



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**Rehabilitation of employees back to work after
illness or injury
Policy and Procedure**

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Signature Sheet

I have read, understood and agree to adhere to the attached Policy and Procedure:

Print Name	Signature	Area of Work	Date

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1.0 Policy

1.1 The Health Service Executive (HSE) is committed to the provision of workplace rehabilitation that supports and enables injured or sick employees to remain at or return to the workplace to continue the discharge of work duties. This process benefits both the employee and the employer.

1.2 The HSE is committed to:

- Providing a safe and healthy work environment and, in the event of an injury or an illness, making sure workplace rehabilitation is started as soon as possible in accordance with medical advice
- Trying to facilitate a safe and early return to work of injured or ill employees by identifying duties that are appropriate to the grade and function where possible. These duties will be medically approved and time limited
- Respecting the confidential nature of medical information and ensuring there will be both verbal and written confidentiality
- Ensuring all employees are aware that, in the event of injury or illness, they will be consulted to develop their Rehabilitation Plan or a structured safe return to work that will not disadvantage them

2.0 Purpose

2.1 The purpose of this policy is to:

- Describe the commitment the HSE provides to all sick/injured employees
- Provide guidelines to managers, employees, occupational health departments, rehabilitation professionals, HR departments and employee assistance services on conducting workplace rehabilitation that assists employees affected by both work and non-work related injuries/illnesses to recover and perform duties for which they are employed
- Support an early and safe return for the employee who has an illness/injury

3.0 Scope

3.1 This policy applies to all employees of the Health Service Executive.

4.0 Glossary of Terms and Definitions

Item	Definition/Abbreviation
Rehabilitation	The process of restoration of skills by a person who has had an illness or injury so as to regain maximum self-sufficiency and function in a normal or as near normal manner as possible. This process is restorative, supportive and preventive and is dependent on the integration of all elements required e.g. medical, physical/functional, occupational / vocational, psychological etc.
Workplace	The workplace includes, but is not limited to, the physical work site, restrooms, cafeterias, training sessions, business travel, conferences, work related social gatherings, etc.
Workplace Rehabilitation	A managed process involving early intervention with appropriate, adequate and timely services based on assessed needs and which is aimed at maintaining injured or ill employees in, or returning them to, suitable employment.
Rehabilitation Professionals	Healthcare Professionals with qualifications validated by the state's designated authority and/or registration council, and with the skills and competencies required to provide an appropriate intervention for the issues that may be inhibiting a return to work. These professionals may be within or outside of the HSE.
Suitable alternative duties	Matching pre-injury/illness duties to recovery abilities on a temporary basis.
Work related injuries	Injuries sustained directly related to the employee's occupation at work or the workplace.
Non-Work related injuries / illnesses	Injuries/illnesses that are determined by a medical practitioner as not significantly caused by the employee's occupation at work or the workplace.
Reasonable accommodation	An employer is obliged to take appropriate measures to enable a person who has a disability to have access to employment, to participate or advance in employment and to undertake training. 'Appropriate measures' are effective and practical measures to adapt the place of work, including adaptations to premises and equipment, patterns of working time, distribution of tasks or the provision of training or integration resources. The employer is not obliged to provide any treatment or facility that the person might ordinarily or reasonably provide for him or herself.
Stakeholders	Individuals, organisations or groups that have an interest or share, legal or otherwise, in services. Stakeholders may include referral sources, service professionals, employers, insurance companies or payors (HIQA 2006).

5.0 Roles and Responsibilities

5.1 Employer Responsibilities

The HSE recognises workplace rehabilitation as a positive strategy for retaining the job skills of employees who are injured or ill.

The HSE is responsible for:

- 5.1.1 Preventing injury and illness by providing a safe and healthy working environment.
- 5.1.2 Ensuring that rehabilitation is the normal practice and an expectation in the workplace.
- 5.1.3 Ensuring that rehabilitation commences as soon as possible following an injury or illness and in accordance with medical advice.
- 5.1.4 Aiming through a Rehabilitation Plan to return the employee to his / her normal duties.
- 5.1.5 Providing suitable duties where practicable, with the aim to return the employee to normal duties.
- 5.1.6 Consulting with employees and, where appropriate, treating medical practitioners to ensure that the workplace rehabilitation procedures operate effectively and safely.
- 5.1.7 Establishing a team based consultative approach for workplace rehabilitation with employees, managers and supervisors in the development, implementation and evaluation of programmes.
- 5.1.8 Ensuring employees are not disadvantaged by participating in workplace rehabilitation programmes.
- 5.1.9 Respecting the rights and the confidentiality of employees.

