DURHAM CONSTABULARY



Recuperative/Adjusted Duties and Medical Redeployment Policy

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	Scheme







1.0 RECUPERATIVE/ ADJUSTED DUTIES AND MEDICAL REDEPLOYMENT POLICY

2.0 PURPOSE AND SCOPE

- 2.1 The purpose of this policy is to provide guidance to all individuals on the utilisation of recuperative and adjusted duties as a means of facilitating an individual member of staffs return to work or full duties following an injury, illness diagnosis or sickness absence.
- 2.2 The policy also provides guidance regarding the process of medical redeployment

3.0 THE LEGAL BASIS AND LEGITIMATE AIMS

- 3.1 Durham Constabulary is required to comply with the requirements of the
 - Health & Safety Act Work Act 1974
 - Equality Act 2010
 - Police (Health and Safety) Act 1997
 - Data Protection Act/Access to Medical Records Act 1998
- 3.2 Throughout the operation if this policy Durham Constabulary will seek to take the least intrusive action which fits within the working policy criteria and will act fairly and proportionally to achieve the proposed purpose
- 3.3 Durham Constabulary will operate within the policing principles as defined by the College of Policing Code of Ethics and in support of this our policies will seek to promote Accountability, Fairness, Honesty, Integrity, Leadership, Objectivity, Openness, Respect and Selflessness.
- 3.4 The Force recognises the contribution of its entire staff and is committed to creating a fully inclusive working environment. This will be achieved by making reasonable adjustments where appropriate, valuing the differences that a diverse workforce can bring and challenging unlawful and unfair discrimination, bullying, harassment, victimisation and other unfair treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, ethnicity, religion or belief, sex and sexual orientation.

4.0 POLICY STATEMENT

- 4.1 Recuperative duties facilitate the earliest possible return to work by making, if appropriate, short term reasonable adjustments following advice from the Force Medical Advisor or Occupational Health Advisor.
- 4.2 Adjusted duties facilitate (following advice from the Force Medical Advisor or Occupational Health Advisor) a longer period of recuperation to prevent the inappropriate early medical retirement of experienced Staff hence retaining their skills and expertise in line with the requirements of Equality Act 2010
- 4.3 Medical Redeployment facilitates the opportunity for staff to take up employment in another post when they have been deemed unfit for their current role by the Force Medical Advisor

5.0 <u>Health Management Referral Process</u>

- 5.1 All individuals who are expected to be absent from work due to sickness for more than 28 days, must be referred to Health Management Unit by their line manager via form Pers 222. Line management may also refer individuals at an earlier stage or if the individual is currently at work, if they feel it is appropriate. Feedback will be forwarded to the Command/Department, HR and the individuals GP via a report and form Pers. 208.
- 5.2 An individual may return to work after being declared fit to do so by their own General Practitioner (GP) unless any concerns are raised by the Force Medical Advisor.

6.0 Recuperative Duties

- 6.1 All recuperative duties should be meaningful and wherever possible performed as part of an individual's normal role. However, it must be noted that on occasions this may not be possible and an individual may be offered recuperative duties in an alternative role/location. Staff do <u>not</u> have the automatic right to work recuperative duties.
- 6.2 If recuperative duties are recommended, then it is the responsibility of the Head of Command/Department in liaison with the Head of People, Standards and Development (PSD) Command, to attempt to identify an appropriate role or duties for the individual to undertake. If a Command/Department cannot accommodate the recommended recuperative duties this should be communicated to the Head of PSD Command to allow a wider search to be conducted by the HR Manager.
- 6.3 If recuperative duties cannot be offered to an individual he/she must remain on sick leave or commence sick leave. However if the individual's GP determines they are fit for work and the Force Medical Advisor deems they are not, they may be medically suspended by the Head of PSD Command

