

Task Title: Modified Work Policy Statement

# OALCF Cover Sheet – Practitioner Copy

**Learner Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Started (m/d/yyyy):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Completed (m/d/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Successful Completion:**  Yes No

|  |  |  |
| --- | --- | --- |
| **Goal Path:** | Employment | Apprenticeship |
| Secondary School | Post Secondary | Independence |

**Task Description:**

Understanding a modified work program policy for employees who are returning to work after an injury/illness.

**Main Competency / Task Group / Level Indicator:**

* Find and Use Information/Read continuous text/A1.2
* Communicate Ideas and Information/Complete and create documents/B3.2a

**Performance Descriptors:** See chart on last page

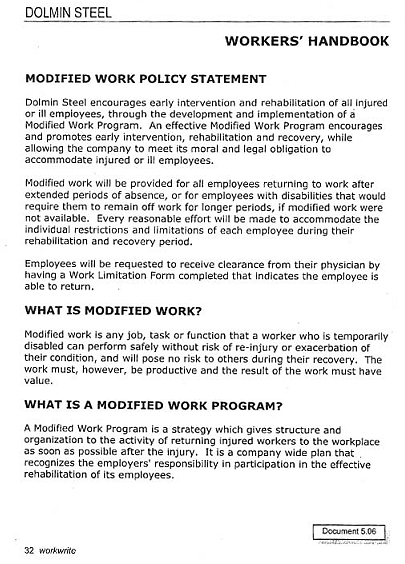
**Materials Required:**

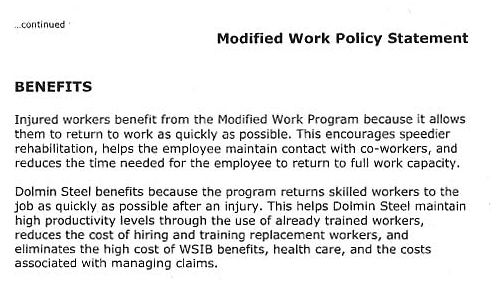
* Modified Work Policy Statement
* Task Set, Pen/pencil or digital device

# Learner Information

Employees who are returning to work after an illness or injury may require a modified work program.

Read the “Modified Work Policy Statement” seen on pages 2 and 3.





# Work Sheet

**Task 1: Following an injury or illness, who provides clearance before   
 an employee returns to work?**

Answer:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Task 2: What form must be completed to indicate the employee is   
 able to return to work?**

Answer:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Task 3: List two benefits for the employer and two benefits for the employee for using a modified work program.**

Answer:

**Modified Work Program**

|  |  |
| --- | --- |
| **Benefits to the employer** | **Benefits to the employee** |
|  |  |
|  |  |

# Answer Key

**Task 1:** Following an injury or illness, who provides clearance before an employee returns to work?

**Clearance must be given by the employee’s physician.**

**Task 2:** What form must be completed to indicate the employee is able to return to work?

**The Work Limitation Form.**

**Task 3:** List two benefits to the employer and two benefits to the employee for using a modified work program.

**Any two of the following or similar answers will suffice.**

|  |  |
| --- | --- |
| **Benefits to the employer** | **Benefits to the employee** |
| -helps them maintain high productivity levels because workers are already skilled | -allows them to get back to work quickly |
| -less costly than hiring and training new workers | -encourages rehabilitation |
| -reduces the cost associated with WSIB benefits | -keep in contact with other employees |
| -reduces the cost associated with health care |  |
| -reduces the cost associated with managing claims |  |

# Performance Descriptors

| Levels | Performance Descriptors | Needs Work | Completes task with support from practitioner | Completes task independently |
| --- | --- | --- | --- | --- |
| A1.2 | Scans text to locate information |  |  |  |
|  | Locates multiple pieces of information in simple texts |  |  |  |
|  | Makes low-level inferences |  |  |  |
| B3.2a | Uses layout to determine where to make entries |  |  |  |
|  | Begins to make some inferences to decide what information is needed, where and how to enter the information |  |  |  |

This task: Was successfully completed Needs to be tried again

Learner Comments:

Instructor (print): Learner (print):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_