The most significant cost to a school district for worker's compensation claims are associated with lost time injuries. A return to work program operates on the premise that cost, including litigation, will be reduced if any employee returns to the work place as soon as possible.

1.0 Objective: Implementation of cost control measures to maintain worker's compensation premiums at a reasonable level.

2.0 Early intervention: It makes sense to incorporate rehabilitation into our worker's compensation management program. It should begin as soon as the worker's injury is known. Early intervention takes a number of forms:

- Building the goal of return to work into medical diagnosis and treatment.
- Working with rehabilitation professionals on job analysis and prevention.
- Looking for light-duty or alternate duty jobs that employees can perform before he or she is back to full strength.
- Making supervisors aware of the importance of helping the employee return to productive work and developing a re-entry process that will make that possible.
- Communicating continually with the employee from the first day, to emphasizing the expectation that the employee will return to work and that the employer will work closely with the employee to realize that goal.

3.0 Operating Procedures

3.1 A copy of the Employee's and Supervisor's Report of Injury/Illness (SIPE Form 6-588) is completed and processed immediately after an employee is injured. The claim process is started.

3.2 The employee is sent for medical treatment at an approved provider facility. The medical facility will be informed by the district's workers' compensation administrator that the district has a return to work program. The employer will provide to the physician a copy of the injured employees job description to enable the physician to make a proper evaluation regarding return to work restrictions.

3.3 After receiving medical treatment, the employee reports back to his work site with the physician's report and work restrictions. The employer is encouraged to contact the physician's office to clarify any uncertainties.

3.4 Every effort will be made by the employer to temporarily accommodate a return to work employee. First priority will be to assign the employee to his/her same work unit and same job.
3.5 If appropriate tasks cannot be found within the same work unit, the employee may be placed in another work unit within the district.

3.6 If the employee refuses the work in the modified work program, it may jeopardize their rights to temporary disability benefits or industrial accident leave benefits are payable, and sick leave or other forms of leave will be subject to approval by the personnel department.

3.7 The employer and district workers' compensation administrators will evaluate the employee's status on a continuous basis. Communication shall be maintained with the physician to ensure a return to full job status as soon as possible.

3.8 If the physician states that the employee should not return to work for a specified time, the district shall follow-up with the physician to confirm the determination. The district shall also remain in contact with the physician to follow-up on the possibility of modified duty at a later date.

4.0 The return to work program is intended to be a means of maintaining employees in the workplace. It is not to establish new jobs or to displace other employees. It is a means the district can utilize for tasks which there currently isn't time to do or which normally would not be done because of lack of time, manpower, funds, etc.

5.0 Districts are encouraged to be flexible in the assignment of modified duties. Any assignment that keeps the employee in the workplace rather than at home will benefit both the district and the employee. Modified duty should be considered a win-win situation for everyone.