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MANAGING FOR WELLNESS

Disability Management Handbook for Managers
in the federal public service

Disability Management Initiative

January 2011

Canada

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Foreword From the Chief Human Resources Officer

The renewal of the public service focuses on achieving management excellence. It is in this spirit that *Managing for Wellness* has been developed for public service managers. It speaks to the fundamental responsibility of all managers to support the health of the people they lead, not just when illness or injury—mental or physical—strikes. As important as it is to be compassionate and caring when employees cannot work because of sickness, it is equally critical to be mindful of the impact the work environment has on the health and wellness of *all* the employees you are responsible for.

We must also work together to find ways that will make the entire disability management regime in the public service fairer and more supportive for employees and managers. It should also be more effective in addressing employee needs while improving the workplace in government and other organizations.

Our work to improve disability management is one aspect of our effort to modernize human resources (HR) management across the public service and help managers better understand their key role in people management. While you make use of this handbook, take a moment to look at the other tools and guides listed on the website of the Office of the Chief Human Resources Officer at <http://www.tbs-sct.gc.ca/chro-dprh/index-eng.asp>.

With your support and that of your colleagues, and the engagement of HR specialists and bargaining agents, we look forward to simplifying the system and introducing a more integrated approach to disability management. Our aim is to work with departments and agencies to achieve better results in preventing illness and injury and in helping ill or injured employees stay at work if possible or return to work as soon as it is safe to do so.

Daphne Meredith
Chief Human Resources Officer
Treasury Board of Canada Secretariat

Introduction

This handbook was produced with the input of members of the Disability Management Practitioner's Network, under the Disability Management Initiative (DMI). The DMI is a collaborative undertaking by federal departments, facilitated by the Office of the Chief Human Resources Officer, Treasury Board of Canada Secretariat, and involving the bargaining agents of the National Joint Council.

The goal of the DMI is to enable the proactive management of disabilities across the public service of Canada, in all employee groups and at all levels.

The DMI project team would like to thank the many contributors and expert reviewers who generously shared their expertise and insight, making this handbook possible. Thirty-six federal departments and agencies and four bargaining agent organizations were represented in the review process. In addition to members of the DMI team, 138 people from these organizations participated in technical reviews, content reviews, stakeholder workshops and focus group sessions. A list of the names of these individuals and their affiliations is provided in Appendix E.

This document has been drafted to be read online. It contains numerous links to additional sources of information. If any of these links fail, please notify the DMI team by email at DMI-PGLI@tbs-sct.gc.ca.

If you choose to print the handbook, note that it is subject to ongoing updates as work under the DMI progresses.

In the event of a discrepancy between this handbook and legislation, Treasury Board policies, directives and standards, collective agreements, and official plan documents governing the eligibility for and delivery of disability benefits and services, the latter shall prevail.

Find out more about the DMI on GCPEDIA.

Note to readers: The concept of wellness, in the context of the DMI, is defined as workplace and workforce health that promotes employee attachment and productivity.

1.0 Purpose of This Handbook

In Canada, a framework of laws and legal human rights decisions makes it a fundamental responsibility of management to prevent illness and injury in the workplace and to accommodate employees who suffer a disability resulting from illness, injury or a medical condition. Employers' obligations to provide a healthy and safe workplace are set out in the *Canada Labour Code, Part II: Occupational Health and Safety*.ⁱ Under the *Canadian Human Rights Act*,ⁱⁱ employers are also expected to accommodate employees who have special needs based on 11 prohibited grounds of discrimination that include disability. Disability encompasses all forms of mental or physical disability (including substance abuse) and includes impairment caused by illness or injury, whether temporary or permanent, work-related or not.

Under the *Employment Equity Act*,ⁱⁱⁱ federal organizations are further required to identify and remove employment barriers as well as provide accommodations for persons with disabilities (along with women, Aboriginal peoples and members of a visible minority). The aim is to achieve representation within the public service that reflects the presence of these groups in Canada's workforce or in segments of the workforce as defined by qualification, eligibility or geography.

