Return-to-Work Program

C.1 Introduction

The intent of this program is to develop a system for returning employees to work quickly and safely after injury or illness and to improve Lawrence Livermore National Laboratory's (LLNL) capability of identifying and appropriately managing temporary and permanent disabilities. The program covers both work- and nonwork-related illness or injury resulting in medical restrictions or lost work time. There will be an emphasis on close collaboration between directorate managers and support organizations. Temporary and permanent restrictions will be managed under separate procedures in the Return-to-Work (RTW) Program.

Program Goal and Objectives. The goal of the RTW Program is to improve LLNL’s management ability to return employees to work quickly and safely after a work- or nonwork-related illness or injury. More specifically stated, the objectives of LLNL’s RTW Program are to

- Support employees in their recovery from injury or illness by providing temporary, modified, or alternate assignments.
- Minimize the amount of absence and resulting impact to both the employee and the organization due to work- or nonwork-related injuries and illnesses.
- Reduce workers compensation and related overhead disability costs.
- Identify and effectively manage potential long-term or permanent disability cases.

C.2 Program Requirements for Temporary Disability

C.2.1 Temporary Disability Cases to be managed in the RTW Program

The following cases will be managed under the RTW Program:

- All OSHA and / or workers compensation cases involving lost work time.
- All OSHA and / or workers compensation cases with temporary medical restrictions.
• Nonwork-related cases with temporary medical restrictions.*
• Nonwork-related lost work time cases identified by managers, RTW managers or self-identified temporarily disabled employees.

C.2.2 Temporary Accommodations

As set forth below, managers and supervisors shall observe the following procedures in transitioning employees back to work following a temporary illness or injury. Each LLNL directorate will provide temporary work assignments up to 90 calendar days per calendar year for a temporarily injured or ill employee to help transition that employee back to work. Directorates are encouraged to provide accommodations beyond 90 days with the recommendation of the Disability Management Team (DMT). Assignments may include continuation in the same assignment with duties restricted or temporary placement in an alternate assignment.

Work related injuries or illnesses (OSHA and/or Workers Compensation).
Directorates shall provide temporary work assignments for up to 90 days per calendar year for employees with temporary medical restrictions caused by a work-related injury or illness. Directorates may work voluntarily to find an alternate-paid assignment in their directorate or in another directorate for the employee. If a directorate cannot find an assignment for the employee, the DMT, in consultation with the directorate, may place the employee in another area of the Laboratory for up to 90 days and the employee’s directorate shall pay the salary costs. If no accommodation can be found in any directorate, then the employee will be sent home with the directorate paying salary expenses for the first 90 days.

Non-work related injuries or illness. Directorates shall make efforts to find work for employees with nonwork-related temporary medical restrictions for up to 90 days.

C.2.3 Notification of Employees

Employees will be notified in writing by directorate management of any temporary accommodation and its duration. The communication shall stress that the accommodation is temporary in nature.

*Note: The term “medical restriction” is used throughout this document to refer to situations in which a physician has issued written limitations on an employee’s work activities. If temporary medical restrictions render the employee unable to do some or all of the usual assignment, then some modification of the duties or an alternate assignment may be necessary as a temporary accommodation. Medical restrictions may result in “restricted workdays” for OSHA recording purposes, depending on the impact of the restriction on work activities; this determination is made by Hazards Control in conjunction with the supervisor.
C.2.4  Employees Returning to Work after Work and Non Work Related Illness/Injury

Supervisors shall contact Health Services when

- Any employee returns to work with a medical restriction written by a non-LLNL clinician for a work or nonwork-related medical problem.
- Any employee who may have experienced a work-related injury or illness.

Additionally, and as required under Section G.III.7 (Return to Work Following Sick Leave) of the LLNL Personnel Policies and Procedures Manual, supervisors shall assure that employees report to Health Services upon returning to work after

- A work-related injury or illness involving one or more days of lost work time.
- A nonwork-related injury or illness involving five consecutive days of lost work time.
- A nonwork-related injury or illness that required hospitalization or surgery.

C.2.5  Procedures for Employees with Work-related Injuries or Illnesses Requiring Temporary Accommodation

When it is determined by the Health Services treating clinician or the employee’s personal physician that an employee cannot fully perform his/her usual and customary duties due to an occupational injury or illness, the following will occur.

