

Police Service of Northern Ireland

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POLICY DIRECTIVE

MANAGING STAFF WITH DISABILITIES (POLICE OFFICERS AND POLICE STAFF)

1. POLICY IDENTIFICATION

POLICY TITLE: Managing Staff with Disabilities – (Police Officers and Police Staff)

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2. POLICY STATEMENT

- (1) The PSNI is committed to the principles of equality of opportunity for all existing and potential police officers and members of police staff.
- (2) The overarching aim of this Policy is to ensure that individuals who are or consider themselves to be covered by the Disability Discrimination (NI) Order (DDO) 2006, will be treated in a fair, reasonable and prompt manner. Under the DDO we recognise our duty to promote positive attitudes towards colleagues with a disability.

3. INTRODUCTION

(1) Aims/Objectives

PSNI will endeavour to provide reasonable adjustments for an individual who is disabled and commit to consulting the individual in all stages of the reasonable adjustment process. We will:

- (a) strive to ensure that police officers and police staff with a disability achieve their full potential at work by offering, so far as is reasonably practicable, the same facilities, career prospects, training and promotion opportunities that are available to others;
- (b) ensure that our internal policies and procedures do not unfairly discriminate against police staff or police officers with disabilities;
- (c) provide an appropriate working environment to ensure the safety of all police officers and police staff with disabilities and their colleagues;
- (d) dispel some of the myths surrounding disability by enabling individuals to remain in their current roles so far as is reasonably practicable (see Appendices 'A' and 'B').

(2) Definitions

(a) Disability

Legislation defines disability as a physical or mental impairment that has a substantial and long term effect on a person's ability to carry out normal day to day activities. This definition applies where the disability has lasted 12 months or is expected to last 12 months. In 2006, the DDO amended this definition so that people with progressive conditions such as cancer, HIV, or multiple sclerosis will be deemed disabled from the point of diagnosis rather than from the point when the condition has some adverse effect on their ability to carry out normal activities.

(b) Reasonable Adjustment

A reasonable adjustment is a change made to working practices or the working environment that balances the interests of all parties affected, does not cause unjustifiable hardship and maximises the participation of the individual. A reasonable adjustment is not excessive in the demands it places on the resources of the PSNI.

(c) **Discrimination**

Employers may be deemed to have discriminated against a person with a disability:

- (i) If there is evidence of less favourable treatment, if for a reason relating to a person's disability the employer treats a disabled person less favourably than they would treat an able bodied person and the treatment cannot be justified; and/or
- (ii) Reasonable Adjustment – An employer fails to make a “reasonable adjustment” to working arrangements or physical features of premises which place a person with a disability at a substantial disadvantage compared to non-disabled persons. (For more definitions please see Appendix 'C').

(3) **Legal Basis**

- (a) Under the Disability Discrimination (NI) Order (DDO) 2006 the PSNI recognises it's duty to promote positives attitudes towards colleagues with a disability.
- (b) The PSNI is not required to make adjustments under disability legislation that would result in a breach of statutory legislation, for example, if a particular adjustment would breach Health and Safety legislation. However, this applies only in cases where a statutory obligation is specific in its requirements and therefore the provision in relation to statutory obligations has a narrow application. In such situations the Service will still have to consider whether it will be required to make other adjustments that would not breach any legislation.
- (c) Whilst the Service should consider all reasonable adjustments based upon the particular circumstances of each individual case the PSNI is under no obligation to **create** a new job for someone who cannot return to their original position or be redeployed after reasonable adjustments have been considered. Similarly there is no obligation to appoint an individual where they do not meet the reasonably adjusted minimum requirements.
- (d) This Policy applies to all police officers and members of police staff. This Policy Directive replaces both the Northern Ireland Civil Service (NICS) Code of Practice and PSNI Policy on Management of Police Officers.

4. IMPLICATIONS/IMPACT OF THE POLICY

(1) Financial Implications/Best Value/Continuous Improvement/Efficiency

- (a) Implementation of this Policy will have implications for line managers, serving police officers and police staff.
- (b) By fully implementing this Policy, the PSNI will ensure that it acts in a manner which is consistent and in line with the Act and any relevant Guidance issued to the PSNI eg by Northern Ireland Office (NIO), Northern Ireland Policing Board (NIPB) etc.
- (c) The implementation of this Policy will require the support of Heads of Human Resources (HR), HR Managers and line management from within District/Headquarter Departments, Health and Safety Advisers, Occupational Health and Welfare (OHW), Human Resources Department and other police staff.

(2) Training

The intranet site is being developed to provide disability awareness training for all police staff.

(3) Partnerships

The Equality Commission for Northern Ireland has been consulted with regard to this Policy.

(4) Internal Policy Links

Policy Directive No 08/07 - Management of Sick Absence. There may be aspects of other policies which have a direct co-relation to this one where further information may be contained eg Service Procedure No 31/03 - Guidance for Promotions, Appointments and Transfers Appeals, Policy Directive 01/05 - Bullying and Harassment Policy and Policy Directive 04/06 - Equal Opportunities Policy etc including the Fire Prevention and Management Guidance Manual, Management Responsibilities Section. This states that the Fire Precaution Officer is required to ensure that all persons with disabilities receive assistance if required to evacuate the premises.

(5) Risks

This Policy must be consistently applied across the Service to ensure that a police officer/member of police staff who considers that they are/may be covered under disability legislation is afforded equal treatment in their individual circumstances and that every effort is made to provide them with appropriate and necessary assistance and support from the Service.

(6) Bureaucracy

This Policy will result in increased administration (but limited to the number of individuals identified) for line managers and HR administration staff. This is necessary to ensure compliance with legislative requirements. The increase in administration is also justified in reducing the organisation's exposure to criticism and/or challenge that it is failing to meet its Policy Statement and ignoring the provisions of disability legislation.

(7) Estates

This Policy does not consider the impact of potential adjustments for people with disabilities on physical changes to the working environment of the Police Estate. Advice may need to be sought from Estate Services and others within PSNI to ensure accessibility to premises and also any adjustments that may need to be undertaken to the physical environment.

(8) Consultation

- (a) This Policy has been initially formulated by a Working Party representing Management, police officers and police staff including:
 - (i) The Police Federation for Northern Ireland (PFNI);
 - (ii) Superintendents' Association;
 - (iii) The Northern Ireland Policing Board (NIPB);
 - (iv) The Northern Ireland Office (NIO);
 - (v) Northern Ireland Public Service Alliance (NIPSA).
- (b) The above groups have been consulted upon internally throughout the Service and externally with the Equality Commission for Northern Ireland.
- (c) The subsequent review has also been consulted upon with the groups identified in (i) – (v) above.

5. HUMAN RIGHTS/EQUALITY/INTEGRITY/FREEDOM OF INFORMATION

- (1) This Policy is deemed to be Human Rights compliant.
- (2) This Policy has been screened for Section 75 considerations and meets integrity standards.
- (3) This Policy is suitable for public disclosure in accordance with the Freedom of Information Act 2000.

6. REVIEW/CANCELLATION

- (1) This Policy has been monitored and its impact assessed from 1 November 2006. It will continue to be reviewed annually.
- (2) An interim review may be prompted by feedback, challenge or change in legislation.
- (3) The next annual review will take place on or before January 2010.
- (4) People Development in conjunction with key stakeholders will review the Policy Directive on an annual basis to reflect best practice.
- (5) This Policy is available in other formats. Should you require a different format, please contact Human Resources (People Development Unit) in Lisnasharragh on Ext 69930 or use the group email zPeopleDevelopment.
- (6) Policy Directive No 07/06 – Managing Staff with Disabilities (Police Officers and Police Staff) is hereby cancelled.

