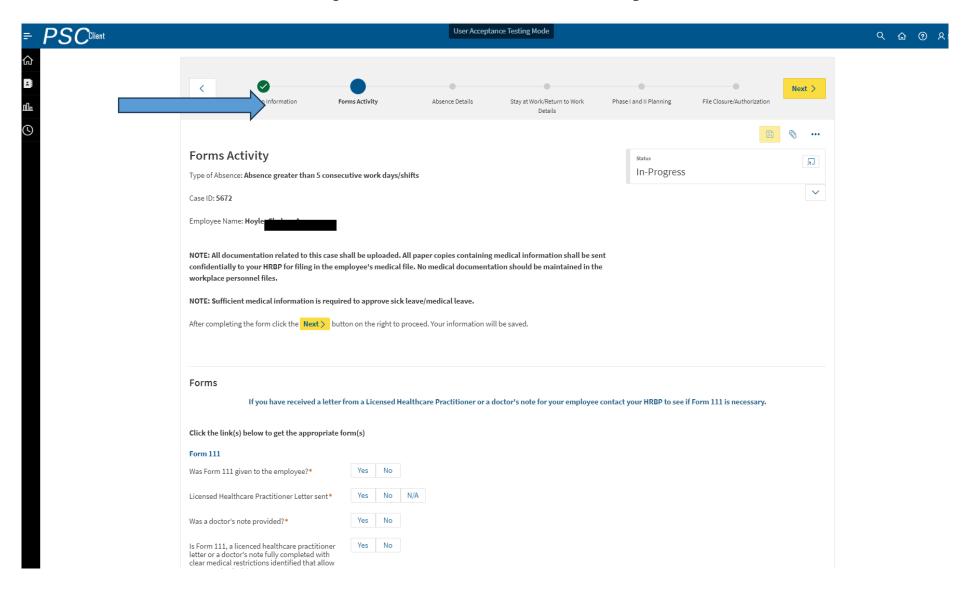
STEP 2 INSTRUCTIONS



Forms Activity

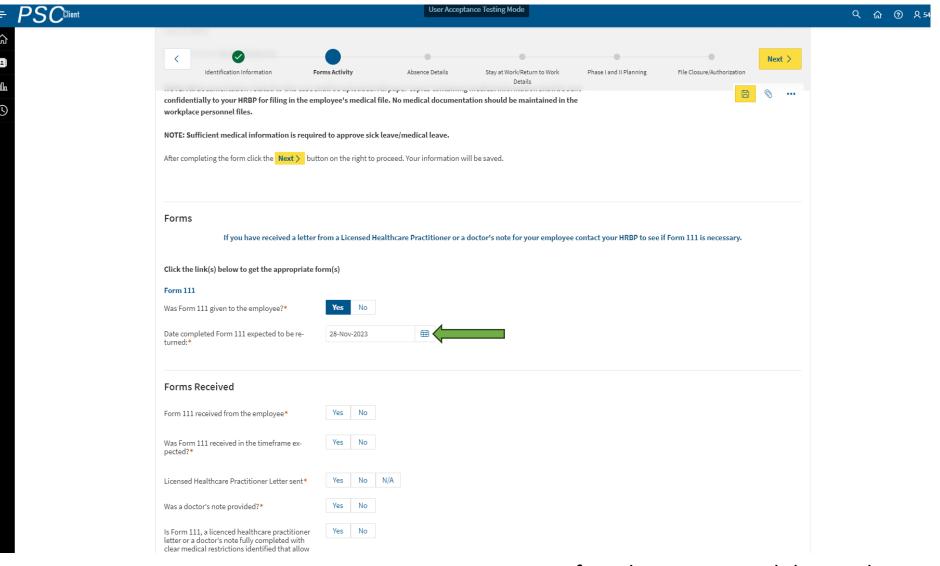
Hover over the button in the top left corner for more information