**Procedure**

The employee will

- Report to Health Services and be evaluated by a clinician for return to work, including sharing any written communications from his/her personal physician regarding work status issues.
- Work with his/her supervisor and RTW Manager to facilitate transition back to work.
- Read and sign the Temporary Accommodation Agreement provided by the RTW manager.
- Report to the temporary work assignment, whether it is a modified assignment or a new assignment.
• Keep all medical and physical therapy appointments.
• Follow medical restrictions when at work and at home.
• Immediately notify his/her payroll supervisor of any problems that arise relating to the injury or temporary assignment.

Health Services will

• Provide medical treatment for most employees with occupational injuries and illnesses.
• Issue all medical restrictions for employees who are temporarily disabled as a result of a work-related injury or illness.
• Communicate with the employee’s supervisor and RTW manager when medical restrictions are necessary.
• Send electronic and hard copy notifications of medical restrictions to the employee, payroll supervisor, and RTW manager.
• Work with employees, supervisors, physicians, RTW managers, and DMT members to address temporary accommodation issues.
• Maintain information systems to track all employees monitored in the RTW Program.

The RTW manager will

• Work with supervisors and line and senior management to assure that the directorate/department accommodates temporary medical restrictions.
• Prepare and issue a communication to the employee offering support and introducing the RTW Program.
• Prepare and issue the Temporary Accommodation Agreement to the employee, and forward a copy to Staff Relations.
• Prepare and issue notifications to employees when temporary accommodations will end should the accommodation approach 90 days.
• Prepare and issue notifications to employees of extensions of temporary accommodations beyond 90 days when applicable.
• Work with the DMT and other RTW managers to find temporary assignments outside of their own directorate/department when a temporary assignment is unavailable within their own directorate or department.
• Meet with DMT members to manage disability issues in their directorate/department as necessary.

• Provide Job Demands Worksheets detailing employee job tasks to Health Services when necessary.

• Track all employees in their directorate who are off work as a result of injury or illness, or have medical restrictions.

• Maintain necessary records for RTW Program operations including medical restrictions, Temporary Accommodation Agreements, and related information.

The DMT will

• Monitor all employees with temporary medical restrictions and work with RTW managers to address accommodation issues.

• Communicate regularly with the RTW manager, employee, and supervisor until the employee is released to full duty work or is determined to have permanent disability.

• Make recommendations to the RTW manager regarding the extension of temporary accommodations beyond the initial 90-day period when appropriate.

• Determine if a directorate/department may receive an exception to the 90-day temporary accommodation requirement.

Staff Relations will

• Assist the directorates in reaching final decisions concerning accommodations, taking into consideration the recommendations of the DMT.

• Maintain a record of accommodations, including temporary accommodation agreements.

• Have final review of exceptions concerning accommodations, as necessary.

C.2.6 Procedures for Employees with Nonwork-related Injuries or Illnesses Requiring Temporary Accommodation

Directorates will make "best efforts" to accommodate temporary medical restrictions for non-occupational conditions and will not be responsible for the employee’s salary if no reasonable assignment can be found. Permanent medical
restrictions for non-occupational conditions will be managed according to the same procedures for occupational conditions (see Section C.3).

The DMT and directorate/department RTW managers will identify employees absent from work with non-occupational conditions and provide assistance in returning them to work when appropriate. There are several ways in which employees may be identified who might benefit from the return-to-work efforts.

- Employees that are absent, due to injury or illness, for 5 consecutive workdays will be identified through the LITE payroll system.
- Employees who have been identified by RTW managers and supervisors as having been off work for a significant period of time.
- Employees that are identified who have applied for short term disability insurance benefits.
- Employees who are off work seeking assistance in returning to work.

Procedure

The procedures for managing nonwork-related cases are the same as those for work-related injuries or illnesses with the following additions.

The directorate/department RTW manager will work with the DMT in identifying employees in their organization who have experienced significant absence from work as a result of nonwork-related medical issues.

The employee will

- Receive a medical release form from Health Services and be asked to complete it so that a Health Services professional may discuss return-to-work issues with his/her physician.
- Work cooperatively with Health Services and his/her personal physician to streamline return-to-work and associated issues.

Health Services will

- Make contact with the employee describing the RTW Program and associated resources.
- Acquire, if possible, a signed medical release form from the employee.
- Communicate with the employee’s personal physician, supervisor, and RTW manager to facilitate return-to-work issues.
• Share no medically confidential information with anyone at the Laboratory without proper written consent from the employee.

