Sample Return to Work Policy Statement

The Organization of _________________ is concerned about the health and well-being of its employees. We are committed to working with our employees and their healthcare providers to find work designed to assist injured workers in transitioning back to the workplace by performing meaningful work within their capabilities.

At any time, the (the organization of) may require written documentation from a licensed physician describing the limitations, progress, and physical abilities of the employee.

Providing there is a reasonable expectation that the employee will be able to resume full duties within/or by (MEMBER DEFINED NUMBER OF DAYS) calendar days subject to available work that will be beneficial to the employer. Work consistent with temporary work restrictions may be assigned to the employee for up to (MEMBER DEFINED NUMBER OF DAYS) calendar days or until the employee is capable of returning to full duty, whichever occurs first. In the event that a modified duty assignment becomes available, the employee is expected to accept the assignment.

The employee is expected to be an active participant in this process by providing M1’s Practitioner’s Reports following medical appointments and communicating changes in their restrictions. The employee and employer commits to following restrictions as outlined in the M1 Practitioner’s Reports or otherwise agreed upon.

Summary

This policy recognizes the Family Medical Leave Act, the Organization of ________________ Personnel Policy, along with Standard Operating Procedures (SOPs) that the department may have. It is intended to work in conjunction with them.

Modified work is not intended to be used as permanent reasonable accommodation under the American with Disabilities Act.

NO TEMPORARY WORK ASSIGNMENT DESCRIBED OR COVERED UNDER THIS GUIDELINE IS INTENDED OR OFFERED AS A PERMANENT ASSIGNMENT.