In practice, this means that employees in the federal public service who experience illness, injury or a medical condition should be supported, including accommodations, in order to continue working. If a period of absence from work is required for treatment, recovery and/or rehabilitation, these employees should be helped to return to work if and when it is safe to do so. If an illness or injury prevents employees from performing the work they were doing, all reasonable measures should be taken to identify work they can perform. If they develop a disability as a result of their illness, injury or medical condition, they should be accommodated to the point of undue hardship on the part of the employer in terms of health, safety and cost.¹

The task of ensuring that this support is provided falls to the employee's immediate supervisor, referred to in this handbook as "the manager." This handbook is intended to help line managers in the federal public service—the people who are directly responsible for assigning specific tasks to employees and evaluating work performance—fulfill their roles and responsibilities with respect to disability management. It provides guidance in three areas: managing the workplace and employees to help prevent illness and injury; supporting employees who have a medical condition and, when illness or injury occurs, supporting their recovery; and

1. For an explanation of "undue hardship," please see the Canadian Human Rights Commission's *A Guide for Managing the Return to Work*, available at www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf.^{iv}

enabling employees who may be temporarily or permanently disabled to return to work when it is safe to do so.

1.1 Disability Management in the Federal Public Service

Although disability management varies throughout the federal public service, it is widely considered to involve preventing and managing absence from work due to illness or injury, and minimizing the impact of impairment on the ill or injured employee's ability to participate in the workplace. A range of legislative requirements, Treasury Board policies and collective agreements dictate what specifically can and should be done, and what benefits employees are offered (see section 2.2). How these measures and resources are deployed and administered is determined by departments. While some federal organizations have developed disability management policies and programs, the manner in which disabilities are managed differs from one department to the next.

However, in all federal organizations, successful disability management relies on two factors above all others: 1) engaged, proactive managers and 2) a team approach. No matter how human resources (HR) services are provided in your organization or how it organizes its employee health, safety and disability management programs, if you manage people, you have specific responsibilities in the area of disability management. In order to fulfill your responsibilities, you need to know *what* they are (see section 3) and *with whom* to collaborate within your organization.

Make sure you know who in HR can help you with these responsibilities, specifically your organization's:

- ▶ **Occupational health and safety (OHS) advisor,** to guide you in maintaining a healthy and safe workplace;
- ▶ **Compensation and benefits advisor,** to provide guidance and information on medical certificates for sick leave, ill or injured employees' entitlements, and administrative requirements, including those related to Workers' Compensation;
- ▶ **Labour relations advisor,** for guidance and support to help you assist employees (in smaller federal organizations, this professional may also provide advice on OHS, compensation, and benefits and accommodation);
- ▶ **Staffing advisor,** specifically to provide expert advice on options to accommodate an employee who requires modifications to his or her current position, lateral transfers to another position and/or access to the priority administration process; and

-
- ▶ **Accommodation advisor**, specifically to assist you in modifying work duties, using special working arrangements, and in procuring modified computer equipment, assistive devices, ergonomic materiel, etc.

For employees who are represented by bargaining agents, you also need to know who the union representatives are. These individuals can be very helpful in ensuring a safe and healthy workplace and in managing individual cases of employee illness or injury. Like management, unions have a legal responsibility to help ill or injured members return to work.²

Some federal departments and agencies have return-to-work coordinators (also called disability management advisors or disability case managers). If you have access to these professionals, be sure to engage them as early as possible when employees experience serious illness or injury that could result in a protracted absence from work and/or require accommodations to stay at work or successfully return to work. A number of federal departments also have centres of expertise on accessibility and on the duty to accommodate. Accommodation specialists in these centres can provide managers and employees with invaluable advice on modifying work and workstations. They may be able to help you access adaptive technologies and assistive devices to accommodate employees' limitations or needs, while ensuring that their capacities are being fully utilized.

