

Wait Staff : Return to Work Checklist and Plan

Please complete with your patient

Worker name: _____ Claim number: _____ Injury: _____

Worker will be able to participate in the duties as below from: / / to / /

Full time Part time _____ hours per day _____ days/week

N.B. Based on your information, a suitable duties plan will be established at the worker's place of employment. In the absence of task availability at their usual workplace the worker will continue to be paid weekly compensation and WorkCover will source suitable alternative workplace rehabilitation with a host employer.

Please consider the "health benefits of good work" and focus on what your patient can do.

Tick if suitable	Job Tasks	Limitations/Comments
	Preparing room for service – move and adjust dining area for expected service, set tables, napkin folding, cutlery and glassware polishing, condiments preparation	
	Taking orders – writing, listening and confirming orders, walking order to the pass	
	Pouring drinks – hold a glass, open drinks (screw tops, de-corking, bottle opener or on tap), fill glass, walk drinks to tables	
	Orders to tables - carrying of food orders to tables, walking to and from tables, weight varies dependent on table size and what has been ordered	
	Clearing tables – Clear dishes, carry to kitchen, clear condiments, spray table, clean table with cloth	
	Cleaning after service – stack up condiments, stack glassware, put away cutlery, adjust tables and chairs, vacuum, polish, clean windows and dining area	
Tick if suitable	Alternate duties	Limitations/Comments
	Administrative tasks: <ul style="list-style-type: none"> • Lower limb/back/upper limb injury: <ul style="list-style-type: none"> ○ Sitting/one arm or restricted arm capacity: Prepare roster with manager, update team member incentives (if applicable), take room orders, data entry inventory of received goods and in delievery book if applicable, complete orders for cleaning/food products ○ Standing/sitting/one arm or restricted arm capacity: catalogue or labelling items, supervise team members, main point of contact for staff and guests enquiries ○ Conduct symptom management breaks as necessary: break in between to do recommended stretches and exercises 	

	<p>Preparing room tasks:</p> <ul style="list-style-type: none"> • Lower limb/back/upper limb injury: <ul style="list-style-type: none"> ○ Sitting/one arm or restricted arm capacity: Napkin folding, cutlery and glassware polishing with uninjured arm (if applicable) ○ Standing/sitting/one arm or restricted arm capacity: Cutlery and glassware placement, filling and polishing of condiments with uninjured arm ○ Conduct symptom management breaks as necessary: break in between to do recommended stretches and exercises 	
	<p>Workplace Health & Safety tasks:</p> <ul style="list-style-type: none"> • Lower limb/back/upper limb injury: <ul style="list-style-type: none"> ○ Standing/sitting/one arm or restricted arm capacity: ○ Update first aid listings and first aid boxes, ensure training records are in plan and up to date, maintenance of equipment records ○ Conduct symptom management breaks as necessary: break in between to do recommended stretches and exercises 	

If none of the above tasks or alternate duties are appropriate at this time, please advise a review date or timeframe to some form of return to work _____ / ____ / ____

Please tick here if you have been unable to identify any tasks and you would prefer an allied health provider to help implement a return to work plan.

Other comments:

SIGNATURES

Treating Medical Practitioner: _____ / ____ / ____
 Worker: _____ / ____ / ____
 Employer: _____ / ____ / ____

Submission and payment for this form (WorkCover Queensland claims only)

If this form is requested as part of a workers' compensation claim, please forward this completed form via our online services, or alternatively by faxing to 1300 651 387. You can charge for a "completed form" under the relevant table of costs, found on our website worksafe.qld.gov.au. This form will become part of a claim file and may therefore be read by claims staff, WorkCover Queensland's network of advisory doctors, specialists at the Medical Assessment Tribunal or during legal proceedings.

In addition, the form that you provide may be released to another person (usually the worker or employer) under the Right to Information Act (2009), the workers' compensation legislation or as authorised or required by law.