5.2 Line Manager Responsibilities

Line Managers are responsible for:

- 5.2.1 Accepting rehabilitation practices as part of management functions within the HSE.
- 5.2.2 Educating all employees about the this Policy and Procedures and what to expect when an injury/illness occurs.
- 5.2.3 In the case of work-related injuries, ensure that the injury is reported in line with the HSE incident reporting procedure, that there is an investigation as to the cause and that appropriate controls are put in place to prevent a recurrence.
- 5.2.4 Ensuring workplace rehabilitation is part of the new employee induction process.

- 5.2.5 To be aware of circumstances where an injured or ill employee may need rehabilitation and ensure timely referral to the Occupational Health Department and/or the Employee Assistance Programme.
- 5.2.6 Liaising closely with the Occupational Health Department and/or the Employee Assistance Programme throughout the rehabilitation process as appropriate, while respecting and maintaining the confidentiality of those processes.
- 5.2.7 Ensuring rehabilitation in the workplace begins as soon as is practicable so that the employee's maximum physical, psychological and social potential can be restored.
- 5.2.8 Advising fellow employees of the injured or ill employee's capabilities and negotiate workplace adjustments in advance of their return to work where appropriate and with the necessary consent of the returning employee.
- 5.2.9 Conducting a return-to-work meeting in accordance with the Managing Attendance Policy and Procedure.
- 5.2.10 Seeking additional internal support and advice as appropriate.
- 5.2.11 Ensuring that duties assigned to an employee for a suitable duties programme are meaningful and have regard to the objective of the employee's Rehabilitation Plan.
- 5.2.12 Monitoring the employee's progress in relation to suitable duties.
- 5.2.13 Maintaining accurate records of hours worked by the employee to provide to the Occupational Health Department.
- 5.2.14 Maintaining confidentiality of information received including appropriate storage and handling.

5.3 Employee Responsibilities

- 5.3.1 Be responsible for preventing work-related injury and illness in line with the requirements of the Health Safety and Welfare at Work Act 2005 by adhering to health and safety protocols appropriate to their scope of work, designed to promote safe working and to avoid injury to oneself and others.
- 5.3.2 In the event of a work-related injury or work risk incident, appropriate medical treatment must be sought e.g. first aid station, GP or Emergency Department.
- 5.3.3 Actively participate in any return-to-work programme in order to resume their normal duties as soon as practicable after illness or injury in accordance with medical advice.
- 5.3.4 Where possible, keep in regular contact with the line manager with particular emphasis on informing of any deterioration in condition or unexpected issues arising.
- 5.3.5 Report any injury occurring at work as soon as possible to the line manager.
- 5.3.6 Advise their treating Medical Practitioner of the availability of a rehabilitation/return-to-work programme and ask them to complete the Functional Capacity Form.

5.4 Fellow Employee Responsibilities

- 5.4.1 Fellow employees will be encouraged to support injured/ill employees and will be informed about their co-worker's rehabilitation on a 'need to know' basis and with the employee's consent.
- 5.4.2 Fellow employees within the workplace are encouraged to be actively involved in a positive manner wherever possible to support the rehabilitation process.

5.5 Occupational Health Department Responsibilities

- 5.5.1 Assist the injured/ill employee to remain at work or return to work, consistent with medical advice.
- 5.5.2 With the employee's consent, obtain accurate information about the medical condition and limitations that apply to the particular employee.
- 5.5.3 Obtain written consent from the employee to communicate with relevant health care professionals involved in their care.
- 5.5.4 Obtain as much information as possible about the employee's role and component tasks of their job. Also ascertain what is required of them to get to and from their work place and how they access facilities in their workplace, toilets, canteen etc.
- 5.5.5 Assess the individual employee and liaise with their line manager in planning the Rehabilitation/Return-to-Work Programme.
- 5.5.6 Liaise initially with the treating Medical Practitioner, explaining the Rehabilitation Plan and seeking his/her approval (with the employee's consent)(Appendix I)
- 5.5.7 Obtain the support of the treating Medical Practitioner in completing the Functional Capacity Form (Appendices II and III)
- 5.5.8 Assess the injured/ill employee at appropriate intervals to ensure that the employee receives optimal care such as special investigations/specialist opinion.
- 5.5.9 Ensure that employees who are in need of rehabilitation services are referred to appropriate rehabilitation professionals e.g. physiotherapy, occupational therapy, psychological supports working collaboratively with all stakeholders and counselling services.
- 5.5.10 Develop a Return-to-Work Plan in collaboration with the employee, line manager and other Rehabilitation Professionals (Appendix IV)
- 5.5.11 Review employees who return to work with accommodations/restrictions to assess progress and fitness to return to normal duties. Ongoing restrictions/absences will be reviewed on a three monthly basis or sooner if required.

