

TAD Policy

I. Policy

In compliance with RSA 281-A:23-b, YOUR BUSINESS NAME will provide temporary alternative/transitional work opportunities to all employees temporarily disabled by a work-related injury or illness.

II. Purpose

YOUR BUSINESS NAME adopts the principle that it is important to provide meaningful work during the time of healing and strengthening following a work-related illness or injury; to retain the knowledge and expertise of the employee and maintain the dignity and respect of the employee associated with their respective positions.

Temporary Alternative/Transitional Duty is meant to be temporary and transitional in nature to return the employee back to full duty. This program will last as long as the employee continues to transition back to the position at full duty, but not longer than 18 months. Once the transition stops, the department head, or his/her designee, will reevaluate the temporary/transitional program the employee is participating in.

This program is not intended to address those situations in which an employee has been deemed to be permanently disabled and unable to resume their previous position.

III. Procedure

- a) The injured employee shall have the treating physician complete the NH Workers' Compensation Medical Form (75 WCA-1), based on the findings during the initial examination. Upon completion, the injured employee will be responsible for returning the form to his/her department head/designee.
- b) The department head/designee will work with the employee to facilitate a safe return to work program with limitations listed by the treating physician. If a job description, essential task analysis, is needed for the treating physician to determine limitations, the employee will notify the department head/designee. The department head/designee shall be responsible for providing that job description essential task analysis to the treating physician. If necessary, the department head/designee may contact the treating physician if additional information is needed regarding the employee's limitations.

III. Procedure (cont'd)

- c) The employee will be responsible for obtaining an updated medical form completed by the treating physician following every medical appointment, but in no longer intervals than thirty days, and returning the form to his/her department head/designee.
- d) Additional modifications will be made to the temporary/transitional alternate duty program as necessitated by the treating physician's NH Workers Comp Medical Form. The department head/designee will be responsible for reviewing the appropriateness of continuing the program or duty assignments as necessary.
- e) Steps A through D may be repeated until such time as the employee is able to return to his/her normal position or has been deemed to be permanently disabled.

The provisions of this policy are intended to comply with RSA 281-A:23-b, Alternative Work Opportunities as adopted into law on February 8, 1994, and LAB 504.04. To extent that this policy is ambiguous or contradicts the RSA or DOL regulations, the language of the RSA or DOL regulations will prevail.