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**Administrative Procedure**

# **PRC-PRO-HR-693**

## **Return to Work after Personal Medical-Related Condition or Absence**

Revision 4, Change 1

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Program: Human Resources

Topic: Human Resources

Technical Authority: Parnell, Lily

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# **Use Type: Administrative**



- 100 K Facility :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- 324 Facility :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Canister Storage Building/Interim Storage Area :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Central Plateau Surveillance and Maintenance :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Plutonium Finishing Plant :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Solid Waste Operations Complex :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Transportation :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions
- Waste Encapsulation Storage Facility :  
Excluded from USQ  
**Exclusion Reason:**  
N/A per PRC-PRO-NS-062 Bulleted List of Exclusions

**JHA:** Administrative

**Periodic Review Due Date:**05/19/2025

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## Change Summary

### Description of Change

Incorporated COVID-19 related information that was previously contained in a temporary Management Directive.

**Return to Work after Personal Medical-Related Condition or Absence**

Published Date: 09/17/20

Effective Date: 09/17/20

**TABLE OF CONTENTS**

1.0 INTRODUCTION ..... 2

    1.1 Purpose..... 2

    1.2 Scope ..... 2

    1.3 Applicability ..... 2

    1.4 Implementation ..... 2

2.0 RESPONSIBILITIES..... 2

3.0 PROCESS..... 3

    3.1 Returning from Personal Medical Condition or Absence ..... 3

    3.2 Returning from Short-Term Disability or Plant Injury/Illness (less than  
        six months)..... 7

    3.3 Returning from Long-Term Disability or Plant Injury/Illness (more than  
        six months)..... 10

    3.4 Returning to Work Following an Approved Leave of Absence Other Than  
        Military or Family Leave ..... 14

    3.5 Returning to Work From Family Medical Leave of Absence for Self, Caring  
        for Family Member, Bonding ..... 16

    3.6 Returning to Work From Military Leave of Absence ..... 18

4.0 FORMS ..... 19

5.0 RECORD IDENTIFICATION ..... 19

6.0 SOURCES ..... 19

    6.1 Requirements..... 19

    6.2 References..... 19

**Return to Work after Personal Medical-Related Condition or Absence**

Published Date: 09/17/20

Effective Date: 09/17/20

**1.0 INTRODUCTION****1.1 Purpose**

This procedure provides company level guidance to CH2M HILL Plateau Remediation Company (CHPRC) employees who are returning to work after a work-related or non-work-related medical condition or absence, or official leaves of absence.

**1.2 Scope**

This procedure defines individual responsibilities for employees returning to work after a medical condition or a brief (5 consecutive workdays, or an equivalent time period for those individuals on an alternative work schedule) personal medical absence or a short- or long-term disability (STD or LTD), plant injury or illness (PI), personal, educational, military, or family medical leave of absence.

**1.3 Applicability**

This Level 1 procedure applies to all regular full and part-time employees.

The return to work process described in this procedure is to be used by all CHPRC represented employees. Refer to the applicable collective bargaining agreement currently in force for specific return to work rights for each group of represented employees.

**1.4 Implementation**

This procedure is effective upon publication.

**2.0 RESPONSIBILITIES**

All responsibilities associated with this procedure are identified in the process steps.

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

### 3.0 PROCESS

#### 3.1 Returning from Personal Medical Condition or Absence

It is the employee's responsibility to contact management of a personal injury or illness, whether or not there was an absence from work, which involved hospitalization, an emergency room visit, outpatient surgery, or a doctor's visit for a major injury/illness.

