

APPLICABILITY DEPARTMENT WIDE

REVISION DATE PAGE NUMBER 7/9/24

NUMBER **DOC 830.200**

POLICY

TITLE

WORKERS' COMPENSATION/TRANSITIONAL **RETURN TO WORK PROGRAM**

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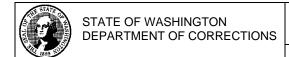
REVIEW/REVISION HISTORY:

Effective: 1/1/89 Revised: 3/14/01 Revised: 11/28/07 3/11/09 Revised: Revised: 11/30/09 Revised: 1/24/11 12/24/12 Revised: Revised: 7/2/19 Revised: 7/9/24

SUMMARY OF REVISION/REVIEW:

Policy Statement I. & II. - Removed unnecessary language Directive I.A.2., I.A.3.b., I.B.1., I.C.1., I.C.4., and I.D.1. - Added language for clarification I.D.5. - Added that L&I will be provided with a Twelve Month Wage History when applicable

APPROVED:		
Signature on file		
	6/5/24	
CHERYL STRANGE, Secretary	Date Signed	
Department of Corrections		



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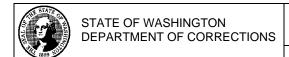
DOC 100.100 is hereby incorporated into this policy; RCW 51; RCW 72.60; DOC 830.180 Assault Benefits for Employees: DOC 840.100 Disability Accommodation and Separation: DOC 830.100 Leave

POLICY:

- I. The Department provides workers' compensation benefits through the Washington State Department of Labor and Industries (L&I) per RCW 51 to employees who sustain a workplace injury or suffer from an occupational illness while working for the Department. These benefits may include payment for medical services, compensation for lost work time (i.e., time loss), and other benefits as provided by L&I according to the claim specifics.
- II. The Department is committed to assisting and supporting employees in returning to work after a workplace injury or suffering from an occupational illness and has developed standardized processes to assist employees.
- III. Non-workplace injuries/illnesses will be handled per DOC 840.100 Disability Accommodation and Separation.

DIRECTIVE:

- I. Responsibilities
 - Α. When an incident occurs resulting in occupational injury or illness to an employee, the employee will:
 - 1. Immediately report the workplace incident to the assigned supervisor and complete DOC 03-133 Accident/Injury Report within 24 hours.
 - 2. Review the Injured Worker Blue Packet located on the Department's internal website for actions to take, who to contact for questions, and information about returning to work.
 - 3. If unable to continue working, seek medical care from a private healthcare provider of choice, and apply for L&I benefits with the assistance of the healthcare provider and:
 - a. Report status of ability to work to the assigned supervisor and the local/designated Human Resources (HR) office immediately and ongoing for the duration of the injury/illness.



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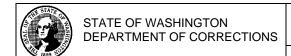
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- b. As soon as possible but no later than 24 hours upon receiving it, provide the assigned supervisor and the local/designated HR office with any documentation from the healthcare provider (e.g., Activity Prescription Form (APF)) regarding assigned restrictions that may impact the ability to perform work duties.
- c. Comply with the healthcare provider's treatment program, as coordinated and approved through L&I.
- d. Contact the assigned Department Claims Consultant if there are specific questions about the L&I claims process.
- 4. When applicable, apply for assault benefits through the local/designated HR office per DOC 830.180 Assault Benefits for Employees.
- 5. Cooperate with transitional return to work efforts and work primarily with the local/designated HR office, which will be the main liaison for helping employees return to work after an occupational injury or illness.
- 6. Submit DOC 03-407 Leave Request per DOC 830.100 Leave for any L&I related medical appointments during regular and/or transitional duty work hours.
 - a. Employees must use their own leave for medical appointments resulting from a workplace injury/illness.
- B. The employee's supervisor, instructor, or Training Program/Facility Performance Coordinator will:
 - 1. Review and use A Supervisor's Responsibilities: The First 5 Steps located on the Department's internal website as a checklist, which includes:
 - a. Ensuring the employee has a copy of the Blue Packet and provide instructions to read it completely and follow the steps listed.
 - 1) The instructor will provide the packet for employees who are injured during training.
 - The Training Program/Facility Performance Coordinator will provide the packet for employees who are injured while in travel status to attend training.
 - 2. Conduct an accident investigation, complete the supervisor's section of the Accident/Injury Report, and submit the report electronically to the Safety Officer within 24 hours.



