



**NOTTINGHAMSHIRE
POLICE**

PD 541 **Restricted and Recuperative Duties**

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Linked forms available on LAN: **G 249 Occupational Health Service Referral Form
G 249 A Occupational Health Service Form – Further Information**

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SECTION 1 VERSION CONTROL

Version No.	Date	Post Holder/Author	Post	Reason for Issue
1.0	8 February 2008	Stella Robinson	Head of Occupational Health	Acceptance

SECTION 2 BACKGROUND

Nottinghamshire Police is committed to managing ill health in a positive and sensitive manner and being mindful of balancing the needs of the individual with those of the organisation.

It is recognised that there may be circumstances where Police Officers and Police Staff have sustained an injury, illness or trauma which will necessitate a gradual return to full duties. In these circumstances, individuals may resume duty as part of a recuperative plan. However, individuals must return from sickness absence to either full operational duties or a timed recuperative plan which clearly aims to get them fit for full operational work. Alternatively, individuals may have a permanent or temporary restriction due to inability to perform full operational duties and this will need to be managed accordingly with consideration given to a number of options including medical redeployment, ensuring compliance with the Disability Discrimination Act 1995.

In the majority of cases such restrictions will be due to a medical condition. However, this procedure also considers people who are moved from their role for reasons relating to disciplinary proceedings [either during or after an enquiry].

SECTION 3 AIMS / OBJECTIVES

The overriding principle is to either keep people at work or to return people from sick leave as soon as possible. This is then properly managed and reviewed as set out in the procedure below.

This procedure includes both police officers and police staff.

SECTION 4 DETAILS

RECUPERATIVE DUTIES

Are temporary rehabilitation duties or working conditions approved to assist an individual's ultimate return to full duties following illness or injury at the earliest opportunity. The restrictions would normally last for no more than six weeks. In very exceptional circumstances the timescale may be increased.

An individual need not necessarily have been absent prior to the use of a recuperative duties programme. Where appropriate, recuperative duties may be adopted as a preventative measure to avoid future sickness absence.

An individual need not be defined as being 'disabled' under the DDA 1995 in order to benefit from the use of recuperative duties. However, the use of such duties may be regarded as a reasonable adjustment where the Act does apply.

Normal pay will apply regardless of hours actually worked. Whilst each case will be considered on its individual merits, it will only be in exceptional cases that recuperative duties and full pay will be continued after a period of 3 months.

If the individual has not returned to full duties after 3 months then a medical referral must take place. If approved, to further aid rehabilitation, then the individual may be transferred to the restricted duties scheme.

This process will be the responsibility of the Line Manager, taking relevant professional information into account.

How this Process operates – Recuperative Duties

Eligibility

All individuals are potentially eligible for a recuperative duties programme.

Typically this will be offered by a Line Manager to enable an individual to return to work more quickly than otherwise would be possible.

It is for Line Managers to arrange and manage this process.

An individual does not have to be absent from work to qualify to be placed on recuperative duties, if by undertaking them they can be retained within the workplace.

Recuperative duties will only be offered where it is deemed to be operationally possible to accommodate and does not impact on the health and safety of the individual or other members of staff.

Length of Time

Not to exceed 6 weeks without guidance being taken by the Line Manager from relevant professionals such as the Occupational Health Unit (OHU) and/or HR Manager.

Review periods will be set by the Action Plan (Action Plans – Page 16) but will normally be as a minimum every two weeks.

If an individual is unable to return to their full duties within 6 weeks, then a medical referral [G249 form] must be completed by the Line Manager with assistance/support from the HR Manager.

Duties to be Undertaken

Recuperative duties, are those which enable an individual to undertake their normal role, but with adjustments.

If an individual is unable to undertake their normal role albeit with adjustments, then they do not qualify for this programme, and the restricted duties process should be used.

Where recuperative duties are considered appropriate this will be done in discussion between the individual and the line manager with further reference, as necessary, to the relevant Personnel Department/OHU.

Recuperative duties will normally consist of some restriction[s] to the normal duties of the individual e.g. no driving of response vehicles, no heavy lifting, non-confrontational duties etc.

In a small number of cases, to assist an individual to return to work or to remain in the workplace, it may be appropriate for the individual's hours of work to be temporarily reduced. Each case will be dealt with on its own merits.

The recuperative duties programme is only open to members of staff who are able to undertake as a minimum at least 50% of their normal hours, and to be able to undertake their full normal hours [including shift working] within the 6-week period of the programme.

Any individual who is unable to work the hours stated above, then recuperative duties will not be offered and the individual will be referred to OHU through the restricted duties process.

Any extension to the 6 weeks [to a maximum of 3 months] will be dependent on the individual being able to work their full hours.

Provisos

All individuals will partake in a recuperative duties programme if the Organisations Occupational Health Advisers believe them to be a feasible alternative to remaining absent.

Failure to participate may adversely impact on decisions regarding pay.

See page 18 - Conflicting Medical Opinion if an individual refuses to participate in a recuperative duties programme.

Roles and Responsibilities

Individual

All individuals will take part in a recuperative duties programme where appropriate. Failure to take part may impact on entitlement to sick pay and could lead to disciplinary or capability action being taken. Where there is a conflict of medical opinion (Page 18).