Actionee	Step	Action
Employee	1.	NOTIFY immediate manager of personal injury or illness.
Manager	2.	INSTRUCT employee to contact the CHPRC Return to Work (RTW) Coordinator at 372-8266.
<p><b>NOTE:</b> <i>Major injury/illness includes those that may result in work restrictions, wounds, or potentially compromises occupational medical clearances. Management can initiate visit to HPMC Occupational Medical Services, the Hanford Site Occupational Medical Service Provider (OMSP), if the safety of the worker is a concern.</i></p>		
RTW Coordinator	3.	<p>INFORM the employee they will be required to present a written release from a personal health care provider to return to work after any of the following whether or not there was an absence:</p> <ul style="list-style-type: none"> <li>• An injury or illness that necessitates a visit to an emergency room when the results of the emergency room visit potentially impair the employee's ability to perform work or compromise fitness for duty</li> <li>• Admitted for hospitalization</li> <li>• Absent for 5 consecutive workdays or more due to personal injury or illness (See step 5 for additional guidance)</li> <li>• Outpatient surgery</li> <li>• Major injury/illness for which the employee sought treatment from a personal health care provider</li> <li>• A condition, procedure, or treatment that may negatively affect your ability to perform work in a safe and reliable manner</li> </ul>
<p><b>NOTE:</b> <i>In accordance with the Center for Disease Control guidelines, the OMSP will not require a physician's note indicating release from care for a COVID-19 or minor illness absence (e.g., common cold, flu).</i></p>		
Employee	4.	<p><u>IF</u> the condition warranted any treatment listed in step 3, <u>THEN</u>, prior to returning to work, OBTAIN a written release to return to work from a personal health care provider.</p>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
Employee	5.	<p><u>IF</u> you have been off work for 5 or more consecutive workdays due to any of the following reasons:</p> <ul style="list-style-type: none"> <li>• Head Injuries (i.e., concussion, stroke, brain tumor, or other brain injuries/medical conditions that may affect memory and cognition)</li> <li>• Psychiatric Disorders (i.e., depression, anxiety, and other mental health disorders)</li> <li>• Substance Abuse Disorders (i.e., residential treatment or <u>detoxification</u>)</li> </ul> <p><u>AND</u></p> <p><u>IF</u> your condition meets any of the medical criteria identified in step 3 above, <u>THEN</u> you must <b>first</b> CONTACT the OMSP Behavioral Health Services (BHS) department to begin the return-to-work process.</p> <ol style="list-style-type: none"> <li>a. MAKE an appointment with BHS (376-4418).</li> <li>b. To help reduce the potential for premature ending of disability benefits, CONTACT personal health care provider <u>AND</u> COORDINATE their approved return to work date with your BHS appointment date.</li> <li>c. BRING written release to return to work from personal health care provider to your BHS appointment.</li> <li>d. COMPLETE your BHS evaluation. BHS will then route you to HPMC OMS to finish the process and obtain a record of visit for your employer.</li> </ol>
	6.	<p><u>IF</u> released to return to work WITHOUT work restrictions, <u>THEN</u> call the HPMC Occupational Medical Services Scheduling Department at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
Employee	7.	<p>COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step), with personal health care provider's written release to return to work, if required, for assessment.</p> <ol style="list-style-type: none"> <li>a. OBTAIN OMSP Record of Visit.</li> <li>b. REPORT to work location <u>AND</u> PROVIDE the OMSP Record of Visit to Manager.</li> </ol>
	8.	<p><u>IF</u> released to return to work WITH restrictions <u>THEN</u> call the HPMC Occupational Medical Services Scheduling Department at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p>
	9.	<p>COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step), with personal health care provider's written release to return to work and restrictions for assessment.</p> <ol style="list-style-type: none"> <li>a. OBTAIN the following from the OMSP: <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i> (Site Form A-6000-939)</li> <li>• OMSP Record of Visit</li> </ul> </li> <li>b. CHECK IN with the CHPRC Receptionist, Room 150, 825 Jadwin (Federal Building), prior to meeting with the RTW Coordinator.</li> <li>c. REPORT to the CHPRC RTW Coordinator with the following: <ul style="list-style-type: none"> <li>• Written release and work restrictions</li> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul> </li> </ol>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

