CITY OF DUBLIN

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ADMINISTRATIVE ORDERS
OF THE CITY MANAGER

ADMINISTRATIVE ORDER 3.8
TO: All Department and Division Heads
FROM: Timothy C. Hansley, City Manager
SUBJECT: Temporary Modified Work Assignments
DATE: January 31, 1997
New Administrative Order

I. PURPOSE

This Administrative Order is to establish a policy and set of procedures governing modified work assignments for employees with temporary physical restrictions. The purpose is to reduce or eliminate lost-time incidents by close communication with the treating physician, managed-care organization (MCO), employee, Division Supervisor , and the Division of Human Resources and Procurement through the utilization of temporary, modified work assignments. Questions regarding this Administrative Order should be directed to the Risk Management Specialist within the Division of Human Resources and Procurement.

II. POLICY

It is the policy of the City of Dublin to assist injured or ill employees obtain quality medical care and actively help the employee to return to work as quickly as possible through the implementation of modified work assignments and effective communication between the employee and Supervisor.

III. PROCEDURES

The following procedures shall be followed in using modified work assignments:

A. The physician will specify the restrictions of the modified work capacity of the employee.

B. The Supervisor of the injured employee will communicate with the City's selected managed-care organization (MCO)and determine an alternate duty assignment based on the written restriction.

C. If modified duty is unavailable within the injured worker's regular Division, the Director of Human Resources and Procurement shall be contacted to ascertain if an alternate assignment is available in another Division.

D. Offers of modified work should contain the following six elements:

(1) The offer should be made in writing to the injured employee. This prevents disputes over whether modified work was offered and the conditions associated with the offer. The letter should either be hand delivered with receipt acknowledged by the employer in writing or sent by certified mail, return receipt requested.

(2) The offer should describe the modified work that is available. The work described should be in the same language as set forth in the physician's report. For example, if the doctor states the employee is not to lift more than 15 pounds, it should be stated in the written work description, that the employee will not lift more than 15 pounds. A copy of the physician's report shall be obtained for files in the Risk Management Specialist's office.

(3) The written offer should name the supervisor or management person to whom the injured worker is to report to for work. All affected staff members will receive a copy of the written work offer.

(4) The letter should indicate the day, date, and time the person is to report to work, and the hours of work to be observed.

(5) The letter should specify the phone number, extension, and location of the supervisor that the injured employee is to contact.

(6) The employee should be informed of the consequences of his/her failure to accept the offer of modified work; meaning that temporary disability benefits may be terminated if he/she does not accept modified work.

D. If the written offer is refused by the injured worker or he/she does not report to work, the Division Supervisor should contact the Director of Human Resources and Procurement.