C.2.7 Extension of Temporary Accommodations beyond 90 Days

The progress of each temporary accommodation will be closely monitored by the DMT and directorate personnel and periodically reviewed prior to expiration. Directorate managers may decide to continue the temporary accommodation past 90 days only after consultation with the DMT. Extensions will be reviewed periodically, but will not exceed a total of an additional 90 days. Directorates are encouraged to provide such extensions when necessary, with the approval of the DMT.

Procedure

• Prior to the conclusion of the initial 90 days of temporary accommodation, the DMT will review each case and determine whether a continuation of the accommodation beyond 90 days is reasonable to achieve the goals of the RTW Program.
• The DMT will review these cases with the appropriate RTW manager. In those instances where the DMT recommends continuation of the restriction beyond 90 days, the RTW manager will ultimately decide whether or not to continue the temporary accommodation.
• If the RTW manager decides to continue the temporary accommodation beyond 90 days, the extension may not exceed an additional 90 days (total of 180 days).
• A letter will be sent to the employee by the RTW manager stating that his/her temporary accommodation will be extended beyond 90 days and that the extension may continue for no more than an additional 90 days.
• The DMT will continue to track the case and continue with efforts to return the employee to unrestricted work.

C.2.8 Exceptions to 90-day Temporary Accommodation Requirement

There may be situations where an employee will not be prepared to return to his/her usual and customary assignment within 90 days and waiving the 90-day accommodation requirement is appropriate. The DMT will be responsible for determining when directorates may be granted an exception from the 90-day accommodation.

Procedure

1. An exception request may only come from the employee’s RTW manager or a member of the DMT.
2. Requests for an exception must be made in writing to the DMT and must include the following:
   a. Requestor's name and directorate.
   b. Employee's name.
   c. Specific medical restrictions and dates.
   d. Reasons for requesting the exception.
3. The DMT will meet to review exception requests within a week of receipt of the request.
4. The DMT will review all requests for exceptions from the 90-day accommodation requirement and grant or deny based on the following:
   b. Goals and objectives of the Return-to-Work Program.
   c. Specifics of the case under review.
5. Notify the requestor in writing of the decision.
5. Staff Relations will maintain a record of the rationale for the decision.

C.3  **RTW Requirements for Permanent Disability**

C.3.1  **Permanent Disability Cases to be Managed under the RTW Program**
The following situations will be managed under the RTW Program:

- Workers Compensation-related injuries and illnesses for which the attending physician has made a determination of permanent disability (i.e., physician determines an employee is “permanent and stationary” and needs a permanent medical restriction).
- Nonwork-related injuries and illnesses for which the employee has presented documentation from an attending physician indicating that a permanent disability exists or that there is need for a permanent medical restriction.

C.3.2  **Management of Permanent Disability Cases**
When permanent restrictions are issued, the RTW manager will immediately notify and consult with the DMT and Staff Relations regarding further action,
such as reasonable accommodation, vocational rehabilitation, or medical separation. Permanent disability cases will be managed in accordance with Section M (Rehabilitation Services) of the *LLNL Personnel Policies and Procedures Manual*. The DMT will meet with payroll supervisor, an upper management representative from the payroll organization, and the RTW manager to review these cases and make recommendations. The review will include consideration of the Laboratory’s responsibilities under state and federal laws. No decision regarding accommodation of permanent medical restrictions should be made until after this review.

**Procedure**

1. All permanent medical restrictions are issued by the Health Services Department after review of relevant medical records, the specific job demands of the employee, and assessment of the employee.

2. The permanent restrictions are communicated to the employee, his/her payroll supervisor, and RTW manager. The RTW manager will convene a meeting with the following participants within two weeks of receipt of the permanent restriction to formally consider accommodation.
   a. Employee’s payroll supervisor and an upper management representative from the payroll organization.
   b. Staff Relations representative.
   c. Health Services representative.
   d. Workers compensation third-party administrator (if there is a claim).

The decision on whether or not to accommodate a permanent medical restriction will include review of all applicable Laboratory policies and state and federal statutes. The employee’s directorate will decide whether or not it can provide permanent accommodation to the restricted employee.

1. The RTW manager will communicate the accommodation decision to the employee in writing, and a copy will be forwarded to Staff Relations.

2. Employees who are permanently accommodated in their current position will be monitored by the DMT depending on case specifics.

