

DEFENSE HEALTH AGENCY

NATIONAL CAPITAL REGION MEDICAL DIRECTORATE OFFICE OF THE DIRECTOR 8955 TAYLOR ROAD, BUILDING 1, FLOOR 9 BETHESDA, MD 20889-5628



FEB 0 9 2015

MEMORANDUM FOR: NATIONAL CAPITAL REGION MEDICAL DIRECTORATE,

(NCR MD)

DIRECTORS, WALTER REED NATIONAL MILITARY MEDICAL CENTER (WRNMMC) AND FORT BELVOIR COMMUNITY

HOSPITAL (FBCH)

DIRECTOR, JOINT PATHOLOGY CENTER (JPC)

SUBJECT: NCR MD-Directive Type Memorandum (DTM) 15-003, Light Duty and Return to

Work Procedures for DoD Civilian Personnel

References: See Attachment

Purpose. This NCR MD-DTM:

• Based on the authority of References (a) through (c), and the guidance of References (d) through (g), establishes the policy and procedures regarding programs for civilian employees of the Federal Government on disability due to personal injury or disease arising from or within the scope of their employment. Supervisors and managers shall make every reasonable effort to facilitate the successful return to work for employees that sustain injuries or occupational illnesses in the performance of their duties.

• This NCR MD-DTM is effective immediately; it must be converted to a new NCR MD Administrative Instruction within 12 months. Otherwise, this DTM will expire 1 year from the publication date.

Applicability. This NCR MD-DTM applies to employees of the NCR MD, WRNMMC to include the DiLorenzo Clinic and the Tri-Service Dental Clinic, FBCH to include the Dumfries and Fairfax Clinics, and the JPC unless prohibited by statute or regulation. Hereafter, these facilities are collectively referred to as Joint Medical Treatment Facilities (MTFs) and Centers.

Policy. It is NCR MD policy that:

- DoD employees are entitled to a safe and healthful work environment that complies with the DoD safety and health policies identified in Reference (e).
- Upon the employee's partial recovery and ability to perform limited duties, every effort must be made to accommodate the employee in a light duty program, based on the medical documentation provided by the attending physician and other applicable medical specialists.
- If an individual is able to return to light duty and such a position cannot be located within the organization, the supervisor will contact the Civilian

- Human Resources Center (CHRC) for assistance. The CHRC, in concert with the NCR MD, Personnel Branch, will locate possible light duty assignments within other organizations in the NCR MD. However, an employee will not be required to accept a light duty assignment at another geographical location.
- Where Telework is an option for light duty assignments, it shall be considered.
- In cases when light duty is not feasible or an option, the CHRC will make a recommendation on the employee's return to work assignment.

Responsibilities

- Supervisors and Managers will make every effort to accommodate employees medically released to perform limited duty.
- The CHRC will assist supervisors and managers in locating a position within the organization for employees able to return to light duty. In cases when light duty is not feasible or an option, the CHRC will make a recommendation on the employee's return to work assignment.
- The CHRC will identify positions within other organizations in the National Capital Region when a position cannot be located within the organization for employees who are not able to return to light duty.

Procedures. All managers and supervisors will:

- Pursue all reasonable alternatives to provide injured employees with light duty assignments.
- Ensure the facts on each worker's compensation form(s) are properly investigated, fully documented, accurately reported, and should controvert when appropriate.
- Maintain close and regular contact with the employee to monitor the ability of the employee to return to full duty or light duty.

Releasability. **Unlimited**. This NCR MD-DTM is approved for public release and is available on the NCR MD Website at www.capmed.mil.

RADM, MC, USN

Director

Attachment: As stated

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ATTACHMENT

REFERENCES

- (a) Deputy Secretary of Defense Action Memorandum, "Implementation of Military Health System Governance Reform," March 11, 2013
- (b) DoD Directive 5136.13, "Defense Health Agency (DHA)," September 30, 2013
- (c) National Capital Region (NCR) Medical Directorate Concept of Operations, September 10, 2013
- (d) DoD Directive 1400.25, "DoD Civilian Personnel Management System," November 25, 1996
- (e) DoD Instruction 6055.1, "DoD Occupational Safety and Health Program," August 19, 1998
- (f) DoD Instruction 1400.25-V810, "Civilian Personnel Management System: Injury Compensation," April 16, 2009
- (g) JTF CapMed Instruction 1438.01, "Injury Compensation," June 14, 2013