Preparing rehabilitation/return to work programs in the workplace

Overview

Although jobs have become safer over the years and legislation has moved away from just paying out injured workers to helping employees to get back into the workplace, injury and illness will continue to be part of an organisation's responsibility.

It is the responsibility of the HR Manager to ensure that the processes for dealing with illness and injury are clearly defined, efficient, fair, in line with legislation, assist workers to return to health and employment and yet do not put too heavy a burden on the organisation. What follows is some advice for those undergoing a review of existing rehabilitation procedures.

Key terms

Injury management

This term encompasses all the activities associated with ensuring the safe and early return to work of an injured worker to the workplace.

Injury management plan

This is developed by the insurer in consultation with the worker, employer and treating doctor. Development of the plan must commence within 3 days of being notified of a significant injury. It sets out the plan relating to a specific individual, and is an evolving document.

Injury management program

Developed by the insurer, the Injury Management Program is the 'umbrella' with which an employer’s return to work program must be consistent. It is a coordinated and managed program that integrates all aspects of injury management including treatment, rehabilitation, retraining, claims management and employment management practices.
Rehabilitation policy

The overall statement of intent (and philosophy) of the employer. It sets out the organisation’s commitment to the process of injury management. It also mentions the importance of consultation and cooperation with agreed procedures. In best practice organisations, the rehabilitation policies include brief references to the systems and procedures to be employed, and the key players and their duties.

Rehabilitation provider

Providers may include an internal employee (return to work coordinator/rehab coordinator, case manager) or external consultant (accredited rehabilitation provider or consultant). For example, Health professionals who provide rehabilitation services to injured workers and their employers. In NSW they are engaged in a small minority of complex cases; in some other States they have a much wider role.

Return to work coordinator

Person or organisation responsible for the management of workers compensation claims including negotiation, legal compliance and reporting responsibilities.

Return to work plan (sometimes known as rehabilitation plan or program)

The RTW plan is a ‘living’ document, agreed to by all parties and aimed at achieving ‘suitable employment’ for the injured worker. The plan outlines ‘suitable duties’, with restrictions and details about how these duties will be monitored and reviewed at the workplace.

Return to work procedures

Established by the employer, the return to work procedures includes rehabilitation policy and obligations and is developed in consultation with workers and respective unions. Sets out how injuries/illness will be managed in the workplace. It is recommended that the RTW procedures be reviewed every two years or when a need for review is indicated, for example, a change in the legislation or when problems are identified. The timeframe for reporting injuries will form part of the Return to Work Program.

Significant injury

A significant injury is when an injured worker cannot undertake their usual duties and/or normal hours for a continuous period of more than a specified number of calendar days (which varies across jurisdictions).

Suitable duties (also known as alternative, selected or light duties)
Work that can be done by the injured worker while recovering from injury, if the worker is not fit for the usual duties. Suitable duties can include parts of the job the worker was doing before being injured; the same job but on reduced hours, or different duties altogether.

**WorkCover agents or claims agents**

In some States return to work coordinators need to liaise with WorkCover agents or claims agents (as opposed to the insurer) in relation to injury claims.

**Dealing with injury**

So now you’ve got a real injury to deal with. What are you going to do?

For starters you will need to contact the injured worker as soon as possible, offer assistance, and make an initial assessment of the injury. Ask the worker what happened, and when it happened. If it seems to be a significant injury, ask them if they received appropriate medical assistance, and if the doctor they saw is the one they want to nominate as the treating doctor. You should also ask about any recommended treatment.

Follow the procedures for your State or Territory. For example, if you work in NSW, you may need to fill out the Register of Injuries Book, notify WorkCover, and notify the insurer within 48 hours, since the injury is significant. Ensure the workers compensation claim form is filled out correctly, including the employer’s ‘Report of Injury’ form. When completed, forward these to the insurer, together with the medical certificate. In some jurisdictions it is the worker who needs to co-ordinate this documentation before submitting to their employer.

Check the timeframes within which the various parties have to complete their responsibilities – and the penalties for not complying.

