TO: ALL STATE AGENCIES, COMMISSIONS, AND BOARDS

From: J. S. Thompson, Jr., State Risk Director

Date: October 1, 2014

OFFICE OF RISK MANAGEMENT

RE: Transitional Return to Work Program for State Agencies

The Office of Risk Management (ORM) has developed the attached Transitional Return to Work Plan for the State of Louisiana pursuant to R. S. 39:1547. This plan is to be used as a guide for state agencies to develop and implement a Transitional Return to Work Program in their agency.

A transitional return to work is employment which allows injured workers to return to work at the agency where they were injured for up to one year, within the physical restrictions determined by their physician, until they are capable of returning to full duty. ORM requires that all agencies begin offering transitional return to work options as of October 1, 2014 to injured employees who have been released to return to work in a transitional capacity by their treating physician. This includes employees who are currently receiving workers’ compensation benefits.

ORM’s third-party administrator (TPA), FARA, will assist and coordinate transitional return to work with state agencies. Loss prevention audits for fiscal year 2015 will include an assessment of an individual agency’s Transitional Return to Work Program after October 1, 2014.

J. S. Thompson, Jr.
State Risk Director
STATE OF LOUISIANA

OFFICE OF RISK MANAGEMENT

TRANSITIONAL RETURN TO WORK PLAN

FOR

STATE AGENCIES
GOALS OF TRANSITIONAL RETURN TO WORK

Injured workers should be returned to gainful employment as soon as medically possible after a job-related injury or illness. The program shall:

- Provide a safe return to work for occupationally related injuries or illnesses
- Give employees return to work options
- Provide suitable accommodations for employees who have sustained an injury or illness that impacts their ability to perform all aspects of their pre-injury or pre-illness job
- Retain qualified employees
- Facilitate a safer working environment
- Reduce the duration of time needed for the employee to transition back to full duty
- Retain valuable employee work skills, physical conditioning
- Reduce workers’ compensation claim costs
- A workers’ compensation claims reporting process
- A process of semi-annual reports to the legislature and the governor

IMPLEMENTATION PLAN

Agency plans shall include the following procedures, components and policies. Agencies that provide special services to ensure public safety may add statements to clarify its mission. A successful transitional return-to-work plan shall be based on medical prognosis and recovery. Transitional work shall be available until an employee is able to resume full duty employment or up to one year. Unforeseen medical issues shall be referred to the ORM’s third party administrator’s (TPA) vocational rehabilitation counselor.

Plan Implementation

- Review the Return to Work program with existing employees annually
- Review the Return to Work program with all new hires during the new hire orientation

Reporting a Work Related Accident/Illness

Once an injury/illness is reported by an employee the agency will

- Report work related injuries or illnesses immediately via the TPA’s claims system
- Provide employee with a Functional Capability form to provide to the treating physician
- Refer the injured employee to the Occupational Medical Clinic chosen for the agency
- Allow the injured employee to seek treatment with a physician of choice

TRANSITIONAL RETURN-TO-WORK TEAM

Each state agency shall have a transitional return-to-work team to review all lost-time workers’ compensation employees under its authority.
Team scope

- complete transitional return-to-work plans
- review of job modifications
- job tasking
- task identification
- comply with the State’s requirement for a transitional return-to-work plans
- oversight of plans
- facilitate success of plans
- report transitional return-to-work program results

Team composition

- human resources representative
- immediate supervisor
- safety personnel
- management representatives
- TPA staff
- RTW coordinator
- Voc Rehab Counselor as needed

Return to Work Coordinator

The RTW coordinator is the primary contact for employees and outside agencies on matters related to disability management and return to work planning. This includes but is not limited to:

- Responsible for the overall coordination and day-to-day administration of the disability management program.
- Develop, facilitate and monitor return-to-work program
- Develop and facilitate accommodations
- Work with the employee and the employer to facilitate RTW programs
- Monitor RTW plan and provide progress reports to appropriate individuals

Frequency of Team Meetings

- The Transitional Return to Work team shall meet bi-weekly or monthly or when an employee is injured and/or there is a change in the injured employee’s medical status based on the following:
  - Size of the agency
  - Number of lost time claims.

Team meetings will not be necessary if there are no active lost time claims.
JOB TASKING
Job tasking is the process of detailing each specific job task performed in a position. If assistance is needed with job tasking, please contact ORM’s TPA.

