



EARLY AND SAFE RETURN TO WORK

GOVERNANCE POLICY

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1.0 PRINCIPLES

- 1.1. The South Shore Regional Centre for Education (SSRCE) is committed to providing a safe and healthy workplace and will assist employees returning to work from illness or injury.

2.0 POLICY FRAMEWORK

- 2.1. This policy complies with the Education Act and other related provincial acts and policies.
 - 2.1.1. This policy sets direction and gives information on a structured program that supports employees to an early and safe return to work from injury or illness as soon as possible. If an employee is able to perform some level of work, but unable to return to their pre-injury or pre-illness work, this policy will provide a means by which the employee may return early to other safe and meaningful work in a modified or transitional assignment.
 - 2.1.2. Management and employees are both obligated to cooperate in efforts to allow for a successful return to work. In support of this cooperation, the SSRCE will alter the workplace, location, or duties in order to accommodate the injured employee's return to work to the extent that it does not cause undue hardship.
 - 2.1.2.1. When a Return to Work Plan is created for an employee, work will be offered as close as possible to their regular shift, location, and job functions. However, the employee, management and where applicable, the Union, acknowledges that there may be exceptions in order to ensure that safe and meaningful work is offered subject to operational requirements.
 - 2.1.3. A Return to Work Plan may be offered immediately in which modified duties may be suitable based on the Suggested Standard Restrictions for a specific injury or medical documentation related to an illness. An employee who chooses not to accept an offer of a Return to Work Plan may impact their wage loss benefits as determined by the Worker's Compensation Board or the Employer.

3.0 AUTHORIZATION

- 3.1. The Early and Safe Return to Work Program was created in consultation with the Regional Occupational Health & Safety Committee.
- 3.2. The Director of Human Resources is responsible for development and implementation of the policy and procedures.
- 3.3. The communication and training of this policy will be the responsibility of the Human Resources Division. All employees, Managers and Occupational Health & Safety Committees will be provided with an applicable training session outlining the program. Ongoing

communication of the policy will be part of a new hire process. The policy and procedures will form part of the Occupational Health and Safety Program and be maintained on the SSRCE's website as well as documented in manuals at all workplaces.

- 3.4. The Regional Executive Director is authorized to issue procedures in support of this policy.

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1.0 ELIGIBILITY

- 1.1. To be eligible for participation in the Early and Safe Return to Work Program, an employee must be temporarily unable to return to full extent of their regular duties as the result of an injury or illness. The eligibility requirement also includes provision of valid medical evidence that supports the disability and functional abilities.

2.0 DEFINITIONS

- 2.1. “Available Work” refers to work that exists prior to injury or illness work site or a comparable work site, considering whether the assignment fulfills part of the employment contract, or travelling to the proposed site is within normal parameters of travel expected by a similar class of employee.
- 2.2. “Cooperate” means maintaining effective communication and working relationships; working towards a common goal of identifying suitable and available employment, and fulfilling the obligations to applicable sections of the Worker’s Compensation Act. Successful return to work requires the co-operation of the Employer, the Employee and where applicable, the Union, in finding acceptable alternatives.
- 2.3. “Health Care Provider” generally refers to the professional responsible for the ongoing health care of the employee. This may include physicians, psychologists, specialists, physiotherapists, chiropractors, or other registered health care professionals.
- 2.4. “Job Demands Analysis” refers to the document that describes job duties and physical work demands.
- 2.5. “Manager” may include Managers, Supervisors, School Administrators, or others in a position of authority that is responsible for the direction of work.
- 2.6. “Modified Work” means temporary work assignment within the employee’s abilities, knowledge and skills. The work plan is designed using the employee’s functional abilities as determined by the treating Health Care Provider. They may also include responsibilities and tasks taken from the employee’s regular job, when the employee cannot perform full duties or normal hours of work.
- 2.7. “MSD” refers to Musculoskeletal Disorders, more commonly called soft-tissue injuries, including, but are not limited to, strains and sprains.
- 2.8. “SIP” means School Insurance Program.
- 2.9. “SSRCE” means the South Shore Regional Centre for Education, known as the employer.
- 2.10. “Transitional Work” means gradual return to regular duties where the employee performs duties of their regular job, with an increase in hours and/or duties over a period of time until a complete return is reached.