5.6 Rehabilitation Professionals Responsibilities

It is the responsibility of the Rehabilitation Professionals, with the employees consent:

- 5.6.1 To provide timely interventions, based on assessed needs and in line with best practice.
- 5.6.2 To engage in two-way communication with the source of referral and/or the Occupational Health Department on an ongoing basis in relation to strategies required and/or recommendations for returning to work.
- 5.6.3 To provide reports as indicated or requested in relation to the employee's rehabilitation progress.
- 5.6.4 To participate in case conferences as required.
- 5.6.5 When applicable and appropriate, to assess aspects of the workplace in respect of contributing factors to the employee's condition and advise accordingly.

5.7 Employee Assistance Service Responsibilities

- 5.7.1 Provide a professional and confidential support and counselling service to HSE employees who are affected by personal or work-related issues.
- 5.7.2 Provide consultancy and support for managers regarding staff and organisational issues.
- 5.7.3 Deliver a high quality Employee Assistance Service which is integral to the organisation's Health, Safety and Welfare practice.
- 5.7.4 Identify and raise awareness of themes and trends that reflect the particular needs of the workforce and the organisation.
- 5.7.5 Provide advice and input with regard to the development of a range of preventative, educational and training programmes.
- 5.7.6 Refer employees to other departments for advice and support e.g. HR, Occupational Health, external supports, etc.

5.8 HR Responsibilities

- 5.8.1 To communicate this Policy and what to expect when an illness or injury occurs to all employees.
- 5.8.2 Support and advise line managers on their roles and responsibilities in relation to the policy.
- 5.8.3 Work with line managers, Occupational Health Department, Employee Assistance Service, and staff support, (where appropriate) in devising Rehabilitation Plans.
- 5.8.4 Advise employees of Sick Leave Schemes and/or associated schemes.
- 5.8.5 Promote the Managing Attendance Policy and Procedure.
- 5.8.6 Advise employees of employee support services.

6.0 Procedure for Workplace Rehabilitation for Employees

- 6.1 All injuries and illness must be reported to the immediate line manager.
- 6.2 If needed, immediate first aid or medical attention must be provided e.g. first aider, GP or the Emergency Department.
- 6.3 The line manager should inform the Occupational Health Department regarding the employee's illness/injury, if appropriate, in accordance with the Managing Attendance Policy and Procedure..
- 6.4 An Occupational Health Department appointment will be made to interview the employee if required.
- 6.5 Where further information is required the Occupational Health Department will liaise with the employee's medical adviser (with appropriate consent). The employee's medical adviser may be requested to fill in the Functional Capacity Form.
- 6.6 Referral will be made to the relevant rehabilitation professionals, e.g. physiotherapy, occupational therapy, psychological and counselling services, consultants, etc. as indicated.
- 6.7 In consultation with the relevant stakeholders a rehabilitation and Return-to Work Plan with agreed time frames will be developed.
This plan will include:
 - The goals of the plan
 - List of duties and restrictions
 - Hours to be worked
 - Details of training required
 - Anticipated time frame of plan
 - Details of pay during the period
 - Reviewed formally every three months (or sooner if required) (Appendix IV)
- 6.8 The Occupational Health Department will maintain good communications between all parties involved, including providing feedback on the Rehabilitation Plan while maintaining confidential and up-to-date records of the progress of the plan.
- 6.9 Where it is identified that a staff member is not progressing and achieving goals as agreed in the Rehabilitation Plan, the Occupational Health professional, (in collaboration with the employee, the line manager/supervisor, relevant rehabilitation professionals and treating Medical Practitioner), will identify areas of concern, seek appropriate additional advice as indicated and amend the plan accordingly.

