1. POLICY OVERVIEW

Authority
The following State of Florida statute applies for this policy: Chapter 440, Workers’ Compensation

Purpose & Scope
The purpose and scope of this guide is to establish procedures for re-integration of eligible injured workers into the workplace by providing necessary accommodations within any limitations prescribed by the Authorized Treating Physician.

2. DEFINITIONS

Accident
An unexpected event or result that happens suddenly. (See Florida Statute 440.02, Definitions)

Accident-Incident Report
The online form which is used to report a work-related injury to the Safety Coordinator.

Alternate Duty
Temporary duties established away from worker’s regular work area/responsibilities and within the functional limitations and restrictions stated on the DWC-25, which is updated after each appointment.

Authorized Treating Physician
A physician authorized by the College to provide medically necessary treatment to a worker who has sustained a job-related injury. The physician completes the DWC-25 after each appointment.

Claims Adjuster
The person with overall responsibility of handling Workers’ Compensation claims, including coordinating lost-time benefits and coordination of medical benefits. The Claims Adjuster is the medical case management provider.

Essential Functions
The basic job duties that a worker must perform, with or without reasonable accommodations.
First Report of Injury or Illness (DWC-1)
The Division of Workers’ Compensation Form used by the Safety Coordinator to report a work-related injury or death of a worker to the Claims Adjuster.

Functional Limitations and Restrictions
Identification of the worker’s ability or lack thereof to perform stated activities, and the degree to which these activities may or may not be performed. Functional limitations and restrictions are identified on the DWC-25 form provided to the worker by the Authorized Treating Physician after each appointment.

Injured Worker
All full-time and part-time College workers are covered under Workers’ Compensation, provided the injury is work-related and took place within the course and scope of employment or service to the College. The injured worker has the responsibility of meeting all scheduled medical appointments and returning to work following each appointment, except when the Authorized Treating Physician provides a medical diagnosis that prevents the worker from returning to work and it is documented on the DWC-25.

Injury
Personal injury or death by accident arising out of and in the course and scope of employment.

Maximum Medical Improvement (MMI)
The medical condition or status at which the injured worker is no longer in the process of recovery and will not medically improve further – i.e., the worker has recovered as much as he or she ever will.

Medical Documentation (DWC-25)
The Florida Workers’ Compensation Uniform Medical Treatment/Status reporting Form (DWC-25) is a written report completed by the Authorized Treating Physician, providing information on medical treatment, referrals, functional limitations and restrictions, condition management, maximum medical improvement, permanent impairment rating, and the follow-up appointment date.

Medical Emergency
An event or condition which is severe enough that lack of immediate medical attention would result in serious jeopardy to life or health, serious impairment of vital bodily functions, and/or serious and permanent dysfunction of a bodily organ or body part.

Modified Duty
Duties established in the worker’s regular position and within the functional limitations and restrictions as reflected on the DWC-25. Modified duty is evaluated at each visit to the Authorized Treating Physician.

Permanent Impairment Rating
Any impairment resulting from the injury which still exists after the date of maximum medical improvement. Permanent impairment is determined by the Authorized Treating Physician using a uniform rating schedule at the time the injured worker reaches maximum medical improvement.
Safety Coordinator
The Santa Fe College employee who manages the Workers’ Compensation Program and acts as a liaison between all parties involved.

Temporary Partial Disability (TPD)
Loss wages which are paid to an injured worker when the department is unable to accommodate the restrictions identified by the Authorized Treating Physician.

Temporary Total Disability (TTD)
Loss wages which are paid to an injured worker when the injury prevents working in any capacity during a set and temporary period of time.

Third Party Administrator (TPA)
Gallagher Bassett Services is the third party administrator which has been contracted by the Florida College System Risk Management Consortium (FCSRM) to provide case management services for the Workers’ Compensation Program for Santa Fe College. The Claims Adjuster is employed by Gallagher Bassett Services.

Waiting Period
The first seven (7) calendar days of a worker’s disability. Full-time workers may use the first 40 hours of their sick leave during this period if they cannot work as determined by the Authorized Treating Physician. Part-time workers are not compensated for this period unless they are medically disabled for more than 21 days, at which time Gallagher Bassett Services will pay the worker retroactively.

Workers’ Compensation Benefits
The State of Florida mandated program that requires employers to provide medical treatment and wage loss benefits for workers who have been injured as a result of a work-related activity.

Workers’ Compensation Notification Letter
An acknowledgement between the injured worker, Supervisor, and the Safety Coordinator that provides the alternate/modified duty tasks list, within the limitations and restrictions established on the DWC-25 Form by the Authorized Treating Physician.