<i>Actionee</i>	<i>Step</i>	<i>Action</i>
RTW Coordinator/ Manager	10.	<p><u>IF</u> employee is released to return to work WITH restrictions, <u>THEN</u> USE information provided by the OMSP to determine whether the employee can:</p> <ul style="list-style-type: none"> <li>• Safely perform the essential functions of the current position, with or without reasonable accommodations.</li> <li>• Work without posing a direct threat to the health and safety of others.</li> </ul> <p><u>AND</u></p> <p>a. <u>IF</u> an accommodation is required <u>OR</u> the employee has restrictions, <u>THEN</u> REFER TO PRC-PRO-HR-048, <i>Reasonable Accommodations to Work Restrictions</i>.</p> <p>b. <u>IF</u> condition is work-related and restrictions cannot be accommodated, <u>THEN</u> INVOLVE the Case Management Specialist. See PRC-PRO-HR-048.</p> <p><b>NOTE:</b> <i>If no accommodation(s) can be made or no suitable position is found, the employee will not be released to return to work.</i></p> <p>c. <u>IF</u> condition is non-work related and restrictions cannot be accommodated, <u>THEN</u> SEND employee to the Mission Support Alliance (MSA) Benefits Administration office for information on applying for short-term disability.</p>
RTW Coordinator/ Manager	11.	<p><u>IF</u> employee is not released to return to work, <u>THEN</u> SEND employee home for follow-up with personal health care provider.</p> <p><b>NOTE:</b> <i>In this situation, the Benefits Return to Work Route Slip is not retained as a record.</i></p>
RTW Coordinator	12.	<p><u>IF</u> employee is released to return to work, <u>THEN</u> SIGN OFF the <i>Benefits Return to Work Route Slip</i> (Site Form A 6000 939).</p> <p>a. RETURN to the employee the OMSP Record of Visit and release to return to work from personal health care provider.</p> <p>b. RELEASE employee to report to manager.</p>
Employee	13.	<p>REPORT to assigned work location <u>AND</u> PROVIDE manager with copy of the OMSP Record of Visit.</p>



## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

### 3.2 Returning from Short-Term Disability or Plant Injury/Illness (less than six months)

<i>Actionee</i>	<i>Step</i>	<i>Action</i>
Employee	1.	<p>NOTIFY the RTW Coordinator at 372-8266 and immediate manager of the planned return to work date and any restrictions.</p> <p>a. <u>IF</u> the absence was due to personal injury/illness, <u>THEN</u> CONTACT the MSA Benefits Administration office.</p> <p>b. <u>IF</u> the absence was due to a plant injury/illness, <u>THEN</u> CONTACT the Workers' Compensation Specialist at 376-1314.</p>
	2.	<p>Prior to returning to work, OBTAIN a written release from a personal health care provider and any restrictions (if applicable).</p> <p>a. <u>IF</u> the condition warrants a visit to BHS as described in Section 3.1, step 5, <u>THEN</u> you must <b>first</b> MAKE an appointment with BHS (376-4418).</p>
	3.	<p>CALL the HPMC Occupational Medical Services Scheduling Department at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p>
	4.	<p>COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step) with personal health care provider's written release to return to work and any restrictions (if applicable) for assessment.</p> <p>a. OBTAIN the following from OMSP:</p> <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