Step 2 Forms Activity



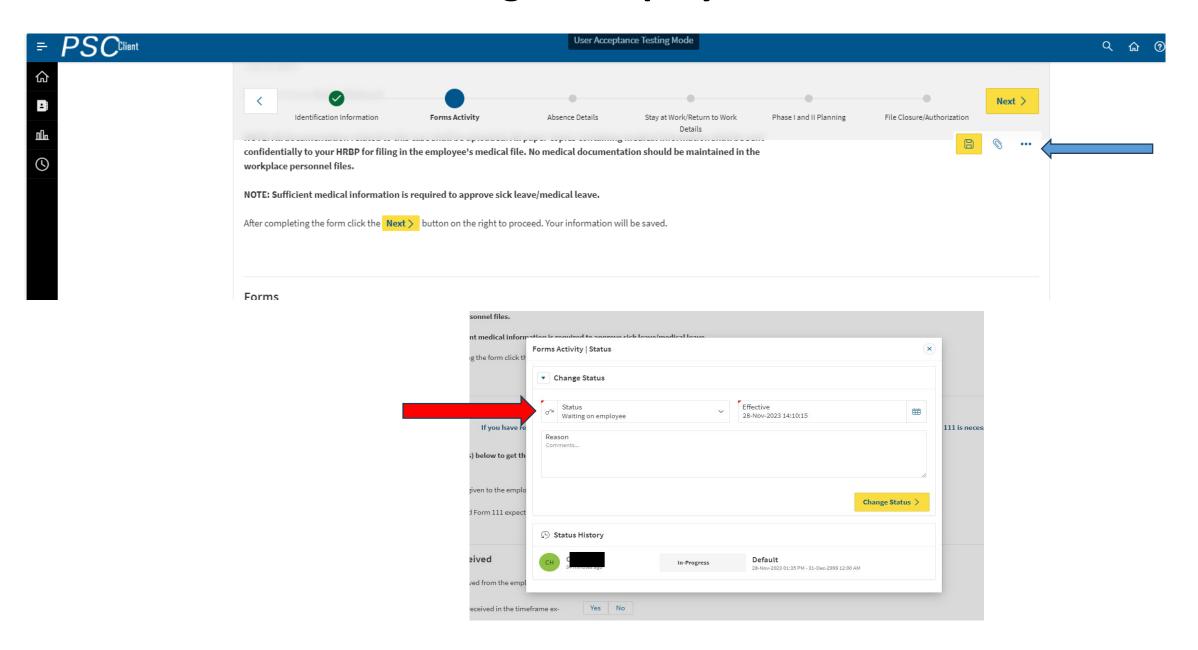
Form 111

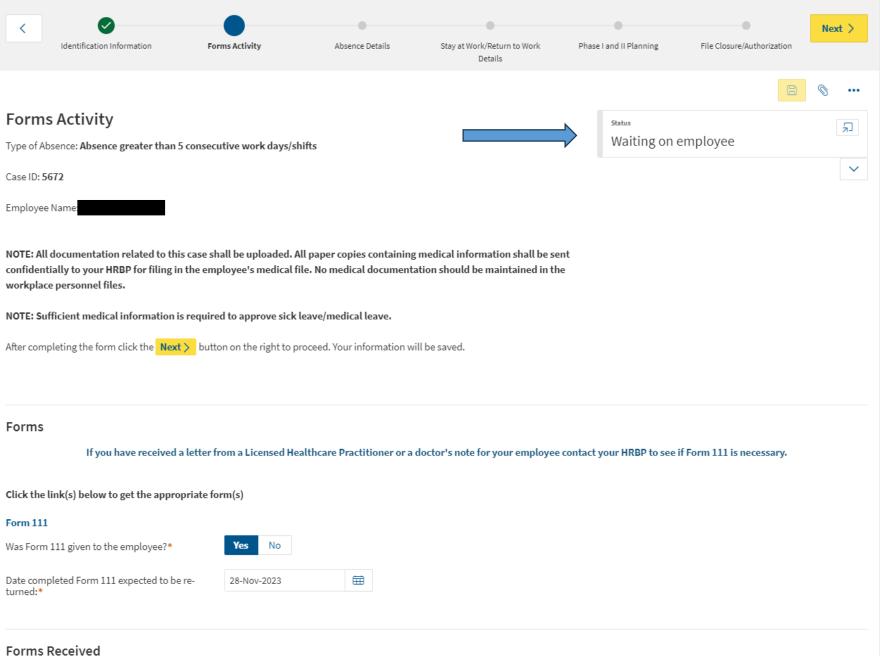
SECTION II: EMPLOYEE RESPONSIBILITIES – completed by Manager/Supervisor and signed by employee
Take this form to your Licensed Health Care Practitioner regarding this injury/illness/surgery to complete Section III (reverse side) and return it to you during that visit.
You are to return this form (completed both sides) to your Manager/Supervisor by(date).
Alternate contact information: (If person to receive this form different from Manager/Supervisor e.g. Ministry Contact, Human Resources, etc.). Manager/Supervisor to fill in: Name and Title: Address: Email and Phone: Fax:
If this is a workplace illness/injury, you will also complete a WCB W1 Form and assist in the completion of an Incident Reporting and Investigation Form 101. I acknowledge my RESPONSIBILITIES and CONSENT to my Licensed Health Care Practitioner completing Section III of this form. I AGREE that my employer may disclose this information to an authorized third party of disability case management services.
Signature of Employee DATE



If you have requested the employee to complete Form 111, or any other information, populate the date you asked the employee to return the completed form in the section as demonstrated.

