

Return-To-Work Program Guide

Introduction

The ultimate objective of a Return-To-Work Program is to help injured workers return to meaningful, safe and suitable employment as soon as it is appropriate to do so. This objective is achieved in part by following individualized Return-To-Work Plans that should be designed specifically for each injured worker.

When a workplace injury does occur, in spite of all prevention efforts, the focus must first be on providing immediate and appropriate first aid and then on returning the injured worker to the workplace. To do this successfully requires a partnership. This partnership will include the worker, employer, healthcare provider, union (if applicable) and the Safety Committee – all of whom must work together cooperatively to minimize the impact of workplace injuries. Together these partners will form a Return-To-Work Committee. It is important to always keep in mind that an early return to work promotes a speedy recovery process, thereby lessening the overall impact of workplace

injuries and reducing the cost of Workers' Compensation premiums.

A majority of workplaces currently recognize that Return-To-Work Programs are essential to the well being of business and the individuals employed in the process of business. Designing and implementing successful Return-To-Work Programs, however, does not happen automatically or easily. If your workplace already has a Return-To-Work Program in place – congratulations!

Promotion and education about Return-To-Work should be done through departmental meetings, newsletters, posters, training sessions and any other methods seen fit. Awareness training for all workers is equally important. The entire work population needs to understand that returning an injured worker to work requires assistance and some special treatment. It is also equally important that the staff know they would also receive similar treatment and accommodations if they were injured on the job.

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What is Return-To-Work?

Return-To-Work is a proactive approach to helping injured workers return to safe and productive work activities as soon as it is physically possible. It is a partnership involving employers, workers, health care providers, unions, and a Return-To-Work Committee.

The primary goal of a Return-To-Work Program is to return workers to their pre-accident jobs. However, this is not the only goal. A Return-To-Work Program must also strive to restore all injured workers to the economic, social and vocational status that they had prior to the injuries.

Generally Return-To-Work Plans within an overall workplace Return-To-Work Program are individually designed for each injured worker as a short-term accommodation, working towards a common, primary goal – a successful return to work. Return-To-Work Plans have time frames and schedules that are transitional and depend on the type of injury, physical abilities and limitations, skills, and pre-accident employment duties of the injured worker.

Why Establish a Return-To-Work Program?

Injuries are costly to all members of today's workplace partnership – employers, workers, medical providers, unions,

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and the insurance companies. While accident prevention is the best way to reduce overall injury costs, an effective Return-To-Work Program is the best way to manage costs after an injury has occurred.

Essential to the Return-To-Work Program is early assistance in helping workers

return to work as soon as it is physically possible. Research and practical experience have shown that for workers who are absent from the workplace:

- There is only a 50% chance that they return to work after a six-month absence
- This declines to a 25% chance following a one-year absence
- This is further reduced to a 1% chance after a two-year absence

Develop the Scope of the Return-To-Work Program

To Whom Does the Return-To-Work Program Apply?

Return-To-Work Programs should be available to all injured workers. Each worker should be treated equally and objectively to minimize conflict and encourage support in the workplace. Fair and consistent treatment of workers helps gain and maintain support for the program and maximizes its success.

Formulate Objectives for the Return-To-Work Program

Objectives should be identified so that the success of the program may be measured and evaluated. Some objectives may include:

- Returning the injured worker to full pre-injury employment
- Returning the injured worker to alternate employment
- Improving employment relations
- · Reducing the number of workplace accidents

Objectives may be added or modified based on needs and goals of the workplace.

Involve and Communicate with the Workforce

Worker involvement is critical for the success of any Return-To-Work Program. The experience and knowledge of people from all areas and all levels of the workplace will provide invaluable information for the development of a Return-To-Work Program.

As a first step in developing a Return-To-Work Program, a preliminary meeting should be arranged between the employer and union/worker representatives. This will allow mutual commitment to be gained from the onset. During this initial meeting, discussions should include topics such as why to develop a Return-To-Work Program and how to involve the staff in this process.

Following the initial employer/union/worker representative meeting, it will be necessary to inform the entire workforce about the Return-To-Work Program. This can best be accomplished through department and staff meetings, with follow-up details and updates communicated in newsletters, memos, electronic mailings, etc. Some workplaces have also found it useful to designate a centrally located bulletin board to display Return-To-Work Program updates.

