

ALAMEDA COUNTY TEMPORARY MODIFIED WORK PROCEDURES (EMPLOYEE)

It is the policy of the County of Alameda to make a reasonable effort to provide temporary modified work assignments to employees who may be temporarily unable to perform their usual job assignment due to injury/disability (both industrial and non-industrial), consistent with their work restrictions/limitations. The provision of temporary modified work assignment(s) should be re-evaluated every 30-45 days as employees continue to improve and progress towards full duty in their usual job assignment. Temporary modified work assignments are not *to exceed ninety (90) calendar days* per injury/illness, unless otherwise required by law. Under extraordinary circumstances, a temporary modified work assignment may be extended up to 210 calendar days on a case-by-case basis. The availability of temporary modified work assignments is determined by the employer and is based on the employee's temporary work restrictions/limitations and the availability of temporary work. Since individual cases will vary, this procedure is designed to provide only a general overview of the County's temporary modified work process.

PROCEDURES

RESPONSIBLE PARTY	ACTION
Employee	 Immediately notifies supervisor when released to work with temporary work restrictions/limitations and provides acceptable medical documentation which includes: date of medical appointment, specific restrictions/limitations and frequency, and duration of restrictions/limitations.
Supervisor	 Reviews employee's medical documentation. Determines and advises employee of ability/inability to provide temporary modified work assignment. Provides completed Temporary Modified Work Plan to employee. Forwards medical documentation to and coordinates temporary modified work with Disability Coordinator/Workers' Compensation Liaison.
Employee	 Returns to work, completes Temporary Modifies Work Plan, and performs temporary modified work consistent with work restrictions/limitations. Provides updated medical documentation to supervisor following subsequent medical appointments or every 30-45 days. Immediately notifies supervisor when restrictions change and/or is released to full duty.
	 Codes time-sheet appropriately to reflect temporary modified work (refer to HRMS time reporting codes).
Disability Coordinator/ Workers' Compensation Liaison (Department)	 Reviews employee's supporting medical documentation and provides written confirmation of department's ability/inability to provide temporary modified work assignment(s). If industrially related, copies to the County's third party administrator and the Risk Management Unit.
()	6. When appropriate, ensures <u>current</u> Description of Employees' Essential Job Functions (EF5) is completed in collaboration with employee and supervisor. Forwards EF5 to physician/clinician to determine employee's ability to return to full duty. If industrially related, copies to the County's third party administrator and the Risk Management Unit.
Supervisor	7. Notifies Disability Coordinator/Workers' Compensation Liaison when the employee's restrictions/limitations change, the employee returns to full duty and/or is unable to work. Re-evaluates the provision of temporary modified work assignment(s) after each medical appointment and new medical documentation/work status report received.

Disability Coordinator/ Workers' Compensation Liaison	 Monitors temporary modified work assignment(s) and on-going medical documentation; concludes assignments when appropriate (before and no later than 90 days) and provides written confirmation. If industrially related, copies to the County's third party administrator and the Risk Management Unit.
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NOTE: Please refer to the Alameda County Temporary Modified Work Procedures (Administrative) for more detailed procedures. Related forms and resources can be located at www.acgov.org/hrs/divisions/dp or the County's Document Center at http://dsmain.acgov.org/docushare/dsweb/View/Collection-2189.

APPROVED FOR DISTRIBUTION

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