

NEIL ABERCROMBIE  
GOVERNOR



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MAJOR GENERAL  
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STATE OF HAWAII  
**DEPARTMENT OF DEFENSE**  
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NGHI-HRO

01 August 2011

MEMORANDUM FOR ALL FULL-TIME FEDERAL TECHNICIANS OF THE HAWAII NATIONAL GUARD

SUBJECT: Policy Memorandum 2011 - 01, Placing Technicians on Light Duty

1. References:

a. NGB-J1-TN, 23 February 2011 subject: Policy for Placing Technicians on Light Duty (TN-11-02), (Encl 1)

b. DoD 1400.25-M, 810 (Injury Compensation), dated 12 April 2005.

c. DoD Instructions 6055.1m "DoD Occupational Safety and Health Program, dated 19 August 1998.

2. This policy memorandum prescribes the procedures to use when a light duty assignment becomes necessary as a result of a claimed workplace injury under the Office of Worker's Compensation Program (OWCP). Light duty is defined as a temporary modified or alternate work position at the same or lower grade in which the technician is qualified to perform.

3. This agency will provide light (modified) duty assignments to technicians, who have sustained workplace injuries or illnesses when written medical documentation indicates the limitations are "temporary" and are the result of the claimed occupational injury or illness which prevents them from performing the full range of duties within their assigned classified position. The doctor's statement must be a written report and will indicate the extent of physical limitations and the types of work that could reasonably be performed within these limitations.

4. Line of Duty (LOD) injury, personal injury or medical conditions warranting light duty are not covered by this policy memorandum.

5. **Technician's Responsibilities.** It is the injured technician's responsibility to:

a. Immediately report an injury to his/her immediate supervisor and complete all required documentation as soon as possible.

b. Maintain contact with his/her supervisor and provide written medical documentation which substantiates his or her work status.

c. Inform the treating physician that light duty assignments are available.

d. When medical documentation indicates the technician is no longer totally disabled, he/she is required to accept any reasonable offer or suitable light duty or limited duty assignment. The assignment will be based on the treating physician's report stating types of work that can or cannot be performed, and the extent of physical limitations that may be performed while in limited duty.

**6. Supervisor's Responsibilities.** It is the immediate supervisor's responsibility to:

a. Identify and offer the light duty assignment to the injured technician. The supervisor must ensure the modified assignment complies with the work restrictions imposed by the treating physician, and the technician understands and complies with the medical restrictions. The offer can be made by telephone but must be confirmed in writing within 48 hours to be valid.

b. Ensure the injured technician is not permitted to work outside of identified limitations. During light duty assignments, the injured technician should not be allowed to perform military duties unless it falls within the scope of his/her limitations. Extended duty day drills and temporary duty travel should not be allowed.

c. Document and track all light (modified) duty assignments and forward all medical documentation to the Human Resources Office's (HRO) Injury Compensation Program Administrator (ICPA). Supervisor will complete and review the Light Duty Case File Record (Encl 2) with the injured technician. A signed copy will be forwarded to ICPA when technician is given a light duty assignment. Supervisor will also make sure ICPA receives timely notification when medical documentation indicates the employee is released to full duty.

**7. HRO/ICPA Responsibilities.** The HRO has final authority in making light duty determinations and will assist with placing the injured technician in a modified position in another section.

a. If an injured technician is placed in another section, the HRO must ensure all medical restrictions imposed by the physician will be adhered to.

b. In accordance with the Freedom of Information Act and the Privacy Act of 1984, HRO will only disclose work status and medical limitations on a need to know basis.

c. The ICPA will also coordinate OWCP issues with the injured technician, supervisor, medical providers, DOD/NGB liaisons and the Department of Labor. The ICPA will make sure a CA-17, Duty Status Report (Encl 3) or OWCP-5, Work Capacity Evaluation Form is completed by the supervisor and treating physician every 4 weeks (30 days) to ensure documentation of assigned duty and limitations are submitted to the Department of Labor in a timely manner.

d. The ICPA will mail all medical documentation to the Department of Labor's DFEC Central Mailroom for imaging and maintain a separate OWCP file for each reported injury.

8. If the injured technician refuses light or limited duty, continuation of pay (COP) should be terminated as of the date of the employee's refusal or after five workdays from the date of the offer, whichever is earlier. Continuation of Pay may also be suspended if medical evidence substantiating the disability is not submitted within ten (10) workdays of the disability. A refusal to return to suitable modified work is noncompliant with the OWCP's 20 C.F.R. 10.222 and could result in an overpayment or lead to disciplinary or adverse action under the provision of TPR752, Discipline and Adverse Action, and continued wage compensation will be terminated.

NGHI-HRO

01 August 2011

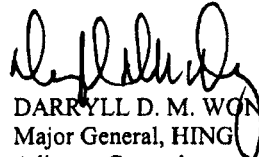
SUBJECT: Policy Memorandum 2011-01, Placing Technicians on Light Duty

9. The HRO has primary responsibility for this policy. Any questions regarding the interpretation of this policy should be directed to the Human Resources Officer at (808) 672-1226 or [randall.tom@hickam.af.mil](mailto:randall.tom@hickam.af.mil).