SECTION 7

1. INTRODUCTION

- (1) There is no legal obligation under the DDO for a member of police staff who has a disability to disclose this information. Any disclosure is purely voluntary however PSNI cannot be liable for disability discrimination against an employee in circumstances where PSNI could not reasonably have been aware of the disability. Additionally Health and Safety legislation places an obligation on employees to cooperate with their employer, to ensure the duty of care for themselves, their colleagues and members of the public is complied with and that no one is put at risk.
- (2) In determining 'reasonable adjustments' the emphasis will be to retain individuals within their existing role although it is acknowledged in some instances it may be necessary to consider redeployment as a reasonable adjustment.

When considering reasonable adjustments PSNI will seek opinions, advice and input from a range of sources. This will include:

- (a) the individual;
- (b) appropriate professionals eg the individual's General Practitioner (GP); OHW; Health and Safety personnel; HR Managers and others;
- (c) operational managers regarding maintaining a balance of the individual's needs with the operational needs to provide an appropriate and responsive 24-hour/7 day service to the public;

with the emphasis being on keeping the individual in their existing role with redeployment being a secondary option.

- (3) Whilst PSNI will endeavour to make reasonable adjustments and/or re-deploy to another role, individuals should recognise that there may be a point reached where no suitable alternative position exists. Indeed re-deployment cannot be used in these circumstances for purposes other than to make relevant and appropriate reasonable adjustments. If all avenues have been exhausted and medical retirement is not an option the organisation may have to consider an individual under the organisation's ill-health capability procedures. Probationer constables with an adjustment under disability legislation must be able to meet the core competencies and pass Physical Competence Assessment (PCA). Inability to achieve the required standards may be dealt with under Policy Directive 06/07 - Probationer Management Policy.
- (4) In order to comply with the requirement to make reasonable adjustments under the disability discrimination legislation, there may on occasions be a requirement to appoint an individual who has been found successful in a selection process, irrespective of the merit position the individual has actually achieved. This decision must be justified and fully documented and can only be undertaken with the consent of the Deputy Director of HR or their designated representative. Please refer to Service Procedure No 55/08 - Selection Competitions and Appointments.
- (5) The PSNI has an obligation to ensure that it fulfils its statutory requirements under all relevant disability legislation.
- (6) The Policy Directive identifies a number of key groups of stakeholders who will be required to take a proactive role to ensure that this Policy is applied consistently and fairly across the organisation.

- (7) Police officers and police staff dealing with situations where disability legalisation applies should promote constructive dialogue between all stakeholders and seek to resolve queries at an early stage. It is important to note that each individual set of circumstances may be different and may require the Procedures and Guidance identified to be applied either in whole or in part(s).
- (8) **It is for District Commanders/Heads of Branch or their nominated representative to determine the level of line management to take decisions and to ensure consistent arrangements are put in place and maintained to discharge the Chief Constable's duties under this Policy.**

2. RESPONSIBILITIES OF ALL POLICE OFFICERS AND POLICE STAFF

- (1) Individuals are encouraged to discuss with their line manager any disability issues, and/or needs arising, which impact upon their work in an open and transparent manner.
- (2) Where an individual has their hours reduced as a result of a reasonable adjustment the onus is on the individual to determine any effect on their pay/pension from their local HR Manager.
- (3) Individuals should note that when they advise PSNI that they are/may be covered under disability legalisation then a number of actions will be taken by line management and/or HR Managers.
- (4) At various stages during this process, there will be the opportunity for the individual to engage in constructive dialogue with management. This is encouraged and may require the individual:
 - (a) To consider and communicate viable options for reasonable adjustments in their current or new role;
 - (b) To agree in writing a new adjusted role profile to be worked to;
 - (c) To seek and/or apply for positions centrally advertised where qualified to do so;
 - (d) To undertake appropriate re-training;
 - (e) To attend OHW for assessment as directed.

This list is not exhaustive and will reflect the individual circumstances pertaining to the individual.

- (5) Our aim is to retain police officers and police staff wherever possible. Medical retirement or dismissal on the basis of inefficiency are seen as a very last resort to be availed of only where all other options, such as reasonable adjustments and redeployment, have been fully explored. Medical retirement is subject to strict criteria and is dependent upon advice from an independent Medical Practitioner (MP).

3. RESPONSIBILITIES OF ALL LINE MANAGERS

- (1) Line management should ensure that in case of a requirement for the evacuation of a building, all staff with disabilities will have a Personal Emergency Evacuation Plan (PEEP) where deemed necessary having consulted with the individual concerned. In all cases, the individual will be involved in the formulation of the plan to take into consideration their individual needs in a safe and dignified manner.
- (2) It is imperative that line management understands disability legislation and how it impacts on their responsibilities to police officers and police staff. Line managers and HR Managers must familiarise themselves and act in accordance with the Guidance on Disability Discrimination Act (DDA) issued by the NIO (Police Division Circular 4/2005); 1996 - Department of Economic Development (DED), 'Guidance on matters to be taken into account in determining questions relating to the definition of Disability', 'Disability Code of Practice – Employment and Occupation' (2005 – Equality Commission for Northern Ireland) and any specific Policy Directive/Service Procedure, which may be issued from time to time by PSNI. All documents referred to can be found on PoliceNet.
- (3) PSNI cannot be liable for discrimination against an employee in circumstances where PSNI could not reasonably have been aware of the disability. Line management should note that the duty to make reasonable adjustments under disability legislation arises only where an employer could reasonably be expected to know of the disability and its effects.
- (4) The duty to make reasonable adjustments could arise where, for example, an individual who usually provides a satisfactory standard of work starts to deliver a less than satisfactory standard. In such a situation line management may reasonably be expected to enquire whether the reason is related to a disability or potential disability. A failure to make such enquiries may not permit the PSNI to raise a defence of ignorance to a complaint that there was a failure to make reasonable adjustments.
- (5) Line Managers and HR Managers in seeking to discharge their responsibilities under this Policy must be able to justify any decision they make as part of the process adopted.

4. RESPONSIBILITIES OF OCCUPATIONAL HEALTH AND WELFARE

- (1) OHW will disclose relevant information to line management where permissions have been given. Whilst maintaining confidentiality, individuals should note that it is permitted for OHW to have/hold meaningful discussions with line management and HR Managers about the consequences of these issues and the effect these may have on individuals in the workplace. In cases where an individual does not want their disability disclosed to local management, OHW will reiterate that this decision will generally hinder the organisation's ability to consider reasonable adjustments. We will apply the principles included in the Home Office guidance document 'Disability and the Police – The Complete Works', as shown at Appendix 'G' to this Policy. In some cases, certain other colleagues do need to know about the disability, its effects, symptoms or the impact on day-to-day activities. If this is the case, then the line manager will explain why it is necessary for others to be aware of this information and the individual's written consent must be obtained before this action can be taken. In other cases, colleagues may only need to know that reasonable adjustments will be made, but not the precise reasons why.
- (2) When requested OHW will advise line management regarding any individual to be managed under the provisions of this Policy. In particular they will, if possible:
 - (a) Identify how the impairment affects activities;
 - (b) Advise on what the individual can and cannot do in broad terms and/or what the individual can do with difficulty;

NOT PROTECTIVELY MARKED

- (c) Comment upon the workplace adjustments, which may be required including the likely duration of such adjustments. (Line management will decide whether the recommended adjustments are reasonable);
 - (d) Identify a date for a review of the individual;
 - (e) Advise on a planned approach to a return back to work if appropriate, rehabilitation and other sources of support; and
 - (f) OHW will be responsible for updating the Duty Adjustment screen on the HR System in a timely and accurate fashion.
- (3) OHW personnel may liaise with the individual's GP and any specialists involved and will regularly monitor any treatment or changes in the condition. OHW will also provide advice and guidance in any case conferences or discussions about the suitability of reasonable adjustments as appropriate.
- (4) From an absence management perspective OHW will provide line management and HR Managers, when requested to do so, with sufficient advice and guidance regarding an individual's illness and absences, which may be disability related, in order to enable the effective management of the individual. This could include information relating to the extent of the disability related leave required to facilitate treatment an individual might expect to undergo or other reason connected which would/could cause absence from work. OHW will advise on what may or may not count as disability related sickness/leave absence and on the type and duration of treatment associated with a particular disability. However it will be the responsibility of line management to make the determination of what is considered to be a reasonable adjustment.