The individual will ensure that they make every effort and undertake nothing that may be detrimental to their full recovery.

The individual should advise their Line Manager about any reasonable adjustment that they may need to assist in their return to work.

They will notify their Line Manager of any changes that may impact on their ability to undertake recuperative duties.

They will notify the Line Manager of any changes that may impact on any risk assessment that has been undertaken.

They will co-operate with the organisation to support them back to their full and normal duties.

Under the Health & Safety at Work Act, individuals have a responsibility to exercise a duty of care in relation to their own health and safety and that of their colleagues. They are also required to co-operate with their employer to meet legal requirements.

Line Manager

It is the Line Managers responsibility to agree and manage this process, taking professional advice as necessary from the relevant Personnel Department and OHU.

They will work with the individual to assist in an early return to work on recuperative duties, or, if the individual is still at work to ensure they are retained within the workplace.

They will implement agreed reasonable adjustments fully and as soon as reasonably practicable.

Under the Health and Safety at Work Act, Line Managers need to ensure that as far as is

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reasonably practicable a working environment is provided that is safe, without risk to health and with adequate facilities and arrangements for the welfare of staff.

They will seek professional guidance from OHU and the relevant Personnel Department where appropriate.

They will be responsible for drawing up an action plan (see guidance on Action Plans - page 16) and undertaking a risk assessment prior to the commencement of the programme.

They will ensure that reviews take place in a timely manner.

Will provide the relevant Personnel Department with copies of the action plan and risk assessment before the individual starts on the agreed programme.

They will keep the relevant Personnel Department updated of any changes.

They will not allow the programme to extend beyond 6 weeks unless advice is sought from the HR Manager and OHU.

Local Duties Managers[s] must be advised of the fact that the individual is on a recuperative duties programme, and when they are again fully operational by the Line Manager.

Divisional/Departmental Personnel Departments

Will provide advice and guidance on the process and paperwork required.

Will keep records of those individuals who are on recuperative duties and update relevant systems in a timely manner.

Provide statistics as and when required

Human Resources Manager

Will provide professional advice and guidance to Line Managers on this process.

Occupational Health Unit (OHU)

The primary role of OHU is to provide useful information to Line Managers, the relevant Personnel Department and HR Managers on the individual's ability to do their job and what if any reasonable adjustments would help a return to the workplace on recuperative duties.

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RESTRICTED DUTIES

Are defined by the HMIC as 'duties or conditions approved for other than recuperative purposes and for fixed periods totalling more than 28 days to any officer unable to perform one or more aspects of full operational duty for a specific reason'.

This may include those individuals restricted for reasons of pregnancy, longer-term medical issues or restrictions due to discipline proceedings [during and after investigation]. There is still an expectation that the individual will return to their usual role.

The restrictions could last as long as twelve months – however, every effort must be made to keep any period of restriction to a minimum.

Longer-term restrictions may also apply to individuals subject to a prolonged investigation or following an inquiry.

Review will again be subject to an action plan but must be at least once a month in the first twelve months (See Method of Review - Page 17).

OHU will determine, following a referral from the Line Manager, if an individual is suitable for Restricted Duties.

Restricted duties do not necessarily mean there is a need to reduce the hours worked, though this may be a reasonable adjustment for a short period of time to support the return to work of the individual.

It is not deemed to be a reasonable adjustment for an individual to work restricted hours and remain on full pay permanently; if the need to work reduced hours is permanent or it is likely to become permanent then it is deemed to be reasonable to pay for the hours worked. Police Staff members will have their contracts amended accordingly and Police Officers may apply to work part time.

Non-compliance with this process may result in action being taken under the Capability Process [Police Staff] or the Police Efficiency Regulations [Unsatisfactory Performance Procedure] [Police Officers].

How this Process operates – Restricted Duties

Eligibility

Restricted duties may be instigated for any of the following three category's

- Reasons relating to disciplinary proceedings
- Medical reasons- Pregnancy related
- Medical reasons

Reasons Relating to Disciplinary Procedures

When any individual is suspended, moved, or placed on restrictions due to disciplinary proceedings then OHU and the relevant staff association [if appropriate] must be advised of this by the HR Manager to ensure welfare support is made available.

Police Officers

Where Police Officers are the subject of investigation they may need to be redeployed for the duration of the investigation.

A similar process to that employed for medical restrictions should be used. The Professional Standards Department should be the adviser on restrictions rather than the Force Medical Adviser. There may, however, be occasions where the input of the OHU is necessary.

An Action Plan will be drawn up by the Line Manager which will include review dates, welfare/OHU appointments and risk assessments (See page 16 on Action Plans).

The responsibility for reviewing the action plan will be between the Professional Standards Department, the HRM and the relevant Line Manager.

Such investigations are usually expected to result in medium term restrictions.

Police Staff

Police Staff can be subject to investigation that has come from an external complaint or from concerns within the organisation. External complaints are dealt with by the Professional Standards Directorate; internal complaint investigations are co-ordinated by the HR Manager. In both cases the Head of Human Resources following liaison with the HR Manager will act as the link and ultimate decision maker regarding whether the Police Staff Discipline Procedure is invoked.

