

Workplace Wellbeing Hub

Return-to-Work (RTW) Protocol Following Mental Health Leave

Overview

Purpose: Help safety professionals, Human Resources and managers coordinate a safe and supportive reintegration for employees returning from mental health leave.

Important note: This guide provides general best practices and sample language. It does not constitute legal advice. Consult your legal counsel to align with applicable laws (e.g., Americans with Disabilities Act, Family and Medical Leave Act, state leave laws).

Section 1: Guiding Principles

Confidentiality: Share information strictly on a need-to-know basis; never disclose diagnoses.

Accommodation first: Explore reasonable accommodations before considering job separation.

Structured reintegration: Use a phased plan with clear check-ins and success criteria.

Shared responsibility: HR, the supervisor, safety lead and the employee each have defined roles.

Safety by design: Adjust tasks, pace and environment to reduce psychosocial risks (use [ISO 45003](#) for guidance)

Treat each employee as a valued team member, with dignity and respect

Section 2: Roles and Responsibilities (At a Glance)

- **Employee:** Provides needed documentation, participates in planning, and communicates limitations and what works
- **Supervisor:** Prepares the team, implements modified duties, sets workload expectations and schedules check-ins
- **HR/Leave Admin:** Coordinates leave-to-work transition, manages documentation and ensures compliance
- **Safety/OSH:** Reviews safety-critical tasks, recommends risk controls and monitors leading indicators
- **Return-to-Work Coordinator (optional):** Acts as the point person who convenes the team, tracks milestones and troubleshoots

Section 3: Sample Modified Duty Language

Policy Statement (Sample):

"The company supports employees returning from medical or mental health leave through temporary modified duty assignments that align with documented functional abilities. Modified duty is not punitive, will not reduce base pay unless permitted by law and policy, and will be reviewed at least every two weeks. We will collaborate with the employee to identify essential functions that can be performed safely, temporarily reassign nonessential tasks, and provide reasonable accommodations unless doing so would create undue hardship or direct safety risk."

Examples of Temporary Modifications:

- Adjusted schedule (e.g., shorter days, later start, split shifts, no overtime)
- Workload caps (e.g., max number of cases, calls, routes or meetings per day)
- Quiet/low-stimulation workspace, notification limits and protected focus blocks

Workplace Wellbeing Hub

- Task selection (e.g., defer high-conflict interactions; limit travel; reduce safety-critical tasks initially)
- Increased supervisory support (more frequent check-ins, clear priorities, written instructions)
- Additional breaks for grounding, bio needs and therapy/medical appointments

Duration and Review

- Default trial period: 2–4 weeks with biweekly review; continue/adjust based on progress

Section 4: Communication Do's and Don'ts

Do

- Use person-first, non-stigmatizing language ("support," "safety," "capacity," "options")
- Ask about work impacts and functional limitations, not diagnosis
- Set clear expectations in writing (priorities, deadlines, availability, check-ins)
- Normalize help-seeking and use of benefits (Employee Assistance Program, peer support, flexible scheduling)
- Protect privacy: Share only what the employee consents to share

Don't

- Ask for medical details or labels ("What condition? What meds?")
- Speculate, gossip or allow team rumors
- Use pressure tactics ("If you can't handle it, maybe this isn't the job")
- Overload the employee on Day 1 or "test" them with crises
- Promise what you can't deliver (e.g., permanent schedule changes without approval)

Team Message (sample, with employee consent):

"Alex is returning on Monday on a phased schedule. Please direct urgent requests through me for the next few weeks. Let's support Alex's transition and keep workloads aligned with our plan. Thanks for your professionalism and confidentiality."

Section 5: RTW Timeline and Checklist

A. Pre-Return (3–7 days before target date)

HR/RTW Coordinator:

- Confirm anticipated return date and required documents (e.g., fitness-to-return/ability-to-work note if applicable)
- Request only functional limitations and capacity (e.g., hours, lifting, exposure to triggers), not diagnosis
- Send the Accommodation Planning Worksheet to the employee, and schedule a meeting
- Brief supervisor on confidentiality, team messaging and temporary coverage plan
- Complete a Safety Risk Review, if in a safety-sensitive role (see section 8)

Supervisor:

- Identify core tasks versus deferrable tasks; draft Modified Duty Plan (see section 4)
- Prepare workstation/environment adjustments (quiet space, flexible breaks, reduced notifications, etc.)
- Schedule a private Day 1 reintegration conversation (30–45 minutes)

