

A Physician's Guide

to Return to Work/Function

“Unemployment is an important determinant of ill-health, having detrimental impacts on mental, physical and social (family and community) well being. Health is affected through the mechanism of job loss (as a stressful life event) and the deleterious effect of chronic joblessness.”¹

As a physician treating an injured/ill worker/patient, you have an important role in helping to maintain the health of your patients, and to promote activities and plans for your patients that are of benefit to their health, active recovery in the event of a work-related injury or illness, and return to work in a safe and timely manner.

Developing strategies for occupational rehabilitation begins with the patient’s first visit, guided by the principle that safe and timely return to work is the desired outcome.

Your responsibility is to:

Assess: take an appropriate medical history (which includes the medical-occupational components) including daily activities and functional abilities and/or limitations; conduct a physical examination; and order appropriate investigations.

Diagnose: reach a working diagnosis of the medical condition and perform a functional assessment, including the individual’s specific capabilities.

Treat: follow an evidence-based approach.

Develop a Return to Work/Function Plan:

including appropriate referrals, consultations and discussion with the patient if the patient needs to be off work or on modified work. As part of your complete treatment plan, build in a return to work/return to function plan. The development of this plan begins with your patient's first visit.

Monitor: the recovery process, including identification of factors that impede or facilitate speedy recovery.

Report: initially and at periodic intervals during treatment and rehabilitation. If your patient is unable to work because of illness or injury, he or she may be eligible for some form of income replacement. You may need to complete paper work on his/her behalf.

Communicate:

- With your patient
- With other health care professionals
- With relevant authorities such as the Workplace Safety and Insurance Board of Ontario (WSIB) and other benefit providers
- With the patient's employer(s), worker representative(s) and family (with prior consent of the patient).

Timely and effective communication with the patient and with various other stakeholders who have an interest in the patient's well-being is critical to the success of any return to work plan.

Prevent: a recurrence of the condition in the same worker or an occurrence of the same condition in other workers. Ideally, this would involve determining the underlying associated or causative workplace factors of a work-related injury/illness and notifying the workplace parties and/or other authorities. Physicians play a key role in reducing the burden of illness and injury on individual sufferers as well as society as a whole.

What you should do in case of a work-related injury/illness:

As the physician who has examined and/or treated the injured/ill worker, you are required under Section 37(1) of the *Workplace Safety and Insurance Act* (reference 1) to “promptly” (i.e. within 48 hours) disclose any health-related information the WSIB may require. Much of the information the WSIB requires to make a decision on whether your patient’s injury or illness is work-related is provided through the completion of forms and reports. The forms you will be using are:

Physicians First Report, Form 8: This initial medical report is crucial to the patient and the WSIB. Physicians are urged to send medical reports to the WSIB within 2 working days following the medical assessment on which the report is based. If all the billing information is complete you will be paid a fee of \$23.54. The fee code is M640.

Physician’s Progress Report, Form 26: Treating physicians are required to provide on-going up-to-date medical information to the WSIB by completing and forwarding a Form 26 promptly. This form is generated and sent by the WSIB claims adjudicator every three to four weeks. If all the billing information is complete you will be paid a fee of \$23.54. The fee code is M643.

A progress report may also be submitted on letterhead anytime, if there is significant, new clinical information relevant to the work-related injury or illness.

The other form that you may be asked to complete is:

Functional Abilities Form for Timely Return to Work, Form 2647A: The WSIB requires employers and workers to cooperate in return to work efforts. The Functional Abilities Form for Timely Return to Work (Form 2647A) assists workers and employers in identifying suitable and available

work that is consistent with the worker's functional abilities or limitations. The *Act* requires that physicians complete Form 2647A when requested to do so by the employer or the employee. **Health professionals cannot initiate the completion of the form.** Health professionals are not expected to do a complete and thorough Functional Abilities Evaluation. Delay in completing the Form 2647A can result in a barrier to the return to work process. Physicians who provide a legible and complete form will receive a fee of \$40.00. The fee code is M901.

Note: Some employers have developed their own forms. The WSIB will not pay for the employer-generated form. Payments for employer-generated forms must be obtained from the employer who requested its completion

Timeliness: Failure to complete the documentation in a timely way after a request from any government or private insurance carrier could put your patient's coverage in jeopardy, and delay the decision-making process to the detriment of your patient.

Confidentiality: As part of the application for WSIB benefits your patient provided consent to the treating health care professional to release functional abilities information to his or her employer. The worker may either sign a copy of the Employer's Report of Injury/Disease, Form 7, or the Worker's Report of Injury/Disease, Form 6 or the Worker's Claim/Consent Form, Form 1492C.

Questions?

Call our new Access Line for Health Professionals 1-800-569-7919 or 416-344-4526 or visit the WSIB Web site at www.wsib.on.ca.

For WSIB clients with complex needs or return to work barriers: When you have a patient who has return to work barriers, a call to the client's nurse case manager or claims adjudicator may be helpful. The nurse case manager and adjudicator are experts in return to work planning and have a complete knowledge of WSIB resources that can help facilitate your patient's return to work. Your patient can provide you the name and telephone number of the adjudicator and nurse case manager.

Reference:

For an online version of Injury/Illness and Return to Work/Function, A Practical Guide for Physicians, Prepared by the **Physician Education Project in Workplace Health (PEPWH)**, go to www.wsib.on.ca/wsib.wsibsite.nsf/public/HealthPhysiciansGuideRTW



Pour obtenir ces renseignements en français
composez le 1-800-465-5606.
Telephone service for the deaf (TTY): 1-800-387-0050