

Return to Work case study

Introduction

Maintaining your injured worker at work or returning them to work involves careful review and assessment of the components of their job, work practices and the risks they pose for your injured worker.

Controlling those risks by making changes to the workplace or work practices, as illustrated in the following case study, is the next vital step to identifying suitable employment and returning your injured workers to work. Examples of an appropriate return to work plan and offer of suitable employment for this case study are also provided.

The case study of Brenda, a nurse with a back injury

Brenda is a 37 year old nurse, of slim build and 160cm tall. She lives a short distance from her employment and has two children aged 12 and 7.

Brenda has worked for her current employer, who operates a 50 bed nursing home, for eight years as a Registered Nurse – Div 2, and is experienced in manual handling techniques.

The nursing home has elderly residents who are bed ridden and require considerable manual handling, and others who are capable of some walking and self care. Many of the residents suffer from varying degrees of dementia and are subject to erratic and sudden unexpected behaviour. In dealing with these situations, great physical demands can be placed on nursing and other staff.

Brenda has enjoyed good health until she injured her back. Brenda sustained the injury to her back when she and a co-worker helped an elderly lady to stand up at a rail in the toilet area. The resident had subsequently let go of the rail and fallen and Brenda had instinctively, but awkwardly, reached out to grab her to stop her falling.

Brenda's medical diagnosis is that of acute back strain. Brenda has been having physiotherapy 2 times a week, and maintains an exercise program, including daily walking, that is supervised by her physiotherapist. Brenda has been treated by her doctor with medication to assist with pain relief while supporting her exercise program.

The doctor and the physiotherapist expect Brenda to be able to return to work in about 4-6 weeks after the injury.

1. Assessing the risk of Brenda's work	2. Controlling the risks to return Brenda to work
<p>Key physical demands of the job:</p> <ul style="list-style-type: none"> • Lifting or assisting in the lifting of residents who are bedridden, or others who have difficulty in standing or walking; • Lifting or assisting residents in confined spaces such as showers or toilet; • Stretching and reaching when making beds • Bending when moving residents or attending to residents' daily care; • Twisting and turning when washing or dressing residents. <p>Workplace risk management activities:</p> <p>The injury investigation highlighted that the cause of Brenda's injury was due to awkward manual handling involved with breaking the residents fall. The resident involved was subsequently assessed as not having the physical capacity to have stood at the rail unsupported.</p>	<p>The employer, in consultation with Brenda, her physiotherapist, her doctor and the WorkSafe Agent, developed a graduated Return to Work Plan for Brenda.</p> <p>The changes included:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Part time work for the first two weeks, progressively increasing Brenda's hours to full time over several months; <input type="checkbox"/> No lifting for two weeks, then review with the physiotherapist to gradually reintroduce; <input type="checkbox"/> Changing Brenda's resident allocation initially so that Brenda only dealt with residents who could walk, shower or dress independently or with minimal assistance; <input type="checkbox"/> Pause at regular intervals, and when required, to do back exercises; <input type="checkbox"/> Using the bed height adjuster to ensure beds are at a height to enable Brenda to change them without bending or stretching for long periods. <ul style="list-style-type: none"> • All residents were individually assessed with regard to their self care and ambulating abilities, together with the level of supervision they required in the toilet and bathroom areas. Individual requirements were documented in their care plans. Care plans are to be reviewed monthly, or a required to reflect each residents status and assistance requirements. • Planned resident emergency assistance strategies were developed in consultation with staff and residents.

RETURN TO WORK PLAN

* **Mandatory Fields** Refer to Page 2 for Return to Work guidance

EMPLOYER DETAILS

Business name & address
Victoria Nursing Home
1 Victoria Street
Victoria

RTW Plan prepared by
Mary Blue

Position *RTW Coordinator* **Contact number** *9876 5432*

RTW Plan number *1* **Date plan prepared** *18/05/2008*

WORKERS DETAILS

Have you discussed RTW with your injured worker? Yes No

* Given name *Brenda*

* Surname *Smith*

Place of residence (not PO Box)
1 The Avenue
Victoria

Telephone *9876 5555* **Date of Birth** *01/06/1974*

Date of injury *01/05/2008* **Claim number** *00000001*

Occupation/pre-injury duties: (Attach job description if available)
Registered Nurse Div 1
Duties attached

Interpreter required? Yes No **Language**

TREATING MEDICAL PRACTITIONER

Name
Dr G Scott

Address
24 Rose Street
Victoria

Telephone *9475 1234* **Fax** *9645 1235*

Nature of injury (symptoms and diagnosis)
Acute soft tissue back strain

OTHER TREATING PRACTITIONERS (physiotherapist etc.)