1.2 Organizations to Which This Handbook Applies

This handbook is intended primarily for managers in the core public administration^{3,v} organizations for which the Treasury Board is the employer. However, it may also be helpful to managers in other federal organizations across the federal public administration.⁴

Virtually every instrument pertaining to work-related illness or injury discussed in this handbook applies in all federal organizations. Every organization in the federal public administration is subject to the *Canada Labour Code, Part II: Occupational Health and Safety*,^{vi} and all federal government employees are covered for workplace accidents causing injury and diseases contracted on the job under the *Government Employees Compensation Act*^{vii} (GECA), **with the exception of regular force members of the Canadian Forces and police officers and civilian members of the Royal Canadian Mounted Police (RCMP).**

2. *Disability Management: Theory, Strategy and Practice*, fourth edition, Dianne E.G. Dyck, LexisNexis, October 2009, page 23.

3. As defined in section 11(1) of the *Financial Administration Act*^{viii} (FAA), core public administration refers to organizations listed in *Schedule I*^x and *Schedule IV*^x of the FAA for whom the Treasury Board is the employer.

4. "Federal public administration" refers to all organizations identified in all FAA schedules.

However, for non-work-related injury or illness, the policies, legislation, services and benefits identified in this handbook may not apply if your organization is a “separate agency” for which the Treasury Board is not the employer.⁵ Your organization may not be subject to the *Public Service Employment Act* (PSEA), which affects whether your employees can participate in staffing processes open to the public service when employees cannot return to their position. Your organization may not be subject to the *Public Service Superannuation Act* (PSSA), in which case employees would not be entitled to PSSA disability pensions. Finally, your organization may not participate in the Disability Insurance (DI) Plan for employees and/or the Public Service Management Insurance Plan (PSMIP) providing long-term disability (LTD) coverage for executives and certain other unrepresented groups. This affects income replacement benefits for employees with non-work-related injuries or illnesses.

Colour-coded symbols are used in this handbook for managers in separate agencies to help identify what is potentially applicable in their organization. Throughout this handbook, one of four symbols (see Table 1) appears beside those benefits, services and recommended interventions specifically connected to GECA / Workers’ Compensation, PSEA, PSSA and the insurance plans. Managers in all federal organizations will find items marked with the star symbol potentially useful. These items include guidance on occupational health and safety and supporting employees who experience an illness or injury as a result of an accident at work or an occupational disease. Whether the benefits, services and recommended interventions identified by the other three symbols are applicable in your organization depends on whether it falls under the PSEA or PSSA, or whether your organization participates in the DI and/or PSMIP LTD plans. In case of doubt, contact your labour relations or compensation and benefits advisor.

5. Separate agencies include organizations in FAA [Schedule V](#),^{xi} most of which are separate employers.

Table 1. Symbols Used in This Handbook

Symbol	Definition
★	GECA / Workers' Compensation: Applies to employees working in federal public administration organizations, with the exception of any person who is a member of the Canadian Forces or the RCMP's regular force. In the RCMP, "regular force member" refers to police officers and civilian members.
◆	Public Service Employment Act (PSEA): In addition to all organizations in the core public administration identified in Schedule I of the <i>Financial Administration Act</i> (FAA) and most organizations in FAA Schedule IV, applies to some of the separate agencies identified in FAA Schedule V. More information on federal organizations subject to the PSEA is available at www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp . ^{xii}
●	Public Service Superannuation Act (PSSA): Applies to organizations whose employees participate in the federal public service pension plan, which includes all organizations in the core public administration as well as most separate agencies in FAA Schedule V and many other federal organizations, including Crown corporations. More information is available at www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp . ^{xiii}
▲	Disability Insurance (DI) Plan and Public Service Management Insurance Plan (PSMIP LTD): In addition to organizations in the core public administration and separate agencies, many other federal organizations that are separate employers participate in these employee benefit plans. Information on employer participants is available in the plan documents. For the DI plan document, visit www.tbs-sct.gc.ca/hr-rh/bp-rasp/benefits-avantages/dip-rai/dip-rai-eng.asp . ^{xiv} For the PSMIP plan document, visit www.tbs-sct.gc.ca/Pubs_pol/hrpubs/TB_863/psmippolicy-eng.asp . ^{xv}

If you are a manager in an organization that belongs to the core public administration, everything in this handbook is applicable.