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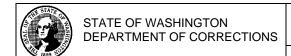
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- a. The instructor will complete the section for employees who are injured during training.
- b. The Training Program/Facility Performance Coordinator will complete the section for employees who are injured while in travel status to attend training.
- 3. Communicate regularly with the injured/ill employee to show support and concern for the employee's wellbeing.
- Immediately report to the local/designated HR office when an employee is missing work or has work restrictions due to an industrial injury or occupational illness.
 - a. Reporting must take place no later than the next business day after being notified by the employee.
- C. The local/designated HR office will:
 - 1. Review and use Human Resources Responsibilities: The First 5 Steps located on the Department's internal website as a checklist.
 - 2. Contact the injured/ill employee as soon as possible after notification of the inability to work in the assigned position.
 - 3. Communicate regularly with the employee to monitor progress throughout the transitional return to work process. Use discussion guides, forms, and best practice tools for tracking ongoing contact to support work disability prevention efforts.
 - Participate in ongoing collaboration with Occupational Health and Wellness Unit (OHWU) to include sharing information received from contact with the injured/ill employee and transitional return to work progress.
- D. A Claims Consultant from the OHWU will:
 - 1. Review and use Claims Consultant's Responsibilities: The First 5 Steps to a Coordinated Return located on the Department's internal website as a checklist.
 - 2. Ensure the employee receives:
 - a. A letter confirming that notification was received that an L&I claim has been filed,



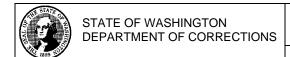
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- 1) The employee's supervisor and local/designated HR office will also be emailed a copy of the notification.
- b. Frequently Asked Questions: Workplace Injury Payments and Leave located on the Department's internal website,
- c. DOC 03-407 Leave Request, and
- d. This policy.
- 3. Maintain up-to-date claim information for the Department's internal claims management system.
- 4. Provide L&I with available claim information (e.g., job analysis, incident description, accident/injury report, witness statements) to assist in claim processing and conduct ongoing communication regarding claims management.
- 5. Provide L&I with completed DOC 03-495 Twelve Month Wage History, when applicable.
- 6. Conduct ongoing collaboration with the local/designated HR office to include:
 - a. Sharing information about the claim,
 - b. Consulting on best practices, and
 - c. Monitoring transitional return to work progress.
- 7. Ensure medical documentation supports continuation of transitional duties or a return to regular duties, as applicable.
- 8. If feasible, present information on the following before the Board of Industrial Insurance Appeals, which is the L&I mediation and judicial authority for resolving disputed claim decisions:
 - a. Claim status
 - b. Department policies and procedures
 - c. Department protest or support of a claim
 - d. Other claim-related matters
- II. Transitional Return to Work Program
 - A. Transitional duty is a temporary work assignment for an employee who is unable to perform regular job duties because of medical restrictions as the result of a workplace injury/illness and an L&I worker's compensation claim has been filed.