Name
S. Wilby (Physiotherapist)

Address
2A Bush Street
Victoria

Telephone *9465 4321* **Fax** *9465 4322*

Current treatment (include type and frequency)
Physio 2 x week, Self managed exercise program.
Medication

RETURN TO WORK (attach additional information if required)

Have you contacted the treater to discuss RTW? Yes No

Record medical restrictions affecting the capacity to work as per WorkSafe Certificate of Capacity and/or conversation with the treating medical practitioner.

RTW at end of June
4 hours per day Mon, Wed, Fri for 2 weeks then review before any increase.
Avoid prolonged bending and standing

Has the injured worker any capacity? Yes No
 If yes, an Offer of Suitable Employment should be attached to this RTW Plan

Is an Offer of Suitable Employment attached?
 Yes No If no, indicate date this will be reviewed:

Will you be able to offer suitable employment?
 Yes No (Attach written reasons) Unknown

* **Will assistance with RTW or other occupational rehabilitation services be required for this worker?**
 Yes No If yes, worker must be given a choice of provider & you should discuss occupational rehabilitation with your WorkSafe Agent.

* **Estimated date of RTW**
25/06/2008 Unknown

* **Steps that have or will be taken to facilitate the RTW:**
Discussion with treating doctor.
Provision of details of suitable duties provided to treating doctor and physiotherapist.

RTW goals:

Short term: *Support worker to RTW on partial hours and modified duties*

Long term: *Increase hours and duties gradually to pre injury duties and hours*

* **Employer's signature** _____ **Date** _____

Worker's signature _____ **Date** _____

* **Date plan to be reviewed**
18/06/2008

Indicate date plan has been forwarded to:
WorkSafe Agent *18/05/2008* **Treating Medical Practitioner** *18/05/2008*

THE RETURN TO WORK PLAN

A Return to Work (RTW) Plan is a written action plan that explains how you will help your injured worker return to work as soon as possible, or how you will help them stay at work while they recover.

Before you complete the RTW Plan you should:

Nominate:

- the RTW Coordinator for your workplace, if you haven't already done so (under Section 156 *Accident Compensation Act 1985*)

Gather information:

- Worker's contact details
- Worker's pre-injury job description
- *WorkSafe Certificate of Capacity*

Consult with:

- your injured worker
 - your injured worker's treating medical practitioner (if possible)
 - the occupational rehabilitation provider, where one is involved;
- and endeavour to arrive at a consensus with these persons in relation to the RTW Plan

COMPLETING THE RTW PLAN

EMPLOYER DETAILS

Business name and address:

Detail where all correspondence should be directed.

RTW Plan prepared by:

Employers are responsible for preparing the RTW Plan, but may authorise another employee to do so - including the nominated RTW Coordinator. The RTW Coordinator is responsible for supporting your injured worker, monitoring the plan and liaising with other workplace parties to manage the RTW process.

Position:

State the primary role or position title of your nominated RTW Coordinator.

RTW Plan review/revision:

RTW Plans must be reviewed regularly and revised

- as soon as an employer becomes aware of any relevant change to their worker's compensable injury
- whenever requested to do so by their worker, the worker's treating practitioner, the occupational rehabilitation provider (if any), the RTW Coordinator or the WorkSafe Agent

Number each new plan and send a copy to your WorkSafe Agent. The employer must, at intervals not exceeding three months, advise the WorkSafe Agent of the progress of the worker's RTW in accordance with the plan.

WORKER DETAILS

Claim number:

Enter the claim number assigned to your worker's claim by your WorkSafe Agent. This will be on all claim correspondence received from your WorkSafe Agent.

TREATING MEDICAL PRACTITIONER

Did you attempt to contact them?

It is recommended that you provide the treating medical practitioner with as much information as possible regarding suitable duties you could offer the worker to help them to remain at or return to work. Consider phoning the doctor, faxing through a list of duties available or sending a letter indicating your willingness to accommodate the workers medical restrictions, if any, when they have a capacity to work.

Nature of injury:

The medical diagnosis made by the treating medical practitioner is stated on the *WorkSafe Certificate of Capacity* which should be provided to you by your injured worker.

Other treating practitioners:

If your injured worker is being treated by someone other than a medical practitioner, such as a physiotherapist or chiropractor, please include their contact details here. You should send a copy of the RTW Plan to them, or consider discussing RTW options with them.

RETURN TO WORK

Medical restrictions:

This information will be included on the *WorkSafe Certificate of Capacity*. This may include information such as reduced hours, sitting or standing tolerance, lifting capacity or what you need to take into account when offering suitable employment.

Offer of Suitable Employment:

This must be incorporated into the RTW Plan if your injured worker has a current work capacity (see attached form and guide: Offer of Suitable Employment). You are required to provide a clear explanation if you believe you will not be able to provide suitable employment.