<i>Actionee</i>	<i>Step</i>	<i>Action</i>
Employee	5.	<p><u>IF</u> there are no restrictions and returning from STD, <u>THEN</u> REPORT to Central Badging with <i>Benefits Return to Work Route Slip</i> (A-6000-939), <u>AND</u> REPORT to MSA Benefits Administrator at 1981 Snyder with the following:</p> <ul style="list-style-type: none"> <li>• Written release to return to work from personal health care provider</li> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>
RTW Coordinator	6.	<p>RECEIVE <i>Benefits Return to Work Route Slip</i> from MSA Benefits Administrator, <u>THEN</u> INITIAL, DATE, <u>AND</u> RECORD time on <i>Benefits Return to Work Route Slip</i>.</p> <p>a. RETURN <i>Benefits Return to Work Route Slip</i> to MSA Benefits Administrator.</p> <p>b. INSTRUCT employee to report Dosimetry if applicable.</p>
Human Resources (HR) Records Admin	7.	<p>RECEIVE completed <i>Benefits Return to Work Route Slip</i> from MSA <u>AND</u> HANDLE in accordance with PRC-PRO-HR-030, <i>Managing Employee Personnel File Information</i>.</p>
Employee	8.	<p><u>IF</u> there are no restrictions and returning from plant injury or illness <u>THEN</u> REPORT to Workers' Compensation Administrator at MO2740 W with the following:</p> <ul style="list-style-type: none"> <li>• Written release to return to work from personal health care provider</li> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>
	9.	<p><u>IF</u> there are work restrictions <u>THEN</u> REPORT to RTW Coordinator with the following:</p> <ul style="list-style-type: none"> <li>• Written release to return to work from a personal health care provider and any restrictions (if applicable)</li> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
RTW Coordinator/ Manager	10.	<p>USE information provided by the OMSP to determine whether the employee can:</p> <ul style="list-style-type: none"> <li>• Safely perform the essential functions of the job, with or without reasonable accommodations.</li> <li>• Work without posing a direct threat to the health and safety of others.</li> </ul> <p>a. <u>IF</u> an accommodation is required or the employee has restrictions, <u>THEN</u> REFER TO PRC-PRO-HR-048.</p> <p>b. <u>IF</u> the condition is work-related and restrictions cannot be accommodated <u>THEN</u> INVOLVE the Case Management Specialist. See PRC-PRO-HR-048.</p>
RTW Coordinator/ Manager/ HR Representative	c.	<p><u>IF</u> the condition is non-work related and restrictions cannot be accommodated, <u>THEN</u> SEND the <i>Benefits Return to Work Route Slip</i> and OMSP Record of Visit to MSA Benefits Administration office (if applicable).</p>
<p><b>NOTE:</b> <i>If no accommodation(s) can be made or no suitable position is found, the employee will not be released to return to work.</i></p>		
	11.	<p><u>IF</u> employee is not released to return to work, <u>THEN</u> SEND employee home to follow-up with a personal health care provider.</p>
RTW Coordinator	12.	<p><u>IF</u> employee is released to return to work from STD with restrictions <u>THEN</u> SIGN OFF on the <i>Benefits Return to Work Route Slip</i> <u>AND</u> SEND copy of <i>Benefits Return to Work Route Slip</i> and OMSP Record of Visit to MSA Benefits Administrator indicating the employee is released to continue with next step (e.g., Central Badging, Dosimetry if applicable).</p> <p>MSA Benefits Administrator will sign and return <i>Benefits Return to Work Route Slip</i> to RTW Coordinator and HR Records.</p>
	13.	<p>RECEIVE the signed <i>Benefits Return to Work Route Slip</i> <u>AND</u> RETURN to the employee the <i>Benefits Return to Work Route Slip</i> (along with other return to work documentation).</p> <p>a. INFORM employee of next step (e.g., Central Badging, Dosimetry if applicable).</p>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
HR Records Admin	14.	RECEIVE completed <i>Benefits Return to Work Route Slip</i> from MSA <u>AND HANDLE</u> in accordance with PRC-PRO-HR- 030, <i>Managing Employee Personnel File Information</i> .
RTW Coordinator	15.	INFORM employee they are not officially released to return to work until all steps are completed in the return to work process.
Employee	16.	REPORT to Access Control and Dosimetry (if applicable), and then to assigned work location.
	17.	PROVIDE manager with copy of the OMSP Record of Visit.
Manager	18.	ENSURE the employee's training certifications, qualifications, and Employee Job Task Analysis (EJTA) are current.