There’s a lot of paperwork, but it can all end up being very important to ensure the injured worker is properly looked after and is able to return to work as soon as possible.

**Suitable duties**

The rehabilitation or return to work plan is really critical to the success of injury management. This is where you really need to focus on suitable duties. Remember that the old idea of “light duties” isn’t enough – for example, sometimes people with back injuries were given so-called “light duties” that involved sweeping and cleaning up – tasks that put even more strain on their backs. Suitable duties have to be chosen with a view to the
specific limitations of the injured worker’s ability to function. They also have to be ‘time limited’, that is, a short term arrangement.

And you have to make sure they’re not demeaning for the worker. That is, they should be useful to STAR, consistent with the worker’s level of education and with the level of his pre-injury job.

The suitable duties can include parts of the worker’s pre-injury job, if there are some things he can still safely do despite the injury. Sometimes the pre-injury job is still suitable, but with reduced hours. Or you might need to find different tasks altogether.

You need to get the medical certificate supplied by the doctor, and prepare a return to work plan after talking with the doctor, Jeremy and the warehouse supervisor.

To help you decide on suitable duties, I’ll email you some tips – they’re strategies the rehab coordinator used in my last job to come up with suitable duties.

You’ll also have to make sure the OHS problems which caused the injury in the first place are rectified. Check if the warehouse supervisor has done this.

**Tips for devising suitable duties**

- List the tasks normally carried out by the injured worker, by talking with the worker and the supervisor. It may help to go and watch the work being done.

- There are four main options:
  - The first option is to keep the worker doing his or her pre-injury duties – with whatever changes are necessary for the worker to be able to continue in that position. Identify the medical restrictions on the worker’s activities by looking at the medical certificate, and consider how these will affect the worker’s ability to perform his or her normal duties. Consider changing the hours, the tasks or the work practices involved. Also think about building in rest breaks, alternating tasks to enable changes in posture, or altering the flow of work. Decide which parts of their normal job (if any) the worker can still perform, and for how many hours each day.
  - The second option is to try to keep the worker in the same area but doing a different job. You may need to design a job especially for the injured worker, using the information from the treating doctor. Identify other duties the worker could perform while recovering from the injury, by talking with the supervisor and others at the workplace.
The third option is to consider a different position in a new area or even a different site of the same organisation. Try to find out if there is a need for a special task or project to be carried out.

The fourth option is to consider different duties in a new workplace: sometimes it won’t be possible to identify suitable duties for a particular worker.

- Consider how the duties and hours selected for the injured worker will affect the supervisor(s) and others, and what kinds of support, training or explanation will be necessary.
- Write down the suitable duties in a return to work plan, including a starting date and a review date. Sign it and get signatures from all relevant parties – the injured worker, the doctor and the supervisor(s).
- Review and modify the return to work plan if necessary.

Suitable duties must be:

- Productive/meaningful
- Time-limited (ie. not permanent)
- Monitored closely
- Regularly upgraded
- Consistent with physical and/or psychological restrictions as per medical advice or
- Consistent with worker’s skills and ability to travel.

In a small percentage of cases injured workers will no longer have any transferable or marketable skills as a result of their injury. Consider either on the job retraining or formal retraining.

Try it

Selecting suitable duties is an important part of rehabilitation and is an area where many problems occur. Qualified medical personnel must be consulted in the process of defining suitable alternative duties for an employee during rehabilitation, however the aim of this exercise is to consider the effect that different types of injury will have on the workplace task that can be undertaken.

Below is a list of injuries that employees may suffer and may be recovering from upon their return to work. Think of as many common workplace activities that employees may have difficulty with according to the type of injury listed.
<table>
<thead>
<tr>
<th>Example Injury</th>
<th>Workplace activity effected</th>
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<tbody>
<tr>
<td>carpal tunnel syndrome</td>
<td><em>Example: Extended use of computer mouse</em></td>
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<tr>
<td>ankle ligament tear</td>
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<td>abdominal hernia</td>
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<td>broken cheekbone</td>
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<td>knee reconstruction</td>
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<td>slipped vertebrae</td>
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<td><em>your suggestion</em></td>
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