1.2.1 Important Note

The guidance provided in this handbook assumes that you, as the manager, have an open, respectful and problem-free working relationship with the injured or ill employee, who has been performing satisfactorily in a job appropriate to his or her skill levels and experience.

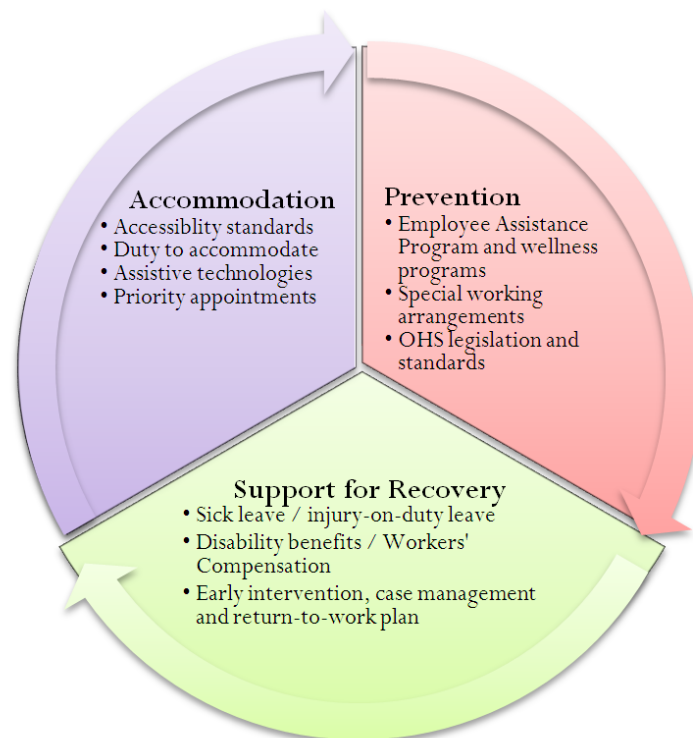
- ▶ It is assumed that for cases of underperformance and/or disciplinary problems, you are aware of how to take timely and appropriate action with assistance from your labour relations advisor. In federal organizations where the Treasury Board is the employer, this would be pursuant to provisions under section 12 of the FAA and in accordance with the Treasury Board's *Guidelines for Discipline*.^{xvi}
- ▶ Likewise, it is assumed that for cases of personality conflicts and/or harassment in the workplace, you are aware of how to resolve these problems. In organizations where the Treasury Board is the employer, this would be pursuant to the requirements set out under the *Policy on Prevention and Resolution of Harassment in the Workplace*.^{xvii} You are advised to take note of the guide *Restoring the Workplace Following a Harassment Complaint: A Manager's Guide*^{xviii} and to be aware of the informal *conflict resolution mechanisms*^{xix} in your organization.

Underperformance, discipline issues, personality conflicts, and harassment in the workplace have an impact on health, both for the employees directly involved and those who work with them. Taking timely and appropriate action is one way managers fulfill their responsibility to help ensure a healthy and safe workplace. It bears emphasizing that the disability management system, including sick leave and Fitness to Work Evaluations, is not an appropriate means of addressing these types of problems. The disability system should *not* be seen or used by managers or employees as an alternative means of addressing performance or discipline problems, personality conflicts, or harassment issues.

2.0 The Components of Disability Management: An Overview

Disability management refers to managing health-related absences from work and the risks that cause these absences in order to shorten or prevent them, improve workforce productivity, and reduce costs. There are three main components of a workplace disability management system, as illustrated in Figure 1.