- 6.4 If an individual's GP states that they are not fit to return to work and the Force Medical Advisor deems that they are fit, then the opinion of a suitably qualified third party doctor may be sought (please refer to Attendance Management Policy).
- 6.5 Not all individuals will be on sick leave when a period of recuperation is recommended. On occasions to avoid an individual taking sick leave, the Force Medical Advisor/Occupational Health Advisor may recommend that a period of recuperative duties should be undertaken.
- 6.6 Staff on recuperative duties will be subject to a written return to work plan (Pers 251) which sets out the arrangements for a phased return to full duties and the time scales involved.
- 6.7 Staff adjustments will remain, until the individual is either assessed by the Force Medical Advisor/Occupational Health Advisor and these are subsequently removed or as outlined on the phased return to work plan.
- 6.8 The minimum number of hours worked per day should be no less than 4 unless there are very exceptional circumstances evidenced by Occupational Health. Occupational Health will provide recommendations regarding a phased return to full hours.
- 6.9 Recuperative duties will not exceed 8 weeks, unless, in exceptional circumstances, the Force Medical Advisor/Occupational Health Advisor outlines their rationale why the recuperative duties should be extended. Such an extension should <u>not</u> exceed six months. During this period the individual will continue to be regularly assessed by the Force Medical Advisor/Occupational Health Advisor.
- 6.10 If any problems occur with the return to work plan the Head of Command/Department must consult with the Force Medical Advisor/Occupational Health Advisor via the HR Manager.
- 6.11 The Force Medical Advisor/Occupational Health Advisor may need to seek further medical information from the individual's G.P. or Treating Consultant before making their recommendation. This information is gathered and stored within the remit of the Data Protection Act/Access to Medical Records Act 1998.
- 6.12 If necessary, management may be required to undertake a workplace risk assessment prior to the individual commencing recuperative duties. Information is available from the force Risk Assessment Policy which is available on the Force intranet. In some instances specialist external assistance may be sought via the Health and Safety Advisor.

7.0 Adjusted Duties

- 7.1 Adjusted duties allow a longer period of recuperation (as recommended by Force Medical Advisor or Occupational Health Advisor) for those members of staff who are recovering from an injury or illness from which they are expected in due course to recover to enable them to return to full substantive role.
- 7.2 The individual member of staff will be assessed by the Force Medical Advisor/Occupational Health Advisor where advice will be given on:
 - a) which adjustments are recommended on medical grounds
 - b) whether the recommended adjusted duties are likely to be permanent.
- 7.3 If the adjustments are considered likely to be permanent by the FMA, the Head of PSD Command will make a determination as to whether the individual should be referred to the Independent Registered Medical Practitioner. (See Retirement/Resignation and Medical Retirement Policy)
- 7.4 The Senior Leadership Team on receipt of form Pers. 208 and accompanying report should ascertain in liaison with the HR Manager if a suitable role is available in the Command/Department. If a Command/Department cannot identify an appropriate role then this should be communicated to the Head of PSD Command to allow a wider search to be conducted by the HR Manager
- 7.5 Individuals on adjusted duties should be assessed by the Force Medical Advisor or Occupational Health Advisor on a regular basis at least every 3 months for the first year adjustments have been in place and thereafter annually.
- 7.6 In addition the individual should be referred to Health Management Unit by their line management via form Pers 222 if:
 - i) the role undertaken changes
 - ii) their medical condition has improved/deteriorated
 - iii) he/she is suffering from another complaint/condition
- 7.7 If adjusted duties are not suitable, appropriate or available, then medical redeployment under the Local Government Pension Regulations may be considered.
- 7.8 The number of staff on adjusted duties will be monitored by both Heads of Command/Department and HR to ensure the restrictions are still appropriate and to ensure adequate force operational resilience.

- 7.9 The Head of PSD Command, in consultation with the Senior Leadership Team has the final decision on whether the recommendation for adjusted duties made by the Force Medical Advisor/Occupational Health Advisor se is accepted.
- 7.10 If an individual is not fit for full duties at the end of six months, they should be considered for medical re-deployment and/or referral to the Independent Registered Medical Practitioner via the Force Medical Advisor.