- Job tasking should begin before the accident occurs or once an injury has occurred that leads to lost time.
- Complete job tasking for each position of injury that results in lost time.
- Consult with first-line supervisors.
- There is no need for repetition of job tasking with each new occurrence.
- Compile a master list of transitional tasks for each position.
- Maintain a file of job tasks for each position for which a lost-time claim has occurred.

Accommodation Types
Modification of job tasks, equipment or schedules for up to one year, or when IW has been released to return to work, to assist an injured worker transition to return to work. Accommodations may include, but are not limited to:

- Modified Work – Includes modification to the job tasks, functions, hours of work, frequency of breaks, worksite, or any combination of these.
- Alternate Work – Different from the employee’s pre-injury job or illness offered to a worker who is temporarily or permanently unable to perform their pre-injury work.
- Transitional work – A group of tasks or specific jobs that can be performed until the worker is capable of returning to full pre-injury duties.

TRANSITIONAL RETURN TO WORK
A transitional return to work plan should be completed with the supervisor of the injured employee and a representative from the return-to-work team to include:

- Specific job tasks identified
- Hours to be worked
- Duty assignment
- Physical restrictions
- The plan shall be reviewed and approved by each member of the team.

Eligibility for Return to Work
When reviewing an individual worker’s eligibility for return-to-work options, the following criteria should be followed:

- Assess the job task of the worker’s pre-injury position
- Identify transitional tasks that can be performed with the employee’s current physical restrictions
- Review other services or tasks that can be performed which would improve the overall function of the agency
- Review tasks that can be performed that would return an employee to gainful employment.
The Office of Risk Management’s TPA will be available to identify transitional return to work tasks if needed.

**Before the Return to Work**
- The agency will hold a return-to-work meeting with the employee to review the plan before the employee returns to work.
- Once the meeting has taken place, an offer of transitional duty employment shall be made to the injured employee in writing
- If the injured employee is represented by counsel, the notice shall be sent to the employee via counsel

**Agency Responsibility**
- Provide a good detailed job description that includes the physical demands and essential functions of the job
- Treat the injured worker with dignity and respect
- Reflect State values and guiding principles – create a positive atmosphere where the employee knows they are valued
- Promote an open, cooperative process including maintaining regular contact with the employee
- Work with the RTW Coordinator to develop a suitable RTW plan for the employee and stay within the outlined abilities/limitations
- Monitor the progress of the employee through the RTW plan and involve the RTW Coordinator if there are any changes in circumstances
- Promote and enforce safe work practices
- Visibly support the RTW program
- Ensure a work environment that is conducive for a successful RTW program

**The Return to Work Offer**
The offer of transitional return to work employment shall include the following:
- Offer must be made in writing
- certified mail return receipt request
- a specific return to work date and time
- duty assignment
- Who to report to.
- The employing agency shall provide transitional employment for up to **one year** or until that employee has reached maximum medical improvement whereby he can return to his previous job, whichever is **less**.

**Employee Responsibility**
- Return the Functional Capability Form to the immediate supervisor within 24 hours or prior to the next scheduled shift.
• Accept the transitional return to work offer
• Report to work as requested in the return to work offer letter
• Work within the restrictions provided by the physician
• Comply with medical treatment and keep all scheduled medical appointments
• Advise the immediate supervisor and the RTW Coordinator if the transitional work is physically too difficult

After the Employee Has Returned to Work
When an employee returns to work on transitional duty employment, the agency shall not require the employee to perform tasks that have not been approved by the treating physician.
• Evaluate the plan every 30 days to assess the employee’s ability to return to full duty.
• The Office of Risk Management’s TPA will be responsible for communications with medical personnel.
• An agency shall not have direct contact with the treating medical personnel without the approval of the Office of Risk Management’s TPA.

TERMINATION OF EMPLOYMENT
An agency should notify ORM’s TPA if a person is at risk of termination due to exhaustion of sick leave. Termination of employment because an injured worker has exhausted sick leave is not an alternative to transitional return to work. It should be used as an option only after other methods have failed.
• Maintain documentation of failed transitional return to work employment.
• Maintain documentation of efforts made to identify transitional return to work tasks
• Maintain documentation of barriers in identifying transitional return to work.
• The employing agency shall document the necessity to terminate employment.
• Documentation shall include evidence that transitional return to work tasks could not be identified.
• Notify the RTW Coordinator for ORM’s TPA when an injured worker is removed from work or the accommodations are no longer available
MEASURE OF EFFECTIVENESS

The attached **TRANSITIONAL RETURN TO WORK AUDIT FORM (DA WC4000)** shall be used to measure the effectiveness of the agency’s transitional duty employment program.