### 3.3 Returning from Long-Term Disability or Plant Injury/Illness (more than six months)

Actionee	Step	Action
Employee	1.	NOTIFY the RTW Coordinator at 372-8266 and immediate manager of the planned return to work date and any restrictions (if applicable).  a. <u>IF</u> the absence was due to a plant injury/illness, <u>THEN CONTACT</u> the Workers' Compensation Specialist at 376-1314.
	2.	Prior to returning to work, OBTAIN a written release to return to work and any restrictions (if applicable) from a personal health care provider.
Manager/ HR Representative	3.	<u>WHEN</u> notified of planned return to work date, <u>THEN SCHEDULE</u> a Work Suitability Exam with the OMSP.
	4.	<u>IF</u> a suitable position is not found, <u>THEN CONTACT</u> Labor Relations to determine the availability of assignments.
Employee	5.	On the day of the scheduled Work Suitability Exam, REPORT to the OMSP at 1979 Snyder Street in Richland with personal health care provider's written release to return to work and any restrictions (if applicable) for assessment.  a. Following the exam, RETURN home <u>AND WAIT</u> for further instruction from the RTW Coordinator.

**NOTE:** *The Manager/HR Representative determines if a Bargaining Unit employee can return to the position held at the time of leave, if the position is still open.*

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
RTW Coordinator/ Manager/ HR Representative	6.	USE information provided by the OMSP to determine whether the employee can: <ul style="list-style-type: none"> <li>• Safely perform the essential functions of the job, with or without reasonable accommodations.</li> <li>• Work without posing a direct threat to the health and safety of others.</li> </ul> <p>a. <u>IF</u> an accommodation is required, <u>OR</u> <u>IF</u> the employee has work restrictions, <u>THEN</u> REFER TO PRC-PRO-HR-048.</p>
Manager/ HR Representative	7.	VERIFY employee's HGET is current.
	8.	<u>IF</u> HGET is current, <u>THEN</u> PROCEED with return to work process. <p>a. <u>IF</u> HGET is not current, <u>THEN</u> PROVIDE a training charge code to the RTW Coordinator:</p>
	9.	<u>IF</u> a suitable position is found, <u>THEN</u> INSTRUCT employee to report back to the OMSP to start the return to work process.
Employee	10.	CHECK IN with the CHPRC Receptionist, Room 150, 825 Jadwin (Federal Building), prior to meeting with the RTW Coordinator.
	11.	REPORT to RTW Coordinator with appropriate documentation to continue the return to work process: <ul style="list-style-type: none"> <li>• Written release to return to work from a personal health care provider and any restrictions (if applicable)</li> <li>• <i>Benefits Return to Work Route Slip</i> (Site Form A-6000-939)</li> <li>• OMSP Record of Visit</li> </ul>
RTW Coordinator	12.	INFORM employee they are not officially released to return to work until all steps are completed in the return to work process.
	13.	PROVIDE MSA Benefits with the <i>Benefits Return to Work Route Slip</i> , OMSP Record of Visit, and Work Suitability Report.
HR Records Admin	14.	RECEIVE completed <i>Benefits Return to Work Route Slip</i> from MSA <u>AND</u> HANDLE in accordance with PRC-PRO-HR- 030, <i>Managing Employee Personnel File Information</i> .

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
Employee	15.	REPORT to Vivid Learning Center to complete HGET and Access Control and Dosimetry (if applicable) prior to reporting to assigned work location (if applicable).
Manager	16.	ENSURE the employee's training certifications, qualifications, and EJTA are current.
<p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>• <i>Non-Bargaining: If there are no positions available that are commensurate with salary level and qualifications, the employee on LTD leave will be subject to termination. In the case of returning from PI, the employee may be eligible for involuntary separation benefits.</i></li> <li>• <i>Bargaining Unit: The employee will return to the position held at the time of leave if the position is still available. If the position is not available, the company will follow the process as specified by the Collective Bargaining Agreement (CBA).</i></li> </ul>		
RTW Coordinator/ Manager/ HR Representative	17.	<p><u>IF</u> a suitable position is not found, <u>THEN</u> CONTACT Labor Relations to determine the availability of assignments.</p> <p>a. MAINTAIN contact with the employee while evaluation of assignment availability is being conducted.</p>
Labor Relations	18.	REVIEW current project needs to see if other positions are available within the company.
<p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>• <i>Open positions will be filled by oldest posting date first.</i></li> <li>• <i>If there are no open positions, the Bargaining Unit employee will bump the lowest person on the current seniority listing for their classification on the Hanford Site provided that the employee has seniority greater than the least senior in the classification.</i></li> </ul>		
	19.	<p><u>IF</u> no positions are available within CHPRC, <u>THEN</u> FOLLOW UP with other Hanford Contractors Labor Relations to inquire of open positions to be filled.</p>
	20.	NOTIFY HR/Manager/RTW Coordinator/Records/other contractor with the location that the employee will need to go.
	21.	COMPLETE a <i>HAMTC Transfer Notice</i> (Site Form A-6002-743) <u>AND</u> HAVE the receiving company Labor Relations sign the form.
RTW Coordinator	22.	NOTIFY Worker's Compensation Specialist to see if the employee owes any arrears (see note below).

