

# Employer's Return To Work Plan

Our employer customers should also refer to CGU's *Employer's Guide to Developing a RTW Plan*



<b>Return To Work (RTW) Plan Number</b>	
<b>Injured Worker's Name</b>	<b>Claim Number</b>

In NSW, it is the responsibility of the employer to develop a RTW Plan in consultation with your injured worker. Where required, CGU assist you in the development of these plans. You must ensure CGU has a copy of the worker's most current RTW Plan at all times

This RTW Plan has been developed to guide the worker's recovery from injury and to ensure the return to work process is safe. The plan outlines the worker's treatment, suitable duties, timeframes and steps to be taken to support the worker's return to pre-injury duties (unless otherwise stipulated.)

Employer							
Pre injury job title							
Work location							
Pre injury days	Mon	Tues	Wed	Thur	Fri	Sat	Sun
Pre injury hours							
Description of pre injury duties							
Return to work goal							
Date expected to achieve RTW goal							
Current medical certificate	Start date			End date			
Current capabilities (as per WorkCover Medical Certificate)							

- The worker is encouraged to:**
- Attend the Nominated Treating Doctor to obtain a current WorkCover medical certificate
  - Notify the employer as soon as possible if unable to attend work or is encountering any difficulties attending to this RTW Plan

**Suitable Duties** are temporary tasks agreed to between you and your worker. They take into account the worker's capabilities (as per WorkCover Medical Certificate), whilst the worker recovers from injury. Performance of suitable duties assists the worker's rehabilitation by maintaining a link to the workplace.

SUITABLE DUTIES (STAGE 1)							
Suitable duties role							
Location							
Commencement date				Completion date			
Person monitoring RTW				Phone number			
RTW days	Mon	Tues	Wed	Thur	Fri	Sat	Sun
RTW hours							
Duties to be performed and considerations							
Specific duties to be avoided							

SUITABLE DUTIES (STAGE 2)							
Suitable duties role							
Location							
Commencement date				Completion date			
Person monitoring RTW				Phone number			
RTW days	Mon	Tues	Wed	Thur	Fri	Sat	Sun
RTW hours							
Duties to be performed and considerations							
Specific duties to be avoided							

Treatment arrangements - where possible, appointments to be scheduled outside work hours, unless agreed to by employer	
Treatment type	
Appointment dates/times	
Treatment type	
Appointment dates/times	

The following parties have agreed to this RTW Plan. Please provide a copy of this RTW Plan to the worker's Nominated Treating Doctor and treating therapist to ensure all healthcare is coordinated. **You must provide CGU with a copy of this RTW Plan.**

Injured worker	Signature	Date
Employer representative	Signature	Date
Nominated treating doctor	Signature	Date
Next review	Signature	Date