Will assistance with RTW be required:

If you need assistance with RTW and identifying suitable employment, indicate this here and contact your WorkSafe Agent immediately. Your WorkSafe Agent must approve costs for occupational rehabilitation before the services are provided.

Steps to facilitate the RTW:

These may include modifying your worker's duties or hours, providing special equipment or discussing RTW options with the treating medical practitioner.

RTW Goals

Try to be specific and realistic about what you are aiming for in the short term and long term e.g. "Able to perform modified duties for 20 hours within 2 weeks" or "Full driving duties recommenced within 2 months". Communicating this to all parties in the RTW Plan helps to set an expectation of successful RTW.

IMPORTANT INFORMATION FOR EMPLOYERS

- A RTW Plan must be prepared within 10 days from the date that your injured worker's claim for weekly payments was accepted, or the date you became aware your injured worker would have an incapacity for 20 days or more, whichever is the later
- If your worker has any capacity for work, the RTW Plan MUST include an Offer of Suitable Employment (see attached form and guide)
- The RTW Plan should be regularly reviewed and updated as your injured worker's condition changes - as a guide, the plan should be reviewed at least monthly in consultation with your injured worker
- You have a legal obligation to offer suitable employment to your injured worker once they have a capacity for work. You also have an obligation to return them to their pre injury duties or equivalent. Employers who do not meet these obligations risk penalties including prosecution and fines
- Ideally, the plan should be signed by all parties to indicate their agreement. You should send a copy to your injured worker's treating medical practitioner to gain their support, but it is not mandatory to have their signature to proceed with planning for your injured worker's return to work
- Send a copy of the completed plan to your WorkSafe Agent as soon as possible and whenever it is updated
- Occupational Rehabilitation Providers can be engaged by your WorkSafe Agent to assist with RTW - you should discuss this with your WorkSafe Agent if you are unsure of what to do. Their involvement however, does not remove your obligations.
- Once the plan has been prepared and whether or not your worker has returned to work, the employer must maintain contact with the worker (unless it is not practicable to do so).

FURTHER INFORMATION

- Additional forms and general RTW publications can be downloaded from www.worksafe.vic.gov.au
- Training is available for RTW Coordinators and is recommended for employers who may require additional assistance in meeting their RTW responsibilities. Details are available from your WorkSafe Agent or the WorkSafe website.
- Contact your WorkSafe Agent for further advice and assistance if required.

OFFER OF SUITABLE EMPLOYMENT

*** Mandatory Fields**

Refer to Page 4 for Offer of Suitable Employment guidance

Date: Offer no.:

Plan dates
From: To:

This offer is made to (worker's name)

as part of your Return to Work Plan, and is not a new employment contract. You are requested to respond by

RTW position (if different from pre-injury job)

RTW commencement date

* Work location (address)

Manager or Supervisor's name and position

Manager or Supervisor's direct contact number

Current certificate
From: To:

RTW restrictions (from current WorkSafe Certificate of Capacity and/or conversation with treating health practitioner)

- No lifting
- Avoid prolonged bending and standing
- 4 hours, Mon, Wed, Friday the medical review before increase

* Describe the specific duties/tasks to be undertaken, including physical and other requirements of the job offered e.g. Lifting, sitting, standing, performance expectations. (Provide attachments/photos as required).

- Supervise ambulatory residents with dressing and showering
- Assist residents with meals, feeding residents where required
- Assist residents with leisure activities including reading, letter writing and card games
- Bed making with assistance from other staff – max one bed per hour for first two weeks. Adjust bed height as instructed
- Rotate all activities between standing, sitting, walking
- Report any difficulties to Mary Blue immediately

Other considerations e.g. specify rest breaks, special equipment, occupational rehabilitation services/providers, treatment

- 5 – 10 minute rest break every hour if required
- Self pace all work
- Undertake back exercises as required
- Request assistance with tasks as required

*** Hours of work** (Specify start and finish)

	Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Hours p/w
Week 1	25/06/2008	10am start 2pm finish	start finish	10am start 2pm finish	start finish	10am start 2pm finish	start finish	start finish	12
Week 2	02/07/2008	10am start 2pm finish	start finish	10am start 2pm finish	start finish	10am start 2pm finish	start finish	start finish	12
Week 3	09/07/2008	9am start 3pm finish	start finish	9am start 3pm finish	start finish	9am start 3pm finish	start finish	start finish	18
Week 4	16/07/2008	9am start 3pm finish	start finish	9am start 3pm finish	start finish	9am start 3pm finish	start finish	start finish	18

* Employer's Signature: Date:

Worker's Signature: Date:

Treating Practitioner's Signature: Date:

* RTW Wages: * Date duties to be reviewed:

Date plan forwarded to:
WorkSafe Agent: Treating Medical Practitioner:

OFFER OF SUITABLE EMPLOYMENT (OSE)

The OSE is a written job offer based on duties your injured worker can perform, taking into account their current work capacity and work restrictions.