10. This policy memorandum supersedes Full-Time Support Regulations (FTSPR) 810-2, subject: Light Duty Assignments.

3 Encls

1. Memo, NGB-J1-TN, 23 Feb 2011
2. Light Duty Case File Record
3. CA-17, Duty Status Report

  
DARRYLL D. M. WONG  
Major General, HING  
Adjutant General



## NATIONAL GUARD BUREAU

1411 JEFFERSON DAVIS HIGHWAY  
ARLINGTON, VA 22202-3231

NGB-J1-TN

23 February 2011

MEMORANDUM FOR THE HUMAN RESOURCE OFFICERS OF ALL STATES, THE COMMONWEALTH OF PUERTO RICO, THE U.S. VIRGIN ISLANDS, GUAM, AND THE DISTRICT OF COLUMBIA

SUBJECT: Policy for Placing Technicians on Light Duty (TN-11-02)

1. This memorandum prescribes the procedures to use when light duty assignment becomes necessary as a result of a claimed workplace injury under the Office of Workers' Compensation Program. Light duty is defined as a temporary modified or alternate work position at the same or lower grade for which the technician is qualified to perform.
2. It is the policy of National Guard Bureau to provide light (modified) duty assignments to technicians who present written medical limitations from their treating physician. The physician documentation must indicate the limitations are "temporary" and are the result of the claimed occupational injury which prevents them from performing the full range of duties within their assigned classified position.
3. It is the technician's responsibility to report an injury immediately to the supervisor, complete all required documentation as soon as possible, and ensure all medical evidence is provided in order to evaluate his or her work status. The injured technician is required to inform the treating physician that light duty is available. The technician is to maintain contact with the supervisor to ensure medical status updates are received as required whenever there is a change in the condition or continued total disability.
4. Once the medical report indicates the technician is no longer totally disabled, he/she will be required to accept any reasonable suitable limited duty. The limited duty will be based on the physician's report stating types of work that can or cannot be performed, and the extent of physical limitations that may be performed while in the limited duty.
5. The immediate supervisor has the responsibility of identifying and offering the light duty assignment to the injured technician in writing. The offer may be made by telephone but must be confirmed in writing within 48 hours to be valid. The light duty offer should include a description of the duties and requirements of the position being offered and if a personnel action is involved, the employee is required to be furnished a copy prior to the offer's effective date. The technician is required to adhere to limited duty until cleared for full duty by the medical provider in writing.

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SUBJECT: Policy for Placing Technicians on Light Duty (TN-11-02)

6. The Duty Status Report (CA-17) or Work Capacity Evaluation form (OWCP-5) should be completed by the treating physician and supervisor every 4 weeks (30 days) to ensure documentation of assigned duty and limitations is provided to the Injury Compensation Program Administrator for submission to Department of Labor unless there is a change in the medical condition. If a supervisor is unable to provide temporary limited duty in the technician's current position due to mission requirements, the Human Resources Office (HRO) should be informed immediately for assistance.

7. The HRO has final authority for light duty determinations and will assist in the placement of the injured technician in modified duty that they are qualified to perform in another directorate or area as warranted.

8. If the employee refuses light or modified duty, continuation of pay should be terminated as of the date of the refusal, or after five workdays from the date of the offer, whichever is earlier. Continuation of pay may also be suspended if medical evidence substantiating the disability is not submitted within ten (10) workdays of the disability. A refusal to return to suitable modified work is noncompliant with the Office of Worker's Compensation Program 20 C.F.R 10.222 and could result in an overpayment or lead to disciplinary or adverse action under the provision of TPR 752 (Discipline and Adverse Actions) and continued wage compensation will be terminated.

9. Questions regarding this policy may be directed to Ms. Candace Schupay, NGB-J1-TNB at 703-607-0777 (DSN 327) or email Candace.Schupay@us.army.mil.



THOMAS E. LANGUIRAND  
Colonel, US Army  
Chief, Office of Technician Personnel  
National Guard Bureau

Office Symbol

DD Month YYYY

MEMORANDUM FOR \_\_\_\_\_ (Technician's Name)

SUBJECT: OWCP Light Duty Case File Record

1. Based on the medical documentation, \_\_\_\_\_ (Technician's Name) should not perform the following tasks at his/her place of duty until cleared by his/her physician or returned to full duty:
  - a. (i.e. Should not lift more than XX pounds.)
  - b. (i.e. Should not reach above head.)
  
2. Based on information provided by \_\_\_\_\_ (Technician's Name) and in accordance with his/her treating physician's recommended limitations and restrictions, \_\_\_\_\_ (Technician's Name) is to perform modified duties as follows:
  - a. [list tasks the claimant is assigned to do in accordance with the treating physician's recommended restrictions, either in paragraph form or as bullets].
  - b. i.e. will provide customer service by telephone and provider clerical duties as assigned while physically located at a desk in room 672-XXX.
  
3. \_\_\_\_\_ (Technician's Name) may take rest breaks, in addition to regularly scheduled work breaks, as needed and as specified by treating physician's written instructions.
  
4. This temporary duty will expire on \_\_\_\_\_ (give date noted by physician or allow 30 days maximum). At that time \_\_\_\_\_ (Technician's Name) will provide his/her immediate supervisor with updated medical documentation specifying either continued limited duty or clearance for full performance of duties as written by his/her treating physician.
  
5. POC for this memorandum is the undersigned at XXX.XXX.XXXX or email address.

\_\_\_\_\_  
(Supervisor Signature)  
SUPERVISOR NAME  
Rank, Agency  
Position Title

EMPLOYEE ACKNOWLEDGEMENT:

I accept the above assignment and will adhere to my restrictions and observe safe work practices.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

cc: Injury Compensation Program Administrator