5. RESPONSIBILITIES OF THE HEALTH AND SAFETY ADVISER

- (1) A key aspect will be the use of Risk Assessment, where appropriate, when considering how the working environment or job role could be adjusted to meet the individual's needs.
- (2) Health and Safety Advisers are available to support the HR Manager and line management to assess the level of risk of the proposed adjustment within the working environment. In providing this support Health and Safety Advisers will work to ensure:
 - (a) The police officer or member of police staff with a disability who is being managed under this Policy has a safe and healthy working environment;
 - (b) Police officers and members of police staff are not placed at an increased level of risk because of the reasonable adjustment. This could be due to alterations to the working environment.
- (3) Risk assessments where appropriate must also examine the individual's role in the service delivery so as to ensure that any reasonable adjustments made under this Policy do not expose members of the public to an increased level of risk.

6. RESPONSIBILITIES OF HR MANAGERS AND HEADS OF HR

- (1) HR Managers are responsible for referring individuals with disabilities to OHW where they are aware/informed of a disability related issue for medical advice on whether duty adjustments under DDO should be considered. A key element of these referrals is tailored questioning so that the advice and guidance from OHW is as appropriate and effective as possible.
- (2) HR Managers are responsible for ensuring that the HR System is fully updated by OHW to accurately reflect any adjustments. They are also responsible for updating the role profile details on the HR System.
- (3) Where an individual is redeployed as a result of a reasonable adjustment, HR Managers are responsible for advising Establishment and Structure of the reason for the move.

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- (4) In circumstances where an agreed adjustment relates to an individual's working hours, the local HR Manager must notify Central/Civilian Pay Branch of the revised working arrangements.
- (5) All documentation relating to each individual request for reasonable adjustment must be held by the HR Manager and passed to the Head of HR when the adjustment is at approval stage.
- (6) Heads of HR ultimately approve every reasonable adjustment within their District/Department. Heads of HR, in consultation with the Legal Adviser where appropriate, shall consider appropriate comparators.
- (7) The Head of HR, Headquarters, in consultation with the Recruitment Team, will agree adjustments for individuals applying to join PSNI either as police officers or members of police staff.
- (8) Only Heads of HR will be able to refer a case to the Central Case Conference for consideration however they may delegate attendance at the Central Case Conference to the relevant HR Managers.

7. ROLE OF THE CENTRAL DISABILITY ADJUSTMENTS CASE CONFERENCE

- (1) The Central Disability Adjustment Case Conference will be held on a quarterly basis where the Head of HR cannot agree a reasonable adjustment within their District/Department and where all local options have been explored and exhausted.
- (2) The objective of this Case Conference is to seek to review the application of this Policy in the particular case and agree possible ways forward. Evidence must be supplied to the Central Disability Adjustment Case Conference panel that all options have been explored and exhausted.
- (3) Membership of the Central Case Conference will be drawn from:
 - (a) Equality and Diversity Unit;
 - (b) People Development;
 - (c) Appointments and Postings;
 - (d) Police Federation/Superintendents' Association/NIPSA.
- (4) The Central Case Conference will be advised by representatives from:
 - (a) Human Resources local and central;
 - (b) Local Operational Command
 - (c) Legal Services;
 - (d) OHW;
 - (e) Health and Safety.
- (5) People Development will chair the Central Case Conference and ensure that advice and guidance follows best practice and that there is consistency across the Service.

8. PROCEDURES FOR APPLICATION

- (1) Below is the descriptive version of Appendix 'D', detailing the actions required for police officers and police staff who become disabled during their employment.

(2) **Step 1**

The requirement for adjustment is identified. This will generally be completed by the individual themselves, as a result of advice from their own GP, or by OHW. If the individual has not yet been reviewed by OHW a referral should be made so that a full assessment can be considered by the organisation. Sample questions for OHW could include:

- (a) Should reasonable adjustments under disability legislation be considered?
- (b) Does the individual's disability have a long term effect on their ability to carry out day-to-day activities?
- (c) Is the individual fully fit for work in their current role or, if not, are they subject to or do they require some form of temporary or permanent adjustments? (include supporting documentation eg role profile, job description, etc where necessary)
- (d) How much time will be required for the individual to undertake treatment/rehabilitation?
- (e) What types of duty may the individual be fit to perform?
- (f) What aspects of the current role is the person unable to fulfil as a result of their disability?

It is worth remembering that not all individuals who come under the remit of disability legislation will need an adjustment to their working environment.

(3) **Step 2**

- (a) Following guidance from OHW the line manager and local HR Manager should discuss possible adjustments with the individual concerned. The individual should be told that any decision taken regarding their case will expressly consider:
 - (i) the account expressed by the individual;
 - (ii) reports from appropriate professionals eg the individual's GP, OHW, Health and Safety personnel, HR Managers and others;
 - (iii) overall impact on the requirement to provide an appropriate and responsive 24-hour/7 day Service to the public and the need to respond to public order events and large-scale investigations taking into account existing staffing and adjustments;
 - (iv) adjustments which would allow the individual to continue in their existing role with re-deployment being a secondary option.
- (b) The line manager and HR Manager from this point must ensure that they complete and maintain a clear record of how the individual's case is progressed (see Appendices 'E' and 'F'). It is essential that accurate documentation is maintained at all stages of the process and of any resulting discussions and decisions. These documents are to be treated as strictly private and confidential and managed in accordance with PSNI Manual of Protective Security (MOPS).
- (c) The line manager may seek advice from a Health and Safety Adviser in the HR Department regarding the particular circumstances to ensure, where appropriate, that a risk assessment of the individual's working environment is undertaken.

(4) Step 3

- (a) The HR Manager will co-ordinate a local Case Conference in which OHW advice will be discussed along with any advice from Health and Safety, Equality and Diversity and line management. The purpose of the case conference is to assess what reasonable adjustments, if any, can be made on a corporate level and to make recommendations to the HR Manager responsible.
- (b) The HR Manager should then forward the recommendations of this case conference to the Head of HR for final approval. The first consideration will be to retain the individual in their current role. Therefore, reasonable adjustments must be considered in an attempt to achieve this. It will **not** be automatically assumed that an individual performing an operational role needs to be moved from that post. The suitability of existing or upcoming vacancies will be explored in the case or redeployment, however it will generally not be deemed reasonable for an existing police officer/member of police staff to be removed from post in order to facilitate an adjustment for an individual with a disability under the provisions of this Policy.

(5) Step 4

The Head of HR will then assess whether the adjustment(s) recommended are reasonable. They will consider whether the adjustment(s) will be effective in preventing or reducing the disadvantage to the individual along with health and safety implications, cost implications and the practicality of the solution. If the Head of HR can make a decision the process moves to Step 6. If they cannot make a decision because the only reasonable adjustment lies outside their District/Department the process moves to Step 5.

(6) Step 5

- (a) In the event that the Head of HR is unable to agree whether an adjustment is reasonable or not because it does not lie within their District/Department they can refer it to the Central Case Conference that is held quarterly. The Central Case Conferences will only consider cases that cannot be resolved at a local level. The Case Conference should consider any re-deployment opportunities throughout the PSNI and any reasonable adjustments that may be necessary in any such re-deployment. The current skills, abilities and qualifications of the individual should be matched to the role profile(s) of the suggested re-deployment. The nature of this decision must be considered at the Case Conference and not locally.
- (b) People Development on behalf of the Central Case Conference will notify the Head of HR as to possible solutions for the individual.

(7) Step 6

The Head of HR will decide whether the adjustment is reasonable or not and will document the rationale for the decision. Where the adjustment is considered reasonable the adjustment will be made as soon as possible.