During workplace program development, there are some consistent messages that need to be shared with all levels of the company – workers, supervisors, managers, union executives and directors. These messages include:

- Human and financial impact of workplace accidents
- Responsibilities of the Return-To-Work Partners
- Benefits of Return-To-Work Programs

Human and Financial Impact of Workplace Accidents

There are many costs associated with workplace accidents for both the employer and worker. Some costs are direct (those that are easily identified with specific activities) and others are indirect (those that are not identified with specific activities). The following list provides some examples of each:

Direct Costs include:

- Health care expenses
- Assessment care expenses
- Accident site clean up

- Decreased net income for injured workers
- Damage to materials, building, tools and equipment
- Fines
- Workers' Compensation benefits

Most of the expense of workplace accidents consists of indirect or hidden costs. They include:

- Injured workers' lost productivity
- Lost productively of co-workers attending to the injured workers or undertaking their workloads temporarily
- · Hiring and training of replacement workers
- Replacement of equipment and tools
- Replacement of first aid supplies
- · Transportation of damaged equipment for repair
- Investigation of the accidents
- Possible legal expenses
- Decreased productivity of co-workers due to low morale
- Paperwork
- Overtime to make up for lost productivity
- Lost productivity as injured workers attend health care appointments

The above costs are ones to which a dollar value can be assigned. But what about the intangible costs to the worker? What dollar value can be assigned to these?

- Pain
- Suffering
- Reduced health
- · Altered social life
- Changed family life
- · Reduced quality of life
- Loss of security
- Decreased self-esteem
- Loss of productivity and ability to earn an income
- Increased stress

The best way to reduce and perhaps eliminate all of these costs is to prevent the accident from happening in the first place. The establishment of a Safety Program at the workplace can help achieve this. However, when an injury does occur, costs can be minimized by having a Return-To-Work Program in place that will assist in restoring the injured worker to a healthy and full lifestyle, both on and off the job.

Benefits of a Return-To-Work Program

An effective Return-To-Work Program is genuinely a "win-win" situation: all members of the Return-To-Work Team will experience benefits from the program.

The following list outlines some of the advantages of a Return-To-Work Program for each partner.

Benefits to the Employer

- Reduced staff turn-over and training costs by retaining experienced and knowledgeable workers
- Improved productivity. When a worker sees the tangible evidence that their employer is concerned about the well-being of its staff, morale improves. Improved morale means greater productivity with skilled workers maintained on the job

- Reduced time loss because the employer is able to participate in making appropriate plans to facilitate the injured worker's return to work
- Reduced amounts paid out in Workers' Compensation benefits because the worker is able to return to employment much earlier
- Reduced time loss because workers know their employer will make whatever reasonable accommodation that may be required to facilitate their return to work
- Minimized accident costs such as worker benefits, the hiring and training of replacement workers, and the cost of inexperienced workers
- Improved mod experience (this may be very important for companies/organizations that bid on contracts)
- Decreased long-term Workers' Compensation rating costs;
- Increased Return-To-Work rate
- Improved morale and worker relations by offering Return-To-Work Plans
- Assurance that time loss is not due to lack of opportunity for the injured worker to work
- Demonstration of concern for the workers' best interests and indication that workers are viewed as valuable members of the company/organization
- Meaningful alternate duties are performed that might not otherwise have been done due to different priorities
- Participation and contribution to the rehabilitation process

Benefits to the Injured Worker

- Maintained employment relationship that provides job security, self-worth, and financial independence
- Maintained financial benefits, including pension, medical and dental plans, insurance coverage and vacation credits
- Maintained contact with co-workers and friends
- Reassurance that they are valuable workers
- Maintained dignity and self-worth by remaining productive
- Alleviated feelings of dependency and lack of control by participating in the development of their own Return-To-Work Plan
- Maintained job skills
- Minimized loss of physical fitness and muscle tone due to inactivity
- Removal, or at least reduction, of uncertainty about the future since Return-To-Work Plans provide action plans with goals, time frames and processes that will assist in returning the injured worker to full employment
- Earlier resumption of a "normal" life supporting family members financially and emotionally, and participating in leisure and social activities
- Provision of a suitable physical rehabilitation program, when appropriate, where muscles and joints are used and exercised according to the demands of the job in an effort to enhance rehabilitation

Benefits to the Health Care Provider

- Focused and coordinated treatment for the injured worker through the Return-To-Work Plan
- Treatment of the whole person rather than just the injury
- More efficient use of health care resources that are directed

- toward a specific goal: the return to work of an injured worker, by using the partnership approach
- Having treatment strategies agreed upon in advance, so the services are not fragmented or duplicated

Benefits to the Union

- Preserved jobs, seniority, benefits, etc. for injured workers/ members
- Increased awareness that the union is there to protect workers' interests and well-being
- Promotion of cooperative labor-management relations

Principles of Return-To-Work

There are several basic principles to follow in the development of an overall workplace Return-To-Work Program and individual Return-To-Work Plans for workers:

Joint Responsibility and Development

Both workers and employers are responsible for the prevention of accidents and the rehabilitation of an injured worker, as well as the development of the workplace Return-To-Work Program and individual Return-To-Work Plans. The employer, worker, union representative (if applicable), and the health care providers should jointly develop and agree upon each injured worker's customized plan.