6.10 **Conclusion of Workplace Rehabilitation**

Workplace rehabilitation will conclude when the employee resumes **all** the prescribed duties for the role to which they were appointed **or** meets the following criteria:

- Is considered to gain minimal or no benefit from continued workplace rehabilitation
- Fails to engage in rehabilitation processes
- Fails to comply with recommendations of the rehabilitation team
- Withdraws from the programme

6.11 In the event that the employee is unable to return to work in their former position, a number of alternative administrative arrangements will be discussed with the ill/injured employee. They may include, but are not limited to, retraining, redeployment, accessing superannuation temporary incapacity benefits or retirement on ill health grounds.

6.12 Where there is disagreement over the proposed plan offered, discussions will take place with the Occupational Health professional, rehabilitation professionals, the Employee Assistance Service, the line manager and the employee (and employee's trade union representative if required by the employee) to seek a resolution.

6.13 Disagreement regarding medical treatment can be referred to an independent Occupational Health Consultant.

7.0 Implementation Plan

There will be a need for training on this policy for line managers.

8.0 Evaluation and Audit

A Workplace Rehabilitation Evaluation Form will be sent to each employee who was involved in a rehabilitation plan (Appendix E).

9.0 References

Health Service Executive – Managing Attendance Policy and Procedures January 2009 - www.hse.ie

Grievance Procedure for the health service– www.hse.ie

The Health Safety and Welfare Act 2005 - www.hsa.ie

Employment Equality Acts 1998/2004 – www.equality.ie

National Disability Authority - www.nda.ie

Employment of People with Disabilities, Disabilities Programmes, and Employment Fairness - www.workway.ie

Work Arrangements (varied options on work arrangements) - www.worklifebalance.ie

Employee Assistance Service PPG's

Return to Work, Workers Compensation Board, Canada - www.wcb.mb.ca

Work Place Safety, Work Safety Insurance Board, Canada - www.wsib.on.ca

Good practice to rehabilitating people at work - www.iosh.co.uk

10.0 Appendices

Appendix I Employee Authorisation Form

Appendix II Letter to the treating Medical Practitioner

Appendix II Functional Capacity Assessment

Appendix IV Return-to-Work Plan

Appendix V Staff member Workplace Rehabilitation Evaluation Form

Appendix VI Overview of Workplace Rehabilitation Chart

APPENDIX I

EMPLOYEE AUTHORISATION

I _____, an employee of HSE, hereby give consent to my treating Medical Practitioner:

Name: _____

Address: _____

Phone: _____

to discuss with my employer's Occupational Health Department _____
specific injury or illness information to assist with the development of a Rehabilitation and
Return to Work Plan.

Employee Signature

Date

Witness Signature

Date

APPENDIX II

LETTER TO THE TREATING MEDICAL PRACTITIONER

Date:

Dear

(Employee name) is employed by the HSE as a (position title). Our Workplace Rehabilitation Policy encourages the early return of our staff to full employment as soon as practicable following an injury or illness. Where possible, staff are returned to their usual work or some suitable work within their capacity.

I would appreciate your help in formulating a Rehabilitation and Return to Work Plan to ensure that (employee name) can safely return to their usual work or is provided with appropriate suitable duties if necessary.

Any information you could provide on the attached Work Capabilities Form would be most useful in assisting us to provide meaningful and appropriate duties.

We look forward to your contribution to our rehabilitation team effort.

Yours sincerely,

Occupational Health Physician / Occupational Health Nurse

APPENDIX III

FUNCTIONAL CAPACITY FORM

Patient Name: _____

Patient Address: _____

Job Title: _____

Description of Proposed Task: _____

I _____ hereby authorise _____ my GP/
Consultant to furnish written information to the HSE, my employer, regarding my residual
functional capacity on my ability to perform the functions of my position and any equipment
or accommodation to enable me to perform these functions.