3. Employees who are not permanently accommodated in their current position will be subject to applicable Laboratory policy and, if eligible,
will receive the vocational rehabilitation benefit provided by workers compensation.

C.4 RTW Roles and Responsibilities

C.4.1 Return-to-Work Managers

Each directorate shall appoint an RTW manager as the central contact for implementing the RTW Program in the organization. The RTW manager will work closely with payroll managers and supervisors from his/her own directorate and will interface with RTW managers and supervisors from other directorates as necessary.

General Responsibilities

• Establish relevant policies and procedures to implement the program in each directorate consistent with the overall program guidance from the DMT.

• Provide early case identification and intervention.

• Participate in training key personnel.

• Work with payroll supervisor and an upper management representative from the payroll organization to coordinate the RTW Program efforts, as well as on a case-by-case basis in the organization.

Specific Responsibilities

• Define the roles of managers and supervisors within their organization under the RTW Program.

• Identify and track employees in their organization who are not working or who have work restrictions because of a work- or nonwork-related illness or injury.

• Work with payroll managers and supervisors who have employees with temporary medical restrictions.

• Regularly communicate the status of employees with medical restrictions or who are not working to upper management and the DMT.

• Commit the resources needed to advance the RTW Program.
• Participate in meetings with the DMT to review individual cases; bring payroll managers or supervisors as appropriate.

• Coordinate permanent medical restriction accommodation review with Staff Relations and the DMT.

• Assure that employees receive a written notice, with the expected duration, of their temporary accommodations.

C.4.2 Payroll Supervisors

• Notify RTW manager and other appropriate managers and supervisors (including work supervisor) when an employee is not working or is medically restricted due to a work- or nonwork-related injury or illness.

• Ensure that all employees returning to work with restrictions from non-LLNL health care providers are seen at Health Services. Refer employees to Health Services in other situations as listed in Section C.2.4.

• Provide Health Services a current Job Demands Worksheet for the employee’s position when requested. (This is to be done in collaboration with the RTW manager).

• Work with RTW managers as well as other managers and supervisors either to make temporary modifications to employee’s existing assignment or to find alternate placement.

• Ensure that temporary assignments are compatible with the employee’s medical restrictions.

C.4.3 Disability Management Team

The DMT is the coordinating body for the Lab-wide RTW program that reviews cases and facilitates cross-department services and activities in a timely and effective manner. The DMT will consist of representatives from the following organizations:

• Health Services Department.

• Human Resources Department (Staff Relations Division, Office of Risk Management, and the Benefits Division).

• LLNL’s workers compensation third-party administrator.

• Hazards Control Department.
General Responsibilities

- Establish procedures to achieve the objectives of the RTW Program.
- Provide a forum for resolution of return-to-work issues. Review and assist with problems that cannot be resolved at the line or department level.
- Involve payroll supervisors and payroll management representatives in RTW meetings and discussions.
- Hold training and periodic informational and problem-solving meetings with RTW managers and others, as needed.
- Assure that the actions of RTW managers and their organizations are consistent with applicable Laboratory policies and state and federal law.
- Support efforts at identifying alternate assignments for individuals who cannot be temporarily accommodated within their directorates.
- Evaluate the RTW Program and make recommendations to the Deputy Director for Operations.

Specific Responsibilities of DMT Members

C.4.3.1 Health Services Department

- Provide onsite medical treatment for work-related injuries and illnesses.
- Provide medical case management of work-related injuries and illnesses.
- Initiate workers compensation and accident investigation administrative processes, where appropriate.
- Issue all medical restrictions for work- and nonwork-related medical problems, including review of restrictions written by non-LLNL physicians, and communicate them to employees, payroll supervisors, work supervisors, payroll RTW managers, and Hazards Control.
- Communicate with outside physicians about return-to-work and medical management issues for nonwork-related injuries and illnesses.
- Maintain an internal information system that facilitates tracking and management of temporary disability cases.
• Provide vocational rehabilitation services, and facilitate efforts to find alternate work for individuals with permanent disability.

• Maintain an injury reporting and investigation information system that is linked to Hazards Control information system.

**C.4.3.2 Staff Relations Division**

• Provide oversight and management of the Laboratory’s Workers Compensation Program.

• Provide counseling and guidance to organizations to ensure adherence to state and federal disability and medical leave laws and the requirements in the *LLNL Personnel Policies and Procedures Manual*.

