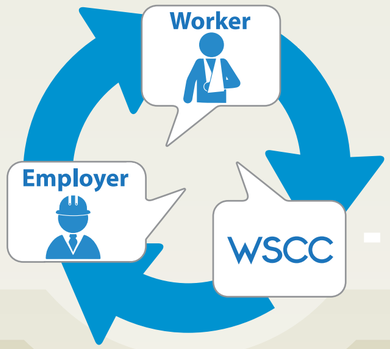
Return to Work Road to Recovery

COMMUNICATE AND COLLABORATE throughout the Return to Work (RTW) Process



INJURY OCCURS

Functional Abilities form

First Medical Report

Health Care Provider completes and submits to the WSCC

REPORT THE INJURY

Employer's Report of Injury form

Worker's Report of Injury form

Employer and worker must submit these forms to the WSCC

NWT Email: nwtclaimsservices@wscc.nt.ca
Toll Free Fax: 1 (866) 277-3677
Tele-claim: 1 (800) 661-0792

NU Email: nuclaimsservices@wscc.nu.ca
Toll Free Fax: 1 (866) 979-8501
Tele-claim: 1 (877) 404-4407

CAN WORKER RETURN TO WORK?

YES

YES with modified or alternate duties

NOT YET

WORKER CONTINUES TREATMENT AND REHABILITATION

WORK TOGETHER TO IDENTIFY SUITABLE WORK

DEVELOP THE WORKER'S RTW PLAN

WORKER RETURNS TO WORK
If safe and medically possible

MONITOR WORKER'S PROGRESS
Meet regularly and modify the plan if required

WORKER RECOVERS
If safe, worker returns to pre-injury duties OR new permanent modified duties

WSCC Workers' Safety & Compensation Commission | ᐃᖅᑲᓇᐃᔭᖅᑎᓄᑦ ᐊᑦᑕᓇᖅᑐᓂᒃ ᐊᒻᒪ ᓇᓪᓕᐅᒃᑯᒪᓂᒃ ᖃᐅᔨᓴᖅᑏᑦ

wscc.nt.ca 1.800.661.0792 wscc.nu.ca 1.877.404.4407