Involvement of the Injured Worker

Injured worker involvement in the development of his/her own Return-To-Work Plan is essential. It provides a sense of ownership of the program and a degree of commitment to return to work in a timely and reasonable manner. Injured workers should be encouraged to take responsibility for their own rehabilitation and to view their entire Return-To-Work Team as resources who will help them in their rehabilitation process.

Communication

For the Return-To-Work Program to be successful there must be ongoing communication and consultation amongst all team members. Only then can each person support and participate in both the planning and the implementation. A positive attitude toward treatment of injury and good communication with workers are key elements to a safe and productive work environment. Injury is very costly for both workers and employers. Being proactive can eliminate downtime from minor injuries, and can stop minor injuries from becoming serious, long-term problems. Encouraging workers to report injuries and helping them find effective treatment quickly will reduce claims, maintain productivity, and keep workers at work.

Keys to an Effective Return-To-Work Program

An effective Return-To-Work (RTW) Program is a "win/win" for all concerned. The injured employee retains a sense of affinity towards his or her employer, knowing his or her many years of

service have been both appreciated and rewarded. In addition to retaining a valued employee, the employer enjoys reduced overall claim costs.

Management Support

Senior-management commitment is critical to your program's success. Its ultimate goal is to save money in both Workers' Compensation and Disability claim costs, but short-term expenses can make it seem more costly than traditional lost time claims. The reason: RTW programs tend to affect two or more cost centers. When employees cannot return to their former department, that cost center suffers reduced productivity coupled with continued payroll costs. Meanwhile, the "light duty" cost center seems to be getting a "free ride." Without pre-emptive management efforts to address these concerns, RTW Programs are doomed from the start.

Team Approach

Once management commitment is secured and communicated throughout the organization, it is time to form a Return-To-Work Team. The RTW Team is similar in design and function to a Safety Committee, but its focus is more narrow – to provide an integrated and coordinated process for administering any RTW claims that may include members of management and supervision.

 Friction may develop when the best match for the employee is in another department. Union-related seniority issues can also complicate this process so the RTW Team and management must work closely together to minimize possible antagonism.

Task Assessment

When a workplace injury appears to be a candidate for the RTW Program, the first significant step is a "Task Assessment" which compares the employee's physical limitations to the tasks of the temporary job assignments to determine the optimal level of exertion. It requires evaluation of each component of the job (such as number and frequency of lifts) to set the appropriate level of activity given the worker's physical limitations. You will need to assess both regular and overtime duties to plan a recovery schedule that meets the employee's needs.

The severity of the injury sometimes makes lost time
unavoidable. Until the employee is ready to assume light
duty, it is vital for the RTW Team to remain in close contact
with the injured employee via frequent phone calls and
even personal visits. In sincerely expressing concern for the
worker's well-being, they must emphasize he or she is the
primary beneficiary of the RTW Program.

Three Ways to Ensure Success in a Lightduty Job

You can save a lot of money when you have an effective Return-To-Work Program. When employees do not succeed in light-duty positions, however, it means you will pay more on their underlying Workers' Compensation claims.

Sometimes workers need only minor changes to their jobs to return to work: remove a certain task and the worker should be able to tolerate the job. When the worker's job or physical restrictions make that impossible, however, it is more complicated.

These strategies can help you make the change to light-duty a successful one.

1. Use Regular Jobs

You can always craft a job where an employee does absolutely nothing, but this will not help you or the employee. To succeed in modified duty, the worker has to do more than just show up and stand around to collect a paycheck. You have to find a way to keep the employee coming to the work place and performing a meaningful job.

There is another danger in calling a job a "light-duty assignment" when it adds nothing of value to the organization. For example a judge may decide he or she is still totally disabled. If the job you create is available only in your facility, and the employee would not find it elsewhere on the open labor market, a judge may conclude the employee cannot perform regular jobs and you wind up paying a claim at a total disability level.

2. Eliminate Chances of Overreaching

Workers' Compensation administrative decisions are littered with cases of employees who were told not to perform some task if it was beyond their medical restrictions, yet the worker tried it anyway. Even when the employees disobey direct orders, these cases usually end badly for employers.

Eliminating temptation is the way to prevent employees from exceeding their restrictions. Instead of telling workers not to lift more than 30 pounds as the doctor's note says, remove the lifting from the job. Another option is reassignment to a job that does not involve lifting. By removing the option of lifting from the employee's discretion, you will reduce the chances of the light-duty assignment that accomplishes nothing – or worse, hampers the employee's recovery.