(8) Step 7

Where the adjustment is deemed not to be reasonable by the Head of HR there are 2 possible options for the continued management of the individual:

- (a) consider medical retirement;
- (b) consider commencing inefficiency proceedings.

(9) **Step 8**

The line manager will notify the individual of the outcome and provide an outline of the rationale for the decision. If the adjustment was deemed not to be reasonable they will advise the individual of their right to appeal the decision as outlined in Section 7(9) of this Policy.

(10) Appendices 'D' and 'E' demonstrate the recruitment process.

9. APPEALS PROCEDURE

(1) An appeal can only be lodged:

- (a) When the individual considers there have been procedural flaws in the application of this process;
- (b) When an individual believes they have been treated unfairly;
- (c) When new information becomes available which the individual can demonstrate was not known at the time of consideration.

(2) An individual who wishes to make an appeal must submit the full grounds for appeal to People Development within 14 days of receiving written notification from the Head of HR.

(3) An independent panel will be convened to review all the information provided by the individual and the decision(s) that were made by the Head of HR/Central Case Conference Panel comprising

- (a) Head of People Development;
- (b) Head of Equality and Diversity;
- (c) A representative from the relevant staff association.

(4) The Panel may invite representatives from Health and Safety, OHW, Appointments and Postings/Civilian Postings, Legal Services to attend the Case Conference to provide advice and guidance. These members of staff will not participate in the decision-making process.

(5) The relevant Head of HR/designate will present the case to the Panel.

(6) Representations will be invited from the appellant.

(7) The outcome of this panel will be conveyed to the individual and District Commander/Head of Branch and local HR department as appropriate. The decision made by this Panel is final.

10. ABSENCE MANAGEMENT

(1) Under this Policy there is a need to recognise that individuals with disabilities may need time away from work either to receive treatment for their disability or be absent from work as a result of their disability. There are 2 types of absence to consider, Disability Related Leave and Disability Related Sickness Absence.

(2) Line management should take advice from OHW as to what leave or sickness should be considered as related to a disability and on the type and duration of treatment associated with a particular disability but the decision to identify an absence as a "Disability Related Absence" is one for line management to determine. Accurate records of the type of absence taken must be made and kept. Line management must be able to justify their decision-making if called upon to do so by others. It is worth noting that an extension of pay due to Disability Related Absences is generally not considered to be a reasonable adjustment.

- (3) If an adjustment of working hours is required PSNI will facilitate this where reasonably practicable. In the event of a reduction in hours, whether permanent or temporary in nature, the individual will normally be regarded as transferring to reduced hours working and pay and allowances will be calculated accordingly. A review of a temporary reduction in hours should happen every 3 months in accordance with Policy Directive No 08/07 – Management of Sickness Absence, section 10 paragraph (k), (ii). Permanent reduction in hours should be reviewed annually.
- (4) All absences from work should be recorded accurately and clearly identifying any disability related leave from other absences. Codes have been allocated to enable HR staff to code absence, see Appendix J'.
- (5) Disability Related Absence should be identified at an early stage.
- (6) If a person who has not disclosed a disability takes intermittent days off which triggers the Unsatisfactory Attendance Procedure or has a long period of sickness absence, the line manager must be mindful as to whether the individual may have a disability when managing sickness absence as per PSNI guidelines.
- (7) When an individual discloses that they have been diagnosed with a condition covered by the definition included in disability legalisation from 1 October 2004 there may need to be reviewed to ensure all disability related absences are recorded correctly. Where an individual can provide evidence of appointments related to their disability the relevant absences should be considered as disability related leave; other absences, which may have been related to the confirmed disability, should be considered as disability related sickness. The individual may be asked to provide evidence of appointments etc to enable this process to be completed accurately. (Note it may be necessary to re-code absences on the HRIS as a result of re-categorisation.)
- (8) There are 2 types of absence to consider as it relates to disability:

(a) **Disability Related Leave**

Disability related leave is where an individual, as part of their treatment for a disability, is allowed a period of time off during working hours for therapy, hospital appointments, rehabilitation, assessment, treatment or such like. Generally, disability related leave is suitable for short term and infrequent absence that will normally be regarded as a paid absence and will be subject to review. Where possible, individuals should make arrangements with their line managers before taking the leave, which will usually not exceed one day. Disability related leave is not the same as sickness absence (which is when a person is unable to work due to illness) and it should be recorded separately from sickness absence.

(b) **Disability Related Sickness Absence.**

To assist PSNI in meeting its obligations when managing a person with a disability, it is imperative that periods of sickness absence directly attributable to an individual's disability are recorded on the HR System as being disability related. In all cases of sickness absence attributable to a disability, the normal provisions governing the occupational sick pay scheme will apply. Absences recorded as being Disability Related Sickness Absence will be included in the normal sickness absence monitoring arrangements and therefore will be included in the calculation of trigger points. In the event that a breach of trigger point occurs, it will be for management to determine if it would be a reasonable adjustment to discount any period(s) of disability related sickness absence when considering if further management action is to be taken – ie implementation of the Unsatisfactory Attendance Procedure.

Examples of the above are available on PoliceNet and advice from OHW should be sought if there is any doubt.

- (9) This list is not comprehensive and in relation to both types of absence, guidance and advice can/should be sought from OHW. OHW can advise on what may or may not count as disability related sickness/leave and on the type and duration of treatment associated with a particular disability. However it will be the responsibility of line management to make the determination. The different codes, which record the absence, available on the HR system are described in Appendix 'J'.

11. CONCLUSION

- (1) PSNI management is committed to working in partnership to discharge its responsibilities under disability legalisation.
- (2) Whilst the flowchart and contents of this Policy seek to provide a framework for action relating to the adjustments made under disability legislation, it should be acknowledged that the process and procedures may change in light of experience and case law determination. All cases relating to adjustments as a result of disability legislation will be reviewed on an individual case by case basis.

TACKLING MYTHS AND ASSUMPTIONS

Stereotypes are limited and limiting.

Here are some common assumptions, which may limit opportunities for people who have a disability:

MYTH	REALITY
Disability doesn't affect that many people.	Over 8 million people in the UK have a disability. It is also estimated that disability affects one in four people (including carers, relatives, etc)
Disability isn't a work issue.	Most disabled people acquire their disability during their working life (approximately 3% are born with their disability).
Most disabled people use a wheelchair.	95% of disabled people do not use a wheelchair.
People with disabilities have lots of extra needs.	80% of disabled people do not require an adjustment to their workplace.
Reasonable adjustments cost too much.	44% of reasonable adjustments cost less than £50 – funding is also available from the Jobcentre Plus via the 'Access to Work' scheme.
Disabled people take too much time off work.	80% of businesses say their disabled staff have the same, or better attendance records than their non-disabled colleagues.

Source: Remploy and Employers' Forum on Disability

It is important that decisions about reasonable adjustments are informed and not based on assumptions about what people with a certain type of disability can or cannot do.

EXAMPLES OF ADJUSTMENTS THAT COULD BE CONSIDERED IN THE WORKPLACE

1. PREMISES/WORKPLACE/DUTIES:

- (1) Providing tactile indicators on stair rails, switches, buttons, etc for a visually impaired worker;
- (2) Installing a telephone with controllable amplification for a worker with a hearing impairment;
- (3) Providing a 'reading machine' (optical character recognition system) which scans and reads aloud text for a visually impaired worker or a worker with a learning difficulty;
- (4) Installing soundproofing or visual barriers to minimise distractions for a worker with a learning disability;
- (5) Supplying matt pastel coloured paper and colour coded filing systems for a worker with dyslexia;
- (6) Installing a hands free keyboard for a worker with upper limb disorder;
- (7) Providing ergonomic furniture/equipment for a worker with tendonitis;
- (8) Providing a refrigerator (either in an office or in a vehicle) for storage of insulin for a diabetic worker;
- (9) Providing a place for a worker with HIV to store medication safely and confidentially;
- (10) Installing hand rails to enable a worker with a mobility impairment to use walkways, especially ramps;
- (11) Relocating light switches and shelves for someone who has difficulty in reaching
- (12) Providing appropriate contrast in décor to help the safe mobility of a worker with a visual impairment;
- (13) Providing an accessible disabled parking bay for someone with restricted mobility;
- (14) Training colleagues in first aid procedures to support a co-worker who experiences epileptic seizures (with the individual's permission);
- (15) Providing extra support during induction training for a worker with a disability which affects their confidence and memory skills;
- (16) Removing the requirement to drive operational police vehicles;
- (17) Adjusting duty to ensure that only dual patrol duties are carried out;
- (18) Removing the requirement for performing public order duties;
- (19) Eliminate the requirement to conduct restraint and retention of detained persons.

