# Work Capabilities checklist: cleaners CM08(e)

**Privacy Notice:** The Department of Education (the department) is collecting information on the below employee’s health and its impact on work in accordance with the department’s ‘Workplace rehabilitation’ procedure, to support the provision of a workplace rehabilitation program. The information will only be accessed by a Rehabilitation and Return to Work Coordinator, to facilitate the employee’s workplace rehabilitation. Some of this information may be given to WorkCover Qld, QSuper or other insurer, a treating doctor or allied health professional or a doctor appointed by the department for the purpose of informing rehabilitation options. Information relevant to the impact of an injury/illness upon an employee’s work may be discussed with a supervisor for the purpose of identifying rehabilitation options. Information may also be discussed with Regional or Central Office Organisational Health and Human Resources employees. The employee’s information will not be given to any other person or agency unless the employee has given their consent or the department is authorised or required to respond to lawful requests from public authorities, including law enforcement.

Action Required: To be completed by treating medical practitioner or allied health professional and returned to the Rehabilitation and Return to Work Coordinator to aid the development of a rehabilitation and return to work program.

I have examined \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is suffering from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

He/She will be capable of performing the following duties from: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_to \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

□ Full time □ Part time \_\_\_\_\_ hours per day \_\_\_\_\_\_\_ days/week

School/Location those duties are performed at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Activities** | **Yes** worker can perform these duties | **No** they cannot perform these duties | **Restricted or limited** with the limitations/ restrictions as noted | **Duration** (in mins) | **Please provide details -Limitations/Restrictions** |
| --- | --- | --- | --- | --- | --- |
| Windows (external and internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Vacuuming (internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Mopping (internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Polisher/scrubber (internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Dusting (internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Sweeping with platform and straw brooms (internal and external) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Rubbish removal (internal) – including emptying bins | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Lifting and moving furniture (internal) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Cobweb control (internal and external) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Amenities | □ | □ | □ | □ pedestals, basins & showers  □ urinals, mirrors & baths |  |
| Drinking fountains and sinks | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Walls (internal and external) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Furniture and blinds | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Hosing and dragging of hoses (external) | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Rubbish removal (external) – including emptying wheelie bins | □ | □ | □ | □<5 □<10 □<15 □<20 |  |
| Bending or stooping | □ | □ | □ |  |  |
| Work between hip and shoulder only | □ | □ | □ |  |  |
| Overhead work | □ | □ | □ |  |  |
| Use of extendable poles  (1.4m, 2.6m & 5.4m) | □ | □ | □ |  |  |
| Other duties: | □ | □ | □ |  |  |

**Other (please specify):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Comments:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**SIGNATURES**

Treating Medical Practitioner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_

Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_

Rehabilitation & Return to Work Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_