Employee:

- Review and complete the **Accommodation Planning Worksheet**

Workplace Wellbeing Hub

- Share any helpful strategies (e.g., morning ramp-up time, meeting caps, communication preferences)

B. Day 1: Return Day

- Execute welcome meeting, review schedule, workload, accommodations and check-in cadence
- Provide a written Reintegration Plan (scope, pace, supports, success measures)
- Clarify points of contact (supervisor for daily work; HR for accommodations; safety lead for hazards)

C. Weeks 1–4: Phased Reintegration

- Weekly check-ins (15–30 min) to review what's working, adjust duties/hours and confirm next steps
- Monitor leading indicators: workload, overtime, break adherence, error/incident trends, team climate
- Update the Modified Duty Plan as capacities change, and document adjustments

D. Weeks 4–8: Stabilization

- Reassess against success criteria; either extend phased plan, maintain accommodations or progress to regular duties.
- If barriers persist, reconvene the accommodation process; consider occupational health support.

E. Closure/Continuation

- Document outcomes; set a schedule for any ongoing accommodations and a 60-to-90-day follow-up.

Section 6: Accommodation Planning Worksheet (Template)

Instructions:

- Employee completes sections A–C (ideally in partnership with an occupational medicine provider)
- Supervisor completes D–E
- HR/Safety facilitates

A. Employee Information

- Name / Role / Department / Supervisor
- Anticipated return date

B. Functional Abilities (Check all that apply)

- Full attendance
- Reduced hours (specify: _____)
- Consistent schedule preferred (Y/N)
- Concentration limits (e.g., meeting cap/day: _____; focus blocks: _____)
- Interaction limits (e.g., conflict-heavy tasks, customer volume)
- Environmental needs (quiet space, lighting, remote days, notification limits)
- Breaks (frequency/duration): _____
- Other (e.g., avoid night shifts; avoid safety-critical tasks initially) (specify: _____)

C. Strategies That Help Me Succeed

Examples: Morning ramp-up, agendas sent in advance, written follow-ups, weekly priority list

D. Essential Functions and Task Analysis (Supervisor)

- List essential functions; note which can be performed now versus later
- Identify nonessential tasks that can be reassigned temporarily

Workplace Wellbeing Hub

E. Proposed Accommodations and Modified Duty Plan

- Hours/schedule: _____
- Task adjustments: _____
- Environmental supports: _____
- Check-in cadence: _____
- Start date / review dates: _____

F. Agreement and Next Steps

- Signatures (employee, supervisor, HR/RTW coordinator)
- Review dates

Section 7: Supervisor Guidance for Reintegration Conversations

Day-1 Reintegration Conversation (30–45 minutes)

- **Welcome and Expectations (5 min)**
 - "We're glad you're back. Our goal is a safe, steady return. We'll go at a sustainable pace."
- **Review Plan (10–15 min)**
 - Hours/schedule, task priorities, accommodations, meeting/notification limits, check-in cadence
- **Safety and Supports (5–10 min)**
 - Quiet space, breaks, EAP/peer support, flexibility for appointments
- **Two-way Signals (5 min)**
 - "If something feels like too much, flag it early. I'll do the same if I see workload creep."
- **Close**
 - Confirm next check-in and written plan delivery

Weekly Check-in Script (15–30 minutes)

- "What went well last week? Where did we stretch too far? Any triggers we can design around?"
- "On a 1–5 scale, how manageable was the workload? What would move it to one step better?"
- "Let's adjust the plan for next week: tasks, pace and any supports."

If Performance Concerns Emerge

- Return to accommodations first; clarify expectations and supports in writing
- Use specific examples; focus on impact and solutions, not labels or traits
- If risks persist in safety-critical tasks, consult HR/safety lead for interim task changes and a fresh risk review

If Distress Is Observed (Non-emergency)

Workplace Wellbeing Hub

- "I'm noticing you seem overwhelmed. Let's pause and adjust today's priorities. Would a short break or quieter space help?"
- Offer EAP/peer support; consider same-day workload reduction.

If There's Imminent Risk (Emergency)

- Follow your organization's crisis response protocol (use NSC's Mental Health Crisis Guide for assistance)
- If needed, ask directly:
 - "Are you thinking about killing yourself or harming yourself today?"
 - If yes, follow emergency steps; stay with the person until help arrives, and notify HR per protocol

Section 8: Safety-Critical Task Review (For Safety/OSH and Supervisor)

Purpose: Ensure duties are matched to current functional capacity and controls.