Waiting on Employee





This is an example of an email sent to the manager or delegate.

Email Example for "Waiting for Medical Information"

From: trac@fcicanada.com [mailto:trac@fcicanada.com]

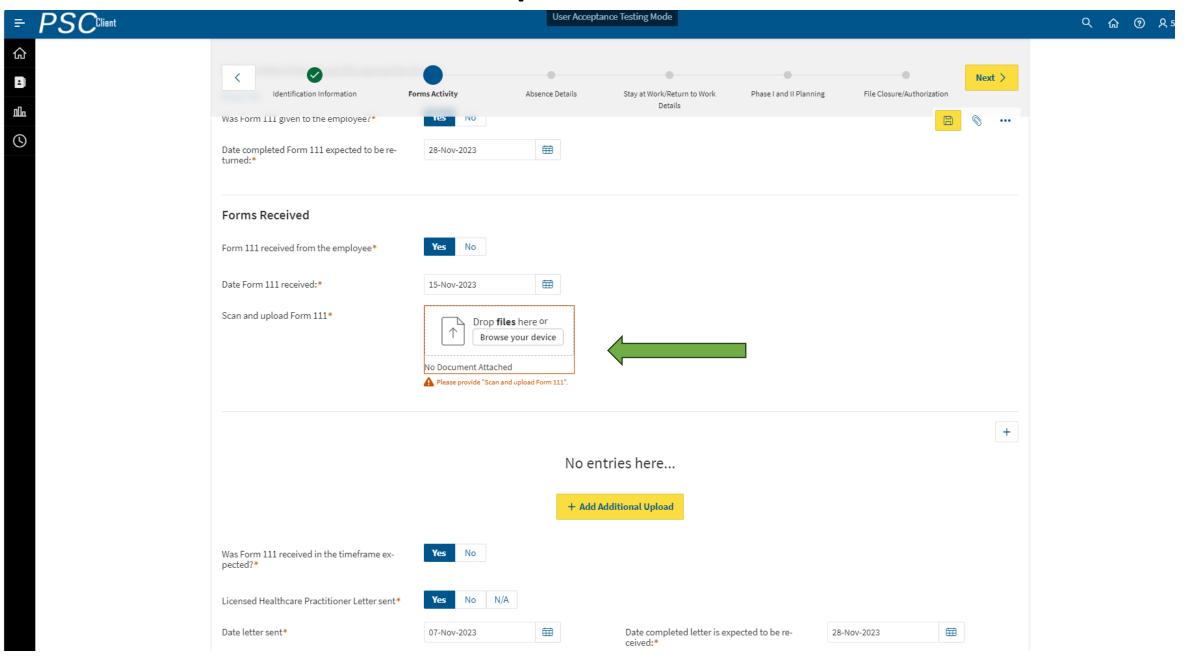
Sent: Thursday, May 03, 2018 12:10 AM

Tol

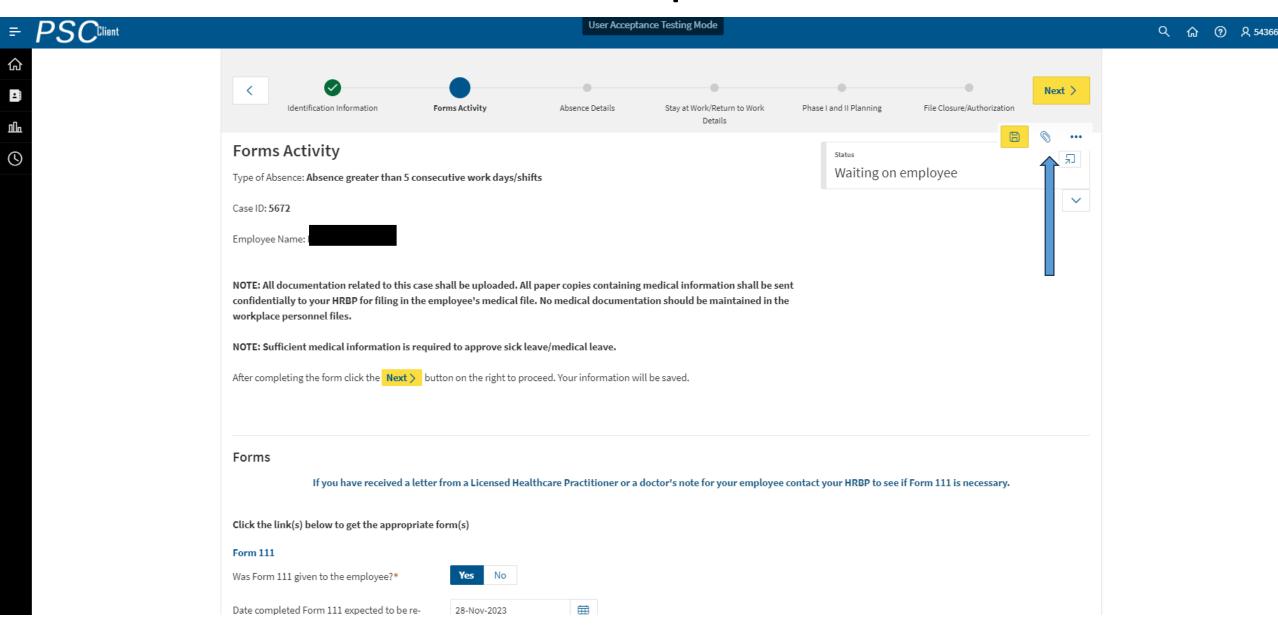
Subject: Be at Work Case File #0305

Your employee has been given until 03-May-2018 to return requested medical information. If your employee did not provide the required medical information to you on this day, follow up with him/her to inquire the reason. Set a new date for the information to be returned in writing (e.g. letter or email to employee) and/or consult your HRBP for assistance if necessary. Do not extend a new date more than once without consulting your HRBP.