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
Labor Relations	23.	NOTIFY Dosimetry to have an exit Dosimetry scheduled before the transfer.
	24.	CONTACT Other Hanford Contractors HR department <u>AND</u> WORK OUT a transfer date as early as possible once Exit Dosimetry and Worker's Compensation are complete.
	25.	NOTIFY Employee with scheduled appointments and reporting instructions.
	26.	Prior to transfer date, NOTIFY HR Records department <u>AND</u> PROVIDE <i>HAMTC Transfer Notice</i> to restore service dates of employee.
HR Records Admin	27.	FILE the completed <i>HAMTC Transfer Notice</i> in accordance with PRC-PRO-HR-030.
<p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>• <i>Bargaining Unit Owing Arrears: IF the employee is in arrears, HR/WC will work with the employee to collect the funds upon returning or filling out a promissory note if they are not moving to another contractor.</i></li> <li>• <i>If a bargaining unit employee is being transferred to another company and the employee cannot pay for the arrears amount, then it is possible to pay by using their personal time bank (PTB). To receive a cash-out distribution of PTB hours, a Request for Personal Time Bank Cash-Out HAMTC Employees (Site Form A-6005-484), is used and sent to Payroll. In addition, if the employee needs to fall below the contract amount in reserve of 120 hours, then an MOU through Labor Relations can be negotiated if HAMTC and local union approve the exception to the contract.</i></li> </ul>		
Labor Relations	28.	SEND RTW Coordinator, Dosimetry appointment, notice regarding arrears, and reporting instructions.
	29.	COLLECT arrears prior to transfer, as a promissory note is not intercompany.

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

### 3.4 Returning to Work Following an Approved Leave of Absence Other Than Military or Family Leave

Actionee	Step	Action
Employee	1.	NOTIFY the RTW Coordinator at 372-8266 and immediate manager of desire to return to work.
	<b>NOTE:</b>	<ul style="list-style-type: none"> <li>• <i>Re-instatement is contingent upon the following conditions of employment:</i> <ul style="list-style-type: none"> <li>○ <i>Favorable drug screen results</i></li> <li>○ <i>Favorable responses to the pre-employment background investigation</i></li> <li>○ <i>Meeting the medical requirements for the position</i></li> <li>○ <i>Other conditions of employment imposed by the U.S. Department of Energy, Safeguards and Security Division</i></li> </ul> </li> <li>• <i>An employee will not be entitled to reinstatement if their former position was eliminated due to a reduction in force or reorganization if they would have been affected by the change had they not been on leave, subject to any veteran's or family leave rights the employee might have.</i></li> <li>• <i>If there is no position available, the employee on personal or educational leave will be subject to termination.</i></li> </ul>
RTW Coordinator/ Manager/HR Representative	2.	<p>DETERMINE if there is an available position commensurate with employee's salary level and qualifications.</p> <ol style="list-style-type: none"> <li>a. <u>IF</u> there is an available position, <u>THEN</u> DIRECT employee to proceed to step 3.</li> <li>b. <u>IF</u> there is no available position and employee is returning from personal or educational leave, <u>THEN</u> PROCESS appropriate termination paperwork.</li> <li>c. <u>IF</u> there is an available position and the employee has been absent for more than 180 days, <u>THEN</u> PROCESS a medical evaluation through the OMSP and safeguard and security requirements will need to be met as with pre-employment prior to continuing with step 3.</li> </ol>



## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

<i>Actionee</i>	<i>Step</i>	<i>Action</i>
Employee	3.	<p>CONTACT the HPMC Occupational Medical Services Scheduling Department at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p>
	4.	<p>COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step) <u>AND</u> OBTAIN a <i>Benefits Return to Work Route Slip</i> (Site Form A-6000-939).</p>
	5.	<p>REPORT to RTW Coordinator with the <i>Benefits Return to Work Route Slip</i>.</p>
RTW Coordinator	6.	<p>SIGN the <i>Benefits Return to Work Route Slip</i> (if applicable) <u>AND</u> PROVIDE instructions for employee to report to Access Control and Dosimetry, prior to reporting to their assigned work location.</p>
	7.	<p>PROVIDE completed <i>Benefits Return to Work Route Slip</i> to Human Resources Records.</p>
HR Records Admin	8.	<p>FILE the completed <i>Benefits Return to Work Route Slip</i> in accordance with PRC-PRO-HR-030.</p>
Manager	9.	<p>ENSURE the employee's training certifications, qualifications and EJTA are current.</p>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

### 3.5 Returning to Work From Family Medical Leave of Absence for Self, Caring for Family Member, Bonding

Actionee	Step	Action
Employee	1.	NOTIFY the RTW Coordinator at 372-8266 and immediate manager of planned return to work date.
Manager	2.	<p><u>IF</u> the leave was for a medical condition for the employee, <u>THEN</u> INSTRUCT employee to contact the RTW Coordinator at 372-8266 <u>and</u> the OMSP at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p>
Manager/ RTW Coordinator	3.	INFORM the employee they may be required to present a written release to return to work from a personal health care provider.
	4.	<p><u>IF</u> the leave was for the care of a family member or bonding, <u>THEN</u> INSTRUCT employee to contact the RTW Coordinator at 372-8266 <u>and</u> the OMSP at one of the following numbers between the hours of 6 a.m. and 4 p.m.:</p> <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997.</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p> <p>A written release from a health care provider is not needed in this case.</p>

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

Actionee	Step	Action
Employee	5.	<p>COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step) with personal health care provider's written release to return to work and any restrictions for assessment, if applicable.</p> <p>a. OBTAIN the following from the OMSP:</p> <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>
Employee	6.	CHECK IN with the CHPRC Receptionist, Room 150, 825 Jadwin (Federal Building), prior to meeting RTW Coordinator.
	7.	<p>REPORT to RTW Coordinator with the following:</p> <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i> (Site Form A-6000-939)</li> <li>• OMSP Record of Visit</li> </ul>
RTW Coordinator/ Manager	8.	<p>USE information provided by the OMSP to determine whether the employee can:</p> <ul style="list-style-type: none"> <li>• Safely perform the essential functions of the job, with or without reasonable accommodations.</li> <li>• Work without posing a direct threat to the health and safety of others.</li> </ul> <p>a. <u>IF</u> an accommodation is required or the employee has work restrictions, <u>THEN REFER TO PRC-PRO-HR-048.</u></p> <p>Conditions and restrictions that cannot be accommodated may be considered a voluntary quit.</p>
		<p><b>NOTE:</b> <i>An employee will not be entitled to reinstatement if their former position was eliminated due to a reduction in force or reorganization if they would have been affected by the change had they not been on leave, subject to any veteran's or family leave rights the employee might have.</i></p>
RTW Coordinator	9.	SIGN the <i>Benefits Return to Work Route Slip</i> (if applicable) <u>AND PROVIDE</u> instructions for employee to report to Access Control and Dosimetry, prior to reporting to their assigned work location.
	10.	PROVIDE completed <i>Benefits Return to Work Route Slip</i> to Human Resources Records.
HR Records Admin	11.	FILE the completed <i>Benefits Return to Work Route Slip</i> in accordance with PRC-PRO-HR-030.

