

Texas Woman's University University Regulation and Procedure

**Regulation and Procedure Name: Return To Work Workers Compensation
Injury or Illness**

**Regulation and Procedure
Number: URP: 05.474**

Policy Owner: Finance and Administration

POLICY STATEMENT

The purpose of this policy is to provide guidelines and information for employees who have been ill or injured, as a result of a claim covered by Workers' Compensation, to return to work following release by a healthcare provider.

If following an injury or illness an employee's health care provider has released the employee to return to work in a modified manner, it is the policy of the University to return employees to a modified/alternative, but productive, temporary assignment until they are released to full duty by their health care provider.

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 or as amended in 2008. This return to work policy will not be applied to any situation or circumstance in a manner that discriminates on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, national origin, age, veteran's status, ethnic origin, or qualified disabled person.

APPLICABILITY

This policy is applicable to TWU Students, Faculty, and Staff.

DEFINITIONS

1. "Full Duty" means the performance of all duties and tasks of the position for which the employee is employed.
2. "Temporary Assignment" means the performance of a temporary job assignment (up to a period of six months) that is intended to return an employee who has been ill or injured to work at less than his/her full duties if an injury or medical condition prevents the employee from working full

duty. The two types of temporary assignments are modified duty and alternate duty.

3. "Modified Duty (Temporary)" means the performance of all essential duties of the job but only a portion of the non-essential duties for which the employee was employed.
4. "Alternate Duty (Temporary)" means the performance of the essential functions of a job or position other than the position for which the employee is employed.
5. "Family Medical Leave Act (FMLA)" means the federal leave entitlement of up to 12 weeks when an eligible employee is unable to work because of a serious health condition. The absence from work must be a period of incapacity of more than three calendar days. FMLA leave is normally continuous, but may be taken intermittently or on a reduced leave schedule (See URP 05.510: Family Medical Leave Act (FMLA)).
6. "Leave Without Pay (LWOP)" means time away from work not covered by accrued or approved paid leave.
7. "Lost Time" means time spent away from work at the direction of the treating doctor as a result of a compensable injury sustained in the course and scope of employment (workers' compensation). Lost time does not include

REGULATION AND PROCEDURE

I. Processes

A. Notification of Injury or Illness

An employee who sustains an injury or illness **on the job** is expected to immediately notify his /her supervisor or departmental management if the supervisor is unavailable. If the illness or injury is job related, the notice must be within 30 days in order to receive workers' compensation benefits.

B. Authorization for Leave and Lost Time

When an employee is ill or injured for a continuous period of more than three (3) days, he/she will be required to furnish a certificate from the treating health care provider showing the cause and nature of the illness or injury. It is the employee's responsibility to obtain the documentation from the treating health care provider and to return it to his/her supervisor with a

copy to the Office of Human Resources. Authorization/recertification is required when requested by the Office of Human Resources.

C. *Bona Fide* Offer of Temporary Duty for Employees with Work Related Injuries or Illnesses or Employees Utilizing Sick Leave Benefits

1. When an employee in one of these categories has a medical release for less than full duty, the University may offer modified or alternate duty on a temporary basis when it is available. The department and the Office of Human Resources will determine if a modified or alternate position is available within the restrictions of the medical release. The medical release form for modified temporary duty may be obtained from the benefits department and they will be issuing the bona fide offer of modified or alternate duty job offer based on the completed medical release form.
2. The employee may accept or reject the bona fide offer of modified or alternate duty. However, if the offer is rejected and the employee is on workers' compensation, the workers' compensation temporary income benefits (if applicable) may be suspended. If accepted, the employee will perform the duties of the assignment position for the length of the temporary assignment or until the employee is medically released to full duty, whichever is sooner.
3. The offer should include the following:
 - a. The type of position offered and the specific duties;
 - b. A statement that TWU is aware of and will abide by any physical limitations under which the treating health care provider has authorized the employee to return to work;
 - c. The maximum physical requirements of the temporary assignment;
 - d. The wage rate of the assignment;
 - e. The location of the assignment;
 - f. The expected duration of the temporary assignment;
 - g. The consequences of not accepting a temporary assignment;

- h. The person to contact if the employee has any questions regarding the temporary assignment, job modification, FMLA leave, or ADA requirements/policies.
- 4. Duration of Temporary Assignment: The employee will have to either return to full duty or request an ADA accommodation within six months of accepting the temporary assignment.
- 5. Requirement for Notification Prior to Return to Work: An employee returning from a leave of absence is responsible for contacting his/her supervisor or manager five working days in advance of his/her anticipated return to work date to discuss his/her employment status. The employee should also contact the Office of Human Resources, Benefits Department to determine if there are any benefit reinstatement issues. A release for return to work should be presented to the supervisor upon the employee's return to work. The supervisor must contact the Office of Human Resources immediately to notify the return to work coordinator of the employee's medical release and return to work date.

II. Responsibilities

A. Employer/ Human Resources Responsibilities

- 1. Provide a designated return to work coordinator in the Benefits department;
- 2. Coordinate the Return to Work program, procedures, and processes.

B. Supervisor/Manager Responsibilities

- 1. Provide a safe working environment;
- 2. Report any FMLA covered illness or injury to Office of Human Resources immediately upon discovery;
- 3. Report any job related illness or injury to Office of Human Resources immediately upon discovery and ensure the employee completes the required worker's compensation claim forms located in HR Forms Website.

4. Either provide general information or refer employees to the Office of Human Resources regarding workers' compensation or FMLA policies and procedures and return to work policy;
5. Ensure job descriptions are up-to-date and include physical activities required to do the work;
6. Provide a copy of the job description to employees on medical leave of absence for their health care provider's consideration;
7. Make every effort to develop and provide meaningful return to work opportunities;
8. Communicate weekly with the employee during the time away from work and monitor progress upon the injured worker's return to work;
9. Document such communication with the employee; and
10. Cooperate with the Office of Human Resources and the return to work coordinator in determining appropriate modified, alternate, intermittent, and/or reduced schedule duties that are available to each employee on a case-by-case basis and within the restrictions outlined by the employee's physician.
11. Send return to work release to OHR on or before the day or shift when the employee returns to work

C. Employee Responsibilities

1. Know and follow safety policies and procedures;
2. Report any work related injury or illness immediately to the supervisor or departmental management if the supervisor is unavailable. Complete the required worker's compensation claim forms as soon as possible, but no later than 30 days. The worker's compensation claim forms are located in HR Forms Website.
3. Report any FMLA covered illness or injury immediately to the supervisor or departmental management if the supervisor is not available and to the Office of Human Resources and complete required forms (See URP 05.510: Family Medical Leave Act (FMLA)).

4. Obtain a copy of the employee's job description and present it to the health care provider to determine possible modified or alternate work assignments;
5. Communicate weekly with the supervisor during the time away from work and report progress and anticipated dates of return to work;
6. When released to return to work, return on the next regular shift with written release to return to work; and
7. Follow the treating doctor's orders and restrictions on and off the job.

REVIEW

This policy will remain in effect and published until it is reviewed, updated, or archived. This policy is to be reviewed once every six years. Interim review may be required as a result of updates to federal and state law or regulations, Board of Regents policies, or internal processes or procedures.

REFERENCES

[URP 05.510: Family Medical Leave Act \(FMLA\)](#)

FORMS AND TOOLS

[TWU HR Forms](#)

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