

POLICIES AND PROCEDURES

Subject: Return to Work Program Policy No. 7

Page 5 Date: February 11, 2009

Policy Statement

It is the policy of Southern Connecticut State University, when possible, to modify work assignments for a limited period to assist employees who are temporarily restricted from performing their regularly assigned duties due to an on-the-job injury.

(Note: This policy should not be construed as recognition that an employee has a disability as defined by the Americans with Disabilities Act (ADA) of 1990. Information concerning that policy may be found in Policy # 3.)

Scope

This policy applies to all Southern Connecticut State University employees.

Definitions

- Return to Work (RTW) (Modified Duty) position is a temporary position to which an employee is assigned when he/she is unable to return to his/her regular position following an on-the-job injury or illness. The Return to Work position temporarily addresses the restrictions placed on an individual by the employee's treating physician.
- **Employment related injury** is an injury or occupational disease, which arises out of the course and scope of employment and is a compensable injury or illness, as defined under the Workers' Compensation Act.
- Physician in this policy means a doctor of medicine, osteopathic medicine, optometry, dentistry, podiatry, or chiropractic who is licensed and authorized to practice in their specified field.

Eligibility

To be eligible for participation in the RTW Program, an employee must provide a medical certificate (*Form P-33A—Employee*) from his/her treating physician that he/she is:

- Temporarily unable to perform his/her essential duties, following an employment related injury or illness, **and**
- Capable of carrying out work of a lighter or modified nature from his/her regular duties and is expected to return to his/her regular duties within 90 calendar days.

If a staff member is involved in job performance counseling, then he/she cannot be placed in a RTW position outside of his/her regular department.

Managed Care System

The State of Connecticut provides a managed care program administered by GAB Robbins, a specialist in work-related injuries. GAB Robbins of North America, Inc. /Medinsights have created a statewide network of doctors, hospitals and rehabilitation services. GAB Robbins staff members will call throughout your recovery to ensure that your progress is going well. GAB Robins may contact your doctor and work with the University to identify modified duties, which will allow you to return to work as soon as possible.

Process

- 1. Once notified of an on-the-job injury or illness, the supervisor must complete a First Report of Injury (Form WC-207) for Workers' Compensation and inform the employee of the Return to Work Program.
- **2.** The employee must be seen and evaluated by his/her physician to determine if the employee is able to return to work, and if so, with or without restrictions.
 - At the time of the evaluation, the employee must inform the physician of the Return to Work Program, and provide him/her with a copy of the employee's regular job description that identifies the essential functions of the job and its requirements.
- **3.** When the employee is able to return to work with restrictions, the employee's physician must complete the Medical Certificate, indicating the specific restrictions, and the duration of those restrictions. Clarification regarding temporary restrictions may be requested of the treating physician.

4. Taking into consideration the information provided by the physician, the employee's supervisor, in consultation with Human Resource Office, will determine if a temporary assignment can be offered. It should be understood that there may be instances in which the University will not be able to offer such assignment.

If the employee's regular work location is unable to meet the employee's need for modified duty, the University will attempt to find such work in a different area which is able to meet the employees' need for modified duty.

Compensation

In most cases, there will not be an adjustment in the compensation of the employee that is placed in a modified duty position. However, the employee placed in a modified duty position may be paid a salary that is equivalent to the salary of other employees holding the same position.

Offer of Modified Duties Position

Once the employee has been approved to participate in the Return to Work Program, the Human Resources Office must provide a Return to Work (Modified Duty) job offer letter. This letter shall include:

- 1. The position offered.
- 2. The location and duties of the position offered.
- 3. The wages and schedule of the position offered.
- 4. The duration of the temporary work assignment.
- 5. A statement that the supervisor will only assign a duties consistent with the employee's knowledge and skills and will provide training if necessary.
- 6. A statement acknowledging that SCSU is knowledgeable about and will abide by the limitations under which the treating physician has authorized the return to work.

Refusal of Modified Duties Offer

An employee may choose to accept or refuse the Return to Work (Modified Duty) job offer. However, an employee who refuses a modified duty job offer is subject to termination. Rejection of the job offer might also result in cancellation of income benefits under the Workers' Compensation Act.

Duration of Modified Duty

A Return to Work with modified duty offer will be for a period not to exceed 90 calendar days. The duration of approved time will be based upon the information provided by the employee's physician. If the employee is unable to return to work at full duty after the initial approved time (for example 60 days), he/she may

request a continuation of modified duty but may not to exceed a total of 90 calendar days.

An employee requesting an extension of modified duty beyond the originally approved amount of time (i.e. 60 days) must submit another medical certificate to the HR Office from his/her treating physician. This document should include what limitations continue to exist and the probable duration of those limitations.

If an employee is unable to return to work at full duty after 90 calendar days, approval beyond 90 calendar days will be based upon the treating physician's assessment of the employee's ability to return to full duty within the immediate future and must submit updated medical information from his/her treating physician prior to the deadline.

End of Modified Duty

An employee who is unable to return to his/her regularly assigned duties at the end of the modified duty agreement may request a leave of absence through his/her supervisor or may elect to terminate his/her employment with the University.

Provided the employee has exhausted any entitlement under the Family and Medical Leave Act (FMLA), the University has the option to approve or deny the leave of absence request. If Leave Without Pay is denied, employment with the University will be terminated.

If the employee believes that the condition is permanent, progressive, or chronic, the employee may pursue their rights under the Americans with Disabilities Act Accommodation Policy (Policy #3) to determine if they are a qualified individual with a disability. Further information concerning the ADA can be found at http://www.ada.gov/.

For Assistance: The Human Resource Office is responsible for administering the Return to Work Program in consultation with the employee's supervisor. Questions regarding the Return to Work Program should be directed to Human Resources.

Authority

- State of Connecticut Workers' Compensation Disability Management/Return to Work program
- State of Connecticut Workers' Compensation DAS Selective Duty Program (for state employees who are members of either the NP6 (para-professional) or the P1 (professional) health care bargaining units)
- Employee Handbook

Exceptions

Any exceptions to the procedures set forth in this policy shall require prior written approval from the Associate Vice President of Human Resources and Labor Relations or designee.