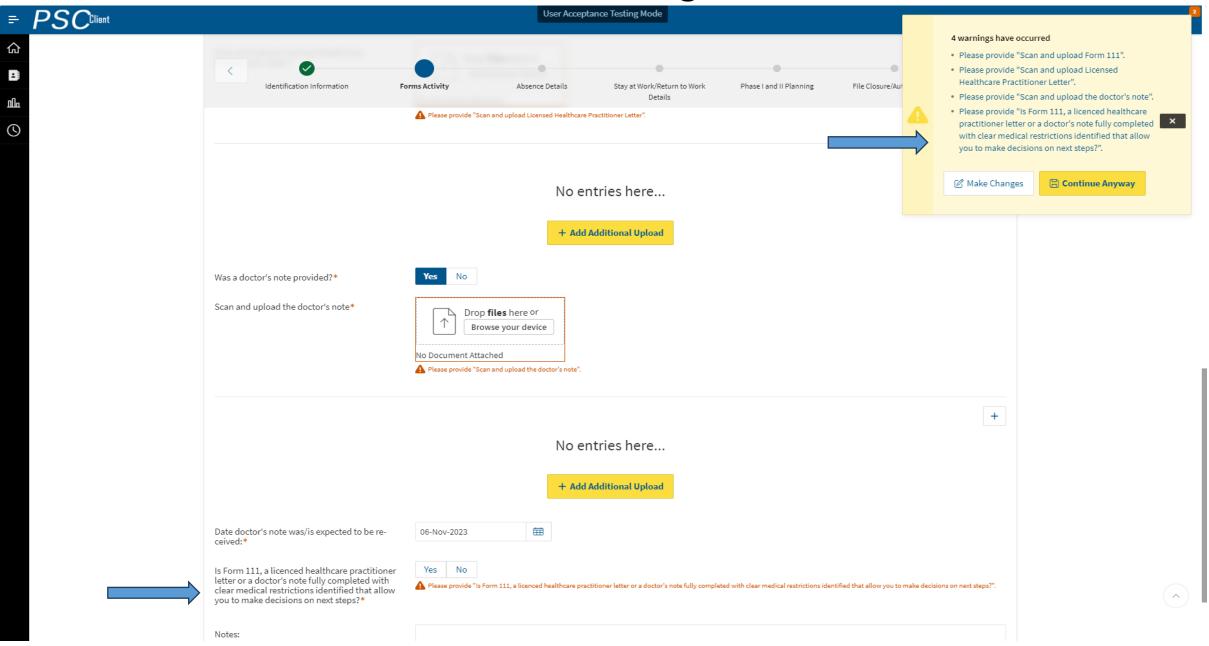
Upload a File



Attach Multiple Files



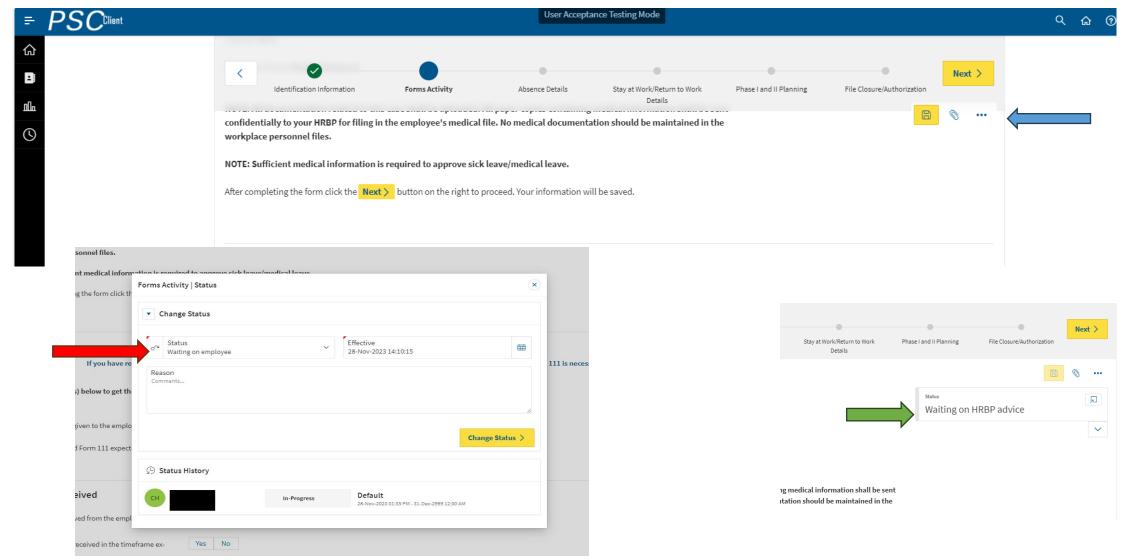
Error Message



Role of the HRBP Administrator & HRBP



Requesting HRBP Advise



This is a sample email to the HRBP upon request for advice

From: itrac@fcicanada.com <itrac@fcicanada.com>

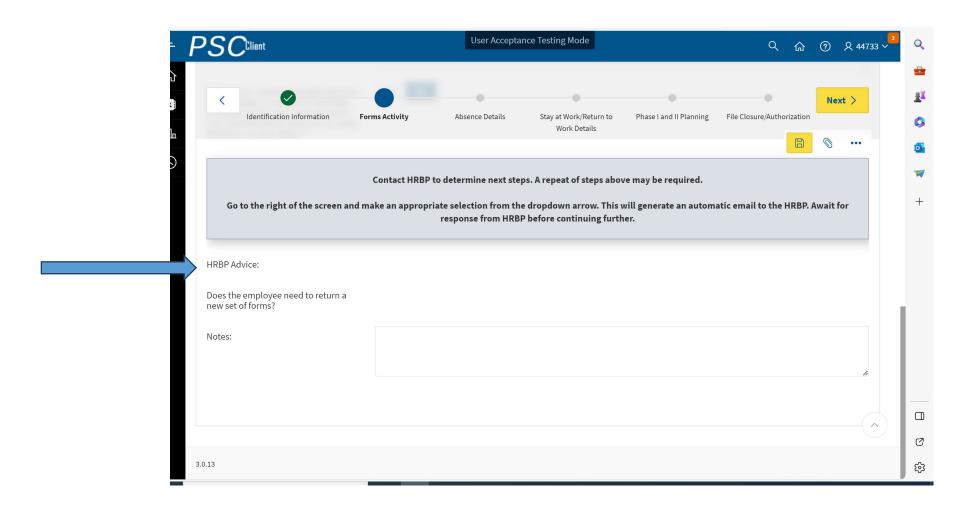
Sent: Thursday, August 30, 2018 9:53 AM

To: HRBP TEAM

Subject: Be at Work Case File #0201

Your manager has given Form 111 to the employee to complete and is experiencing difficulty obtaining clear, objective medical restrictions. Please contact this manager to learn more and provide assistance.

Providing Advice to your Client



After HRBP Provides Advice