3. Have an Exit Strategy

The ultimate goal is to get the worker back to his or her preinjury job. Setting up a light-duty assignment is just the first step. You also need to make changes when the employee's conditions improve. As employees are able to tolerate more physical demands, it may be possible to move them back into their old jobs.

Of course, you will never know if this is possible unless you monitor the employee's recovery from the injury. You should have regular deadlines to review the status of the employee's restrictions. At each doctor's appointment the employee should receive instructions from the physician. The doctor should decide whether the prior restrictions are still necessary or whether they might be too restrictive due to the employee's recovery.

CHECKLIST:

- Maintain a list of regularly available jobs that do not involve much physical activity.
- Do not leave job tasks involving activities that could violate restrictions up to a worker's discretion.
- Demand an update on restrictions every time a worker has a medical appointment.

Developing a Return-To-Work Committee

Creating a Return-To-Work Committee ensures that all aspects of the workplace are considered and takes the knowledge and experience of all levels of workers. It provides an opportunity to take advantage of the widest range of ideals for the development of a Return-To-Work Program. Each workplace should develop the type of committee that suits its needs, but it is critical that the committee members reflect the concerns and interests of both labor and management.

Who Should be on the Committee?

All members of the committee should have a general understanding of the difficulties experienced by injured workers in returning to work. They should also be aware of the costs associated with workplace injuries for the employer, the worker and society as a whole. They must be knowledgeable about the ways in which Return-To-Work Programs can minimize the cost of Workers' Compensation.

The committee should provide an opportunity for management, union/worker representative and all other Return-To-Work Partners to participate, ensuring that decisions and procedures are seen as mutually beneficial. Members of the committee should also have the respect of workers and management, and be perceived as an unbiased group who are open to varying viewpoints and opinions.

The committee should include individuals who understand broad administrative and managerial issues, as well as individuals who have specific expertise in areas such as occupational health and safety, human resources, worker benefits, etc. Members should be familiar with applicable union agreements and with a variety of workplace job functions.

Management members might include managers from individual departments within the company, Human Resource personnel, and/or those with the ability to authorize budget expenditures for procedures such as job modifications.

Worker members should be from various work areas, representing different occupations within the company. They may also include members of the Safety Committee. Regardless of who becomes a committee member, the general worker population should have the ability to participate in the selection of its representative. After all, it will be these people who are accountable to and representative of the worker population.

In unionized workplaces, the union should be asked to nominate members to the committee. Both union and

management will have the added responsibility of ensuring that the Return-To-Work Program observes the collective agreement and that the collective agreement meets various legal requirements.

The Return-To-Work Committee should also be linked to another committee that deals with occupational health and safety, ergonomics, long-term disability, worker assistance, affirmative action/employment equity and Workers' Compensation. This connection can be accomplished through joint meetings or simply through the exchange of meeting minutes.

Regardless of the final size of the committee, strive to maintain a balanced representation of the Return-To-Work Partners. Each committee member should be committed to the objectives of the Return-To-Work Program and the suitable and efficient return to work of injured workers.

Return-To-Work Committee Responsibilities

The Return-To-Work Committee is essential to the development and acceptance of the Return-To-Work Program. The committee should utilize all existing resources so as to ensure that duplication of activities and costs are avoided. Remember that your Safety Committee may already have gathered, and are willing to share, some very valuable information.

The Return-To-Work Committee has a number of responsibilities:

- Developing a Return-To-Work policy statement and formal understanding;
- Developing the rules and procedures to be followed when a workplace injury occurs;
- Conducting a Job Task Analysis;
- Developing suitable alternate work assignments;
- Communicating and promoting the program to the workplace;
- · Creating an information package for the injured workers;
- Organizing the Return-To-Work Team who will assist with the individual Return-To-Work planning;
- Providing guidance and support to the Disability Management Coordinator;
- Meeting regularly and ensuring the minutes are kept of all meetings;
- Developing a dispute resolution process;
- Exploring ways to improve the Return-To-Work Program.

The committee may also be involved in the development of individual Return-To-Work Plans for injured workers. The committee must ensure a Return-To-Work Program for a unionized workplace is designed and administered within the collective agreement. It must provide a process for identifying and resolving potential labor relations problems.

The committee must also ensure that the program is developed through consensus and operates with the full participation and support of management and staff and provides an ongoing avenue for worker input.

Selecting a Disability Management Coordinator

The Disability Management Coordinator should be the driving force behind the day-to-day activities of the Return-To-Work Program. From the first contact with an injured worker, to talking with an adjuster, health care personnel, co-workers, family members, etc., the Disability Management Coordinator facilitates a timely and safe return to work process.

The Disability Management Coordinator should be objective and have respect of co-workers, union officials and management. The individual should have comprehensive knowledge of the diversity of jobs in the workplace and their physical demands. The person must also have excellent interpersonal and communication skills and have the ability to cope with conflict and work effectively in a collaborative environment.

