

Workplace Rehabilitation Policy and Procedures

1. Policy Statement

The University, through its Occupational Health and Safety Policy, is committed to accident prevention, and health promotion. However, the University recognises that despite its best efforts, some injuries and illnesses may occur.

It is the policy of the University to support and contribute to the provision of workplace rehabilitation for all employees whose ability to carry out their duties is affected by injury or illness. This applies regardless of whether the injury or illness is work-related.

The University aims to maintain the injured/ill employee at work, without time off, where possible. Where time off is required, the aim is to ensure that return to work occurs as soon as medically advisable. Early return to work programs benefit both the injured/ill staff member and the University, and are recommended by the Division of Workplace Health and Safety and the WorkCover Authority.

The University supports a flexible approach to return-to-work programs so that, where practicable, the rehabilitation needs of the individual can be accommodated. However, it also acknowledges that return-to-work goals must be achieved within a realistic time frame.

Rehabilitation

Rehabilitation must be goal directed with timely and appropriate service provision having regard to the worker's injury; and the objectives of the rehabilitation plan; and the worker's rate of recovery. Strategies used in rehabilitation must be evaluated by the Ergonomics and Rehabilitation Adviser as the case progresses to monitor their effectiveness. Rehabilitation must focus on return to work. However, if the worker's injury is so severe that a return to work is precluded, rehabilitation must focus on maximising the worker's independent functioning.

Duties assigned to a worker for a suitable duties program must be meaningful and have regard to the objective of the worker's rehabilitation. The Ergonomics and Rehabilitation Adviser must ensure rehabilitation for a worker is coordinated with and understood by line managers, supervisors and co-workers. A worker must be treated with appropriate respect and equity.

The University is committed to the following priorities with respect to *final* outcomes of injury/illness.

- Priority 1: The employee returns to the same job.
- Priority 2: The employee returns to a modified version of the same job.
- Priority 3: The employee is redeployed to a different job preferably within the original department, or to another department
- Priority 4: The employee is unable to be redeployed within the University and as a last resort, employment is terminated on the grounds of ill health. (HAI Volume 2 Section 8.40 Medical Conditions Affecting performance (Injuries/Illnesses) Affecting Performance).

2. Rights of all parties

The injured or ill employee has the following rights with respect to workplace rehabilitation:

- To be actively consulted during all stages of the workplace rehabilitation process, and in particular, regarding any proposed change in their employment conditions and/or work organisation.
- To involve a union representative or other person of their choice at any time.
- To be treated by the treatment providers of their own choice.
- To be provided with copies of all reports related to their workplace rehabilitation management.
- To access a review of rehabilitation program mechanism in the event of any disagreement over the workplace rehabilitation process

The University has the right to:

- Enquire about staff who are absent from work for significant periods because of injury or illness, and obtain medical certification for illness/injury requiring longer than 3 days (General Staff) or 7 days (Academic Staff) absence from work.
- Determine, in consultation with such staff and their medical advisers, whether a workplace rehabilitation program is indicated.
- Require the injured/ill employee to attend a medical examination with a medical practitioner of the University's choice for the purposes of assessing or reviewing their condition.
- Determine, on objective performance measures, whether the injured/ill employee is fit to undertake suitable duties in relation to the workplace rehabilitation program.

3. Responsibilities of all parties

The injured or ill employee is expected to:

- Provide medical certification for illnesses/injuries which require longer than 3 days (General Staff) or 7 days (Academic Staff) absence, and facilitate communication between the Ergonomics & Rehabilitation Adviser and treating medical practitioner regarding workplace rehabilitation planning.

- Comply with reporting procedures outlined in Part 4 of this document.
- Co-operate with the development of, and participate in a workplace rehabilitation program.
- Take reasonable steps to ensure their recovery by complying with the suitable duties program at work, and not undertaking activities, (including those after work hours) which may hinder the recovery process.
- Report on their progress at regular intervals as required.
- Advise their manager and the rehabilitation co-ordinator immediately if their condition becomes worse, and/or inform them of any changes in their treatment.
- Cease any task which adversely affects their condition and report the problem immediately to their manager and the rehabilitation coordinator.
- Submit all certificates and reports relevant to the workplace rehabilitation program.
- Attend any medical examination arranged by the University for the purpose of assessing or reviewing their condition.