2. COMMUNICATION:

- (1) Providing a trained lip speaker to assist in lip reading for a worker who is deaf;
- (2) Providing reference manuals/policies, etc in large print, tape or Braille;
- (3) Producing written summaries of detailed verbal information for a dyslexic colleague;

- (4) Giving aide-memoirs or demonstrations to consolidate verbal instructions given to a team member with a learning disability;
- (5) Adjusting the way instructions are given to a worker with a mental health problem;
- (6) Allowing time for reflection and response to verbal information given to workers with learning difficulties;
- (7) Having regular meetings to review how reasonable adjustments are working and to ensure that team members are supportive;

3. WORKING HOURS OR PLACE OF WORK

- (1) Agreeing a flexible pattern of working and meal breaks for a worker with diabetes;
- (2) Scheduling duties around the effects of someone's medication;
- (3) Agreeing working hours to accommodate travel requirements;
- (4) Agreeing a transfer to more suitable or accessible premises for a worker to undertake their role;
- (5) Considering occasional home-working;
- (6) Adjustments to working hours may on occasions have implications on pay and pension.

4. PROVIDING TRAINING:

- (1) Training someone how to use any equipment that has been provided as a reasonable adjustment;
- (2) Providing training materials in large print, tape, Braille; etc
- (3) Making reasonable adjustments to training such as extra time, e-learning access and training techniques tailored to individual needs.

5. SUPPORT:

- (1) Providing a support worker to assist a worker with restricted manual dexterity to undertake filing duties;
- (2) Allocating a mentor for a worker whose disability leads to uncertainty or lack of confidence in the workplace;
- (3) Re-alignment of duties among a team, making use of each member's ability;
- (4) Regular meetings to ensure that reasonable adjustments are still meeting the individual's needs and to ensure that colleagues are also being supportive;
- (5) Making individuals aware of the staff associations, welfare services and Disability Colleague Supporters available;
- (6) Holding an awareness session on a specific disability for colleagues (only with the individual's consent)

6. CHANGING ROLES:

- (1) Re-aligning duties within a team to utilise each member's abilities;
- (2) Allocating an aspect of the job to another colleague;
- (3) Where it is not possible for a disabled team member to continue in their role, to organise re-Deployment to a suitable role. Consideration should also be given to providing training to increase re-deployment options

7. ABSENCE:

(1) **Disability Related Leave**

Providing disability related leave could also be considered a reasonable adjustment. Disability related leave enables a worker to adjust to changes caused by the development of a new disability, or to manage an existing disability. This type of leave covers time off for therapy, hospital appointments, rehabilitation, assessment, treatment, or training, but not sickness. This type of leave plays an important part in keeping an individual fit for their role. Disability related leave must not be used to cover periods of sickness absence, whether or not the sickness absence is directly related to the person's disability. Disability related leave is generally for a fixed period of time, whether one-off or a regular appointment. It is usually known about in advance and arrangements should be made with line managers to take this type of leave; please refer to PoliceNet for examples of what may be considered reasonable. Managers will need to consider whether each request is reasonable, and whether it is reasonable to provide paid leave or unpaid leave. This should be done in consultation with the local HR Manager who will in turn make a recommendation to the Head of HR. Disability related leave should not be included in Bradford Formula calculations.

(2) **Disability Related Sickness**

It could also be a reasonable adjustment to discount disability related sickness from the Bradford Formula calculations and other sickness monitoring - please refer to the Attendance Management Policy for guidance.

(3) **Paid leave**

Please note that in the exceptional circumstance that someone is off work because the organisation has not yet provided the required reasonable adjustments, this is not disability related leave or disability related sickness. It is paid leave because the individual is willing to work, but they are not able to, because the organisation is not fulfilling its duty to make reasonable adjustments.

(4) **Procedures**

- (a) Reasonable adjustments should also be considered in the following people management procedures:
 - (i) Attendance management - absence monitoring and sick pay;
 - (ii) Probationary performance assessments;
 - (iii) Performance and Development Reviews;
 - (iv) Training and career development schemes;
 - (v) Transfer, promotion and specialist post selection processes;
 - (vi) Allocation/accessibility of benefits and facilities;

- (b) This list is not exhaustive and it is important to note that managers will have to liaise with specialists to determine what is reasonable in each individual case.
- (c) It is also important to remember to organise a risk assessment on any reasonable adjustment to ensure that new equipment or furniture does not have an adverse impact on safety in the workplace.
- (d) Reasonable adjustments should also be considered within role specific procedures such as:
 - (i) Giving evidence in court;
 - (ii) Taking statements;
 - (iii) Taking details from the public;
 - (iv) Driving police vehicles;
 - (v) Recording or remembering details;
 - (vi) Exercise of police powers;
 - (vii) Sitting on boards or project teams;
 - (viii) Liaising with partner organisations.
- (e) This may require liaison with other organisations such as partners, community groups and the Crown Prosecution Service (CPS). Again, this will ensure that individuals have what they need in every aspect of their job.