The nature of the allegation will determine whether the member of staff is restricted or indeed suspended [see Police Staff Discipline Procedure].

Where the individual is restricted an Action Plan will be drawn up by the Line Manager which will include review dates, welfare/OHU appointments and risk assessments (see Action Plans – page 16).

The responsibility for reviewing the Action Plan will be between the Professional Standards Department [if applicable], the HR Manager and the relevant Line Manager.

Such investigations are usually expected to result in medium term restrictions.

Following an Enquiry

For both Police Officers and Police Staff, an enquiry may result in permanent restrictions of the individual.

Any such permanent restriction must be managed through the redeployment process.

There may be a point where, depending on the outcome of the enquiry, that restrictions are lifted. This will be dependent on risk assessment informing management decision.

Medical Reasons – Pregnancy Related

For full details see the Maternity Provisions for Police Officers and Police Staff.

Medical Reasons – other than Pregnancy Related

All individuals are potentially eligible for a restricted duties programme.

Restricted duties are normally for those individuals who require adjustments to be made to enable them to remain in the workplace that will be for fixed periods in excess of 28 days.

Restricted duties, although normally for longer periods of time, will be used in place of the recuperative duties process for shorter-term restrictions where the role required is other than the one held substantively by the individual, or the restrictions are likely to last for a period greater than 6 weeks.

All medical referrals will be made by the Line Manager, on Form G249, supported by guidance as necessary from the relevant Personnel Department.

Individuals may NOT self refer on other than welfare grounds to the OHU.

Restricted duties for medical or welfare reasons may ONLY be recommended by OHU, following full consultation with the individual's Line Manager and HR Manager.

Individuals must be given a copy of the OHU referral form, once the Line Manager has completed this. Ideally, if at all possible and appropriate, the individual should be consulted regarding the content of this form.

Restricted duties will only be offered where it is deemed to be operationally possible to accommodate them and it does not impact on the health and safety of the individual or other members of staff.

Length of Time

Restrictions are likely to last for 28 days or more.

In a small number of cases, to assist an individual to return to work or to remain in the workplace, it may be appropriate for the individual's hours of work to be temporarily reduced. Each case will be dealt with on its own merits.

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The restricted duties programme is only open to individuals who are able to undertake as a minimum at least 50% of their normal hours, and are expected to be able to undertake their full hours within the first 3 months of the programme.

Any individual who is unable to return to working their full hours within the first 3 months of being restricted will be referred to OHU by the Line Manager for a further review. An additional 3-month period on restricted hours [where these must be a minimum of 50% of the normal hours] may then be allowed, if this is supported by OHU and it is operationally possible to accommodate [with any other reasonable adjustments that are required].

It is only in very EXCEPTIONAL circumstances that an individual will be accommodated working less than 50% of their normal hours. This is a senior management decision that must also have the approval of the Senior Line Manager, Head of OHU and HR Manager.

The restricted duties programme may be likely to last for 12 months. In some cases these restrictions may be permanent.

Where it is considered that the restrictions are likely to be permanent or that the individual is unlikely, within a 12-month period, to be able to return to their substantive post with adjustments, then they will be considered for redeployment in to a "Fit for Post" role under the organisations redeployment process.

Duties to be Undertaken

Restricted duties are those which enable an individual to return to the workplace in a role, other than their substantive one or to their substantive post with adjustments.

There is an expectation that individuals will be able to return to their normal role. This programme aims to support this expectation.

Police Officers

The restrictions that will impact on a Police Officer being unable to undertake their normal role for a period of time will fall into one of the following category's:

- The ability to sit for reasonable periods, to write, read, use the telephone and to use [or learn to use] IT.
- The ability to run, walk reasonable distances, and stand for reasonable periods;
- The ability to make decisions and report situations to others.
- The ability to evaluate information and to record details.
- The ability to exercise reasonable physical force in restraint and retention in custody.
- The ability to understand, retain and explain facts and procedures.

The Force Medical Adviser should be asked to give more detail than just the key capabilities above so that a more informed management decision can be reached.

Where possible police officers on restricted duties should have their existing established post adjusted to their needs or be moved to another established post. Any new post/project should be one in which it is necessary for that person to be a police officer.

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If it is necessary to create a project [and thus a post] outside the establishment to keep an officer at work then this should be a short term solution and be reviewed at least monthly, this should be only for exceptional cases. This is because of the organisations requirement to manage the establishment.

The Force Medical Adviser should be asked to give more detail than just the key capabilities above so that a more informed management decision can be reached.

Where possible police officers on restricted duties should have their existing established post adjusted to their needs or be moved to another established post. Any new post/project should be one in which it is necessary for that person to be a police officer.

If it is necessary to create a project [and thus a post] outside the establishment to keep an officer at work then this should be a short term solution and be reviewed at least monthly, this should be only for exceptional cases. This is because of the organisations requirement to manage the establishment.

Police Staff

Whether or not a member of police staff is medically restricted from carrying out their duties will obviously depend on the post that the person holds.

Every effort will be made to adapt workstations, change hours etc to allow a person to continue in their role.