Employee Signature: _____ Date: _____

Date of Assessment: _____

Medical Condition:

☐ I advise that you are not fit for work:

☐ You may be fit for work taking account of the following advice:

If available, and with your employers agreement you may benefit from:

- ☐ a phased return to work
- ☐ amended duties
- ☐ altered hours
- ☐ workplace adaptations

Functional effect of the patient's conditions (limitations):

Planned Treatment:

- ☐ Referral to a Consultant
- ☐ Referral for physiotherapy
- ☐ Recommend a specialised Occupational Health Assessment

Doctor's Signature: _____

Doctor's Address: _____

Doctor's Stamp:

Information Notes to Assist in Completion of Functional Capacity Form

Factors determining Fitness for Work

- Nature and severity of problem
- Patient's attitudes and expectations
- Physical and mental demand of the job
- Potential for work to exacerbate illness
- Safety considerations

Assessing Fitness for Work

Questions that maybe helpful in identifying the need and scope for Job Modifications

- What is your job and what tasks does it involve?
- Are there aspects of your job that you would find difficult or impossible because of you health problem/
- If so, are there simple ways in which your job could be changed to overcome those difficulties?
- Is there another job that you would find easier, to which your employer might move you while you are recovering?

What type of Advice should I include on the Functional Capacity Form?

Examples of advice about a patient's function and possible Job Modifications

- "He should avoid lifting weights greater then 10 kg. Might it be possible for him to transfer temporarily to other work?"
- "She should avoid prolonged sitting without breaks. Review of her work station might be useful. She will need time off twice a week for physiotherapy."
- "She cannot drive her car. So that she can use public transport it would be helpful if she could start and finish work a little later then normal."
- "He should avoid kneeling and squatting."
- "She could manage work that does not involve handling customer complaints."

In some cases, the doctor may include recommendations for specialist Occupational Health assessment. This might be helpful, for example, in cases where the patient's job could have contributed to the patient's health problem.

Employers are not obliged to follow doctors' recommendations. The purpose of the advice you provide is to help your patient and the employer explore ways of facilitating a return to work. In some cases this may not be possible and your patient will be treated as if you had advised that they were not fit for work.

Reference:

Assessing Fitness for Work and Writing a Fit Note
Goggin and Palmer B.M.J. 26/November 2010

APPENDIX IV

RETURN-TO-WORK PLAN

Workers Name: _____ Position Title: _____

Date of Injury: _____ Work Location: _____

Nature of Injury: _____ Supervisor: _____

Date Plan Prepared: _____

Rehabilitation Goal (e.g. return to full pre-injury duties):

Rehabilitation Plan Effective from: _____ to _____

STAGE I

Duties to be performed:

Duties to be provided:

1. _____
2. _____
3. _____

Medical Restrictions:

1. _____
2. _____
3. _____

Other Considerations:

STAGE II

Duties to be performed:

Duties to be provided:

1. _____
2. _____

3. _____

Medical Restrictions:

1. _____

2. _____

3. _____

Other Considerations:

Monitored by: _____

Contact No: _____

Review Date: Occupational Health Advisor _____ will review
you on or before _____

Please ensure this appointment is kept.

This plan has been developed in consultation with the injured worker, his/her supervisor, his / her treating G.P. and other health care Professionals.

The following partners agree to the Return to Work Plan:

Injured Worker: _____ **Date:** _____

Supervisor: _____ **Date:** _____

Occupational Health Advisor: _____ **Date:** _____

Other Health Professional: _____ **Date:** _____

Other Health Professional: _____ **Date:** _____

Other Health Professional: _____ **Date:** _____

Please sign and return to the Occupational Health Department.

Occupational Health Advisor / Occupational Health Physician

APPENDIX V

STAFF MEMBER WORKPLACE REHABILITATION EVALUATION FORM

To ensure that our Workplace Rehabilitation Policy and Procedures continue to meet staff needs, can you please answer the following questions.

	Yes	Unsure	No
Was your Rehabilitation Plan what you expected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you satisfied with the amount of input you had in the development of your Rehabilitation plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were there any duties that caused you discomfort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you find the hours you were asked to work comfortable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were your work colleagues supportive of your workplace rehabilitation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was your supervisor supportive of your workplace rehabilitation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there enough contact between you and the Rehabilitation and Return-to-Work Co-ordinator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were you given adequate training to prevent the same injury recurring and to perform the selected duties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you find there was enough medical input into the plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you offer suggestions on how to improve our Workplace Rehabilitation Procedures?			

Signature: _____ **Date:** _____

Note: Please return completed evaluation form to your local Human Resource Department.

APPENDIX VI