The Line Manager &/or Rehabilitation Coordinators are responsible for:

- Early identification of injured / ill workers who may need rehabilitation
- Notifying the Ergonomics & Rehabilitation Adviser and WIM Team of workers who may need rehabilitation.
- Coordinating and monitoring the progress of injured or ill workers as specified in their suitable duties program. (Problems should be discussed with the Ergonomics and Rehabilitation Adviser so that the program can be modified as needed)
- Liaising with the WIM Team and Ergonomics and Rehabilitation Adviser,

The list of Rehabilitation Co-coordinators and the areas that they cover is found in Appendix 5.

The Ergonomics and Rehabilitation Adviser is responsible for:

- Liaison with WIM Team Manager regarding improvement and maintenance of rehabilitation systems
- Request the worker's consent for the University WIM Team to obtain or release information associated with the worker's rehabilitation (refer to Application for Workers' Compensation Attachment 1).
- Undertake written communication with the treating doctor including appendices 2&3 of the University's Workplace Rehabilitation Policy.
- Development of Rehabilitation Program for individual workers and approval of Rehabilitation Programs in consultation with the treating medical practitioners (refer appendices 1 & 2)
- Obtain and document the written approval of the worker's treating doctor for all rehabilitation programs and amendments to rehabilitation programs.
- Overseeing the management of rehabilitation cases
- Conducting regular reviews of rehabilitation plans ie objectives, rehabilitation strategies, time frames and progress.
- Ensuring early worker contact for workers who sustain injuries
- Ensuring that all of the principal parties involved in workplace rehabilitation understand the program. This may include the injured/ill employee, the

rehabilitation co-ordinator, the line manager, the head of school (if appropriate) and other treatment providers, and Human Resources. .

- Ensuring that the suitable duties program is understood and coordinated by line managers, supervisors and coworkers.
- Providing expert advice for file review meetings
- Ensuring that rehabilitation focuses on work, however if the workers' injury is severe focus rehabilitation on maximum independent functioning.
- Monitoring and evaluating rehabilitation and return to work services
- Liaising with Case Manager regarding rehabilitation strategies.
- Maintaining records of staff on workplace rehabilitation programs as confidential, other than for the purposes of liaising with the principal parties (above).
- Arranging or assisting with referral and access to internal and external rehabilitation resources.
- Educating all levels of staff about the University's Workplace Rehabilitation Policy.
- Informing the worker of their entitlement to formal review of the rehabilitation process and referring worker requests for formal review of the workplace rehabilitation process to the Associate Director OH&S. (In the event of a disagreement over the workplace rehabilitation process, the worker will be asked to direct written details of their disagreement to the Executive Manager OH&S)

The Work Injury Management Team Case Manager is responsible for:

- Maintaining a current copy of the rehabilitation plan on file and ensuring its confidentiality.
- Integrating the strategies of the rehabilitation plan with the overall case management plan.
- Communicating claims management issues to the Ergonomics & Rehabilitation Adviser and discussing possible modifications to the rehabilitation plan.
- When appropriate, monitoring the rehabilitation activities.
- Ensuring that rehabilitation providers are paid promptly for their service.

Rehabilitation Service Providers (eg external rehabilitation service providers, the University Health Service) may be requested to provide the following services:

- Providing specific rehabilitation services (eg functional capacity assessments, worksite assessments, ergonomics evaluations, development of suitable duties programs)
- Contributing to the development of rehabilitation plans in collaboration with the Ergonomics and Rehabilitation Adviser.
- Liaising with principal parties involved in workplace rehabilitation. This may include the injured/ill employee, the supervisor other treatment providers, and Human Resources
- Assisting in the development of the suitable duties program.

Immediate supervisors/ line managers are responsible for:

- Ensuring that the responsibilities of themselves and employees are met with respect to injury reporting procedures (appendix 3).

- Assisting in the development and implementation of suitable duties programs for staff under their responsibility.
- Ensuring that the conditions agreed to in the suitable duties program are met, and that the program is complied with.
- Monitoring the day-to-day progress of the employee on suitable duties programs.