2.11. “WCB” means Worker’s Compensation Board of Nova Scotia.

3.0 PROCEDURES

3.1. Process for Determining Responsibilities

3.1.1. Responsibilities of Employees

- 3.1.1.1. In the case of workplace injury, report the injury, including the onset of any MSD discomfort, by contacting or having someone contact their manager immediately after the injury occurs or no later than their next regular scheduled shift.
- 3.1.1.2. Participate in referrals to early intervention assessment by physiotherapy for any suspected MSD.
- 3.1.1.3. Return to work following medical treatment and report to their Manager. If it is medically impossible to return to work, report to their Manager via telephone as soon as possible following medical treatment.
- 3.1.1.4. Provide their Manager with information on functional abilities from their treating Health Care Provider and provide updates as requested, within deadlines set.
- 3.1.1.5. Attend a meeting or make contact with the Employer as requested, to establish a communication plan. Cooperate and maintain effective communication throughout the period of recovery, particularly any immediate changes affecting a Return to Work Plan.
- 3.1.1.6. Assist in identifying suitable and available employment.
- 3.1.1.7. Accept return to work offer when medically able.
- 3.1.1.8. Take personal responsibility for maintaining optimal health and recovery plans, including participation with all scheduled health care appointments.
- 3.1.1.9. Follow their Health Care Provider’s recommendations with respect to established work restrictions, treatment, and physical abilities.
- 3.1.1.10. Provide their Manager any information requested concerning the Return to Work Plan, and any particulars regarding any barriers which may arise during the return to work process.

3.1.2. Responsibilities of Manager

- 3.1.2.1. If an injury or illness occurs at work, ensure required first aid is provided, and arrange for immediate emergency medical care (which includes transportation to the nearest appropriate health-care facility), if necessary.
- 3.1.2.2. If the nature and severity of the injury or illness prevents immediate return to work, the Manager will contact Human Resources prior to the Employee’s next shift to arrange a referral for early intervention assessment by a physiotherapist or health practitioner.
- 3.1.2.3. If the injury occurred in the workplace, investigate accident (see Appendix A: 13.3 Investigation Directives) and complete an “Incident Investigation Report” (Appendix B) and ensure WCB Report of Accident and SIP Incident Report Form are completed and submitted.
- 3.1.2.4. Assist in identifying and providing suitable and available employment. Make all necessary contacts and document communication as per the plan distributed by the Human Resources Division.

