

APAC

Rehabilitation and Return to Work Procedure

S3[APAC]-018-PR1

1. Purpose and Scope

- a. AECOM is committed to providing a safe and healthy working environment for all its employees. This procedure recognises that it is the responsibility of management, working in cooperation and consultation with employees, to ensure ongoing active prevention and management of injury in our workplace.
- b. Specifically, the Return to Work process/procedure:
 - i. Is a three party agreement between an injured employee, employer and treating practitioner;
 - ii. Ensures any employee injured or made ill as a result of their employment, will be returned to work in the shortest possible time, provided it is safe and practicable to do so; and
 - iii. If an employee is unable to return to their original position, where possible, a suitable alternative position, which does not jeopardise their well-being, shall be provided.
- c. AECOM's expectations in relation to rehabilitation and return to work are:
 - i. Remaining at, or returning to work as soon as it is safely possible after an injury is a normal workplace practice.
 - ii. There shall be a full involvement of employees in their return to work and participation in such a program shall not prejudice any employee.
 - iii. Return to work shall commence as soon as possible after illness or injury and a Rehabilitation and Return to Work Plan shall be established for any employee who has been directed to undertake modified or restricted duties or work hours.
 - iv. Return to work activities shall be monitored including consultation with the employee to ensure progress is continuing towards a complete recovery.
- d. This procedure applies to AECOM employees in Asia Pacific (APAC) who sustain a work-related injury or illness in the course of undertaking business activities.
- e. The management of non-work related injuries and illness is equally important to ensure that suitable return to work assistance is provided where appropriate.

2. Procedure

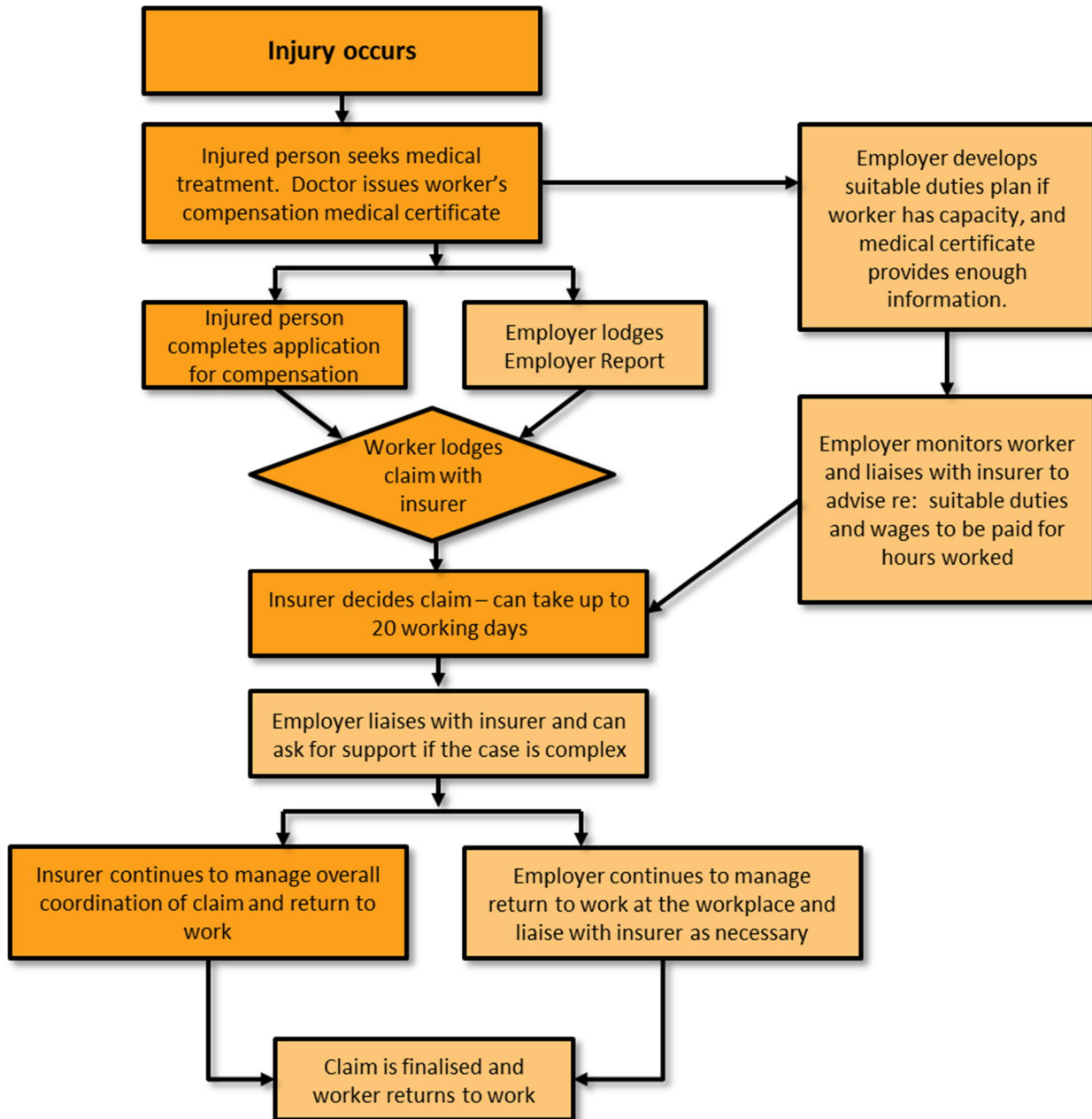
- a. When an injury occurs on premises, the worker shall seek first aid / medical treatment immediately. The worker should be escorted by their supervisor, or a delegate, to the nearest first aid / medical facility where possible.
- b. Where a worker sustains a non-work related injury/illness they must notify their supervisor, who in turn shall notify the Rehabilitation and Return to Work Coordinator as soon as possible if the injury/illness has the potential to impact on the worker's fitness for work.
- c. The Return to Work Capacity Assessment Form should be used when the worker initially attends an appointment with the treating medical practitioner (TMP) to facilitate the identification of suitable duties. This Form does not take the place of the Workers' Compensation First Medical Certificate (not applicable in all countries in APAC).