8.0 <u>Medical Redeployment</u>

- 8.1 The Force Medical Advisor will advise management if medical redeployment or that a referral to the Independent Registered Medical Practitioner for a decision regarding whether they are permanently incapable of discharging their duties as a result of ill-health, may be necessary.
- 8.2 The individual will be included on the redeployment register for a period of 6 months (or until redeployed) and will be required to complete a skills sheet, to assist in their redeployment (See Pers. 232 available on the Force intranet).
- 8.3 As vacancies arise, HR will seek to match the skills of individuals on the register. The individual should be able to meet all the essential requirements of the person specification, however if this is not the case, then individuals may be considered for training within a reasonable timescale and reasonable costs. This will be assessed by the Head of PSD Command and Head of Learning and Development. Appropriate testing/assessment of skills or aptitudes will be agreed between the HR Manager and Command/Departmental representative with responsibility for filling the vacancy (taking cognisance of the Equality Act, if appropriate). Advice will also be sought from the Force Medical Advisor with regard to the suitability of the role.
- 8.4 As redeployment can be an unexpected change, Police Staff will be able to approach the relevant support groups in the usual way e.g. their own Senior Leadership Team, Welfare, GMB/Unison, CiC (confidential care line) and HR, in order to discuss any concerns they may have about the process or changes generally.
- 8.5 In some cases an individual may be re-deployed into a lower grade post. If this is the case they will receive <u>cash value protection</u> of pay based on their current substantive grade together with any appropriate usual allowances payable to the individual (e.g. standby, shift and weekend working) and the <u>actual hours worked</u> by the employee following this re-deployment. Re-deployment, if necessary, may also include posting to a substantive post which is graded one grade higher than the individual's current substantive grade and he/she will be paid accordingly.
- 8.6 Individuals are entitled to 12 month's salary protection from the effective date of re-deployment. Pay protection will cease after the 12 month period or if the individual voluntarily applies for another post, or the date the member of police staff leaves Durham Constabulary, whichever is the earliest. During the salary

protection period the employee's salary will not qualify for any annual cost of living award. In exceptional circumstances an individual may need to be further medically re-deployed during this protection period, if this occurs the existing pay protection arrangements will continue and no further pay protection arrangements will be offered. However, if a further medical re-deployment is necessary after the protection period has elapsed the individual will once again be subject to pay protection arrangements

8.7 The redeployed member of police staff will <u>not</u> be entitled to excess travelling expenses nor excess travelling time compensation.

9.0 **Pension**

9.1 Individuals should seek advice from the Support Services Command - Payroll and Pensions in relation to all pension issues

10.0 **Contract termination**

10.1 Police Staff can remain on the medical redeployment register for a period of 6 months from the date they are notified by the Head of PSD Command that a medical redeployment/retirement is recommended (unless a medical retirement comes into effect before that date), or they are offered and refuse 2 suitable vacancies, on availability. If an employee cannot be suitably redeployed, medical retirement will be considered following a referral to the Independent Registered Medical Practitioner. As a last resort, if the individual is not permanently incapable of discharging their duties as a result of ill-health, their contract may be terminated if they cannot be suitably redeployed.

11.0 Sick Leave

11.1 If an individual is on sick leave whilst on the medical redeployment register, they will continue to receive full pay if the reason for absence is directly related to the reason for medical redeployment and they have not been offered a suitable alternative post.

12.0 Return to work and further Medical Opinion

- 12.1 Where there is a conflict of advice between the FMA and the individual's GP or treating Consultant, the opinion of an independent occupational health doctor may be sought.
- 12.2 Where an individual is considered fit to return to work by their general practitioner but who, in the opinion of the FMA and an independent occupational health doctor is not fit enough to return in any capacity, then the individual will remain on sick leave.

13.0 Specific Instructions

- 13.1 Staff on recuperative duties should not work overtime.
- 13.2 Staff on adjusted duties should not work overtime unless there are exceptional circumstances.
- 13.3 Staff with approved Business & Private Interests agreements will not be permitted to continue with the conditions of this agreement whilst on, recuperative or adjusted duties, without the prior approval of the Head of Professional Standards.
- 13.4 Staff working reduced hours as part of recuperative duties will be required to take annual leave as full days irrespective of the hours worked. (Please refer to the Leave Policy).
- 13.5 Any temporary limitations in relation to maternity are not covered under the provisions of this policy. Please refer to the Risk Assessment policy

14.0 APPEALS PROCEDURE

If an individual wishes to appeal against any decision made in connection with this policy, they should write to or email, the Deputy Chief Constable at the below address within 14 days of receiving a decision. The appeal will be considered and consultation will take place with appropriate individuals to establish all facts before a decision with regard to the appeal is made. A response to the appeal will be provided in writing within 10 working days of receipt of the appeal. Should this period not be achievable the individual will be notified in writing when a decision will be communicated.