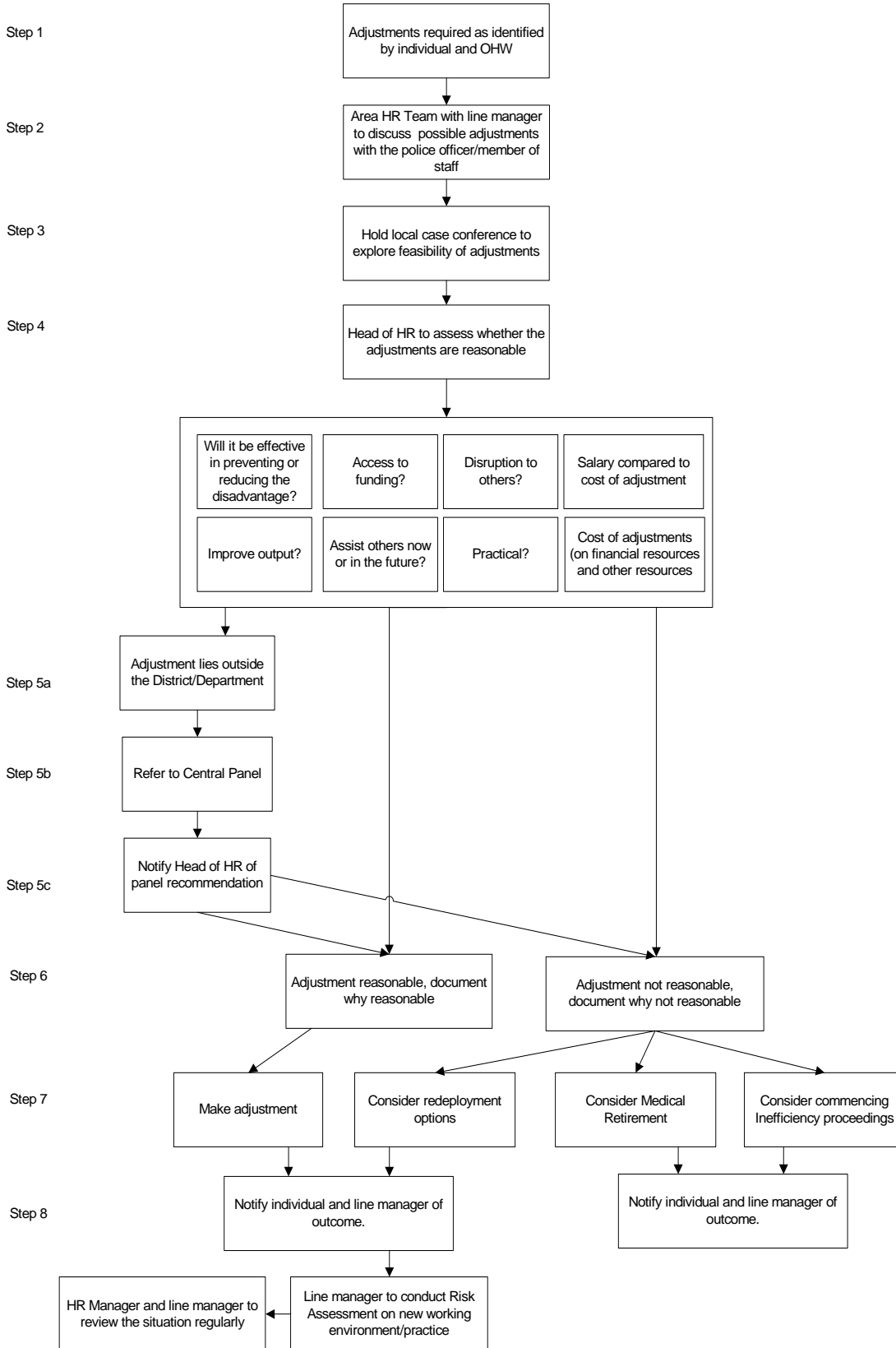
DEFINITIONS FROM DISABILITY LEGISLATION

1. **A disabled person** is defined under disability legislation as someone with a “**physical or mental impairment, which has a substantial and long-term adverse effect on that person’s ability to carry out normal day-to-day activities.**”
2. Where impairment ceases to have a substantial adverse effect on a person’s ability to carry out normal day-to-day activities, it is to be treated as continuing to have that effect if that effect is likely to recur.
 - (a) **Physical impairments** are impairments affecting the senses such as sight and hearing, a weakening of part of the body through illness, by accident or congenitally, such as a paralysis of a leg or heart disease.
 - (b) **Mental impairments** are diagnosed, clinically well recognised mental illnesses (a clinically well-recognised mental illness is one that is recognised by a respected body of medical opinion such as the International Classification of Medical Diseases).
 - (c) **Substantial adverse effect** means that the effect of the physical or mental impairment on the ability to carry out normal day-to-day activities must be more than minor or trivial. It does not have to be a severe effect. The person must be affected in at least one of the respects listed in disability legislation – mobility, manual dexterity, physical co-ordination, continence, ability to lift, carry or otherwise move everyday objects, speech, hearing or eyesight, memory or ability to concentrate, learn or understand, or perception of risk or physical danger.
 - (d) **Long-term** means that the effect has to have lasted, or be likely to last, overall for at least 12 months or for the rest of the life of the person affected. A person with a life expectancy of less than 12 months would be covered if the effect were likely to last until that person dies.
 - (e) **Normal day-to-day activities** - the impairment will be taken to impact on normal day-to-day activities only if it affects one or more of the following activities:
 - (i) Mobility;
 - (ii) Manual dexterity;
 - (iii) Physical co-ordination;
 - (iv) Continence;
 - (v) Ability to lift, carry or move everyday objects;
 - (vi) Speech, hearing or eyesight;
 - (vii) Ability to concentrate;
 - (vi) Memory, ability to learn or understand;
 - (vii) Perception or the risk of physical danger.

3. Disability legislation does not provide a definitive list of what impairments are covered. **Each case must be considered individually.** Individuals with:
- (a) sensory impairments (vision and hearing);
 - (b) heart conditions;
 - (c) musculoskeletal conditions, affecting the limbs, hands, back or neck;
 - (d) progressive conditions such as MS, HIV if it is symptomatic, AIDS or cancer;
 - (e) recurring of fluctuating conditions, such as arthritis;
 - (f) mental health problems such as diagnosed depression;
 - (g) epilepsy;
 - (h) asthma;
 - (i) dyslexia;
 - (j) diabetes;
 - (k) severe disfigurements. People with severe disfigurements do not need to demonstrate that the impairment has a substantial adverse effect on their ability to carry out normal day-to-day activities);
 - (l) learning disabilities;
 - (m) progressive conditions – these are conditions that are likely to change and develop over time. Where a person has a progressive condition, they will be covered by disability legislation from the moment that the condition leads to an impairment that has some effect, however slight on the ability to carry out normal day-to-day activities. Examples given in disability legislation are cancer, multiple sclerosis, muscular dystrophy and HIV infection;
 - (n) recurring conditions, for example epilepsy or bi-polar affective disorder might be covered under disability legislation although much will depend on their nature and severity and the effect on normal day-to-day activities.
4. The following conditions specifically do not count as impairments;
- (a) addiction to or dependency on alcohol, nicotine or any other substance (unless resulting from the substance being medically prescribed);
 - (b) seasonal allergic reactions (for example hay fever) unless it aggravates the effect of another condition;
 - (c) tendency to set fires, steal or physically or sexually abuse another person; and
 - (d) exhibitionism and voyeurism.
5. “Reasonable Adjustments” are changes to the working environment, which prevents an individual with a disability from being substantially disadvantaged. The Act provides a number of examples of adjustments, or ‘steps’ which employers may have to take, if it is reasonable for them to do so. The Act does not give an exhaustive list, which may have to be taken to discharge the duty.

6. Disability legislation lists a number of factors, which may, in particular have a bearing on whether it will be reasonable for the employer to have to make a particular adjustment. The factors that are listed are:
- (a) the effectiveness of the step in preventing the disadvantage;
 - (b) the practicability of the step;
 - (c) the financial and other costs of the adjustment and the extent of any disruption caused;
 - (d) the extent of the employer's financial or other resources;
 - (e) the availability to the employer of financial or other assistance to help make an adjustment;
 - (f) the nature of the employers activities and the size of its undertaking.
7. **“Permanently adjusted duties”** is the term for what was previously known as ‘restricted duties’. Permanently adjusted duties is a term used where an individual has a long-term impairment preventing them from undertaking the full range of operational duties.
8. **“Temporary adjusted duties”** is the term for what was previously known as ‘recuperative duties’. Temporary adjusted duties are temporary in nature; normally not for a period exceeding 6 months to aid a return to full duties.
9. **General**
- (a) Severe disfigurements consisting of tattoos, non-medical body piercing or attachments to such piercing, or which may otherwise be regarded as self-inflicted, are not treated as having substantial adverse effects.
 - (b) Whilst addiction to or dependency on substances is not covered, conditions relating to or stemming from these (such as clinical depression, or certain types of liver disease) may mean that the person does meet the definition of disability.
 - (c) It is important to note the position if medication or other treatment reduces or removes the effects. In general in such cases, the effects that matter are those, which would be present if there was no medication or treatment taking place (with the exception of spectacles/contact lenses). A person with insulin dependant diabetes, therefore, meets the definition of disability because without the insulin there would be a substantial adverse effect on normal day-to-day activities.
 - (d) It is likely that an individual with a problem related to vision which is correctable with glasses/contact lenses would not be considered as having a disability under the Act as long as the corrected vision no longer had “...a substantial adverse effect” on that person’s “ability to carry out normal day-to-day activities.”

Process – Staff who become disabled during employment



ASSESSMENT FOR REASONABLE ADJUSTMENT

This form is designed to be used in conjunction with Policy Directive 07/06 and **MUST BE** completed for all requests for a reasonable adjustment.

To be completed by line manager with the individual being assessed.