2.1 Workers' Compensation Claims Process

- a. Where a worker sustains an injury / illness during the course of their employment the Rehabilitation and Return to Work Coordinator is to advise them of the local Workers' Compensation Claims Process and assist with the completion of relevant forms where required.

- b. Claims shall be managed in accordance with local regulatory requirements and through the process outlined in Figure 1.

Figure 1. Claims Process



2.2 Injured Worker Consent

- a. Completion of a Rehabilitation and Return to Work Consent Form allows a Rehabilitation and Return to Work Coordinator to contact and obtain information from the injured/ill employee's medical and allied health practitioners, such as Doctors, physiotherapists, psychologists, etc.
- b. The Consent Form is valid for the duration of an employee's rehabilitation plan or period of personal leave.

2.3 Suitable Duties

- a. A Rehabilitation and Return to Work Plan shall be established by the Rehabilitation and Return to Work Coordinator in consultation with the injured / ill worker, relevant Supervisor and treating medical practitioner (TMP). This shall be done as soon as possible following:
 - i. the worker being certified fit for restricted duties or unfit
 - ii. their TMP stating that they need a return to work plan
- b. The Return to Work Program is completed using the Rehabilitation and Return to Work Plan Template.
- c. Suitable duties are a means of offering a monitored and graduated return to normal duties, and shall be:
 - i. Matched to the capabilities of the worker and consistent with restrictions as advised by the TMP
 - ii. Sufficient to match the rehabilitation needs and background/experience of the worker
 - iii. Time limited and regularly upgraded according to his/her level of recovery and treating medical doctor advice.
 - iv. Monitored and reviewed regularly with the aim of eventually returning to pre-injury duties
 - v. Established with regard for the objectives of the worker's rehabilitation plan and be meaningful duties.
- d. If an employee is unable to return to their original position, where possible, a suitable alternative position, which does not jeopardise their well-being, will be provided.