• Provide guidance on employment and personnel matters, including medical separation and performance management issues.

• Provide periodic reports on workers compensation costs to the DMT, directorates, and Laboratory management.

**C.4.3.3 Workers Compensation Third-party Administrator**

• Investigate workers compensation claims to determine compensability and eligibility for benefits.

• Administer the workers compensation claims process, provision of benefits for accepted claims, and dispute resolution of claims.

• Maintain an information system for tracking and managing claims.

• Participate in medical case management of work-related injuries and illnesses with Health Services.

**C.4.3.4 Hazards Control Department**

• Make OSHA 200 log determinations (e.g., recordability, and lost and restricted workday decisions).

• Conduct accident investigations to determine the cause(s) of work-related injuries and illnesses and implement actions for prevention.

• Maintain an injury reporting and investigation information system that is linked to Health Services’ information system.

• Provide periodic reports on OSHA 200 log to the DMT, directorates, and Laboratory management.
C.4.4.4 Employees

- Report all injuries and illnesses immediately to your payroll supervisor and work supervisor.

- Participate fully in medical treatment and rehabilitation plan; keep medical appointments and follow medical recommendations.

- Keep your payroll supervisor and work supervisor apprised of the work status and of your anticipated return-to-work date.

- Cooperate with members of the DMT in efforts to facilitate return to work.
• Report to Health Services
  — When returning to work with any medical restrictions.
  — After an absence due to a work related injury.
  — After a 5-day medical absence for any cause.
  — After hospitalization or surgery.

C.5 Protection of Sensitive Unclassified Information (SUI)
The RTW Program manages information that LLNL classifies as Sensitive Unclassified Information (SUI). There are significant differences in the management of SUI in the RTW Program depending on whether the injury information is work or nonwork related. This difference exists because there are more individuals and organizations at LLNL with a "need to know" regarding work-related injury information because of institutional responsibilities involving administration of Workers Compensation Program and OSHA recordkeeping requirements. The program is subject to one or more of the following statutes:

• California Information Practices Act.
• California Confidentiality of Medical Information Act.
• Federal Privacy Act.

The RTW Program manages information in accordance with all applicable statutes and will adhere to the following Laboratory procedures for Sensitive Unclassified Information:

• Ensure that all necessary precautions are taken to safeguard the confidentiality of personal and confidential information about individuals.
• Ensure all records maintained on paper or microfilm/microfiche are locked in files, safes, or other secured places.
• Take care when working with the records that unauthorized persons do not gain access inadvertently.
• Secure records so as to never leave them on a desk or table when unattended by an individual authorized to have access to the information.
• Establish, as necessary, written procedures to safeguard the confidentiality of records.
• Establish physical, technical, and administrative safeguards for all information maintained in computer systems.

Violations of the above state and federal acts could bring civil remedies and penalties. Violation of Laboratory policy concerning personal and/or confidential records (SUI) could lead to corrective action up to and including termination of employment from the Laboratory.

C.6 Return-to-Work Program Records Management

C.6.1 Staff Relations

The Office of Staff Relations (OSR) is responsible for maintaining records associated with the RTW Program and will establish internal procedures for administration of relevant records.

C.6.2 RTW Managers

The RTW managers will be responsible for maintaining their directorates/departments RTW records, and will establish internal procedures for administration of these records. They will be responsible for keeping original copies of the following records:

• Temporary and permanent medical restrictions for employees in their directorate.

• Temporary Accommodation Agreements.

• Documents addressing the decision to extend temporary accommodations beyond 90 days.

• Documents granting directorates an exception to the 90-day accommodation requirement.

• Documents addressing permanent medical restriction accommodation reviews.

• Records of all employees in the directorate who are absent because of injury or illness.

C.6.3 Health Services

The Health Services Department will be responsible for management of the following records:
• Medical records and related medically confidential information.
• All medical restrictions for Laboratory employees.
• Reports of employees who are absent from work due to injury or illness.
• Individual case management information including whether or not medical restrictions are being accommodated.

C.6.4 Risk Manager and Workers Compensation Third-party Administrator

The risk manager and the workers compensation third-party administrator will be responsible for all records related to workers compensation claims.

C.7 Return-to-Work Procedures

Following are flowcharts of LLNL’s procedures for the Return-to-Work Program. See Table C5.1 to find the flowchart applicable to a given situation.