The determination of a Disability Management Coordinator need not involve the creation of a new position at the workplace. For many employers it may be more practical to appoint a senior line manager, human resources representative, or some similar personnel to coordinate disability management activities. It is important to remember that the needs of each workplace will vary depending on its size.

Evaluate the Needs of the Workplace

One of the first steps that the Return-To-Work Committee should take is to carry out a comprehensive analysis of the workplace. Before anyone can begin to decide the program's objectives and policies, they must first understand the specific needs of the workplace.

Although each workplace will develop its own unique approach to collecting information and defining actual needs, there are some basic steps to follow and some common questions to ask at the beginning. The following concepts should be considered and explored during the Return-To-Work Program development.

Determine the Corporate/Union/Worker Attitude Towards Return-To-Work Programs

- How do people feel about integrating workers with disabilities? Is there resistance to the concept?
- What kind of labor/management working relationship exists? Is the relationship cooperative or confrontational? How are concerns about safety, workplace conditions, job demands, etc., currently resolved?

Define the Disability Profile Within the Company Organization:

- What kind of conditions, accidents, disabilities, illnesses are most common?
- Are there any probable links between job positions and injuries that warrant further investigation?

Identify the Types of Assistance that are Presently Available to Injured Workers:

 Does your organization have a Safety Program? Does it already provide some assistance with respect to Return-To-Work?

- Is the union already actively assisting workers with Return-To-Work?
- How can the types of assistance currently available support or enable the Return-To-Work initiative?
- Is there an Employee Assistance Program or Wellness Program at the workplace?

Estimate the Level of Support Required:

- How many workers are currently off the job and receiving Workers' Compensation benefits?
- What is the company's history in terms of lost-time accidents?
- What are the impacts of time loss injuries?

Identify the Return-To-Work Assistance that is Available to Injured Workers now and how it is Working:

- How many workers have returned to work without assistance? After a month, after two months, after three months, etc.?
- Are there individuals within the company already helping injured workers return to work? Is there a proactive supervisor, co-worker, manager, union representative who has developed some informal procedures already?
- Are there modified or transitional jobs available? Have any job accommodations been made in the past? What worked? What did not?
- Is there a job inventory or detailed job description of each position within your workplace? Do any job descriptions contain information about functional demands?

Review the Work Site Accident History

Before designing the Return-To-Work Program, the Return-To-Work Committee should review the work site accident history. This information may be available from your Safety Committee, however, your insurance agent and/or carrier will provide statistical data related to your claim history. Things worth considering are:

- The number of accidents in the past five years;
- The type of work performed by those who sustained injuries;
- The types of injuries (e.g. back strain, broken ankle, shoulder dislocation);
- The circumstances under which each injury occurred;
- Any trends in the number of reported accidents or in the type of work done by the injured workers;
- Demographics of workers (e.g., are there any particularly high risk occupations?);
- Statistics on repeat accidents;
- Whether injuries occur more on certain shifts where shift work is performed;
- Costs.

The Return-To-Work Committee uses this information to determine how many and what kind of physical restrictions and capabilities the program will most likely need to accommodate.

The information gained from the work site accident analysis can be used to fine tune the Return-To-Work Program, help identify accident prevention measures, and establish a baseline for tracking future improvements. In the end, this will mean a more efficient and appropriate Return-To-Work Program as well as better safety records.

Document and Report Findings to Senior Management

The concepts and questions are only intended to stimulate and help focus the research carried out by the Return-To-Work Committee. The questions each workplace actually asks may be quite different, but the process of questioning and collecting information will help in developing the Return-To-Work Program – a program that will suit the needs of the workplace environment and the real needs of workers. The end result will be a more practical, cost-efficient program.

Rehabilitative Focus

The Return-To-Work Program should have a rehabilitative focus. Each individual Return-To-Work Plan should be developed as part of an overall rehabilitation (physical and vocational) program for the injured worker.

Work Similar to Pre-Injury

The primary goal of Return-To-Work planning is to return the injured worker to the pre-injury job. When this is not possible, the Return-To-Work Plan should include duties as similar to the pre-injury job as possible. All Return-To-Work accommodations will depend on the nature of the injury, the worker's functional abilities and skills, and the availability of work.

Meaningful, Productive and Valuable Work

The tasks and duties described in a Return-To-Work Plan should be meaningful and productive, and have value to both the employer and worker. When this value is not readily apparent to either the injured worker or his/her co-workers, it should be clearly identified and explained.