- 3.1.2.5. Meet initially and follow-up meetings frequently with the employee as outlined in the Return to Work Plan to assess progress and suitability of the plan and adjust accordingly. If this is not possible, assign another appropriate individual to coordinate this step. Report visits to the Manager of Human Resources.
- 3.1.2.6. Ensure that employees are working within their physical abilities.
- 3.1.2.7. Ensure that employees receive a thorough orientation to any new work and that they understand any safety precautions involved in the work.
- 3.1.2.8. Refer to Human Resources in the event of any complications, disputes, or barriers that prevent a successful return to work.
- 3.1.3. Responsibilities of Human Resources
 - 3.1.3.1. Assign an HR staff member as a Return to Work Coordinator.
 - 3.1.3.2. Contact the employee as soon as possible after the injury and/or initial medical treatment. Discuss any potential for a Return to Work Plan and establish an agreed-upon communication schedule with the employee. Document the plan and communication schedule, distributing it to the Employee, the Manager and place a copy in the Employee's medical file.
 - 3.1.3.3. To arrange a referral for an early intervention assessment by a physiotherapist, the Return to Work Coordinator will refer to Physiotherapy Providers Approved by WCB considering travel proximity and preference for the employee. Contact will be made with the clinic to arrange an appointment for an initial assessment. All relevant information regarding the injury, regular job duties, and potential for a Return to Work Plan will be communicated to the clinic. Any required physiotherapy forms will be completed and faxed to the clinic.
 - 3.1.3.4. To provide the employee with documentation required to assess modification or restrictions on employment as a result of a non-work-related illness or injury. The Return to Work Coordinator will provide the appropriate documentation, along with deadlines for completion to the employee. Referrals will be made to independent health practitioners as necessary. The Return to Work Coordinator will follow up on appropriate deadlines or upon receipt of documentation.
 - 3.1.3.5. If required, provide job descriptions, or alternatively use a Physical Job Demands analysis to assist with Return to Work planning.
 - 3.1.3.6. Ensure that injuries have been correctly reported to the appropriate legislative authority (i.e.: WCB, SIP, or NS Department of Labour and Workforce).
 - 3.1.3.7. Assist in identifying and providing suitable and available employment. In conjunction with the Manager, design a Return to Work Plan with the employee based on medical information. If this information is not available or provided, use the Suggested Standard Restrictions.
 - 3.1.3.8. Work with the employee, Manager, Health Care Provider, and WCB to ensure the Return to Work process is adhered to and that all parties involved understand their responsibilities and cooperate with all aspects of the process.
 - 3.1.3.9. As healing progresses, request updated medical Information from the employee, usually at each 2-week interval. Modify the Return to Work Plan according to any functional ability changes.

- 3.1.3.10. Provide mediation and consultation services for any complications, disputes or barriers that may be preventing a successful return to work.
- 3.2. Process for Obtaining and Using Functional Abilities Information
 - 3.2.1. Functional Abilities Information is used during the return to work process to help match suitable employment consistent with the employee's physical abilities. Its purpose is to highlight what the employee can do and what limitations apply. Information will be gathered through a Functional Abilities assessment by a Health Care Provider. The information provided should not include any medical or diagnostic information. The information shall be in written format, preferably on a Functional Abilities Information form which includes written consent of the employee, or a similar form used by the Health Care Provider or for WCB's purposes. If required, a more detailed evaluation may be used, such as a Functional Capacity Evaluation.
 - 3.2.1.1. Confidentiality
 - 3.2.1.1.1. All parties agree not to disclose any information regarding functional abilities provided by the Health Care Provider, except to persons involved in planning the return to work.
- 3.3. Process for Return to Work
 - 3.3.1. Modified and Transitional Duties
 - 3.3.1.1. Modified duties may incorporate, but is not limited to, the employee's regular duties. Modified duties are temporary, but it may be required on a permanent basis in some cases. Permanent accommodation can only be arranged and approved by the Human Resources Division. Transitional duties allow injured employees to return to their regular duties progressively, supporting an increase in strength, tolerance and healing in the process. Similar to modified duties, transitional work needs to be planned in conjunction with medical treatment.
 - 3.3.2. Permanent Accommodation
 - 3.3.2.1. In consideration of the re-employment requirements under the Worker's Compensation Act, and a general requirement of accommodation under the Nova Scotia Human Rights Act, all requests for permanent accommodation will be reviewed with prudence by the Human Resources Division. The request must be in the form of writing and be accompanied by medical information detailing the physical abilities that require accommodation. The SSRCE is committed to offer any suitable work that becomes available and will provide accommodation, up to the point of undue hardship to the non-essential duties or access to the workplace. Assistance may be requested from external agencies in overcoming any barriers and/or assist the individual directly.
 - 3.3.3. Return to Work Plans
 - 3.3.3.1. A Return to Work Plan involving modified and/or transitional duties is matching job duties to functional abilities. A documented Return to Work Plan must be prepared by the Manager, the Return to Work Coordinator and the employee. If further advice is required to determine suitability of the work, a Job Demands Analysis or assessment may be performed by a trained professional. Other elements that must be considered in designing a Return to Work Plan include: duties, skills, qualifications, experience, physical

and cognitive effort, level of responsibility, right and privileges, wages, benefits, working conditions, hours of work, geographic location, and any collective agreement provisions. The Return to Work Plan is a formal employment offer and must be signed by both the Manager and employee indicating acceptance of the return to work offer. Any offer must be safe for the injured employee and co-workers. An employee will not be offered work that creates displacement of another current employee. The Return to Work Plan Must Include:

- 3.3.3.1.1. A description of any modifications to be undertaken to accommodate the functional abilities of the employee
- 3.3.3.1.2. An outline of the duties or physical requirements to be performed
- 3.3.3.1.3. The length of time to be spent on particular duties
- 3.3.3.1.4. An estimated time frame for return to pre-injury or pre-illness duties
- 3.3.3.1.5. Review dates for the plan and an end date for the plan
- 3.3.3.1.6. Outline of hours to be worked each day/week.
- 3.3.3.2. Return to Work Plans are not to involve any overtime assignments during the period of disability. This is in recognition that typical recoveries must be controlled and may be jeopardized if excessive work is imposed on an employee.
- 3.3.4. Duration
 - 3.3.4.1. Return to Work Plans are a temporary measure to facilitate an early and safe return to full duties. Return to Work Plans typically should not exceed 8 weeks and will be reviewed with Human Resources if this is not the case. If at any time during the Return to Work Plan, the progression is not leading towards this standard duration, consultation will take place with Human Resources regarding continuation and other interventions required. There are some cases which may require an extension in duration if the injury is of another nature, if complications arise, or other factors are involved. Clarity of any of these situations may be obtained by requesting additional medical information to gather more medical information. The duration of both modified and transitional duties should be planned in accordance to established disability duration guidelines, such as *The Medical Disability Advisor: Workplace Guidelines for Disability Duration*, Presley Reed, M.D., which is also utilized by WCB. The overall objective is to eventually return to full pre-injury / illness duties. Any extension will consider the likelihood of a return within a reasonable time and recommendations by both Health Care Providers and / or WCB. At no time will Return to Work Plans be designed with an indefinite period of duration.
- 3.3.5. Acceptance & Rejection or Non-Compliance with Return to Work Plan
 - 3.3.5.1. An employee may accept or reject a return to work offer by either signing or not signing the Return to Work Plan. The employee shall be informed that a rejection will be reported to WCB or insurance providers and may impact their claim. If an employee rejects the return to work offer, the employee will remain off work until the end of any approved leave or until the employee provides medical clearance by a Health Care Provider to return to work. An

employee who has not accepted a return to work offer must still provide updated medical information forms at pre-determined times to allow for re-evaluation of any changes for other return to work offers. The circumstances around any non-compliance issues with an accepted Return to Work Plan may be dealt with under normal disciplinary measures and will be reported immediately to WCB and / or insurance providers to determine further steps.

4.0 RESPONSIBILITIES

It shall be the responsibility of the Regional Executive Director to ensure these administrative procedures are followed.

13.3 Investigation Directives

The **South Shore Centre for Education** shall ensure that the following types of incidents are fully investigated, that causes be determined and corrective actions be taken to prevent reoccurrence.

1. Accident that results in injuries/illness requiring medical aid.
2. Accident that results in lost time.
3. All accidents that must be reported in accordance with Legislative requirements.

Employees shall report all accidents or incidents that results in medical attention and lost time and/or property damage to their immediate supervisor.

Supervisor shall ensure that an investigation is conducted and reports completed in a timely fashion. OH & S Officer notified.

The Joint Occupational Health & Safety Committee shall be provided with a copy of the investigation.

APPENDIX "B"

Incident Investigation Report

Date: _____

Who was involved? _____

What happened? _____

When? Date: _____ Time: _____

What was the immediate cause?

What were the underlying causes?

What training, instruction, and/or cautions, were given before the incident?

How can similar incidents be prevented in the future?

Recommendations for further action:

Signed: _____

Date _____