Figure 1. Three Main Components of a Workplace Disability Management System



- ▶ **The purpose of the prevention component is to promote health and wellness in the workplace, i.e., prevent injury and illness arising from risks and hazards in the workplace and its social environment, and protect employee health at work.** It includes policies, programs and services, as well as personal protective equipment aimed at reducing the risk of illness and injury and supporting employees in helping prevent threats to health from escalating. Key elements include OHS standards; employee assistance programs; and preparing for and managing threats to employee health and productivity, such as pandemic flu, workplace stress and musculoskeletal injury.

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- ▶ **The purpose of the support for recovery component is for ill or injured employees to remain at work when possible or to set the stage for a successful return to work.** It includes benefits plans that provide income replacement and rehabilitation services while an employee is away from work, alongside early intervention, case management, and planning for a timely and successful return to work.
 - ▶ **The purpose of the accommodation component is to modify or adjust a job and/or work environment and create a welcoming workplace for ill or injured employees so they can stay at work or successfully return to work from an absence due to illness or injury and perform job functions efficiently and safely.** It includes the policies, services and support that help employees returning from extended sick leave reintegrate into the workplace, including employees who are or have become disabled. This is in addition to the social environment created by management to make the workplace welcoming and inclusive of all forms of diversity, including disability.

In each component, legislation, collective agreements and Treasury Board policies establish what federal departments and agencies can do to promote wellness (prevention), proactively manage disability cases (support for recovery), and support employees in staying at or returning to work (accommodation).

Each component is mutually reinforcing. The boundaries between them are not distinct; benefits and services in one component can sometimes be used very effectively in another. For example, assistive technologies fall under accommodation, but in some situations they can be used successfully to *prevent* serious illness and injury from occurring in the first place, or to prevent a relapse for employees who have returned to work, thus helping them stay at work.

2.1 The Distinction Between Occupational and Non-Occupational Disability

As a concept, effective disability management does not differ depending on what caused the illness or injury. However, there are different requirements under legislation, policies related to disability management, and administrative schemes for the provision of disability management services and benefits, depending on whether an illness or injury is or is not directly related to work.

There are two main types of disability cases: occupational and non-occupational.

- ▶ Cases of occupational illness or injury (i.e., directly related to work) are dealt with under the *Government Employees Compensation Act*, which uses the provincial or territorial Workers' Compensation system to adjudicate claims and provide rehabilitation and other services as

well as wage-loss benefits. With the exception of Quebec, occupational disability includes cases of psychological injury and mental stress arising from a traumatic event at work.⁶

- ▶ Non-occupational cases (i.e., illness, injury or medical conditions, both physical and psychological, not related to work) are dealt with pursuant to legislation, employer policies, collective agreements and arrangements established with the administrators of disability insurance plans.

With respect to the components of the disability management system, the distinction between occupational and non-occupational illness or injury has the greatest impact on employees in support for recovery. It affects both the source of benefits and services and the amount of income replacement available to employees with a disabling illness, injury or medical condition. The distinction has little impact on ill or injured employees under accommodation and on what can be done to help them stay at work or to assist them in returning to work following an illness or injury. In prevention, the main impact is the requirement to thoroughly report workplace injuries or illnesses in order to make the workplace safer for all employees.

2.1.1 Overview of Occupational Injury or Illness Benefit Plan

In cases of occupational illness or injury, leave, income replacement and rehabilitation services are provided for the employee pursuant to Treasury Board policies and guidelines, collective agreements and the *Government Employees Compensation Act (GECA)*. GECA applies across most of the federal public administration⁷ and is administered by the Labour Program of Human Resources and Skills Development Canada. Provincial Workers' Compensation Boards (WCBs) adjudicate claims. Managers *must* ensure that a work-related illness or injury involving medical attention or lost time is reported to the [appropriate regional office of the Labour Program](#)^{xxi} *within three days of the occurrence*. (Note that in many federal departments and agencies, the occupational health and safety unit informs the Labour Program.) The Labour Program office will ensure that forms are completed and a claim is submitted to the appropriate WCB.