Where the member of staff is unable to remain in their substantive role, they will be placed on the medical redeployment register. The mechanism for redeployment is set out in the Medical Redeployment procedure (see page 21)

Provisos

All individuals will partake in a restricted duties programme if the organisations Occupational Health Advisers believe such a programme to be a feasible alternative to remaining absent.

Failure to fully participate in a programme that the organisations Occupational Health Advisers advise is suitable [taking due account of Regulation 34, in the case of Police Officers] may adversely impact on decisions regarding pay.

Roles and Responsibilities

Individual

All individuals will take part in a restricted duties programme if the organisations Occupational Health Advisers support this.

If a change of role were required then the individual's substantive post would remain theirs until they were [if necessary] redeployed to a new role or their contract of employment was ended.

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The individual will ensure that they make every effort and undertake nothing that may be detrimental to their full recovery.

They will notify their Line Manager of any changes that may impact on their ability to undertake restricted duties.

They will notify the Line Manager of any changes that may impact on any risk assessment that has been undertaken.

The individual should advise their Line Manager about any reasonable adjustment that they may need to assist in their return to work.

They will co-operate with the organisation to support them back to their full and normal duties at the earliest opportunity.

Under the Health & Safety at Work Act, Individuals have a responsibility to exercise a duty of care in relation to their own health and safety and that of their colleagues. They are also required to co-operate with their employer to meet legal requirements.

Line Manager

It is the Line Managers responsibility to agree and manage this process, if OHU support its use taking professional advice as necessary from the relevant Personnel Department.

They will work with the individual to assist in an early return to work on restricted duties, or, if the individual is still at work, work with them to ensure they are retained within the workplace.

They will be responsible for ensuring any reasonable adjustments that are agreed are implemented.

Under the Health and Safety at Work Act, you need to ensure, as far as is reasonably practicable a working environment that is safe, without risk to health and adequate as regards facilities and arrangements as to the welfare of your member of staff.

Should an alternative role be required due to the nature of the restrictions, they will work with the HR Manager and the individual to identify a suitable post. Line Management responsibility would then pass to the new Line Manager.

The HR Manager should ensure that any new Line Manager is made aware of the restrictions and any adjustments that have been agreed.

They will be responsible for drawing up an action plan (see guidance on Action Plans - page 16) and undertaking a risk assessment prior to the commencement of the programme. The risk assessment form G193 contains the necessary guidance to carry out a risk assessment.

They will ensure that reviews take place in a timely manner.

Will provide the relevant Personnel Department with copies of the action plan and risk assessment before the individual starts on the agreed programme.

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They will keep the relevant Personnel Department updated of any changes.

They will not allow the programme to extend beyond the agreed period unless advice is sought from the HR Manager and OHU.

Local Duties Managers[s] must be advised of the fact that the individual is on a restricted duties programme, and when they are again fully operational by the Line Manager.

Divisional/Departmental Personnel Departments

Will provide advice and guidance on the process and paperwork required.

Will keep records of those individuals who are on restricted duties and update relevant systems in a timely manner.

Provide statistics as and when required.

Ensure regular reviews of restricted and recuperative programmes are carried out.

Human Resources Manager

Will provide professional advice and guidance to Line Managers on this process.

Occupational Health Unit (OHU)

The primary role of OHU is to provide useful information to Line Managers, Personnel Departments and HR Managers on the individual's ability to do their job and what if any reasonable adjustments would help a return to the workplace on restricted duties.

FIT FOR POST/PERMANENTLY RESTRICTED/RETAINED UNDER A20

Restrictions for these individuals are expected to last more than a year and in some cases are thought to be permanent. This is likely to include individuals whose medical condition will leave them unable to take up their usual role for at least twelve months.

Individuals who are judged to be subject to long-term restrictions may be considered for medical retirement as part of their review process. For both police officers and police staff the medical retirement process requires assessment either by the Force Medical Advisor (police staff only) or an independent doctor, the Selected Medical Practitioner (SMP) (police officers and police staff).

Long-term restrictions may also apply to individuals subject to a prolonged discipline/misconduct investigation (more than twelve months) both during and/or following the enquiry.

Redeployment on medical grounds to a suitable alternative post will always be the last reasonable adjustment considered. Every effort will be made first to retain the individual in their original job with reasonable adjustments such as equipment, an alteration in hours or allocating an inessential duty, which is found to be difficult to someone else. In some

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cases, however, this may not be possible if, for example the role cannot be done on a part time basis, is too demanding or has a particular service requirement e.g. PSD, Response Driving, Firearms.

For further guidance on reasonable adjustments please refer to the Disability Procedure.

Where it is recognised and agreed by the organisation that an individual has an underlying medical condition that results in a long-term restriction, is subject to restrictions following disciplinary proceedings, or a person is retained under A20 and they cannot be accommodated as above then they will be subject to the redeployment policy on medical or discipline grounds.

When a suitable established post has been identified and agreed, the member of staff will be deemed to be 'fit for post'.

For more information on the redeployment process please refer to page 21.