Steps

1. Identify safety-critical tasks (e.g., operating heavy equipment, working at heights, confined spaces, armed roles, solo night shifts)
2. Review current functional information (attention, reaction time, sleep, medications with side effects, if the employee volunteers or provides occupational health documentation)
3. Apply the hierarchy of controls: eliminate/substitute tasks temporarily; engineer controls (e.g., automation); administrative controls (buddy system, slower pace, no overtime); provide Personal Protective Equipment, as needed
4. Define requalification steps (simulation, buddy sign-off, skills checks)
5. Set objective reentry criteria and timelines; document reviews

Section 9: Confidentiality and Information Sharing

- Store RTW documents separately from general personnel files per policy
- Share only functional limitations and accommodations with the supervisor and safety lead; never disclose diagnosis
- Only provide team communications with employee consent and keep it minimal

Section 10: Metrics and Continuous Improvement

Continuously monitor and improve systems as needed:

- **Leading indicators:** Workload balance, overtime, break adherence, schedule stability, incident/near-miss trends, EAP utilization (de-identified), turnover intent
- **Lagging indicators:** Sustained work participation at 30/60/90 days, absenteeism, workers compensation claims, re-leave episodes
- Conduct a 60-to-90-day After-Action Review to refine processes

Workplace Wellbeing Hub

Appendix A. Reintegration Plan (Template)

Instructions: Keep medical information confidential. Focus on functional abilities and work design (to be completed by safety lead or supervisor along with employee).

Employee Name
Role/Department
Supervisor
RTW Coordinator (if applicable)
Safety/OSH Contact

KEY DATES

Target Start (Return) Date:

Phase 1 Dates (e.g., Weeks 1–2):

Phase 2 Dates (e.g., Weeks 3–4):

Review Checkpoints (e.g., end of each phase):

HOURS/SCHEDULE

- Standard weekly hours during Phase 1:
- Standard weekly hours during Phase 2:
- Start/end time preferences (e.g., later start, split shift):
- Overtime permitted? Yes No (If yes, limits: _____)
- Remote/hybrid days (if applicable):

TASK PRIORITIES AND SCOPE

Phase 1 (Initial Reintegration)

- Primary tasks to focus on (3–5):
- Tasks deferred/limited (and who covers them):
- Environmental supports (quiet space, notification limits, etc.):

Phase 2 (Progression/Stabilization)

- Primary tasks to add or expand:
- Tasks still deferred or requiring buddy/QA:

Workplace Wellbeing Hub

- Requalification steps for safety-critical duties (simulation, buddy sign-off, skills check):

ACCOMMODATIONS / SUPPORTS (Check all that apply and specify)

- Adjusted schedule (details):
- Workload caps (e.g., max meetings/cases per day):
- Environment (quiet space, lighting, notification limits):
- Breaks (frequency/duration):
- Written instructions/clarified priorities:
- Reduced conflict-heavy / customer-facing tasks:
- Appointment flexibility (therapy/medical):
- Other:

CHECK-IN CADENCE AND CONTACTS

- Weekly 15-to-30-minute check-ins on:
- Who attends: Employee Supervisor HR/RTW Safety/OSH
- Signals to adjust plan (e.g., workload \geq 4/5 difficult, missed breaks, incident/quality flags):

SUCCESS MEASURES (Define 3–5 objective indicators)

Example domains: Manageable workload rating (target \geq ____/5), completion of priority tasks, adherence to breaks/schedule, error/incident trend, EAP/peer support uptake (de-identified), requalification achieved.

- 1.
- 2.

Workplace Wellbeing Hub

- 3.
- 4.
- 5.

APPROVALS AND REVIEW DATES

Role	Name/Signature	Date
Employee		
Supervisor		
HR/RTW Coordinator		
Safety/OSH (if safety critical)		

Note: This Reintegration Plan is temporary and will be reviewed at each checkpoint. Accommodations are provided unless they create undue hardship or direct safety risk.

Quick Reference: RTW Checklist

Before Return

- Confirm date and functional limits
- Complete Accommodation Worksheet
- Draft Modified Duty Plan and conduct a safety review

Day 1

- Welcome and reintegration conversation
- Provide written plan and contacts

Weeks 1–4

- Weekly check-ins; adjust plan

Weeks 4–8

- Reassess; continue/scale accommodations

Days 60–90

- Conduct After-Action Review
- Finalize ongoing supports