The WCB communicates directly with the employee for the claims adjudication process. In most cases, it will copy the employer on decision letters. It determines whether time away

6. From *Mental Stress Claims*, Safety Compliance Insider, page 11, April 2010, available through subscription at <http://www.ohsinsider.com/marketing>.^{xx}

7. The federal public administration includes the core public administration (departments and agencies for whom the employer is the Treasury Board), separate agencies, Crown corporations and special operating agencies. For more information, see the *Population Affiliation Report* at http://www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp.^{xxiii} Note that military personnel in the Canadian Forces and regular (i.e., police officer and civilian) members of the RCMP are *not* covered under GECA.

from work for an illness or injury—the “period of disability”—is warranted. If and when the WCB makes this determination, the manager authorizes **injury-on-duty leave**^{xxii} and the employee continues to receive full pay and benefits. Any sick leave used to this point connected to the occupational illness or injury is credited back to the employee.

To assist recovery, the WCB may authorize medical, therapeutic and/or rehabilitation treatment services. To assist with the return-to-work process, many WCBs provide very useful services. They can facilitate discussions between you, the employee, and his or her caregivers to, among other things, assist in clarifying appropriate precautions, modified job duties and required accommodations. Some have ergonomists and return-to-work advisors on staff. They may also be able to refer employees for “functional capacity evaluations” in situations where there is conflicting or inadequate medical information. These evaluations provide the detailed information necessary for the development of a rehabilitation plan, clarify prognosis for return to work, and help identify the individual’s functional abilities for his or her own occupation or others.

Managers are expected to maintain contact with employees on sick leave or injury-on-duty leave and begin exploring return-to-work options, if appropriate. If the employee is likely to require more time for recovery than the maximum period of 130 days that Treasury Board guidelines for injury-on-duty leave recommend, the manager should notify the WCB and the regional office of the Labour Program to ensure that the employee receives Workers’ Compensation wage-loss benefits until his or her claim is resolved. This varies across provinces but generally provides a benefit of 75 per cent of net earnings. (See section 5.3 for more information.)

2.1.2 Overview of Non-Occupational Illness or Injury Benefit Plan

For cases of non-occupational illness or injury, leave, income replacement and rehabilitation services are provided pursuant to one of two arrangements, depending on whether the federal public service employee is represented by a bargaining agent.⁸

- ▶ For represented federal public service employees, benefits and services are provided pursuant to provisions in applicable **collective agreements**,^{xxiv} the Treasury Board’s *Directive on Leave and Special Working Arrangements*,^{xxv} and via the **Disability Insurance Plan**.^{xxvi}
- ▶ For non-represented or excluded federal public service employees, benefits and services are provided pursuant to the Treasury Board’s *Policy on Terms and Conditions of*

8. A list of bargaining agents in the federal public service and the specific federal organizations whose employees they represent is available at http://pslrb-crftp.gc.ca/collectivebargaining/agentstatus_e.asp.^{xxxi}

Employment,^{xxvii} *Directive on Executive Compensation*^{xxviii} (for executives), *Directive on Leave and Special Working Arrangements*^{xxix} and via long-term disability (LTD) under the *Public Service Management Insurance Plan (PSMIP)*.^{xxx}

Generally speaking, for cases involving a protracted period of absence from work, once sick leave credits are exhausted, employees may qualify for either DI or PSMIP LTD for up to two years, receiving 70 per cent of their earnings. Within two years, if a medical practitioner deemed qualified by the employer or Health Canada determines that the employee is totally disabled and there is no reasonable prospect of a return to work in the foreseeable future, under the *Directive on Leave and Special Working Arrangements*, termination of employment for medical reasons can be considered. DI and PSMIP LTD will continue to provide 70 per cent of earnings up to age 65 if the insurers continue to find that the employee cannot perform the duties of a commensurate occupation, consistent with the insurers' definition of "total disability." (See sections 6.4 and 6.5 for more information.)