Table C5.1. Flowcharts of LLNL’s procedures for the Return-to-Work Program.

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<td>Permanent Medical Restrictions Because of Work- or Nonwork-related Illness/Injury.</td>
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</tbody>
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Chart A
Off Work Because of Work Related Illness/Injury
Initial Treatment at Health Services

Work related injury/illness occurs

Employee is evaluated and receives treatment in Health Services?

yes

Does the Health Services clinician determine that the nature of the injury precludes work of any kind?
(Health Services has department guidelines on how clinicians are to approach this decision.)

no

See Flow Chart C
Work Restrictions

Health Services communicated immediately by phone with the supervisor that employee is precluded from work followed by electronic and hard copy notification to the employee, supervisor and Directorate RTW Manager

DMT logs and monitors case
- Expedite medical evaluation/treatment
- Initiates/continues communication with physician and employee to offer support and to initiate return to work planning

DMT communicates every 2-4 weeks with Directorate RTW Manager, Line Management and supervisor
- Provides updates on return to work date
- Projects likely work status upon return (restricted vs unrestricted)

Directorate RTW Manager coordinates efforts to:
- Characterize specific job tasks of current position
- Explore possible modification of current position and potential transitional work assignments

Employee released to work?

yes, no restrictions

Employee returns to full duty work and RTW Program ends involvement

yes, with medical restrictions

See Flow Chart C

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team
Chart B
Off Work Because of Work
Related Illness/Injury—No Initial Treatment at
Health Services

Work related injury/illness occurs

A clinician outside Health Services provides treatment (employee predesignates their personal physician) and determines that the injury precludes work of any kind?

Does Health Services agree that work preclusion is reasonable after reviewing case?

Health Services communicates with outside clinician to review injury specifics, job demands and to discuss work status

Does the outside clinician determine employee may return to work with medical restrictions?

Employee continues to be precluded from work

Return to Flow Chart A

The employee does not seek out medical treatment and does not come to work

Supervisor instructs employee to come to Health Services ASAP to receive treatment and review work status

Does the Health Services Clinician determine that the injury precludes work of any kind

Yes

Return to Flow Chart A

See Flow Chart D

No

Employee returns to full duty work and receives necessary medical treatment

Does the employee require restrictions?

Yes

No

See Flow Chart C

Return to Flow Chart A

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team
Chart C
Temporary Medical Restrictions Because of Work
Related Illness/Injury—Restriction from On-site Clinician

Injury/illness occurs and is treated on-site; employee does not need to be "off work."

Does the Health Services clinician who provides treatment think medical restrictions are necessary? (Health Services has department guidelines on how clinicians are to approach this decision.)

- no
  - Employee returns to work, no restrictions
- yes
  - Health Services clinician communicates with supervisor and Directorate RTW Manager when appropriate before issuing medical restrictions to better understand employee's specific job demands
  - From Flow Chart B, D
    - Employee sent home (Directorate pays first 90 days)
    - See Flow Chart A

DMT Logs case

Health Services communicates medical restrictions to supervisor by phone to supervisor and Directorate RTW Manager electronically and by hard copy

Are the Supervisor and Directorate RTW Manager successful in either modifying employee's current position or finding an alternate assignment after reviewing medical

- no
  - Are the efforts by Directorate RTW Manager to find a temporary assignment for the employee elsewhere in the directorate or outside the directorate (with the assistance of the DMT) successful
    - no
    - Employee sent notice by Directorate stating that accommodation is only temporary and is provided to aid in his/her recovery
    - Employee begins temporary restricted duty assignment
    - DMT monitors case
      - Expedites medical evaluation and treatment
      - Communicates every 2-4 weeks with employee and clinician
    - Abbreviations:
      - DMT = Disability Management Team
      - RTW = Return to Work
  - yes

(Next page)
Chart C (continued—page 2)

DMT conducts periodic case reviews with Directorate RTW Manager, Line management and supervisor
— Provides updates on work status and projects timeline for end of temporary medical restrictions

Do temporary medical restrictions end within 90 days with employee being released to full duty?

- yes — RTW Program ends involvement
- no —

Do the temporary medical restrictions become permanent?

- yes — See Flow Chart F
- no — Temporary medical restrictions will likely extend beyond 90 days

Formal case review occurs with Directorate RTW Manager, Line Management, employee’s supervisor and the DMT (specifically Staff Relations) to consider whether an accommodation extension beyond 90 days is reasonable

Is a decision made to discontinue accommodation of temporary restriction based on case specifics?

