



MODIFIED WORK DUTIES PROCEDURE

Modified Work Duties Procedure

January 2023

A. General

This procedure shall establish guidelines for the timely return of employees in a restricted or modified work capacity after an Occupational Injury or Illness.

B. Definition

Any employee who, as the result of an Occupational Injury or Illness, cannot perform one or more parts of their regularly scheduled job or is not capable of working a complete shift, but can, in accordance with restrictions from a competent medical authority, perform productive, limited work shall be deemed to be on restricted work activity or placed on a modified work duty schedule.

C. Requirements

It is imperative that site management develop and implement a comprehensive back-to-work program to include, in so much as possible, a restricted work activity policy of providing meaningful and productive work designed to readily comply with restrictions placed upon an employee by medical authorities following an Occupational Injury or Illness. The responsibility must therefore fall on site management to adequately analyze their project or facility and identify various positions or jobs determined to be suitable for the employees' work restrictions.

Assessment of an injured employee's ability to perform restricted or modified work shall be made by a competent medical authority and all restrictions shall be stated in writing and provided to necessary site personnel for inclusion in the employee's medical file. Injured Employee Job Description must be reviewed by the treating physician.

Management must ensure that all restrictions are communicated to applicable supervisory personnel and under no circumstances shall the employee be allowed to exceed these. Restricted work activity may include such measures as temporary changes in job classification, temporary transfers, or other such measures as deemed necessary by site management, which are designed to return an injured employee to the work force.

Restricted work activity or modified work schedules shall not be offered to employees suffering from non-work-related injuries, which necessitate restricted activities.

In all cases of injury, employees shall obtain a return-to-work notice prior to returning to full duty.

Note: If the employee will not or cannot return to work in a modified duty capacity, the Human Resources representative will place the employee on Leave of Absence. Immediate notification of this change shall be made to the appropriate insurance carrier and to the Workers' Compensation.

A modified work duty or restricted work activity program should include as a minimum:

1. Site commitment to a modified work duty program to include participation by all supervisory personnel.
2. Modified work duty shall be restricted to no more than 40 hours per week.
3. A thorough assessment of the project or facility to determine availability of modified or restricted work.
4. Assignment of meaningful, productive work to employees on a modified or restricted work program.
5. Monitoring of employees engaged in a modified or restricted work program to ensure compliance with work restrictions.
6. Continuous, on-going communications with attending physician(s) and if necessary, legal counsel.
7. Maintenance of all necessary documentation concerning communication, both oral and written, between concerned parties (job site, physicians, employee).
8. Proper selection, training, and program development of and with physicians who take an active role in the site modified work activity program.

Revision History

Rev	Rev Date	Rev By	Approved By	Description
1.0	1.3.2022	Shayne Torrans	Shayne Torrans	Initial Procedure Document
1.1	12.20.2022	Shayne Torrans	Shayne Torrans	Format Revision

Approvals:

Procedure Owner

Competency Assessment

No.	Questionnaire	C/NYC
Q1		
A1		
Q2		
A2		
Q3		
A3		
Q4		
A4		
Q5		
A5		

Enclosed Attachments	
Risk Assessment	<input checked="" type="checkbox"/>
Environmental Aspect and Impact	<input checked="" type="checkbox"/>
Training and Competency	<input checked="" type="checkbox"/>
Measure and Evaluation Tools	<input checked="" type="checkbox"/>

Competency Checklist

To be filled out by Trainer and signed by Employee, Assessor and Supervisor before being returned to the HSEQT Manager for recording purposes.

Procedure	Competency	Date	Competent YES / NO	Employee Signature

(Please tick appropriate box)

This employee is competent in performing the job.

This employee has not attained the competency level.

*

* *If the employee has not attained all competency levels, the General Manager must assess the action to be taken, provide an extension of training or alternative action as listed below.*

Alternate action to be taken: _____

Signed By	Employee: _____	Date: _____
	Trainer: _____	Date: _____
	Assessor: _____	Date: _____
	Regional Manager: _____	Date: _____

Environmental Aspects and Impacts

Identified Environmental Aspects and Impacts

The following table is a summary of the likely environmental aspects and impacts that may be identified during site inspections. The significance of each impact needs to be assessed using the Risk Assessment Model.

Activity	Aspect	Impact
Purchasing & Administrative Work	Consumption of goods	Conservation of natural resources
	Consumption of energy (eg. Electrical equipment and facilities)	Release of greenhouse gases and atmospheric pollution; Consumption of natural resources; Habitat loss
	Generation of waste (eg. Paper)	Consumption of space for waste disposal; Habitat loss
Climate Control	Consumption of energy	Release of greenhouse gases and atmospheric pollution; Consumption of natural resources; Habitat loss
	Generation of noise	Disturbance to community; Habitat loss
Cleaning of – offices / vehicles	Storage, use and release of chemicals	Contamination of air, water or soil; Risk to human health
Transport (Fleet vehicles / staff travel)	Consumption of energy	Release of greenhouse gases and atmospheric pollution; Consumption of natural resources; Loss of habitat at all stages of generation; Light pollution
	Consumption of goods (eg. Oil)	Consumption of natural resources; Generation of waste; Habitat loss; Biodiversity impacts
	Generation of waste (eg. Oil)	Consumption of space for waste disposal; Potential contamination of water or soil; Habitat loss
	Exhaust emission	Release of greenhouse gases and atmospheric pollution
	Use of dangerous goods (eg. Batteries)	Potential contamination of air, water or soil; Risk to human health
	Generation of noise	Disturbance to community; Habitat degradation
Operations		

Sample only.
To be filled in

Risk Assessment



Risk Assessment // insert name here					
Step No: Logical sequence	Sequence of Basic Job Steps documented in the Procedure, Work Instruction and project plans. Break down Job into steps. Each step should be logical and accomplish a major task.	Potential Safety & Environmental Hazards/Impacts at the site of the Job Identify the actual and potential health and safety hazards and the environmental impacts associated with each step of the job.	Risk Rating Refer to the risk matrix or HSEQ.PRO.Risk Mgt	Recommended Corrective Action or Procedure <i>Determine the corrective actions necessary to reduce the risk to as low as reasonably practical (ALARP) refer to HSEQ.PRO.Risk Mgt. The risk must be reduced or controlled to ALARP before work commences.</i> Document who is responsible for implementing the controls to manage each hazard identified.	Risk Rating refer to the risk matrix or HSEQ.PRO.Risk Mgt
1.					
2.					
3.					
4.					
5.					

Audit



Process: insert// Procedure: Insert //		Date:		Audited by:	
		Location of Audit:		Area Mgr/Supervisor:	
Item	Question	Evidence Sited	Comments		Conformance Score 0,3,5
1.					
2.					
3.					
4.					
5.					
6.					
7.					
AUDITOR'S SIGNATURE:		CONFORMANCE SCORE: / 25		0 – Non-Conformance	
SAFETY REP'S SIGNATURE:		CONFORMANCE %:		3 – Continuous Improvement Opportunity	
				5 – Total Conformance	