RECUPERATIVE/RESTRICTED/FIT FOR POST PROCESS

An Action Plan should include:

- What actions are needed prior to the individual starting the recuperative/restricted/new post – including a risk assessment. [Form G193]
- Details of what the current restrictions are.
- Details of the role to be undertaken.
- Details of the hours to be worked.
- Details of what adjustments have been agreed.

When the individual is expected to be fully operational/able to return to their normal role:

- At what time recovery is expected
- What the review periods will be
- Who will undertake the reviews
- What progress is expected at each point
- For a recuperative duties action plan reviews must take place as a minimum every 2 weeks.
- For a restricted duties action plan reviews must take place as a minimum every month
- For those individuals who are deemed to be 'Fit for post' then they should be reviewed at least annually. This will include a medical referral as a matter of course.
- Risk assessment reviews.
- Details of welfare/medical appointments/interventions to take place.
- Where appropriate dates of salary reviews.

It is the Line Managers responsibility to draw up the action plan in liaison with OHU, the relevant Personnel Department and PSD as appropriate.

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METHOD OF REVIEWAL

Recuperative Duties – It is the Line Managers responsibility to undertake the reviews as a minimum on a two weekly basis and to keep Personnel and Duties updated of any changes.

Restricted Duties – Reviews will be organised by the relevant Personnel Department. They should be on a monthly basis [unless the action plan requires a more detailed/frequent review] and involve:

- The HR Manager or Personnel Officer
- A representative from OHU and/or PSD (Professional Standards Directorate) [if the restriction relates to an enquiry]
- Line Manager

The individual involved should be made aware of the reviews and be invited to attend or make representation either through a written report or staff association representative.

Note: the meeting will take place in line with the Action Plan whether or not the member of staff is able to attend. If the member of staff is absent from the meeting it is the Line Manager's responsibility to update the person on the content of the meeting and any outcomes. This will be backed up with a letter from the relevant Personnel Department.

The same process for Fit For Post members of staff will apply as for Restricted Duties. However, a medical referral must have been made and taken place prior to the meeting if the deployment relates to medical issues – should this relate to issues resulting from disciplinary proceedings then PSD guidance should be sought. This should be detailed in the individuals action plan.

CONTENT OF THE MEETING

This will be dependent in part on the individual case. It is likely to include:

- A progress update.
- Whether the action plan is being kept to.
- How the person is coping with their revised or new role.
- Where the hours have been reduced if they can now be increased.
- Where it is a medical matter, the current OHU report.
- Any Action that needs to be taken regarding pay.
- Where expected – the current likelihood of the person returning to their substantive role;
- The action plan itself – does it require revision;
- Is there a case for referral to the SMP for medical retirement?
- Report or input from PSD where the restriction results from an enquiry.

CONFLICTING MEDICAL OPINION ON AN EMPLOYEE'S ABILITY TO RETURN TO WORK

All individuals will partake in a recuperative or restricted duties programme if the Organisation's Occupational Health Advisers believe them to be a feasible alternative to remaining absent.

If an individual refuses to participate in a recuperative or restricted duties programme then, under Regulation 33 Police Regulations 2003, Annex P (police officers) or conditions of service (police staff), a referral to an independent medical practitioner will be made for determination as to whether that individual is fit to undertake recuperative or restricted duties. If the independent medical practitioner agrees with the Force Medical Officer then the individual will no longer be entitled to remain absent and receive payment.

REFUSAL TO PARTICIPATE

Failure to participate in a recuperative or restricted duties programme may:

Adversely affect any decisions in those cases when the question of extensions of pay might have to be considered.

Result in discontinuance of pay if the HR Director after consideration of all relevant information is satisfied that the individual could return to work on a recuperative or restricted duties basis. [Police Regulation 33]

WHAT ARE THE HEALTH AND SAFETY CONSIDERATIONS?

A **risk assessment** will be undertaken for all individuals prior to and during periods of restricted or recuperative duties as necessary. Further advice can be sought from the Force H & S Adviser.

A specific risk assessment must be carried out for all individuals on recuperative or restricted duties and reviewed at regular intervals, in collaboration with the individual and Line Manager. These should be monitored by the relevant Personnel Department. Risk assessments are a methodical way of looking at tasks, duties and activities that the individual performs in their role. The risk assessment will consider tasks and activities, individual limitations and conditions that impact upon employment. The risk assessment provides a pro-active approach to ensure controls are provided thereby reducing or eliminating the risk to which an individual is exposed.

Full guidance in how to complete a risk assessment is contained with Form G193a – Risk Assessment.

Once the safety system has been established, Line Managers have responsibility to ensure that risk assessments and control measures are properly audited and reviewed whenever significant changes occur either in the work operation itself or in the process utilised. A change is significant if it alters the nature of the risk in any way.

Under the Health & Safety at Work Act, Individuals have a responsibility to exercise a duty of care in relation to their own health and safety and that of their colleagues. They are also required to co-operate with their employer to meet legal requirements.

PAY FOR THOSE ON RESTRICTED DUTIES

Support Staff

It may be that any adjustments or changes to a role as a result of restriction would see no difference in salary between the old and new roles. However, when an individual reduces their hours or moves to a role that attracts fewer or no allowances it is possible that the salary earned by the person who is restricted is greater than that usually paid for their new role.