- yes — Employee goes off work See Flow Chart A
- no —

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team
Chart D
Temporary Medical Restrictions Because of Work Related Illness/Injury - Restriction from Outside Clinician

1. Injury/illness occurs

2. A clinician outside Health Services provides treatment (i.e., employee predesignated their personal physician) and determines that medical restrictions are necessary

3. Employee is seen in Health Services for evaluation

4. Does Health Services agree that medical restrictions are reasonable after reviewing injury specifics?
   - Yes: Return to Flow Chart C
   - No: Health Services communicates with outside clinician to review medical restrictions, and Directorate RTW Manager and supervisor provide job demands worksheet if requested to aid process

5. Does the outside clinician remove medical restrictions?
   - Yes: Employee resumes full duty work and receives necessary medical treatment from outside physician
   - No: Medical restriction issued whether modified or not

Return to Flow Chart C

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team
Chart E
Off Work or Temporary Medical Restrictions Because of Non-Work Related Illness/Injury

Employee is off work from non-work related medical problem

- Employee initiates efforts to return to work
- Directorate RTW Manager initiates return to work efforts based on unique directorate needs
- Liberty Mutual (disability insurance carrier) solicits the DMT to facilitate return to work
- DMT tracks LLNL employees off work greater than 30 consecutive days

DMT involvement in return to work efforts begin

DMT contacts individual employees and their Directorate RTW Manager to see if return to work assistance is necessary

Is return to work assistance requested by either the Directorate RTW Manager or the employee?

- No: RTW program involvement ends
- Yes:
  - Health Services contacts employee and asks employee to sign a medical release to facilitate communication with their physician
  - Health Services limits communication with employee’s physician to cover only work status issues, excluding discussion of any confidential medical information
  - Process proceeds per applicable sections of Flow Charts A, B, C, or D with “best efforts” at temporary accommodation (non-mandatory)

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team
Chart F
Permanent Medical Restrictions Because of Work or Non-Work Related Illness/Injury

Outside physician communicates that employee needs permanent medical restrictions for work related for non-work related condition

Health Services physician provides treatment for a work related injury and determines that a permanent restrictions are necessary

Employee is seen in Health Services for evaluation

Permanent medical restrictions are issued by Health Services after thorough review of all relevant records and are communicated to the employee, supervisor and directorate RTW Manager

Formal accommodation review occurs with DMT (specifically Staff Relations), Directorate RTW Manager, Line Management, and supervisor considering specific job demands of employee’s position

Is the decision made to accommodate permanent medical restrictions in employee’s current position?

yes

DMT monitor status of employee in the workplace depending on case specifics

no

Are efforts successful at finding a position at LLNL where accommodation of the permanent medical restrictions are possible?

no

Employee is medically separated; vocational rehabilitation benefit provided by Workers’ Compensation if employee eligible

yes

Employee placed in new position with permanent medical restrictions (which may be a transfer for work related case or the DOE Cost Index)

Abbreviations:
RTW = Return to Work
DMT = Disability Management Team

DMT monitors status of employee in the workplace depending on case specifics
Appendix D
Worker Rights and Responsibilities

D.1 Worker Rights
Health Services recognizes the basic human rights of patients and makes sure that each worker subject to a medical evaluation or test knows his/her rights. These include

- Knowing the purpose, scope, and results of medical evaluations or test.
- Knowing that medical records are confidential, unless you authorize release of information. **Note:** Release of certain information or reporting is mandated by law.
- Knowing how to gain access to information in your medical records.
- Giving consent for all medical procedures.
- Knowing what type of information will be conveyed to LLNL management as a result of medical evaluations.
- Knowing that you must be referred for medical follow up when indicated.
- Expressing any dissatisfaction you may have regarding your health evaluation or health care.
- Refusing treatment, but, at the same time, knowing you will be responsible for any medical consequences as a result of this action.
- Having the opportunity, to the extent possible, to participate in decisions involving your health care.

D.2 Worker Responsibilities
Workers shall

- Provide Health Services clinicians accurate and pertinent information about their health, medical history, occupational history, and medications.
- Notify Health Services clinicians if they do not understand their medical evaluation or what is expected of them.
• Seek medical advice and treatment from their personal physician for matters that are beyond the scope of services provided by Health Services.