Heads of school are responsible for:

- Ensuring that employees under their responsibility, are aware of the University's Workplace Rehabilitation Policy.
- Ensuring that the responsibilities of themselves, the injured/ill employee and the supervisor have been met with respect to this policy. Particularly with regard to injury reporting procedures (appendix 3).
- Ensuring that all recommended modifications to the employees workplace and duties are made, where practicable, without delay. Where it is not practicable to implement such recommendations, the head of department should notify the University Ergonomics & Rehabilitation Adviser and the Work Injury Management Team.
- Employing, where practicable, temporary staff as required to maintain the school's essential operations and to ensure that unreasonable workloads are not imposed on others.
- Ensuring, where practicable, that all those concerned are aware of, and observe any work restrictions which apply to an employee on a suitable duties program.
- Encouraging, where practicable, an attitude of cooperation and support amongst other members of the department during the workplace rehabilitation period.

4. Injury Reporting and Rehabilitation Procedures

All work injuries should be reported immediately to the Manager and in accordance with the Injury Reporting Procedure Flow Chart (appendix 3), and when appropriate medical attention should be sort as soon as possible.

Early worker contact

A worker who sustains an injury and who requires rehabilitation will be contacted by the Ergonomics & Rehabilitation Adviser about rehabilitation as soon as practicable after the injury is sustained or is reported.

Refer to The Injury Reporting Procedure Flow Chart (appendix 3) for time frames and responsibilities for reporting.

Medical attention

Where medical attention beyond the level of first aid is required, it is desirable that staff consult the University Health Service. The University nominates the Health Service as its preferred provider of medical services to staff with work-related injuries and illnesses. However, it respects the right of individuals to consult an external practitioner if they so choose. In case of emergency the University Health Service should be used by the injured/ill party.

Staff are eligible to use the University Health Service for non work-related consultations when the appointment schedule permits. An appointment with one's own general practitioner is advised when the University Health Service appointment schedule is fully booked.

In the case of emergency the University Health Service will provide medical attention to staff.

Rehabilitation plan (Appendix 1)

- (1) A rehabilitation plan must be developed for each worker undertaking rehabilitation.
- (2) The plan must be consistent with the worker's needs.
- (3) The plan must be developed in consultation with the worker.
- (4) The plan must at least contain the following matters—
 - (a) clear and appropriate objectives with ways of achieving the objectives;
 - (b) details of rehabilitation required to meet the objectives;
 - (c) projected costs and time frames of rehabilitation;
 - (d) review mechanisms and dates for review;
 - (e) progress to date.

Case notes

- (1) Accurate and objective case notes must be kept for each worker undertaking rehabilitation.
- (2) Case notes must contain details of—
 - (a) all communications between the worker, the rehabilitation coordinator and other relevant parties; and
 - (b) actions and decisions; and
 - (c) reasons for actions and decisions.

All case notes must be dated and signed

Worker's Authority (see Application for Compensation Attachment 1)

The worker's written authority must be sought to obtain or release information regarding the rehabilitation plan.

Confidentiality

- (1) Information obtained during rehabilitation must be treated with sensitivity and confidentiality by all parties.
- (2) If it is necessary to obtain or release information associated with the worker's rehabilitation, the worker's authority to obtain or release the information must be obtained.
- (3) The worker's authority is not required for the release of information to WorkCover

5. Procedures for provision of suitable duties and other rehabilitation programs (refer also to Managing a Claim Procedure – Suitable Duties)

“Suitable Duties”

“Suitable duties, are work duties for which the worker is suited having regard to the following matters—the nature of the worker’s incapacity and pre-injury employment; relevant medical information; the rehabilitation plan for the worker; the provisions of the employer’s workplace rehabilitation policy and procedures; the worker’s age, education, skills and work experience; if duties are available at a location (the “other location”) other than the location in which the worker was injured—whether it is reasonable to expect the worker to attend the other location; any other relevant matters.

"Maintain-at-work" programs: where an injury or illness interferes with a person's ability to carry out their normal duties, but medical advice permits them to remain at work, a worksite assessment involving the injured/ill person, their supervisor, and the Ergonomics and Rehabilitation Adviser will be conducted. Aspects of the job which are considered barriers to remaining at work will be identified and advice sought from treatment providers (doctor, physiotherapist, etc.), if necessary. Where practicable, maintenance at work will be achieved by strategies such as modifications to the tools, equipment, furniture, or environment, the provision of assistive devices, protective equipment or special access, education in appropriate work practices, or the modification of duties (e.g. alternative duties initially, with a gradual return to normal duties). The injured/ill person's progress will be reviewed and changes made to the program as necessary.