2.2 The Universe of Disability Management Instruments

Table 2 identifies the main disability management instruments in the federal public service arising from legislation, Treasury Board policies, and/or collective agreements. Certain legislative requirements (e.g., under the *Canadian Human Rights Act*, the *Employment Equity Act* and the *Canada Labour Code*, Part II) are further clarified in the Treasury Board's *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service* and its policy instruments on occupational safety and health. Table 2 indicates which instruments are most relevant to which components of the disability management system. In some cases, instruments can be applied in more than one of these areas—for instance, depending on the circumstances, a special working arrangement can be used to help *prevent* illness or injury or to *accommodate* an individual returning from extended sick leave.

Note that your organization may have its own policies for applying these instruments. Please check with your corporate HR services. All instruments are discussed in more detail in each of the sections of this handbook corresponding to prevention, support for recovery and accommodation.

Table 2. Disability Management Instruments in the Federal Public Service

Instrument	Legislation	Treasury Board Policy Suite	Collective Agreements	Prevention	Support for Recovery	Accommodation
<i>Canada Labour Code, Part II</i>	x			√		
<i>Canadian Human Rights Act</i>	x			√		√
<i>Directive on Leave and Special Working Arrangements (sick leave without pay)</i>		x		√	√	√
Disability Insurance		x			√	
<i>Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service</i>		x		√		√
<i>Policy on Employee Assistance Program</i>		x		√	√	√
<i>Employment Equity Act</i>	x			√		√
<i>Government Employees Compensation Act (Workers' Compensation)</i>	x				√	√
Injury-on-duty leave		x	x		√	
Occupational safety and health		x		√		
<i>Policy on Government Security (emergency and business continuity)</i>		x		√		
Public Service Management Insurance Plan long-term disability		x			√	
<i>Public Service Employment Act (Priority appointments)</i>	x					√
Public Service Health Program (Fitness to Work Evaluations)		x		√		√
<i>Public Service Superannuation Act (medical pensions)</i>	x				√	
Sick leave with pay		x	x		√	
<i>Telework Policy</i>		x		√		√
Termination of employment (medical reasons)	x	x				
<i>Policy on Terms and Conditions of Employment</i>		x			√	

3.0 The Role Managers Play in the Disability Management System

Line managers are critical players in all workplace disability management systems. They are the people who, on a daily basis, match employees to tasks, assign and lead work, and evaluate work performance. In addition to business and technical skills, successful managers have strong relationship or “people” skills—the ability to motivate and listen to, empathize with and support people constructively. These skills are integral to effective disability management. Managers certainly need to know the business rules and policies they must adhere to in managing cases of employee illness and injury. However, it is their people management skills that make the difference in creating a healthy and productive workplace, encouraging employees to maintain their health and well-being and supporting employees in their recovery from illness or injury to increase the likelihood that they can stay at work or successfully return to work.

As a manager, you are responsible for ensuring a healthy and safe workplace. When employees experience serious illness or injury, your role is to make sure they get the support they need and are entitled to. To fulfill these responsibilities, you must be aware of and engaged in efforts to promote and support workplace wellness and stay in touch with ill or injured employees. Section 4 contains a wide range of suggestions and interventions in the area of workforce wellness.

How you stay in touch is up to you and the ill or injured employee. Contact can range from periodic phone calls to informal meetings, depending on the circumstances. Staying in touch allows you to keep the ill or injured employee informed about what is happening at work and shows that you care and that he or she is missed and matters to you and the rest of the team. Last, but not least, it allows you to make sure the employee is getting the support he or she needs and is entitled to, and to intervene if there are problems. Section 5 outlines the various benefits and services that are available to ill or injured employees in the federal public service that you need to know about.