Information to be tracked shall include the following:

- Number of workers injured per month
- Number of lost-time days from work-related injuries per month
- Number of employees returned to work on transitional employment duties. (Include employees who have resigned or who have been terminated.
- This information is tracked as long as the employee is receiving workers’ compensation indemnity benefits.
- Lost-time days for those employees will be tracked as an average of 21.5 days per month.)

This report will reviewed by the Loss Prevention section of the Office of Risk Management’s TPA during the agency’s annual loss prevention audit.
ADDENDUM

I. CIVIL SERVICE GENERAL CIRCULAR No. 001290
   http://www.civilservice.la.gov/PROGASST/Gencirc/GENCIRC97/001290.HTM

II. TRANSITIONAL RETURN TO WORK AUDIT FORM (DA WC4000)

III. PHYSICIAN’S MODIFIED WORK INFORMATION SHEET

IV. TRANSITIONAL RETURN TO WORK FLOW CHART
REPORT THE FOLLOWING ACTIVITY:

1. Number of lost time workers’ compensation claims during the past month: __________
2. Number of employees returned to work on transitional duty: __________
3. Number of employees returned to work full duty: __________
4. Number of employees on workers’ compensation at month’s end: __________
5. Number of employees who are separated from the agency and still receiving workers’ compensation: __________

- The sum of #3 plus #4 should be greater than the sum of #2 plus #5.
- Total RTW ________ > total not RTW ________ = PASS
- A job task list is on file for each workers’ compensation claim this month: ___yes ___ no
- The RTW committee has met and reviewed all W/C ___yes ___ no

1. Employee ________________ days missed ________ day pay rate __________
2. Employee ________________ days missed ________ day pay rate __________
3. Employee ________________ days missed ________ day pay rate __________
4. Employee ________________ days missed ________ day pay rate __________
5. Employee ________________ days missed ________ day pay rate __________
6. Employee ________________ days missed ________ day pay rate __________
7. Employee ________________ days missed ________ day pay rate __________
8. Employee ________________ days missed ________ day pay rate __________
9. Employee ________________ days missed ________ day pay rate __________
10. Employee ______________ days missed ________ day pay rate __________
11. Employee ______________ days missed ________ day pay rate __________
12. Employee ______________ days missed ________ day pay rate __________

TOTAL __________ TOTAL __________
**PHYSICIAN’S MODIFIED WORK INFORMATION SHEET**

Employee Name: ___________________________ Injury/Illness date: ___________________________

Doctor Name: ___________________________ Phone Number: ___________________________

**RETURN TO WORK FULL DUTY WITH NO RESTRICTIONS?**  YES  NO  DATE ____________

---

**To All Employees:**
Please return this completed report directly to your supervisor within 24 hours of your injury or illness, and prior to the start of your next scheduled work shift.

---

**Attending Physician:**

The following details the employee’s current capabilities; *(please checkmark as appropriate)*

<table>
<thead>
<tr>
<th></th>
<th>1 to 2 lbs</th>
<th>3 to 5 lbs</th>
<th>6 to 10 lbs</th>
<th>11 to 20 lbs</th>
<th>21 to 30 lbs</th>
<th>31 to 40 lbs</th>
<th>41 + lbs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carrying</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Push/pull</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Minimal</th>
<th>Under 1 Hr</th>
<th>1-2 Hrs</th>
<th>2-3 Hrs</th>
<th>3-4 Hrs</th>
<th>4-5 Hrs</th>
<th>5-6 Hrs</th>
<th>8 hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sitting</td>
<td>YES</td>
<td>NO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walking</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Squatting                  | YES     | NO         |         |         |         |         |         |       |
Bend/Twist at Waist        |         |            |         |         |         |         |         |       |
Reaching                   |         |            |         |         |         |         |         |       |
Work above Shoulder        |         |            |         |         |         |         |         |       |

List any other restrictions:
_____________________________________________________________________________________

Restrictions effective until (date) ______________________________________________________

---

Follow Up Appointment date(s): _______________________________________________________

Signature of Attending Physician: _____________________________________________________

Date: ___________________________
Transitional Return to Work

- Report a Work Related Accident / Illness immediately to TPA via claims system
  - RTW Coordinator will contact physician and determine restrictions & review eligibility for Return to Work
  - Review the transitional return to work plan with the return to work team
  - Identify transitional duty position
  - Hold Return to Work meeting with the employee
  - Make offer of transitional return to work employment to the employee
  - Evaluate every 30 days to assess employee’s ability to return to work full duty
  - Notify TPA of any changes regarding employment status