Workplace Rehabilitation: where time off work is required (either workers compensation or sick leave), the Ergonomics and Rehabilitation Adviser will maintain communication between the injured/ill person, their supervisor, and their treatment providers. As soon as possible after the injury/ illness, an initial worksite assessment involving the injured/ill person (if fit to attend), their supervisor, Ergonomics and Rehabilitation Adviser will be conducted. Obvious and potential barriers to successful return to work will be identified, and workplace rehabilitation goals established. The injured/ill person's progress will be monitored on a regular basis by the rehabilitation coordinator. Once medical clearance has been given to return to work, and based on medical advice, a suitable duties program will be initiated.

The suitable duties program will be planned with the co-operation of the injured worker, the workplace manager, the treating medical practitioner, and the Work Injury Management Team Case Manager.

Provision of suitable duties: the aim of return to work programs is to provide meaningful productive work for staff who would otherwise remain away from work. Where staff are unable to perform their usual duties and alternative duties are required, the choice of duties will be made on the basis of the nature and severity of the injury/illness; restrictions imposed by treatment providers; previous work undertaken by the individual and their future employment objectives; the predicted time frame for workplace rehabilitation duties available in the department or elsewhere in the University.

Intensive rehabilitation (pre-work): individuals requiring intensive rehabilitation may

be referred to a Rehabilitation Centre for an assessment to determine their suitability for rehabilitation. Referrals require a letter from the injured person's treating doctor. For those accepted into the program, a range of centre-based and worksite-based services are available.

6. Review of workplace rehabilitation progress

Workplace rehabilitation progress will be monitored regularly by the worker's Manager, the Ergonomics and Rehabilitation Adviser, the rehabilitation co-ordinator in conjunction with the WIM Team. If continued workplace rehabilitation is required and the staff member's progress is satisfactory to all concerned, extensions of the workplace rehabilitation program may be approved. Programs will not extend beyond 3 months without an extensive reassessment of the case and its progress to date. Reassessment may involve consultation with and advice from any of the following parties, as applicable:

- the injured/ill staff member
- the head of school and/or manager
- a union representative
- the Ergonomics and Rehabilitation Adviser
- the Work Injury Management Team
- a Human Resources representative
- the University Health Service, treating doctor and other treatment providers
- the superannuation officer

7. Redeployment

Redeployment is the transfer of an injured/ill staff member from their existing position to another position within their department, or to a position in another University school. Transfer within the school /section will be considered as a first priority and will be facilitated by school /sectional staff, and the Work Injury Management Team. In the case that the staff member cannot return to their normal/modified duties and transfer within the school /section is not an option, the possibility of redeployment to another school /section requires consideration. Human Resources is responsible for the management of this process and further details are provided in HAI Volume 2.

The Ergonomics and Rehabilitation Adviser consults with relevant parties to determine the suitability of redeployment options with regard to functional capacities of the injured worker. The Ergonomics and Rehabilitation Adviser may arrange work assessment schemes for the purpose of a temporary redeployment or a trial to determine the suitability of permanent redeployment.

8. Retraining

Where staff are unable to return to their own position, and are unable to be redeployed to an alternative position, the University will, where practicable, assist with retraining. Assistance will be given to staff who are deemed to have good redeployment prospects within the University following retraining.

For staff on workers compensation, the Work Injury Management Team may be approached for financial assistance for short term retraining (i.e. 3 - 4 months duration short certificate courses, TAFE courses, licences, etc.). For staff not on workers compensation (either because they are not eligible or because their claim has ceased), the Commonwealth Rehabilitation Service may be able to offer financial assistance. Further details regarding retraining schemes are available from the Ergonomics and Rehabilitation Adviser.

9. Termination on the grounds of ill health

Where staff are unable to continue to be employed within the University (i.e. either returned to work, redeployed or retrained), the employee may elect to retire, or may be terminated on the grounds of ill health. Specific procedures for the termination of employment on the grounds of ill health of academic and general staff are available from Human Resources.