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

### 3.6 Returning to Work From Military Leave of Absence

Actionee	Step	Action
Employee	1.	NOTIFY the RTW Coordinator at 372-8622 and immediate manager of planned return to work date following military service.
RTW Coordinator/ Manager/HR Representative	2.	DETERMINE if there is an available position commensurate with employee's salary level and qualifications.
	3.	FOLLOW appropriate legal requirements for re-employment.
	4.	INSTRUCT employee to contact the RTW Coordinator at 372-8266 <u>and</u> the OMSP at one of the following numbers between the hours of 6 a.m. and 4 p.m.: <ul style="list-style-type: none"> <li>• COVID related absence: 509-376-8378 (376-TEST)</li> <li>• Non-COVID related absence: 509-376-9997.</li> </ul> <p>The HPMC Scheduling Department will screen the individual health situation and reason for return to work. Based on this screening, HPMC may elect to process the return to work telephonically, if medically possible. If not, an appointment will be scheduled at 1979 Snyder Street in Richland.</p> <p>A written release from a health care provider is not needed in this case.</p>
Employee	5.	COMPLETE medical screening with the OMSP (in person or telephonically as determined in previous step) <u>AND</u> OBTAIN the following: <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i> (Site Form A-6000-939)</li> <li>• OMSP Record of Visit</li> </ul>
	6.	CHECK IN with the CHPRC Receptionist, Room 150, 825 Jadwin (Federal Building), prior to meeting RTW Coordinator.
	7.	REPORT to RTW Coordinator with the following: <ul style="list-style-type: none"> <li>• <i>Benefits Return to Work Route Slip</i></li> <li>• OMSP Record of Visit</li> </ul>
	<b>NOTE:</b>	<i>An employee will not be entitled to reinstatement if their former position was eliminated due to a reduction in force or reorganization if they would have been affected by the change had they not been on leave, subject to any veteran's or family leave rights the employee might have.</i>
RTW Coordinator	8.	SIGN the <i>Benefits Return to Work Route Slip</i> (if applicable) <u>AND</u> PROVIDE instructions for employee to report to Access Control and Dosimetry, prior to reporting to their assigned work location.

## Return to Work after Personal Medical-Related Condition or Absence

Published Date: 09/17/20

Effective Date: 09/17/20

<i>Actionee</i>	<i>Step</i>	<i>Action</i>
RTW Coordinator	9.	PROVIDE completed <i>Benefits Return to Work Route Slip</i> to Human Resources Records.
HR Records Admin	10.	FILE the completed <i>Benefits Return to Work Route Slip</i> in accordance with PRC-PRO-HR-030.

### 4.0 FORMS

*Occupational Medical Service Provider (OMSP) Record of Visit*

*Benefits Return to Work Route Slip, A 6000 939*

*HAMTC Transfer Notice, A-6002-743*

*Request for Personal Time Bank Cash-Out for HAMTC Employees Only, A-6005-484*

### 5.0 RECORD IDENTIFICATION

None

### 6.0 SOURCES

#### 6.1 Requirements

10 CFR 851, Appendix A, Part 8, *Worker Safety and Health Program, Occupational Medicine*

29 CFR 825, *Family and Medical Leave Act of 1993*

RCW Title 49, *Chapter 49.78, Family Leave*

RCW Title 73, Chapter 73.16, *Employment and Reemployment*

38 USC, Part III, Chapter 43, Subchapter II, Sections 4312, *Reemployment rights of persons who serve in the uniformed services*, and 4313, *Reemployment positions*

#### 6.2 References

PRC-PRO-HR-030, *Managing Employee Personnel File Information*

PRC-PRO-HR-048, *Reasonable Accommodations to Work Restrictions*