Functional Abilities

In Return-To-Work planning, the focus should be on what the worker can do, not what they cannot do. The health care provider can identify the limitations caused by the injury and the abilities that exist. Return-To-Work Plans should remain within these abilities so as to avoid re-injury. Workers must be able to perform the duties safely, without risk of further injury to themselves or others.

Skills and Aptitudes

The injured worker must have the skills and aptitudes to perform the tasks and duties included in the Return-To-Work Plan.

Progressive Return

Each individual Return-To-Work Plan should be time-limited and transitional with stated short and long-term goals. It should include a schedule of activities that will allow the injured worker to gradually return to regular duties and tasks.

Conduct Return-To-Work Program Evaluation and Assessment

Evaluating the success of individual Return-To-Work Plans in the workplace will tell whether or not the overall program is meeting its objectives. It is recommended that evaluation be done through an analysis and comparison method. The analysis will determine:

- · Length of disability;
- Average number of days lost following injury;
- Average time required to settle a Compensation claim;
- · Number of workers returned to full duties;
- Numbers of workers with permanent medical impairments who have been accommodated into permanent positions;
- · How well the procedures are followed;
- · How well participants are served;
- What changes are required?

This information should be compared with previous information to determine whether the program is working successfully and where the adjustments and revisions are required.

Conduct a Job Task Analysis

Job Task Analysis is defined as the investigation and collection of information surrounding work tasks for the purpose of making a step-by-step comparison between the demands of the task and the capabilities of the worker.

Job Task Analysis may be conducted and/or coordinated through the Return-To-Work Committee with input from the Safety Committee or representative, an occupational health nurse or an occupational therapist. The emphasis of the analysis is on the physical demands required to perform each job task. Work environment issues must also be considered when performing a Job Task Analysis.

To conduct a Task Analysis, the job must be broken down into separate units of work and each unit of work analyzed for physical requirements. The analysis must include a description of each task, the tools, machines and equipment used, postures required, and the height and weight of objects lifted and/or moved. Also to be considered are endurance factors, such as strength required for lifting; how long one has to walk, stand, and sit; and the physical demands placed on shoulders, back, arms, and legs. This level of analysis focuses attention on the majority of potential problem areas.

Benefits of Job Task Analysis

Use of a Job Task Analysis can identify areas for ergonomic and workplace modifications so that work environments can be adapted to fit the needs of the injured worker. Once the factors limiting an individual's return to work are identified through the Job Task Analysis, the work environment can be modified to eliminate or reduce the barriers preventing the worker from performing the duties of the job. A thorough Job Task Analysis will also help identify potential accidents, thereby assisting in the prevention of future workplace injuries. The information gathered through the Analysis may also be valuable to the

Safety Committee. It may help the committee improve work process to prevent and identify causes of accidents and near misses.

Information Gathering

The following outlines two possible ways to gather the information needed for the Job Task Analysis. The first suggests that workers perform their own analysis of job tasks. Because workers are often most aware of how they are doing their jobs, this method of Task Analysis can prove to be quite cost effective and beneficial. Workers may also be able to suggest changes in procedures that will improve safety. In addition, this process may assist the injured worker, in consultation with the health care provider, to identify transitional or alternate work assignments.

A second alternative for completing the Job Task Analysis is to obtain the services of a professional in ergonomics and task analysis. These professionals are experienced in observing work environments, breaking job duties into components, identifying problem areas and offering solutions. Occupational Therapists, Ergonomists, Physiotherapists, and Occupational Health Nurses are some of the professionals who have specialized training in this field.

During the analysis, job descriptions are reviewed and workers are observed performing their job duties. Frequently this process is followed up with personal interviews with workers, supervisors and co-workers who are knowledgeable about the jobs within the workplace. This Job Task Analysis alternative can sometimes be costly to the employer, however the long term benefits of completing this type of analysis may significantly outweigh the associated costs.

Regardless of which method of Job Task Analysis is chosen, it will be imperative that workers are encouraged to assist in the process. Workers know their jobs best and are the best people to locate problem areas and offer ideas on how to improve methods, increase safety and identify potential transitional work assignments.

In the event that a Job Task Analysis cannot be completed on all positions of the workplace initially, it is recommended that a review of the work site accident history be undertaken to determine the type and frequency of the most common workplace injuries and in what workplace positions they are most likely to occur. In using this information one can prioritize the Job Task Analysis and target the most likely transitional job functions required to be accommodated. Then, as time permits, a Job Task Analysis can be completed on the remaining positions in the workplace.

When the Job Task Analyses have been completed, the Return-To-Work Committee and the Safety Committee will have two sets of data – the Job Task Analysis showing the physical demands of each job, and the worksite accident history indicating the most common type of injuries for each job.

A comparison of the two sets of data may help develop potential transitional duties and workplace accommodations.

New positions may also be identified by combining tasks from different jobs and work site accommodations.