In this case the action plans for those on restrictions must include review of salary. It is unlikely to be considered a reasonable adjustment for someone on restricted hours to continue to be paid full pay for a prolonged period of time.

Police Staff contract's of Employment will be amended in line with the hours they are actually working.

A member of police staff whose substantive post is one which would attract either weekend working or shift allowance but is unable to work their normal shift pattern for a period likely to be in excess of 6 weeks will receive 28 days notice to align any allowances with the hours actually being worked. This will be addressed through the Case Conference process. Allowances will be reinstated when/if an individual returns to working shifts / weekends.

Police Officers

Where as a result of restrictions an officer has reduced their hours of work the action plan must include a review of the hours worked. As for Police Staff this will also be addressed through the Case Conference process.

Police Officers may apply to work part time if they are unable to work full hours – should they choose not to do so but remain unable to work full time hours after a reasonable period of time, [in line with the reasonable adjustments identified through the case conference, this is unlikely to be for a period in excess of 6 months] then consideration will be given to the invoking the Efficiency Regulations through the Unsatisfactory Attendance Procedure.

POLICE OFFICERS AND PART TIME WORKING

Regulation 5 [five] of the Police Regulations 2003 requires an officer's consent to part time working. A disabled [or non disabled] officer cannot therefore be required to work on a part time basis. However, it will be in the interests of officers to continue in employment on a part time basis if they cannot work full hours. A failure to attend work when required to do so is likely to lead to action under the Police Efficiency Regulations 1999 [as amended]

EQUAL PAY

The organisation will avoid placing restricted duties and fit for post officers into police staff posts. If the police officer cannot be called upon to undertake full operational duties – or duties that only a police officer can undertake – the police staff could have an equal pay claim.

EXTENSION OF SERVICE

Where a police officer requests an extension of service or applies to the 30+ scheme consideration of any restrictions will be taken into account. This will be to determine whether the officer can be retained in a role that is an established post and one that requires police powers.

PROMOTION

Any medical restriction should not prevent police officers or police staff applying for promotion/other roles. The applicant should be able to undertake the new role if successful with reasonable adjustments.

INTERVIEW

Where police officers or police staff have a long-term restriction and are already in a fit for post role, they will be guaranteed an interview for a post where they meet the minimum criteria for the role. This only relates to those staff with medical restrictions. The ability of a member of staff to move roles where they are restricted as a result of an enquiry will be determined by the HR Director in conjunction with the PSD and the appropriate HR Manager where appropriate.

PROBATION

Police Officers and police staff have a duty to make Nottinghamshire Police aware of any medical problem that may impose restrictions/impact on their work.

For police staff every effort will be made to make reasonable adjustments to enable the person to remain in their role. Where this is not possible efforts will be made under the redeployment policy to find alternative work. However, priority will be given to their colleagues who have served for more than a year with the organisation. The capability process may be used where redeployment within 6 months has not been possible.

Police officers are expected to be able to perform the ordinary duties of a police officer (Appendix 1). Where a probationer declares a medical condition that may be a block to them performing the ordinary duties of a police officer then every effort will be made to make reasonable adjustments to allow them to continue in their role. Where adjustments cannot be made so that the officer can perform all the ordinary duties of a police officer, a decision must be made under Regulation 13 [thirteen] of the Police Regulations 2003 whether the officer can continue with their service to the organisation.

This decision will be taken with full medical evidence and input from all parties concerned.

MEDICAL REDEPLOYMENT PROCESS

Fit for Post Redeployment Process – see Appendix 3 for flowchart.

Where an officer or member of police staff is judged to be subject to long-term restrictions, a case conference will be held to assess if consideration should be given to medical retirement or redeployment.

This process may be deemed to be appropriate at any time and does not need an individual to have been on a restricted duties programme for a set length of time. Each case will be considered on its own merits.

The individual involved will be notified of the case conference and invited to attend or to make representation either through a written report or staff association representative.

The HR Manager will chair the meeting; also in attendance will be the Line Manager or Countersigning Officer and a representative from the OHU Department. If appropriate then a representative from PSD will also attend. The individual may, if they wish be accompanied by a staff association representative/friend, they must either be a serving police officer or member of police staff

The intention is to see if reasonable adjustments can be made to the individuals substantive post to enable them to perform the role on a permanent basis or if redeployment into another role is or will be required.

CONTENT OF THE CASE CONFERENCE

The HR Manager will explain the purpose of the meeting. The guidance from the Home Office regarding medical redeployment for an individual who may be subject to the DDA will be explained. The individual will be asked to allow personal medical information to be discussed if it is deemed necessary and appropriate in the context of the meeting. This is:

- There should be no automatic move from operational duties/ an individuals substantive position
- The focus should be on determining what the individual CAN DO in consultation with individual and OHU. [Type of restrictions]
- Can current role be performed with reasonable adjustments? All possible reasonable adjustments should be explored. This may well involve obtaining specialist medical and other expert reports, such as from a disability employment adviser or IT specialist. Any reasonable adjustments that are identified should be implemented as quickly as possible. If a delay in providing adjustments is unavoidable, then the HR Manager will ensure the individual is kept informed for the reasons for the delay.
- There are various bodies that may help including Access to Work which is a government run scheme that may assist with solutions. See Appendix 1.