10. Worker Evaluation (Appendix 6)

4 months after completion of the workplace rehabilitation program (ie a successful return to work or completion of highest possible level of vocational functioning as specified in the rehabilitation plan) the worker will be provided with a worker evaluation form.

The worker will be asked to return it to the WIM Team so that the feedback can be used to contribute to the review and modification of the workplace rehabilitation processes.

Appendix 1

Request for Treating Doctor's Approval of the Rehabilitation Program

This document is used when early rehabilitation services have been provided and there is insufficient time to send the "Request for Physical Capacity Information from the Treating Doctor" letter before the return to work date.

In this case the physical capacity information on the medical certificate or from a conversation with the treating doctor is used to develop the workplace rehabilitation program. An ergonomics review of the duties is also done to ensure that physical/psychological demands do not exceed capacities and are gradually increased. Following the development of the workplace rehabilitation program, the "Request for Treating Doctor's Approval of the Rehabilitation Program" is forwarded for the treating doctor's consideration, and appropriate modifications are made if necessary. This document is a sample document and the format is used for the structuring of all such letters. The content is changed to suit individual requirements.

Copies of this document are sent to the worker, supervisor and Work Injury Management Team file.

Date

Treating Doctor's Name
Address

Dear Dr. _____,

Re: Injured worker's name
Address
Date of Birth

(Injured worker's name) is employed at the University of Queensland within the Property and Facilities Division. The University has an active rehabilitation policy and we encourage early return of our workers to full employment as soon as practicable following injury or illness. Where possible they are returned to their usual work or some alternative work within their capacity.

As the Ergonomics & Rehabilitation Adviser for the University, I request your consideration of a suitable duties program to ensure a safe resumption to work.

(Injured worker's name) pre-injury position was as a furniture removalist and this involved moving large and heavy items of furniture up and down stairways on a frequent basis. _____ has met with the Facilities Manager and me, to discuss changing his work duties permanently as a means of reducing the risk of further injury. At this stage _____ has expressed interest in changing to the new duties and the Facilities Manager has advised him that all work entitlements will remain unchanged if he does the new duties.

It is proposed that _____ commences the new duties on a graded program of physical demands and hours. Could you please consider the following proposed program, that includes the new duties, for _____ workplace rehabilitation program:

Week	Days/Hours	Duties
1	5 days 4 hours	Sorting mail into frames with 15kg max. weight Use of a sit-stand perch stool to reduce fatigue of lower limb General handling of mail bags, parcels and boxes with 15kg max weight. Occasionally answer phone. Operate a computer Weigh mail Accompany delivery driver without handling mail General housekeeping Avoid continuous standing for > than 30 minutes Avoid forceful pushing, pulling and lifting movements
2	5 days 6 hours	All of the above duties AND Picking stores items with a weight limit of 15 kg Pushing trolleys with stores items in them Wrapping stores items into parcels with a weight limit of 15kg Placing parcels onto benches for collection by drivers Avoid continuous standing for more than 60 minutes
3	5 days 7 hours & 15 minutes (Full time normal hours)	All duties from Weeks 1 & 2 AND Picking up parcels from the bench and putting them into van Driving the van to the delivery location Putting parcels into a trolley Moving the trolley into the building via lift or stairwell (it is a stair climbing trolley)

It is proposed that _____ returns to work on the suitable duties on Wednesday 10/10/01 on the graded program of hours. The duties outlined in Week 3 will become his permanent duties.

Could you please tick the appropriate response in relation to the proposed suitable duties program for _____.

_____ **It is considered appropriate for _____ to return to work on the proposed suitable duties on 10/10/01.**

_____ **It is considered appropriate for _____ to return to work on the proposed suitable duties program on 10/10/01 provided the following guidelines are adhered to:**

_____ **is not fit to return to work on suitable duties on 10/10/01, however he is fit to return to work on suitable duties on / /.**

We also request your consideration of referring _____ to the University Physiotherapy Clinic for treatment, as this would allow him easy access. Could you please indicate whether you approve this referral _____ **Yes or No.**

If you wish to discuss _____ workplace rehabilitation please contact me on 3365 6122.

Treating doctor's stamp:

Treating doctor's name:

Treating doctor's signature:

Date: / / .

