What reports does the department require when forensic services are provided? A forensic evaluation requires thirty-day progress report(s) and a final report.

1. Progress reports. Each progress report must include:
   a. A detailed explanation why the forensic referral was not completed as of the date of the report;
   b. A summary of all activities taken in the past thirty days, including progress on previously recommended actions;
   c. Identification and analysis of any barriers preventing completion of the referral; and
   d. A description of the specific actions the provider intends to take to overcome barriers and the expected time frame to complete those actions.

2. Final report. The final report must include recommendations and a recommended outcome. The report must comprehensively evaluate the vocational and medical aspects of the claim so that the adjudicator can make an appropriate vocational decision. The vocational provider must designate an outcome in the closing report when the forensic evaluation is complete. The recommendations may include, but are not limited to:
   a. Able to work: The injured worker is employable at gainful employment. The report must include:
      i. Whether the worker is employable with the employer of injury or current employer, or if not, a list of job possibilities for which the worker is qualified;
      ii. A medically approved job analysis. When this is not obtainable, medically approved physical capacities information supporting the worker's ability to perform the job may be used; and
      iii. Labor market information supporting the provider's recommendation. Labor market information is not necessary when the injured worker is medically released to work for their job of injury at their previous work pattern.
   b. Further services appropriate: Vocational rehabilitation services are necessary and likely to enable the injured worker to become employable at gainful employment. The report must include:
      i. An analysis demonstrating how vocational rehabilitation plan development services are necessary and likely to enable the injured worker to become employable at gainful employment.
      ii. The specific return to work possibilities investigated and the reasons why they were ruled out, including labor market information when necessary.
   c. Further services not appropriate: The injured worker is not likely to benefit from vocational services. The report must include:
      i. An analysis explaining why vocational services are not appropriate;
      ii. Identifying barriers that will make it unlikely the worker will benefit from vocational services, consistent with the requirements in WAC 296-19A-010(1);
      iii. Medical, labor market, and/or other information, as necessary, supporting the provider's recommendations.
   d. Return to work: The injured worker has returned to work. The report must specify and/or document attempts to obtain the following information:
      i. A description of the job the worker returned to;
      ii. The name of the employer;
      iii. The date that the worker returned to work;
      iv. The worker's monthly wages.
(e) Further clarification of medical issues is needed. The vocational rehabilitation provider will identify issues impacting the vocational rehabilitation process and requiring clarification.

[Statutory Authority: RCW 51.04.020, 51.04.030, 51.32.095, 51.36.100, 51.36.110. WSR 03-11-009, § 296-19A-135, filed 5/12/03, effective 2/1/04.]