2.3.1 Non-Work Related Injuries / Illness

- a. Provision of suitable duties for non-work related injuries/illness is not mandated and will be evaluated on a case by case basis. Effort will be made to assist a worker who sustains a non-work related injury to return to work in a timely and safe manner.
- b. Suitable duties determined for a non-work related injury should be documented on the Rehabilitation and Return to Work Plan Template and flagged as a non-work related injury.
- c. In the event that a worker is unable to return to their full normal duties following a non-work related injury, the supervisor will determine the capacity to accommodate them in the workplace in consultation with Human Resources Business Partner and the Rehabilitation and Return to Work Coordinator and based on restrictions and business implications.
- d. A 'reasonable' duration for the provision of suitable duties is to be established by the Supervisor, Human Resources Business Partner and Rehabilitation and Return to Work Coordinator based on the nature and prognosis of the employee's injury / illness.

2.4 Use of Rehabilitation Providers

- a. External rehabilitation providers may be used to assist with an employee's rehabilitation.

2.5 Independent Medical Examinations

- a. AECOM may direct an employee to attend an Independent Medical Examination.
- b. Information obtained from an independent medical examination may be used to provide guidance in relation to the ongoing rehabilitation of an employee or for employment purposes, such as determining the impact an injury or illness may have on an employee's capacity to work and guiding decisions on issues such as reasonable workplace adjustments, ill-health retirement, etc.
- c. Costs of independent medical examinations, including reasonable travel costs to and from the place of examination, will be paid by AECOM.
- d. Referrals for independent medical reviews are completed the Rehabilitation and Return to Work Coordination or a Human Resources Business Partner.

2.6 Clearance Certificates

- a. A clearance medical certificate is used to document that a medical practitioner believes that an employee is able to safely perform the duties of their position following recovery from an injury or illness.
- b. Clearance certificates are required when:
 - i. An employee's absence from work has been the subject of an accepted workers' compensation claim;
 - ii. An employee has participated in a return to work program;
 - iii. The employee has had an extended absence (3 months or more in the past 12 months) from work due to a medical condition; or
 - iv. The nature of the employee's injury/illness is such that there is a possibility that their work may aggravate their condition.
- c. Clearance medical certificates are required for both work related injury or illness and non-work related injury or illness.

2.7 Monitor and Review

- a. All rehabilitation cases must be monitored at regular intervals by the Rehabilitation and Return to Work Coordinator.
- b. Until a clearance medical certificate is obtained or the case is closed for other reasons (i.e. those listed in **section 2.6** of this procedure), there should be a certificate of capacity covering all periods of work.

2.8 Cessation of Rehabilitation

- a. Rehabilitation concludes when an injured/ill employee meets any of the following criteria:
 - i. The employee resumes full duties of their position without any adjustments;
 - ii. The employee returns to their position but with permanent or long-term adjustments to their duties, work processes and/or their work environment; or
 - iii. The employee ceases to be employed by AECOM due to resignation, termination, redundancy or retirement.
 - iv. If an employee has an 'Accepted' Workers' / Accident Compensation Claim, rehabilitation should not be ceased until the insurer has finalised the employee's claim.

3. Responsibilities

- a. Responsibilities of the Injured Worker:
 - i. Ask their doctor for a WorkCover medical certificate (or equivalent);
 - ii. Actively participate in workplace rehabilitation (i.e. compliance with Rehabilitation & Return to Work plans); and
 - iii. Maintain communication with the employer/Rehabilitation Coordinator and WorkCover or equivalent authority about relevant issues related to their compensation claim.
- b. Rights of the Injured Worker:
 - i. To receive workers compensation for work-related injuries accepted by the insurer;
 - ii. To choose their own doctor;
 - iii. Authorise AECOM's Rehabilitation Coordinator e.g. HR, SH&E Team to contact their treating practitioner for advice on suitable duties and/or modified hours;
 - iv. To have confidential and safe keeping of personal information;