Yours faithfully

Kris Fraser
Ergonomics & Rehabilitation Adviser

Appendix 2

Request for Physical Capacity Information from the Treating Doctor

This document is used in cases where there is sufficient time to correspond with the treating doctor regarding physical capacities before requesting the treating doctor's approval of the rehabilitation program. The physical capacities specified by the doctor are used in the development of the workplace rehabilitation program.

Date

Dear Dr

RE: Name of injured worker

Name of injured worker is employed as a <classification> at the University of Queensland. The University has an active rehabilitation policy and we encourage early return of our workers to full employment as soon as practicable following injury or illness. Where possible they are returned to their usual work or some alternative work within their capacity.

As the Ergonomics & Rehabilitation Advisor for the University, I would appreciate your help in formulating a rehabilitation programme to ensure a safe resumption to work.

Any information you could provide on the attached capabilities statement would be most useful in assisting us to provide meaningful duties. Additional information about the job can be provided for you if required.

Should it be possible to formulate a rehabilitation plan, your approval will be sought as required under Regulation 31 of the WorkCover QId Act 1996.

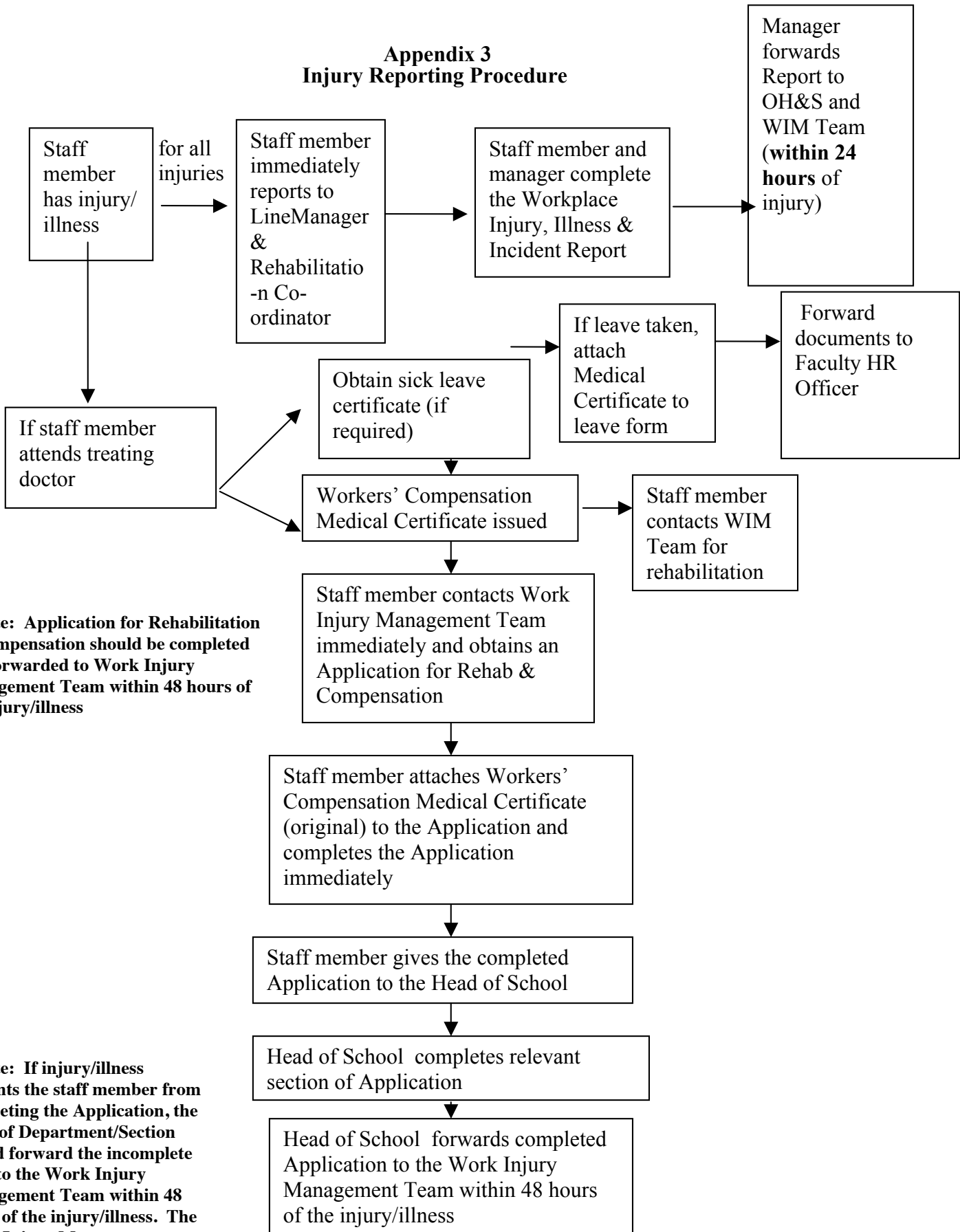
Occupational therapists can be used in the rehabilitation program where appropriate.