Work Restrictions
(see Functional Limitations and Restrictions)
3. ROLES & RESPONSIBILITIES

Worker
1. The worker must follow the Department of Safety and Risk Management’s guidelines for reporting injuries, which can be found on the College’s safety web page.
2. The worker is responsible for attending all appointments with the Authorized Treating Physician (ATP), as well as all referral appointments deemed necessary by the ATP.
3. The worker is responsible for providing a copy of the DWC-25 to the Safety Coordinator after each medical appointment.
4. The worker must read and sign the Workers’ Compensation Notification Letter. If the worker has questions regarding the Letter, he or she must bring them up immediately with the Supervisor.
5. The worker must perform assigned duties (modified or alternate duty) satisfactorily and, if experiencing difficulty, must inform the Supervisor immediately.

Safety Coordinator, Supervisor & Human Resources
1. The Safety Coordinator monitors the progress of workers’ compensation claims; return to work status, and work restriction accommodations. The Safety Coordinator is the liaison between the Claims Adjuster, the Supervisor, and worker.
2. The Safety Coordinator emails the Workers’ Compensation Notification Letter to the injured worker’s Supervisor informing them of all necessary information including the injured worker’s restrictions, if any, as identified by the Authorized Treating Physician on the DWC-25.
3. The Supervisor is responsible for responding to the Safety Coordinator within 24 hours of receipt of the Workers’ Compensation Notification Letter advising if the department can or cannot accommodate restrictions.
4. Supervisor will notify the worker whether or not the department is able to accommodate the restrictions.
5. Supervisor ensures attendance and leave are recorded on the worker’s timesheet according to College procedures. Contact the Payroll Department if questions arise.
6. The Supervisor must notify the Safety Coordinator when the injured worker has stopped coming to work due to the injury, has difficulty performing his or her job, or when the worker has returned to work. The Safety Coordinator will notify the Claims Adjuster, Payroll, and Human Resources of the worker’s status.

Third Party Administrator (TPA)
1. The Claims Adjuster who works for the TPA is responsible for the overall handling of workers’ compensation claims reported by the College. The Claims Adjuster determines compensability and coordinates lost-time benefits when the worker is unable to work. The Claims Adjuster is the College’s resource for questions and issue resolution.
2. The Safety Coordinator and Claims Adjuster receive the completed DWC-25 after each authorized appointment. The Claims Adjuster verifies that the DWC-25 is properly completed. The Claims Adjuster arranges and authorizes appointments to meet the treatment plan outlined by the Authorized Treating Physician, including but not limited to, referrals to specialists, testing and therapies, and ensuring functional limitations and restrictions listed on the DWC-25 are clear and measurable.
4. PROCEDURES

The Return-to-Work Program is available on the Department of Safety and Risk Management website. The Department of Safety and Risk Management is responsible for updating the program as needed. Human Resources will provide the information to new hires.

After an incident, the Safety Coordinator will review the Accident-Incident Report and conduct an accident investigation in an attempt to prevent a reoccurrence. The Safety Coordinator will keep a record of all injuries, and will promptly report the injury to the Claims Adjuster using the DWC-1.

Alternate Duty or Modified Duty Tasks
The Supervisor will develop alternate duties or modified duty tasks based on the DWC-25 functional limitations and restrictions identified by the Authorized Treating Physician. This is determined on a case by case basis. The Safety Coordinator and Human Resources will review the alternate or modified duties and provide guidance or assistance to the Supervisor when needed. The Safety Coordinator will contact the Authorized Treating Physician for clarification if necessary.

Communications, Monitoring, and Coordination
The Safety Coordinator provides written updates to the Supervisor regarding work restrictions. The Supervisor must keep the Safety Coordinator abreast of any concerns or issues that arise concerning the injured worker. The Supervisor must immediately notify the Safety Coordinator if the worker stops coming to work because of the injury.

Workers’ Compensation Notification Letter
1. The Letter will be completed and emailed by the Safety Coordinator to communicate the functional restrictions and limitations from the DWC-25 to the Supervisor.
2. The Supervisor will list the modified or alternate duties on the Letter and sign it and provide the Letter to the injured worker for acknowledgment and signature. The Supervisor will email it back to the Safety Coordinator within 24 hours.
3. The Safety Coordinator will provide a copy of the completed Letter to Human Resources.

Exit Process
1. The Workers’ Compensation Notification Letter will be completed by the Safety Coordinator and will be sent to the worker’s Supervisor, Payroll, and Human Resources when the worker has reached Maximum Medical Improvement. The Notification Letter will include the following information: Date of MMI, Work Restrictions, and the Permanent Impairment Rating.
2. If the worker has no work Restrictions, the Safety Coordinator will communicate the information on the Workers’ Compensation Notification Letter including the expected return to work date and provide the Letter to the Supervisor, Human Resources, and Payroll.

Recordkeeping
A file is maintained for each injured worker by the Safety Coordinator in the Department of Safety and Risk Management.