Details of person being assessed:

Name:	Service No.:
Staff group (police officer or police staff):	
Job title or role:	
District / Department:	
Date of assessment:	Name of assessor:
I, _____ have read Policy Directive 07/06 prior to assessing the individual.	
Contact details:	Assessor's signature:
Date of H & S risk assessment:	Name of assessor:
Contact details:	Assessor's signature:
What areas need addressing in relation to the member of staff's role (eg equipment, location, training etc.)?	
What areas need addressing in relation to the individual's employment of the organisation? Which other departments (eg payroll, training, ICT etc.) need notifying of any different needs?	
What external agencies have provided assistance and in what form e.g. equipment, assessment or funding?	

Reasonable adjustment checklist:

Please tick all that have been considered.

- ◆ **Making adjustments to premises**
eg altering the height of filing cabinets, installing ramps, widening doors, improving lighting or colour contrast, allocating parking space, changing taps to make them easier to turn.
- ◆ **Allocating some of the duties associated with the post to another person**
eg duties which require driving, climbing ladders or lifting heavy objects could be exchanged for other duties where physical abilities are not prerequisite. It is important to ensure that the remaining duties are not simply those that are less challenging, as this itself could be discriminatory.
- ◆ **Transferring the person to an existing vacancy**
eg via the redeployment process or new posting to a site where the disabled person is able to perform the full range of duties.
- ◆ **Altering or attaining flexibility in the working hours of person**
eg to allow a friend to drive the disabled person to work or to enable a wheelchair user to avoid crowded situations.
- ◆ **Assigning the person to a different place of work**
eg to a place where access is better or the environment is more convenient for them.
- ◆ **Allowing the person to be absent from work for rehabilitation, assessment or training**
eg disabled people undergoing treatment which is related to their disability should be given paid time off.
- ◆ **Giving or arranging training or mentoring**
eg specific training which is appropriate and relevant to the individual need.
- ◆ **Acquiring or modifying equipment**
e.g. specialist chairs, computer, computer equipment, induction (hearing) loop, telephones with volume control or minicom facility.
- ◆ **Modifying procedures for testing or assessment**
eg ensuring tests are appropriate if the person has any particular requirements.
- ◆ **Providing a reader or interpreter**
eg a person with a disability may require a reader at certain times or interpreter in particular circumstances; ensure where interpreters are used that they are appropriately qualified.
- ◆ **Providing written material in an appropriate format**
eg a person may require written material in Braille, audiotape, CD-ROM, large print or disc.
- ◆ **Providing supervision**
eg additional supervision time to support a person with a disability should be negotiated and should not simply amount to closer supervision which may in itself constitute less favourable treatment.
- ◆ **Other**
Please specify:

Advice and/or support obtained:

HR Department: Yes No Equality & Diversity: Yes No
OHW: Yes No Health & Safety Department: Yes No
Estate Services: Yes No External Agency/Organisation: Yes No

If 'Yes' please specify:
Attach all supporting documentation.

To be completed by HRM

(Outline your recommendation to the Head of HR for the reasonable adjustment you support. This adjustment should have been discussed with the individual's line manager and in turn with the individual themselves).

Reasonable Adjustment Required	Date

To be completed by Head of HR

Action Taken	Date

To be completed by the individual requiring adjustment

The information in this form will be treated with the strictest confidence, however in order to ensure that the PSNI can continue to meet your individual needs the information above may be shared with future line managers.

Are you happy for this information to be shared in this way? Yes No

Signed:..... Date:.....

-
- Distribution of completed form:**
1. Personal file of person being assessed.
 2. Relevant HR Unit for inputting data onto HR System.

CHECKLIST FOR HRM

Process	Action to be taken	Y/N	Completed By (LM/HRM)	Date
Step 1	Need for Reasonable Adjustment identified.			
	Line Manager to request a referral to OHW (if not already done) via the HR Manager.			
	Line Manager to talk to individual and explain process. Conversation should be documented.			
	Individual notified in writing that their position has been noted and that work is commencing to <ol style="list-style-type: none"> 1. establish if DDO is considered applicable; and 2. identify and agree a reasonable adjustment. 			
	OHW advice and guidance received.			
	Individual advised of OHW comments in relation to whether disability legislation is applicable or not.			
Step 2	Line manager and HR Manager to meet to discuss options with individual.			
	Management audit trail commences by both Line Manager and HR Manager.			
	Line Manager to review impact on current role.			
	HR Manager/Line Manager to liaise with Health & Safety for advice and guidance, if appropriate.			
	Line Manager carries out Risk Assessment.			
	HR Manager to review absence records and update if appropriate.			
Step 3	Local Case Conference.			
	Various options to be considered by management. Those in attendance at the case conference might include Line Manager, HR Manager, OHW, Health & Safety Advisor, Operations Planning, Estates Services. Confidentiality of the situation must be stressed and there is no need to discuss the diagnosis, rather what the individual can and cannot do.			

Consider the following options:				
	Review impact of disability legislation on current role			
	Changes to working hours			
	Change place of work			
	Re-allocation of duties			
	Training/mentoring required			
	Time off for appointments etc			
	Acquiring or modifying equipment			
	Change in supervision			
	Adjustments to premises			
	Transferring individual to an existing vacancy			
	Adjustments required to Role Profile			
	Case Conference should propose a solution, which will reduce/eliminate any disadvantage to the disabled employee.			
Step 4	Send copies of all relevant papers and evidence to the Head of HR for approval <ul style="list-style-type: none"> • Role Profile - detailing specific tasks and timings • Role Profile - specifying tasks which can and cannot be done • Evidence of all options explored and exhausted that were considered locally (local case conference minutes) • OHW and Health and Safety Reports, if applicable • Relevant HR System screen prints 			
This process can stop at any stage if a reasonable adjustment is not required or is agreed. In these cases the outcome should be documented and reviewed on a regular basis.				

This checklist should be passed to the Head of HR along with Appendix 'E' - "Assessment for Reasonable Adjustment" for their approval.

CONFIDENTIALITY – HOME OFFICE GUIDANCE

Whilst we have a duty of care for all staff, we understand the sensitive nature of information disclosed regarding a person's disability. PSNI will apply the principles included in the Home Office guidance document 'Disability and the Police – The Complete Works', which states:

'The previous Code of Practice (issued by the Secretary of State for Education and Employment under Section 53 (1) (a) of the Disability Discrimination Act) says that the DDA does not prevent a disabled person keeping a disability confidential from an employer.

This is likely to mean that unless the employer could reasonably be expected to know about the person's disability anyway, the employer will NOT be under a duty to make reasonable adjustment. If a person with a disability expects an employer to make reasonable adjustment, they will need to provide the employer – or as the case may be, someone acting on their employer's behalf – with sufficient information to make the adjustment.

