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Return-to-Work Policy

Roadmap reference: Support recovery

**(Insert organisation name)**

# Objective

This policy articulates **(Insert organisation name)** commitment to supporting and promoting the return-to- work process.

**(Insert organisation name)** recognises that returning to work following illness or injury is generally best for the worker and their organisation.

# Goals

We will:

* Support the worker through the recovery process, including through expressing positivity about prospects for recovery, while respecting privacy and personal space
* Assist workers to understand and access their leave options
* Encourage staff to return to work at the earliest practical opportunity, consistent with medical advice
* Involve affected staff (including the worker’s colleagues) in the return-to-work process
* Make the necessary reasonable adjustments to support return-to-work and ongoing recovery
* Develop a return-to-work plan specific to the affected worker and consistent with Health and Safety legislation
* Actively engage with stakeholder supports such as healthcare practitioners, occupational/ workplace rehabilitation specialists, and claims and insurance managers
* Provide accurate and timely information to workers about worker’s compensation
* Investigate and address the workplace factors that may have contributed to the worker’s injury or illness, so far as is reasonably practicable

# Scope

This policy applies to all staff of **(Insert organisation name and applicable geographical location)**

# Communication

**(Insert organisation names)** will ensure that:

* All leaders and managers are made aware of this policy
* This policy is considered when evaluating performance
* This policy is easily accessible to all members of the organisation
* Events and activities that support and promote this policy will be communicated to staff

# Monitoring and review

**(Insert organisation name)** will review this policy months after implementation and annually thereafter.

Date

Manager

Title {e.g. CEO, General Manager}

Signature

Date

Date of next review

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