

Musterer : 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
	Checking bores - walking or seated driving in vehicle required.	
	Stock recording - counting cattle through the race/gate. Can be seated. Can be one handed. Other one handed and/or seated tasks include writing on ear tags and loading ear tags.	
	Maintenance - clean and maintain buildings, sheds, pens, equipment and facilities. May be one handed work. Very light work. Can sort bolts and parts and organise them accordingly.	
	Horse related cleaning - clean and maintain saddles and riding equipment and/ or wash saddle cloths. Seated or standing, may be one handed.	
	Checking Fencing - driving ATV or vehicle along fence line checking for damage to fence, recording this. Requires driving ability. Seated.	
	Cleaning water troughs. Scrubbing trough with brush. Requires squatting and gripping.	
	Fencing - fixing damage to fences. May require digging to replace post. Please indicate if only able to assist with fencing e.g. passing tools and fencing wire.	
	Handle cattle - opening and closing gates, assisting to handle, load and transport livestock. Requires standing. One handed job.	
	Building cattle yards. Please indicate if only able to assist someone else building cattle yards e.g. passing tools and equipment.	
	Mustering - riding horse or motor bike to muster cattle	
	Workshop -performing tasks including welding or using power tools. Please indicate if can only assist with these or can assist mechanic with servicing vehicles & equipment e.g. fetching tools, oil or similar.	

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Tick if suitable	Alternate duties	Limitations/Comments
	Administration - filing, shredding, archiving, answering telephones, computer work. Seated or standing positions, one handed tasks available.	
	Kitchen tasks - assist cook with preparing meals, peeling and cutting food, cleaning dishes, clean or defrost fridge/freezer. Seated and one handed tasks available. Under 5kg.	
	Laundry tasks - washing clothes, ironing. One handed tasks available. General cleaning - dusting, sweeping, mopping, removing rubbish, remove cobwebs, painting, clean windows. One handed tasks available.	
	Cleaning vehicles/motorbikes and checking oil, water, fuel, tyre pressure	
	Garden tasks - mowing lawns on ride on mower. Requires sustained sitting. Can take breaks as required.	
	Garden tasks - Mowing lawns with push mower. Walking and pushing.	
	Garden tasks - whipper snip, prune trees and shrubs, mulch garden beds, rake leaves, water plants/lawns and move sprinklers, weeding, spray weeks. Requires gripping and reaching, squatting and light lifting (mulch or weed bags).	

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.