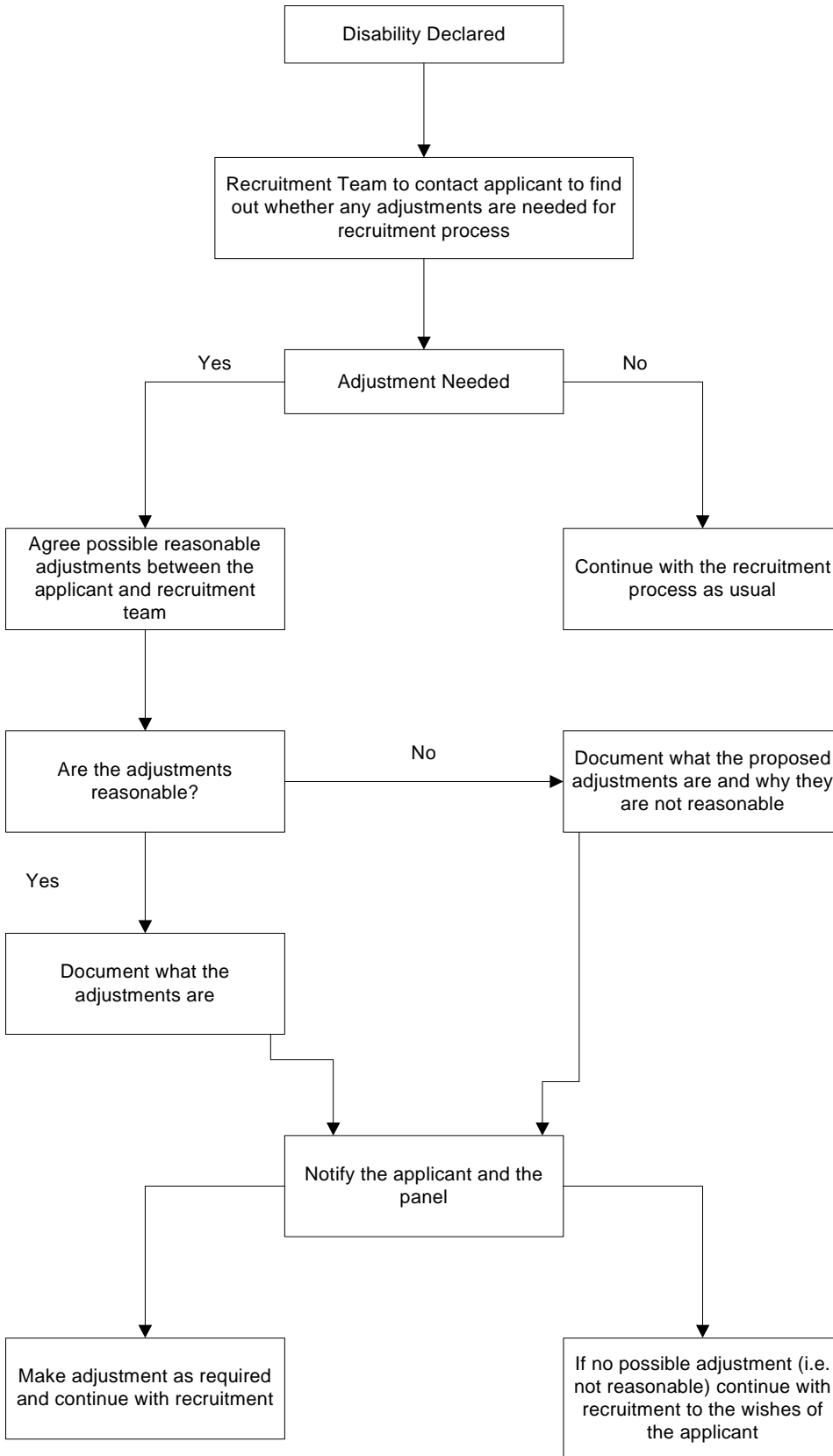
The code of practice also states that if an employer's agent or employee (for example an occupational health officer, a HR Manager or a line manager) knows of an employee's disability, then the employer cannot claim that they do not know of that person's disability, and that they are therefore excluded from the obligation to make reasonable adjustment.

This will be the case even if the disabled person specifically asked for such information to be kept confidential. Employers will therefore need to ensure that where information about disabled people may come through different channels, there is a means – suitably confidential –for bringing the information together, so the employer's duties under the DDA are fulfilled.

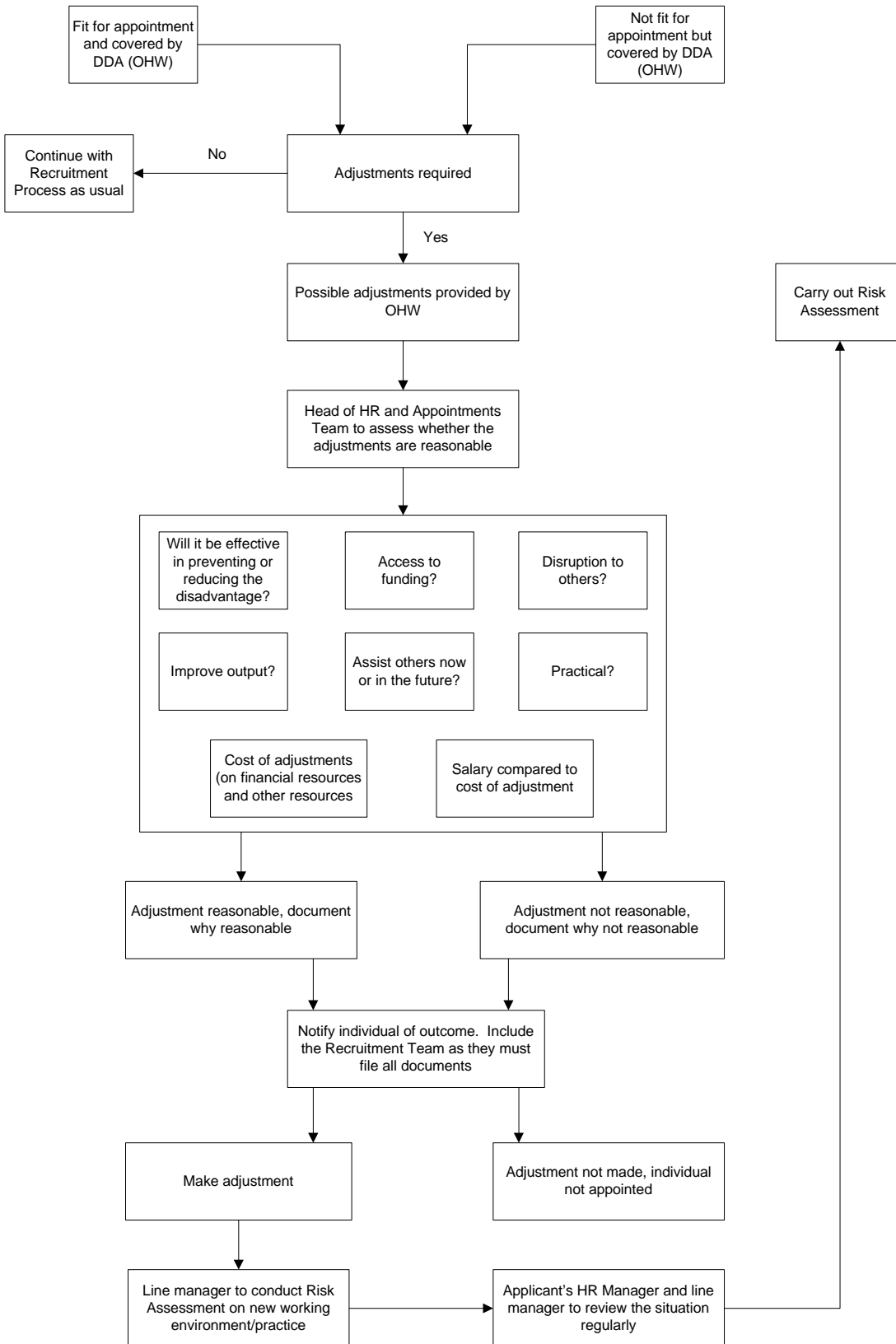
In practical terms this means that any manager or occupational health officer, who learns about a disability or could reasonably be expected to know that a police officer is disabled, needs to discuss it with that police officer. It may be in some cases that certain other colleagues do need to know about the disability, its effects, symptoms, or the impact on day-to-day activities. In this case the police officer's consent should be sought after explaining why it is necessary for others to be told about the disability. In other cases colleagues may only need to know that reasonable adjustments will be made but not the precise reasons why.'

Police staff should also be aware of their responsibilities under Health and Safety legislation to advise managers of anything that might affect the health and safety of themselves or any other party, for example colleagues or members of the public.

Process - Applications from individuals with a disability



Process - Successful applicants with a disability



Codes have been allocated to enable HR staff to code absence. The following codes should be utilised in the Medical Section on the HR System:

- (1) 0250 Sick Medical Certified;
- (2) 0251 Disability Related Absence Self Certified;
- (3) 0252 Disability Related Absence Medical Certified;
- (4) 0262 Injury Medical Certified;
- (5) 0450 Sick Self-Certified;
- (6) 0462 Injury Self Certified;
- (7) 0253 Disability Related Leave.