Job Task Analysis Checklist

When the Job Task Analysis is being performed, the analyst should ensure that a number of ergonomic issues are addressed. The following list is comprehensive; however, it may not be all-inclusive:

- · What activities are involved?
- What physical functions are required?
 - How much lifting, bending, twisting, sitting, standing, walking is necessary?
- How frequently are these activities performed?
- What are the endurance factors?
 - Degree of strength required.
 - Duration of walking, sitting, standing.
 - Physical demands on shoulders, back, legs and arms.
- What is a typical daily schedule?
- What tools and equipment are required?
- What skills are required?
- What are the heights and weights of objects to be moved and/or lifted?
- What are the environmental factors?
 - Access: entrance, parking, elevators, washroom facilities.
 - Environment: temperature, light noise, floor surface, fumes, chemicals, personal protective equipment.
 - Social and Administrative: hours of work, break periods, interaction with peers and the public, independence of work.

Organize the Return-To-Work Team

The Return-To-Work Team's primary responsibility is the development of the individual Return-To-Work Plans for injured workers. Each Return-To-Work Team will vary, depending on the workplace size and resources. Nevertheless, all team members will provide important information and support during the treatment and rehabilitation of injured workers.

Each Return-To-Work Team should consist of at least the following members, each with his/her own specific role:

- Disability Management Coordinator (from the company);
- Injured Worker;
- Worker/Union Representative;
- Health Care Provider:
- Employee Supervisor

Responsibilities of the Return-To-Work Team

The Return-To-Work Team will be very actively involved in individual Return-To-Work planning once the accident has occurred. Some general team responsibilities include:

- Meeting with the injured worker to set up the Return-To-Work Plan, its goals and objectives.
- Ensuring that no conflict exists between the Return-To-Work Plan and the collective agreement in unionized workplaces.

Each individual team member will also have responsibilities in the efficient and safe return to work of injured workers. The following outlines individual member responsibilities:

Responsibilities of the Disability Management Coordinator

The Disability Management Coordinator is a workplace representative who will direct the workplace disability management activities. The Disability Management Coordinator should be familiar with the workers, their work environment and the tasks that they are performing. He/she will report the process of the Return-To-Work activities to a senior management representative and the Return-To-Work Team.

Therefore, the Disability Management Coordinator's responsibilities include:

- Maintaining contact with the injured worker, the health care provider, worker/union representative, employer and claims adjuster/nurse case manager;
- Developing and maintaining appropriate documentation and reporting systems for each individual Return To-Work Plan;
- Communicating with the injured worker as soon as possible after the injury occurs (if possible, contact should be made in person or by telephone. If this is not possible, a letter may be used.);
- Ensuring receipt of all relevant medical information;
- Advising the injured worker's supervisor of the Proposed Return-To-Work Plan;
- Meeting with the injured worker to facilitate a return to work:
- Monitoring the progress of the injured worker's Return-To-Work Plan:
- Completing and submitting required WCB forms to the appropriate persons;
- Ensuring and maintaining regular contact with the appropriate persons, adjuster, nurse case manager, medical providers, etc.

Responsibilities of the Injured Worker

The responsibilities of the injured worker include:

- Maintaining regular contact with the Disability Management Coordinator and communicating any concerns to him/her for resolution;
- Taking an active role in the development of his/her own Return-To-Work Plan;
- Reviewing the Return-To-Work Plan with his/her Return-To-Work Team;
- Maintaining regular contact with the employer contacts;

Responsibilities of the Union/Worker Representative

In a unionized workplace, the union/worker representative's responsibilities include:

- Providing information about union requirements and the collective agreement to staff;
- Assisting in developing and monitoring the Return-To-Work Plan;

- Representing the worker in matters covered in the collective agreement, such as seniority and job assignments;
- Communicating with the union membership.

Responsibilities of the Health Care Provider

The injured worker's primary health care provider is a consulting member of the Return-To-Work Team. This person will be provided with the Job Task Analysis that will familiarize him/her with the injured worker's job and work environment. This will enable an accurate assessment of the worker's capabilities to be made.

Therefore, the primary health care provider's responsibilities include:

- Assessing the condition of the injured worker;
- Providing appropriate physical treatment to the injured worker;
- Contributing his/her expertise to the development of the Return-To-Work Plan;
- Completing the Work Readiness Form as presented by the employer and presented by the worker.

Responsibilities of the Employer

The responsibility of the employer includes:

- Creating Return-To-Work opportunities;
- Maintaining contact with the Disability Management Coordinator;
- Promoting, communicating and educating workers about the employer's commitment to the Return-To-Work Program;
- Monitoring the success of the Return-To-Work Program and approving changes as agreed upon by the Return-To-Work Committee.

