I. **REASON FOR THIS POLICY**

The University of South Dakota’s return to work policy is designed to accommodate employees who sustain an injury or medical event, when a physician has determined the employee has physical limitations which prevent them from performing their normal job. Temporary modified or alternative light duty positions are identified as positions which require less physical effort, so the injured worker can return to work. Following the guidelines from the treating physician and input from the injured employee, the injured employee can be returned to a position appropriate for their work place restrictions.

Statistically, a return to work program enhances both the psychological and physical healing process, shortening the time an employee is off work due to an injury. Other benefits include:

1. Employee continues to be productive
2. Employee remains in touch with co-workers
3. Employee avoids financial stress
4. Lower directed cost associated with worker’s compensation
5. Employee avoids feeling isolated
II. STATEMENT OF POLICY

The University provides a return to work program for employees who sustain an injury or illness. The University will provide a modified or light duty assignment, as available, to an employee with an approved claim, once they have been released to temporary modified/restricted work by a licensed medical professional. Placement into a light duty position is on a temporary basis and should never become permanent. Employees who are working a light duty assignment will be held to the same standards of accountability as a employee on regular duty. An employee working on a light duty assignment is to abide by the restrictions imposed by their treating physician and should not exceed those restrictions until they have been released to normal working status by their doctor. It is also the responsibility of the injured employee to immediately inform Human Resources and their supervisor of any changes made to their work capacity while working a light duty assignment.

III. DEFINITIONS

**Injured Worker:** An employee who sustains an injury or has an illness which requires a modified, light duty, or restricted duty work schedule

**Medical Event:** a medical issue under supervision of a medical professional which may result in work restrictions

**Temporary Modified/Light Duty/Restricted Duty:** A work capacity given to an injured worker by their treating physician stating the employee is not capable of performing their regular job duties, but is capable of working in a modified or restricted capacity within their normal job classification

**Regular Duty:** a work capacity given to the injured worker by their treating physician stating that the injured worker is capable of returning to work without restrictions or modifications to their normal job classification.

IV. PROCEDURES

An injured employee should immediately notify Human Resources and their supervisor once their treating physician has released them to any type of modified or restricted work. The employee must also provide a signed, written copy of the workplace restrictions given to them by the treating physician. Human Resources will coordinate with the employee’s supervisor and determine what light duty assignment is available for the injured employee using their department’s light duty job bank.

Each University department will provide a list of light duty work when necessary. The light duty list must identify tasks that are not physically demanding and allows the light duty employee to work and recover from their injury or illness.
At the discretion of the University, if the work restrictions are minor and the regular job duties can be modified to accommodate the employee, the employee will be assigned to their regular work duties. However, as the restrictions become more specific, the task assignment must also become more specific and defined. Every restriction will be reviewed on an individual, case by case basis. Light duty should not exceed the level of responsibility of previously held position.

Light or modified duty assignments will be re-evaluated each time a Physician’s return to work evaluation is submitted by the injured employee. Light or modified duty assignments are non-precedent setting and will be considered on an individual case by case basis. Every effort will be made to place the injured employee back to work.

Once a light duty assignment has been chosen, Human Resources will complete a Modified Duty Assignment Form with the employee and supervisor to document the light duty job as well as current restrictions. The Modified Duty Assignment Form will encourage communication and eliminate misunderstandings between the restricted duty employee and their supervisor, as well as provide documentation of accommodating a workplace restriction.

The original Modified Duty Assignment Form will be kept in the Restricted Medical folders within Human Resources and attached to their doctor’s restriction. A copy of the Modified Duty Assignment Form will also be given the supervisor and the employee.

Supervisors will monitor the tasks being completed by an employee working a temporary modified/restricted duty position to ensure that the employee is working within their prescribed restrictions.

V. RELATED DOCUMENTS, FORMS AND TOOLS

Modified Duty Assignment Form
Modified Duty Assignment Form

Employee: ___________________ Employee #: ________________ Department: ___________________ Date of Injury: ________________

We have received your medical release from

(Doctor/Facility) (Date)

We are pleased you are able to return to work. Your release form states you may return to work with the following restrictions:

________________________________________________________________________________________________________________________________________________________________

Your department is able to accommodate the above restrictions. Your return to work date is:

_________________________ at_________________________○ A.M.

(Start Date) (Time) ○ P.M.

The description of modified duties are as follows:

________________________________________________________________________________________________________________________________________________________________

Participant’s Responsibilities:

Employee:

• Work within the physical limitations set by the doctor.
• You must take primary responsibility for your own safety and abiding with your restrictions.
• Let the supervisor know if I am having difficulties with any of the tasks I must perform.
• Tell the supervisor in advance if I must leave work for a medical appointment.
• Ensure Human Resources and my supervisor knows of any changes in restrictions and provide a copy of the work status report from the doctor to Human Resources and my supervisor.

Human Resources and Supervisor:

• Communicate regularly with the employee regarding his/her progress.
• Monitor changes in restrictions.
• Ensure the employee works within the physical limitations set by the doctor.

We have read, fully understand, and agree to the duties of this assignment.

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<tr>
<th>Employee’s Signature</th>
<th>Date</th>
<th>Supervisor Signature</th>
<th>Date</th>
<th>Human Resources</th>
<th>Date</th>
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