The Deputy Chief Constable
c/o Human Resources
Police Headquarters
Aykley Heads
Durham
DH1 5TT

Email <u>human.resources@durham.pnn.police.uk</u>

EQUALITY IMPACT ASSESSMENT (EIA)

RECUPERATIVE/ADJUSTED DUTIES AND MEDICAL REDEPLOYMENT POLICY

An equality impact assessment (EIA) form <u>must</u> be completed by the Policy/Function lead when developing or reviewing policies or procedures which may impact on the way the Force conducts its business (both internally and externally) and must show that when making decisions we:-

- Give due regard to the impact it will have on protected groups
- Undertake an assessment <u>prior to</u> any decisions around policies/procedures being ratified to identify what potential impact has been found and subsequent action taken, and
- Provide an audit trail of the assessment undertaken which identifies how the policy or procedure is likely to affect protected groups.

The EIA must be completed **before** decisions are made, and remain a live document to be reviewed and continually updated during policy/procedure development or updating

This form is a Tool to document the assessment and should be completed, attached to the relevant policy/procedure document and submitted to the HR User Group or other strategic group for ratification

1) Purpose of the policy. Why do we need it and what will it achieve

The purpose of this policy is to provide guidance to all individuals on the utilisation of recuperative and adjusted duties as a means of facilitating an individual member of staffs return to work or full duties following an injury, illness diagnosis or sickness absence.

The policy also provides guidance regarding the process of medical redeployment

2) Explain briefly why the Policy/Procedure is being developed or reviewed?

Policy updated to amend the timescales for inclusion on the redeployment register which is now 6 months

3) What research/resources have been used or considered in the initial stages of this assessment?

4) Who has been consulted around the potential impact during the development/amendment of the policy/procedure

All support networks.

Force Executive (AC0)

HR Staff

Independent Advisory Groups (IAG's)

Staff associations Legal Services

Heads of Command

5) Following assessment of available information, has a positive or adverse impact been

identified OR is the initiative equality neutral?

A **Positive Impact** – will actively promote equality of opportunity or improve relations between

one or more groups

An **Adverse impact** – will cause some form of disadvantage or exclusion.

Neutral impact is when there are no notable consequences for any diversity group

Provide details on ALL decisions for ALL the protected characteristic groups below. Specify what actions, if any, will be taken as a result of the assessment, provide any findings and the reason any decisions were reached, and determine what changes may be necessary to either reduce any adverse impact or enhance any beneficial impact. If an adverse (negative) impact has been identified question 5 must be completed.

	<u>Positive</u>	<u>Negative</u>	<u>Neutral</u>	<u>Details</u>
Age			x	
Disability		Х		There is the potential for a negative impact by reducing the period of time on the register from 12 months to 6 months however in the unlikely event a member of staff is not suitably redeployed then this will be considered by the Head of PSD Command. 12 months' pay protection will continue to apply
Transitioning from one sex to another (either thinking of, in the process of or have)			х	
Marriage and Civil Partnership			X	
Pregnancy and Maternity			X	
Race			X	
Religion or Faith			Х	
Sex			X	
Sexual Orientation			Х	

6) If a negative impact has been identified, please provide further details stating what actions need to be undertaken as a result of the section 5). How any negative impact can be justified for this initiative.

Confirm the above Actions have been incorporated and the EIA is now ready for submission to HR PUG or other Strategic Group.

OFFICIAL

Name Sylvia Horsfield	Date 14th February 2020
7) - Ratify the Policy / Procedure	at HR PUG or other Strategic Group
Meeting/Group:-	HR PUG
Chair of Meeting/Group:-	T/C/Supt Chris Curtis