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- If there are no reasonable adjustments that will enable the individual to retain their substantive post, then a skills assessment should be conducted.

This should reveal:

- The skills acquired in their job
- Skills that may have been acquired outside work
- Any transferable skills
- Training needs

The HR Manager will then be responsible for ensuring that the organisation as a whole is reviewed to identify:

- Current suitable vacancies
- Vacancies that might be suitable with reasonable adjustments e.g. change of location, working hours or removal of an inessential duty
- Vacancies which might be suitable if training were provided
- Vacancies that may arise in the foreseeable future
- The onus is on the organisation to identify suitable vacancies within the organisation.
- If the member of staff meets the person specification for any vacant position then they should be transferred to that post. A competitive selection process should not be held in such cases [Archibald v Fife Council – HL] unless there is more than one person requiring medical redeployment interested in the post.
- Further guidance is available in the Disability Procedure
- OHU must agree that the member of staff is fit for the proposed role. However, the final decision as to suitability is a management one. Where it is not possible to identify suitable posts at the initial case conference, when potentially suitable vacancies come to light a further case conference should be convened to explore the suitability in more detail. Attendees should be the same as for the original case conference but may also involve the Line Manager of the vacant post for expert advice on the role.
- Medical retirement will only be an option only if the criteria is met
- Police Officers can only be redeployed to a Police Staff post, on Police Staff terms and conditions of employment [therefore resigning their position as a Police Officer] if the officer agrees. It would not be deemed to be a reasonable adjustment to post a Police Officer to a Police Staff post and continue on Police Officer pay, conditions etc. They must also meet the person specification for any vacant post.
- If unable to work full hours, an Officer may apply to work part time hours. This right is contained within Police Regulations. For Police Staff after the statutory period of notification, a new contract will be issued with the amendment to hours.
- If there should be disagreement with the description of an impairment/impact on work/risk assessment, then it may be necessary to refer to independent Medical practitioner. This would be arranged through OHU.
- In the event of any dispute, then the individual may use the Fairness at Work process.
- Police Efficiency Regulations 1999 via the Unsatisfactory Attendance Procedure [police officers] or the Capability Procedure for Police Staff or Discipline Procedure for Police Staff may be used if all else fails.

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SELECTION FOR POSTS (POLICE OFFICERS)

There is a requirement to identify suitable police posts for officers who cannot perform frontline operational policing duties or requiring redeployment for reasons relating to disciplinary proceedings. Issues such as operational effectiveness and resilience will need to be considered and a balance established.

All core policing posts should be considered when an officer needs medical redeployment. This may, on occasion mean that another officer, who is fit to perform frontline operational policing duties or an alternative post is moved to accommodate the officer needing redeployment. If there are any doubts regarding fitness then a referral must be done to OHU and a case conference held.

The officer so moved should not be disadvantaged in their new post and should, wherever possible be retained within the particular Division where they are based. If there are no vacant posts on Division then the HR Manager must highlight this to other HR Managers and the need for a particular type of posting will be discussed at the Force Staff Planning Group.

The decision to move an operationally fit officer out of a non-frontline policing role should be carefully considered by the HR Manager and Divisional Management team, taking advice from OHU and consultation with the officer and Staff Association before taking such action.

NEW OR VACANT POSTS

Before any new or vacant post is advertised, [either police officer or police staff post] consideration **MUST** be given to those individuals that need redeploying. No core policing or police staff post will be advertised either locally or across the organisation or externally (apart from partnership funded posts) until consideration has been given to those needing redeployment.

Individuals requiring redeployment on medical grounds will be recorded on NSPIS. The HR Manager is responsible for ensuring a check of those listed as requiring redeployment is carried out prior to any recruitment process commencing. Where individuals are identified, the recruiting HR Manager must liaise with the redeploying HR Manager to establish the suitability of the role, the redeploying HR Manager will have 5 working days to respond to the notification of a potential post.

Any skills match or other process to assess suitability – including a review by OHU must be completed within 10 working days. Failure to adhere to these timescales can impact on operational effectiveness and the post may then be advertised.

SPECIALIST POSTS

Police officers identified as needing redeployment will, if they meet the minimum criteria for an advertised post, be guaranteed an interview.

STAFF PLANNING

The HR Director will chair the strategic attendance management meeting held on a quarterly basis. This will be attended by the Head of OHU and all HR Managers.

Any cases where redeployment on medical grounds or those relating to disciplinary proceedings is proving to be problematic will have their case discussed, having due regard to confidentiality here in order to try and find a suitable established post.

Any potential posts that are identified will be fed back into the case conference process (see page 21)

TIMESCALES

No member of Police Staff will be kept on the medical redeployment register for a period in excess of 3 months without the HR Directors approval.

Police Officers – If a suitable post is identified that meets the needs of the individual on medical grounds then the officer will be so posted.

Police Staff – If a suitable post is identified that meets the needs of the individual on medical grounds and is deemed to be a reasonable adjustment in terms of skill, location, grade etc and is rejected, then the organisation reserves the right to consider termination of the contract of employment under the Capability Procedure.