If any further information is required please contact me on 3365 2465. We look forward to your contribution to our rehabilitation team effort.

Yours sincerely,

Kris Fraser
Ergonomics & Rehabilitation Adviser

Appendix 3 Injury Reporting Procedure



◆ **Note:** Application for Rehabilitation & Compensation should be completed and forwarded to Work Injury Management Team within 48 hours of the injury/illness

◆ **Note:** If injury/illness prevents the staff member from completing the Application, the Head of Department/Section should forward the incomplete form to the Work Injury Management Team within 48 hours of the injury/illness. The Work Injury Management Team will assist the worker to complete the application.

Appendix 4

Workers Compensation return-to-work schemes:

'Medical expenses only' claim

This applies to the injured or ill employee who is able to return to work but requires some time off for treatment or medical appointments. This situation is covered by a 'medical expenses only' (MEO) claim, and requires a medical certificate from the treating doctor.

Fully funded suitable duties

On the advice of the treating doctor, the injured/ill worker returns to work (on a program) for a specified time period (maximum 2 weeks unless otherwise negotiated) to assess if they are able to cope with the demands of the job. The worker does not receive payment from their Department/Faculty is paid by the WIM Team. (refer appendix 8)

Partially funded suitable duties

The work trial applies where workers are able to return to work, but need a gradual return to work. In this case the Department/Faculty pays wages *for the hours worked* and the Work Injury Management Team supplements their pay according to a formula prescribed in the WorkCover Queensland Act 1996. The worker needs to have a current medical certificate. (refer appendix 8 & 9)

**Appendix 5
Rehabilitation Services Guide**

Work Injury Management Team ext. 56022 Ergonomics and Rehabilitation Adviser:
(OH&S Unit & WIM Team): ext 56122

Rehabilitation Coordinators

Name	Site
Kris Fraser (RC number: 5085 Expiry: 3/11/07)	St. Lucia Campus Carolyn Chisholm Centre Dayboro Veterinary Surgery Geology Seismic Station Heron Island Research Station Kenilworth Veterinary Surgery Herston Medical School North Queensland Clinical School Social & Preventative Medical Unit Greenslopes Private Hospital Prince Charles Hospital Julius Kruttschnitt Mineral Research Centre Dental School
Robyn Buck (RC number: 3939 Expiry: 1/9/06 Completed recertification in October 06)	Bribie Island Radio Research Station Carolyn Chisholm Centre Dayboro Veterinary Surgery Herston Medical Research Centre Kenilworth Veterinary Surgery Low Isles Research Station Herston Medical School Moreton Bay Research Station New Farm Consulting Suite Social & Preventative Medical Unit Mater Hospital Complex
Gerard Ross (RC number: 9763 Expiry: 29/10/09)	Gatton Campus Redland Bay Farm Mt. Cotton Farm Ipswich Campus Goondiwindi Pastoral Veterinary Centre
Eddie Delsorte (RC number: 15279 Expiry: 14/10/07)	Dental School
Anne Matyear (RC number: 13025 Expiry: 20/1/09)	Inala Community Health Centre Ipswich Campus
Brian Roberts (RC number: 13621 Expiry: 6/6/09)	Customs House

Appendix 6

WORKER EVALUATION FORM

- ◆ To be given to a worker 4 months after a successful return to work.
- ◆ On completion, collate and retain as statistics for this workplace.
- ◆ **To ensure that our Workplace Rehabilitation Policy & Procedures continue to meet our worker’s needs, please answer the following questions.**

1. Was your rehabilitation program what you expected? YES NO

If no, what was different?

2. What would you like to see changed in our rehabilitation program?

Signed: _____

Date:/...../.....