- v. Be provided with suitable duties, if practicable;
 - vi. Be consulted in the development of a rehabilitation and/or suitable duties plan(s);
 - vii. Ask for a review of decisions with which they do not agree; and
 - viii. Have access to an impartial grievance mechanism, which is accessed in the first instance by raising the grievance with the Rehabilitation Coordinator for resolution or escalation.
- c. The Role of the Rehabilitation and Return to Work Coordinator:
- i. Develop, coordinate and monitor workplace rehabilitation strategies for injured workers (this may include Rehabilitation and Return to Work Plans) and to obtain treating practitioner approval for plans, as appropriate.
 - ii. Initiate early communication with an injured worker following injury and liaise with relevant internal and external parties.
 - iii. Maintain a file in a confidential manner for workers undertaking rehabilitation, including all documents, correspondence and accounts to protect the injured workers privacy.
 - iv. Maintain relevant statistics regarding workplace rehabilitation.
 - v. Ensure currency of this Procedure and Rehabilitation Coordinator accreditation.
 - vi. Provide injured workers with the opportunity to give feedback on the rehabilitation system and to document this feedback.
 - vii. Educate workers about the Workplace Rehabilitation Policy and Procedures and what to expect when an injury occurs and to provide education to supervisors regarding their role and responsibilities for rehabilitation.
- d. The Role of Managing Director:
- i. Ensure the region under their management and control; develops, implements and maintains an effective injury management and rehabilitation program.
- e. The Role of Human Resources Business Partner:
- i. Ensure that all processes used are consistent with current practice and to support Regional Rehabilitation and Return to Work Coordinators. Note in some regions of APAC HR have full responsibility for injury management and return to work, in others this is owned by the SH&E function.
- f. The Role of Managers, Supervisors and Team Leaders:
- i. Actively assist the Rehabilitation and Return to Work Coordinator in identifying and coordinating suitable duties/hours;
 - ii. Adjust workplace procedures and rosters to enable successful implementation of the plan;
 - iii. Monitor the injured worker's progress in relation to suitable duties; and

Generally offer support to any injured worker.

4. Terms and Definitions

Define only those terms mentioned within the document and list using 'Alpha List' option from the AECOM Procedure List dropdown on the Home tab.

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| a. | Worker/Employee | A person who works under an AECOM contract of employment. |
| b. | Work-Related Injury or Illness | An injury or illness sustained as a result of work activities OR on a journey to or from work, OR by aggravation of a pre-existing condition where employment is a <i>'significant'</i> contributory factor. |
| c. | Suitable Duties | Suitable duties are short-term work duties, agreed between the employer and the worker to assist the injured worker's rehabilitation. Suitable duties shall comply with a current medical certificate. |

- d. **Rehabilitation and Return to Work Plan** Is a written, formal offer of suitable duties by the employer to the injured worker. The Plan specifies the tasks the worker can and cannot do when they return to work. The plan is agreed by all relevant parties – the worker, supervisor, nominated treating doctor, return to work coordinator, and accredited rehabilitation provider (if applicable).
- e. **Rehabilitation and Return to Work Coordinator** The nominated person to coordinate the rehabilitation process for injured workers within AECOM.

5. Records

The following records shall be maintained:

- a. Employee information collected through the rehabilitation and return to work process shall be kept private and confidential.
- b. WorkCover/Local Authority medical certificates
- c. Copy of Compensation Application
- d. Incident Notification Form S3[APAC]-004-FM1
- e. Rehabilitation and Return to Work Case Notes template S3[APAC]-018-FM2
- f. Return to Work Capacity Assessment Form S3[APAC]-018-FM3
- g. Rehabilitation and Return to Work Consent Form S3[APAC]-018-FM1
- h. Rehabilitation and Return to Work Plan Template S3[APAC]-018-FM4
- i. Leave Application Form H3AN-500-FM2
- j. Tax invoices for medical treatment

6. Change Log

List the change history pertaining to this document including if it was identified differently throughout its life-cycle:

Rev #	Change Date	Description of Change	Location of Change
0	May 8, 2018	Initial Release	All