Any appeals by the individual regarding the suitability of the post should be made to the HR Director in writing within 10 days of receiving the offer of the post in writing and detailing why the post is not considered suitable. A decision will be made by the HR Director considering all evidence available to the organisation within 5 working days of receipt of the appeal. The HR Director will copy the relevant HR Manager into the letter detailing the outcome of the appeal.

Nothing in the above procedures prevents the earlier return to full fitness and duty or the expedition of medical retirement based upon individual circumstances. All individuals have a responsibility to assist and co-operate with the organisation to facilitate their speedy recovery. This includes attending appointments and following medical advice.

SECTION 5 LEGISLATIVE COMPLIANCE

This document has been drafted to comply with the general and specific duties in the Race Relations (Amendment) Act 2000, Data Protection, Freedom of Information Act, European Convention of Human Rights and other legislation relevant to the area of policing such as, Employment Act 2002, Disability Discrimination Act 1995, Sex Discrimination Act 1975 and Employment Relations Act 1999.

APPENDIX 1 ACCESS TO WORK

Access to Work is a government scheme run by Jobcentre Plus. It provides financial assistance towards the extra costs of employing someone with a disability. It is available to unemployed, employed and self-employed people and can apply to any job, full time or part time, permanent or temporary.

The type of support available includes:

- A communicator at a job interview for people who are deaf or have a hearing impairment
- A reader at work for someone who is blind or has a visual impairment
- A support worker if someone needs practical help because of their disability, either at work or getting to work
- Adaptations to a vehicle, or help towards taxi fares or other transport costs if someone cannot use public transport to get to work because of their disability
- Special equipment [or alterations to existing equipment] necessary because of an individuals disability
- Alterations to premises or a working environment necessary because of a persons disability

Funding Available

The funding available depends on the employment status of the disabled individual at the disabled individual at the time of application: For

- Unemployed people starting a job and all self-employed people – the programme will pay up to 100% of all approved costs.
- People changing jobs – the programme will pay up to 100% of all approved costs
- Employed people who have been with the employer for six weeks or longer – Access to Work will not make any contribution to costs below £300. Above this sum, the programme will pay up to 80% of the costs up to £10,000 and up to 100% of the costs above £10,000.
- Travel to work – the programme will pay up to 100% of all approved costs irrespective of employment status.
- Communicator support at interview – the programme will pay up to 100% of all approved costs irrespective of employment status
- A support worker – the programme will pay up to 100% of all approved costs irrespective of employment status.

Access to Work funding is made available for up to three years. A review of an individuals circumstances and support needs takes place if further funding is needed after this time.

Applications for Access to work must be **MADE BY THE PERSON WITH THE DISABILITY ON AN APPLICATION FORM**. Forms are obtainable from the Employment Service Disability Service Team [Through Job Centre Plus].

Access to Work aims to provide the help and adjustments as quickly as possible. In some cases, however, equipment or the permanent adjustment may take time to arrive. In these

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cases, you should ask your Access to Work Adviser to explore temporary alternatives e.g. a support worker or reader while waiting for computer software.

If a delay in providing adjustments is unavoidable, make sure you keep the member of staff informed about the reasons for the delay, what you are doing to overcome the problems in the short term and the likely timescale for the adjustments to be implemented.

As reasonable adjustments enable an employee to do their job safely and to the best of their ability it is not reasonable to ask the employee to contribute to their cost.

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APPENDIX 2 GUIDANCE NOTES FOR COMPLETION OF G249

For referrals to OHU for reason of consideration of recuperative/restricted duties then Form G249 should normally be used.

Where it is necessary or appropriate for a more detailed referral to be made then form G249a should be used.

Advice as to the most appropriate form to use can be obtained from your local personnel team.

Please ensure personnel details of the individual are completed including telephone numbers, as this helps OHU staff to be able to make contact with the individual. Also details of the Line Manager in order communication from OHU can be sent not only to personnel but to the line manager as well.

Reason for referral i.e. reason for sickness absence, this section needs to have as much details as possible. Just putting 'Stress' is not very helpful.

Referring following more than 4 absences on a rolling period of 12 months need only to be referred once even if they having 5 or 6 or more absences in 12 months. Once an individual has been seen in OHU in these circumstances they do not need referring again, unless the circumstances have changed.

APPENDIX 3 POLICE OFFICER AND STAFF REDEPLOYMENT PROCESS

When to consider an individual for permanent redeployment?

Commencement of this procedure may be considered at any point during period of sickness absence or restricted/recuperative duties. Some examples of when this might be are as follows:

- Following an Attendance Review Meeting in line with the Managing Short-term and Long-term Absence Procedures, where medical retirement is not considered appropriate.
- Where it has been identified an individual is not likely to be able to perform their substantive role for a period of at least 12 months even with reasonable adjustments, usually as a result of a Case Conference under the Restricted & Recuperative Duties Procedure.

ATTENDANCE REVIEW MEETING / RESTRICTED DUTIES CASE CONFERENCE

Is the individual fit to continue in their substantive role with reasonable adjustments if required?

