations.

2. After the initial treatment for an industrial injury, employees released to work on full duty status or on modified duty with medical restrictions must provide a Return to Work Authorization form to Risk Management. If modified duty is recommended, the authorized medical professional will provide the District with a Return to Work Authorization form indicating the specific physical limitations imposed upon the employee.

3. If the Return to Work Authorization lists medical restrictions and advises modified duty, the injured employee’s supervisor will be contacted promptly. If the Return to Work Authorization is initially received at the work location, the supervisor will immediately contact the Risk Management department.

4. If a Return to Work Authorization denotes unclear medical restrictions or does not indicate if the employee may be considered for a modified duty assignment, the Risk Management department shall contact the authorized medical professional to determine the projected return-to-work date and/or medical accommodations which might enable the employee to be assigned to temporary modified duty.

\(^1\) Employees are required to have a pre-designated form on file with the District’s Human Resource Department.
5. The Risk Management Department will consult with the employee's appropriate supervisor or manager regarding temporary modified duty assignments. The Human Resource Director may also be consulted when appropriate.

6. The Risk Management Department, and if necessary, the Human Resources department will review the medical restrictions and determine if there is an appropriate, temporary, modified duty assignment available at the employee's usual work site that will accommodate the restrictions. Each case will be considered according to its own specific circumstances.
   a. If a temporary modified duty assignment is not available at the employee’s usual work site, the Risk Management Department and Human Resources department may attempt to locate other available and appropriate modified duty assignments at an alternative District site.
   b. The District will follow the medical recommendations of authorized medical professional when an employee is released to return to work. Participating employees will be assigned to work duties that match, as closely as possible, the physical limitations recommended by authorized medical professional.
   c. If no appropriate, temporary, modified duty assignments are available, the employee will continue off work on Temporary Total Disability benefits until an appropriate modified duty assignment becomes available. This assignment shall accommodate their work restriction until their restrictions are removed.

7. An interactive conversation will ensue between the employee, direct supervisor, Risk Management Department, Human Resources department and other appropriate employees outlining the modified duty assignments which may be available that accommodate the work restrictions as outlined by the authorized medical professional. The Modified Duty Agreement form outlining the specific temporary duty assignment chosen will be signed by the employee and appropriate supervising management.

8. The injured employee will not be assigned to modified duty without the knowledge of the site supervisor and/or the off-site supervisor. The participating employee with a modified duty assignment shall be monitored by his/her supervisor.

9. The Risk Management Department will review each case at least once every 20 calendar days. The supervisor and the participating employee will be interviewed in accordance with the Modified Duty Agreement form provided by the District. Participating employees may be reassigned if the work proves too strenuous and/or poses a threat of re-injury or if the authorized medical professional changes the recommendations regarding physical limitations.

10. If an employee declines work in a modified duty assignment, Temporary Total Disability benefits will not be paid by the workers’ compensation administrator. Sick leave or other leaves (if available) may be authorized, subject to the approval of the Director of Human Resources.

11. If the employee with temporary modified duty assignments has not progressed to full work status by the end of 180 calendar days, they will be removed from work and once again placed on Total Temporary Disability status. The workers’ compensation administrator will be notified that Temporary Total Disability payments are to commence or resume, and the employee will not be eligible to return to work until the authorized medical professional releases the employee to perform all essential functions of their usual and customary position, or until the employee reaches maximum medical improvement, with or without restrictions.
12. The injured employee may appeal the 180 calendar day limit for temporary modified duty. This appeal must be made in writing and must be submitted to the attention of the Risk Management Department within five working days of notification to the employee that the limit of 180 calendar days of temporary modified duty has been exhausted. The appeal will be reviewed by the Risk Management Department and the Director of Human Resources. The employee will be notified of the outcome in writing.

13. An employee who is off work because the limit of 180 calendar days of temporary modified duty has been exhausted is expected to be available during normal work hours to respond to the District’s phone calls for information or assistance with business-related items as they arise.