Development of Individual Return-To-Work Plans

Early assistance is critical to the success of Return-To-Work planning. The following step-by-step process should assist in the development of individual Return-To-Work Plans for injured workers:

- The Disability Management Coordinator (or existing staff person appointed to manage claims) will provide the injured worker with a pre-developed information package. Depending on the severity of the injury, the injured worker might receive this in person immediately following the accident or by mail shortly thereafter.
- 2. The Disability Management Coordinator will contact the injured worker or the worker's family within 24 hours of the occurrence of the injury, depending on the severity of the injury. This allows the Coordinator to convey the employer's concern and to determine if other assistance is required. It also provides an opportunity to discuss the completion of the Work Readiness Form, the nature of the injury, and the expected return-to-work date. This initial contact also allows

- an opportunity to establish with the worker or his/her family, the frequency and preferred method of contact.
- The Disability Management Coordinator will ensure that the completed Work Readiness Form is returned.
- 4. Once the functional abilities of the injured worker have been identified by the health care provider, the Disability Management Coordinator compares this information to the existing (pre-injury) Job Task Analysis. A determination is then made as to whether or not it is necessary to modify the job to accommodate the injured worker's abilities. If modification of the pre-injury job is not necessary and/or appropriate, then the Disability Management Coordinator should review the Job Task Analysis inventory and determine where an alternate job should be suitable. Remember to take into consideration all the skills and abilities of each worker.
- 5. The Return-To-Work Team must determine the duration and progression of the individual Return-To-Work Plan. Based on information from the health care provider, as provided by the injured worker, the team develops the plan with gradual increases in duties, hours of work, etc. The plan is then forwarded to the health care provider for review.
- 6. The Disability Management Coordinator should keep in close contact with the insurance carrier as well.
- 7. The Disability Management Coordinator should ensure that the injured worker's immediate supervisor has a copy of the Return-To-Work Plan and is informed about the worker's capabilities, goal and expectations of the plan. The supervisor should advise the injured worker's co-workers that he/she will be returning to work and explain the basics of the individual Return-To-Work Plan. The supervisor should emphasize the need for peer support and the cooperation of co-workers.
- 8. The Disability Management Coordinator and supervisor should monitor the progress of the injured worker at regular intervals to ensure that the RTW Plan is appropriate and to address any concerns that might develop. Once the injured worker has returned to full pre-injury duties, monitoring should continue for a pre-determined period of time.
- 9. The Return-To-Work Team should keep the Return-To-Work Committee informed of any program issues that arise so that improvements can be made to the overall workplace Return-To-Work Program. Amongst all parties and at all times, confidentiality must be maintained.

Create an Information Package

The information package provides information and instructions to the injured worker, thereby lessening his/her concerns about what happens after an injury occurs. Workers should be familiarized with the concept of Return-To-Work and the contents of the informational package during the initial employment orientation.

It is recommended that the following documents be included in each individual Return-To-Work information package:

- A personal letter to the injured worker outlining the following:
 - The company's expectations of the injured worker (e.g., who to contact after seeing the health care provider and how frequently the worker should call).
 - What the worker can expect from the employer.
 - Who the employer's key contact people are.
 - The Job Task Analysis of the pre-injury job.
- A letter to the injured worker's primary health care provider with an attached Work Readiness Form stating:
 - The workplace's goal and willingness to work with the health care provider to assist the injured worker's return to a safe and productive work environment as soon as physically possible;
 - What alternate and transitional work is available;
 - The name and phone number of the workplace's contact person;
 - A request for the completion and return of the Work Readiness Form;
 - Return-To-Work options in the workplace;

File Maintenance

The Disability Management Coordinator is responsible for managing files on all injured workers, including their individual Return-To-Work Plans; it is recommended that information pertaining to the Return-To-Work Plan and Workers' Compensation be kept separate from regular personnel files. This will keep the accident information together and prove to be quite helpful during future statistical analyses, evaluations and safety reviews. All information in the files must remain in strict confidence.

Information to be Included in Each File:

- Injured worker's home address and phone number;
- List of Contact Names:
 - Injured workers primary health care provider,
 - WCB case number and Insurance Carrier claim number,
 - Injured worker's supervisor, and
 - Union representative if applicable.
- Completed Internal Accident Reporting Form and First Report of Injury;
- Copy of WCB paperwork;
- Pre-Injury Job Task Analysis;
- · Completed Work Readiness Form;
- Other pertinent reports from health care providers;
- All correspondence between members of the Return-To-Work Team (include notes of telephone conversations and meetings with the Return-To-Work Team members);
- · Reports of progress;
- Copy of the Return-To-Work Plan;
- Upon a return-to-work, each injured worker's file should be stored in a confidential area.