Before you provide this offer you will need to:

Gather information:

- Worker's pre-injury job description & wages
- The current RTW Plan
- Current *WorkSafe Certificate of Capacity*
- Details of available, suitable duties within the worker's capacity

Consult with:

- your injured worker
 - your injured worker's treating medical practitioner (if possible)
 - the occupational rehabilitation provider, where one is involved;
- and endeavour to arrive at a consensus with these persons in relation to the RTW Plan

COMPLETING THE OSE FORM

DATES, ROLES AND LOCATIONS

Offer number:

It is important that you number each OSE to make clear the order in which multiple OSE's are made.

Plan dates:

The offer will usually mirror the period covered by the current *WorkSafe Certificate of Capacity*.

Response:

The OSE should be discussed with your injured worker and by signing the form they indicate their acceptance of the offer.

Return to work position:

If the OSE is for a position different to your worker's pre injury role, indicate their new job title.

*** RTW commencement date:**

Enter the date that your worker is expected to commence work under this offer.

*** Work location:**

What is the address of the workplace where your worker will be working? If several or varying locations, indicate all locations.

Manager or Supervisor:

Indicate who will be the line manager or supervisor that your injured worker reports to. You should ensure this person also receives a copy of the RTW Plan incorporating the OSE.

MEDICAL STATUS & RESTRICTIONS

Current certificate:

Include the start and end dates of your injured worker's current *WorkSafe Certificate of Capacity*.

Return to work restrictions:

Examples may include: lift no greater than 10kg, no reaching above shoulder height, no face to face contact with the public, rest breaks every 30 minutes etc.

DETAILS OF OFFER

*** Specific duties:**

Consider offering modified tasks or responsibilities, alternative hours/shifts and rotating tasks or a combination of any of these.

*** Review date:**

The offer must be revised with each change in current work capacity. A formal review is recommended at least monthly.

Other Considerations:

Include details of rest breaks. These must be adhered to by both employer and worker. Appointments for treatment should (where possible) be made outside of the agreed working hours.

WHAT TO DO WITH THE OFFER

The Return to Work Plan and Offer of Suitable Employment must be signed by the employer or by an employee with sufficient authority to commit the employer to the RTW Plan and make an offer of suitable employment. Request your worker to respond to the OSE within a reasonable, specified period.

*** Give** a copy of the OSE to your injured worker and their treating medical practitioner and seek their support for the plan. By signing the document all parties are indicating their commitment and support of the RTW process.

*** Send** the OSE to your WorkSafe Agent - it is essential to keep them informed of the current RTW Plan and Offer of Suitable Employment.

If applicable, send the OSE to any other health practitioner involved in the treatment of your worker (eg. Physiotherapist, psychologist, etc.) and the workplace supervisor.

IMPORTANT INFORMATION FOR EMPLOYERS

- If your worker has any capacity for work, the RTW Plan **MUST** include an Offer of Suitable Employment (see attached RTW Plan and guide)
- A RTW Plan must be prepared within 10 days from the date that your injured worker's claim for weekly payments was accepted, or the date you became aware your injured worker would have an incapacity for 20 days or more, whichever is the later
- You have a legal obligation to offer suitable employment to your injured worker once they have a capacity for work. You also have an obligation to return them to their pre injury duties or equivalent. Employers who do not meet these obligations risk penalties including prosecution and fines
- The RTW Plan, including the OSE, should be regularly reviewed and updated as your injured worker's current work capacity changes - as a guide, this should be at least monthly in consultation with your injured worker
- If you are unsure of your worker's current work capacity and restrictions or need further clarification, contact the treating health practitioner who issued the most recent *WorkSafe Certificate of Capacity*
- Occupational Rehabilitation Providers may be engaged by your WorkSafe Agent to assist with RTW and identifying suitable employment - you should discuss this with your WorkSafe Agent. This assistance however, does not remove your obligations to prepare a RTW Plan or make an OSE within the required timeframes.

FURTHER INFORMATION

- Additional forms and general RTW publications can be downloaded from www.worksafe.vic.gov.au
- Training is available for RTW Coordinators and is recommended for employers who may require additional assistance in meeting their RTW responsibilities. Details are available from your WorkSafe Agent or the WorkSafe website
- Contact your WorkSafe Agent for further advice and assistance if required.

Electronic copies of this form are downloadable from the WorkSafe website at www.worksafe.vic.gov.au.