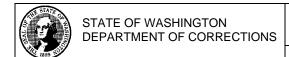
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- 1. Transitional duty may modify or eliminate essential functions of regularly assigned work activity, for a limited time, to meet the employee's work restrictions as an alternate work assignment that does not:
 - a. Require a vacant position,
 - b. Is not promotional in nature, and
 - c. Does not require any specific job classification.
- B. The employee, supervisor, local/designated HR office, and Claims Consultants from the OHWU will review the APF and any documentation from the healthcare provider and collaborate to recommend appropriate transitional duties to assist the employee in transitioning back to their original position.
- C. The transitional duty assignment:
 - 1. Must observe the medical restrictions specified by the healthcare provider and may not cause a delay in medical treatment for the injury/illness.
 - 2. Need not be in the same location, on the same shift, or within the same job class the employee normally performs and may include:
 - a. Working shorter hours,
 - b. Temporarily performing a different job, and/or
 - c. Performing transitional work in the same job class with lighter physical demands.
 - 3. Except for injured employees approved for assault benefits, transitional duty should last no longer than 12 weeks in any one position and may be further limited by Department operational/business needs.
 - a. The local/designated HR office will consult with the Appointing Authority on a case-by-case basis for exceptions.
- D. The local/designated HR office will discuss and finalize with the Appointing Authority the recommended transitional duty assignments, within the employee's medical restrictions, that meet the operational/business needs of the facility/ office.
 - 1. In the absence of an APF, an Employer Job Description (EJD) must be sent to the healthcare provider for approval to ensure the transitional work assignment is appropriate based on the employee's current abilities and poses no risk of harm.
 - a. The local/designated HR office can still discuss and offer transitional duties to the employee.



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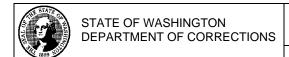
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- 2. The local/designated HR office will coordinate all personnel actions related to facilitating transitional duty assignments.
- E. If approval is obtained from the Appointing Authority, a Returning to Work Agreement Letter maintained on the OHWU SharePoint site must be signed by the employee and the transitional duty supervisor (i.e., the supervisor over the work area where transitional duties will be performed). The letter will contain:
 - 1. The assignment start date, transitional duty supervisor, work hours, salary, and benefits to be received,
 - 2. A copy of the APF/EJD or written medical restrictions and DOC 03-494 Transitional Duty Assignment Attendance Report, and
 - 3. A reminder that the employee will work only within the physical restrictions identified in the medical approval for the assignment.
- F. The transitional duty supervisor will participate in all transitional return to work program efforts (e.g., reporting job status, attendance, and performance) with the local/designated HR office.
- G. The employee will:
 - Receive their regular pay and benefits for the hours worked performing transitional duty, including shift differential and geographic pay when applicable.
 - a. Overtime will not be allowed while working a transitional duty assignment.
 - 2. Be paid for actual hours worked if working a reduced work schedule to assist with injury or illness recovery.
 - a. L&I may supplement the reduced wage with Loss of Earning Power payments as coordinated and approved by the L&I Claims Manager.
 - 3. Notify the transitional duty supervisor and the local/designated HR office immediately:
 - a. Of any restriction changes,
 - b. If there are any difficulties with completing transitional duties,
 - c. If permanent restrictions are given by the healthcare provider, and



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- d. If the employee has any concerns about returning or is not expecting a full duty return to the regular work assignment when the transitional duty period ends.
- 4. Submit a completed DOC 03-494 Transitional Duty Assignment Attendance Report and any associated leave requests each pay period to the transitional duty supervisor.
 - If applying for Loss of Earning Power, a copy of the attendance report must be provided to the OHWU with related required documentation.
- H. If an employee declines or fails to cooperate in the Transitional Return to Work Program, the employee may jeopardize time loss benefits from L&I.
- I. If an employee's return to work, in any capacity, remains unpredictable or absence has continued uninterrupted for more than 365 days, the local/designated HR office will consult/coordinate with OHWU to consider initiating reasonable accommodation/separation.
- J. If permanent restrictions are given by the healthcare provider, the local/designated HR office will initiate processes per DOC 840.100 Disability Accommodation and Separation.
- K. The Department may terminate the transitional work assignment if the medical information does not continue to support the assignment or the claim is rejected by L&I.

DEFINITIONS:

Words/terms appearing in this policy may be defined in the glossary section of the Policy Manual.

ATTACHMENTS:

None

DOC FORMS:

DOC 03-133 Accident/Injury Report

DOC 03-407 Leave Request

DOC 03-494 Transitional Duty Assignment Attendance Report

DOC 03-495 Twelve Month Wage History