You are responsible for doing everything to the point of undue hardship to help ill or injured employees remain at work if they are able and to return to work when they are ready, even in cases where they cannot return to their previous position or to a position in your department or agency. Your responsibility to these employees continues for as long as they are absent from the workplace until one of two things happens:

- ▶ They are hired in a new position and report to a new manager; or
- ▶ They cease to be employed because they have resigned or retired for medical reasons, or their employment has been terminated for medical incapacity (i.e., they have been found unable to return to work for the foreseeable future by a competent medical authority).

In this handbook, policies pertaining to disability management are treated as a “floor,” not a “ceiling.” In other words, it is in your purview as a manager to reach beyond what policies prescribe to support the health and well-being of the people you lead and provide a safe and healthy workplace.

3.1 Basic Managing Principles for Employee Health and Well-Being

As you consult this handbook for guidance in determining how to manage specific cases and for ways to support your employees’ health and well-being, know that two basic principles apply.

1. Be proactive about supporting your employees in maintaining their health and well-being.

- ▶ If employees are showing signs of mental stress or physical discomfort, ask them if they need help. At no time are you entitled to personal medical information, including diagnostic information or diagnoses. However, offering to make help available is *not* an invasion of privacy—you do not need to know private medical details to help employees get the assistance they need. Remind your employees that their health matters to you because, as their manager, it is your job to help them perform to their full potential. They cannot do that if they are struggling with a mental or physical health problem.
- ▶ Become knowledgeable on topics such as work–life balance, workplace mental health risk factors and what can be done to promote and protect employee mental health. Seek out resources and services to enhance your managerial skills, knowledge and competencies for disability management. For more information, see section 4.0 of this handbook.
- ▶ If leave is required for treatment and recovery, *keep in touch with the employee*. This is the most important action you can take to set the stage for a successful and timely return to work. Following an absence from work due to illness, injury or medical condition (or for any other reason), it is also good practice to hold a “return-to-work” meeting with the employee. This can be informal if the absence was only a few days. In cases of a long absence, several meetings to plan the return to work are advised.

2. Keep the health of your entire team uppermost in mind.

- ▶ When an employee is ill or injured, his or her inability to perform the duties of the job, even temporarily, will affect the workload and thus the stress levels of the other members of your team. It is certain to do so in the event of a protracted absence from work, which could also compromise your team’s ability to achieve its business goals. As a manager, you have the right to know that an employee is going to be away from work for health reasons, and you have the right to obtain an expected return-to-work date. Keeping in touch should ensure that

you receive the information you need on the expected duration of the absence, helping you manage your unit's workload and avoid overstressing the rest of your team.

- ▶ If the employee is likely to be absent for more than a week, you may need to consult with your staffing advisor to arrange for a temporary replacement. Sources of temporary talent may include corporate assignment programs, work experience programs and/or student programs. If the employee moves to sick leave without pay for an indefinite period, it is your responsibility, in consultation with your staffing advisor, to determine whether and when to take steps to recruit a permanent replacement. Note that if this occurs, you are still responsible for keeping in touch with and supporting the ill or injured employee until he or she is hired into a new position (and reports to a new manager) or ceases to be employed. For more information, see section 5.4 of this handbook.

3.2 Privacy

In Canada, under federal and provincial privacy laws, personal medical information is private, and individuals have the right to control who has access to it. As a manager, you must respect the privacy of medical information *even in situations where an employee voluntarily shares this information with you*. In other words, if you are made privy to any aspect of an employee's personal medical history or condition, you may not pass along this information to *anyone* without first requesting and receiving the employee's explicit, written permission.

In the workplace, respecting the confidentiality of medical information is essential for effective disability management. Moreover, you do not need medical information to fulfill your role to support ill or injured employees. Your role is not to diagnose illness or to adjudicate a disability claim. The word of a treating physician is sufficient to verify whether an employee is unable to work for medical reasons. You do not need to know what those medical reasons are. The insurers and/or Workers' Compensation Board will, with the employee's consent, collect the medical information required to process a claim. You do not decide whether an illness or injury is work-related. If an employee tells you that it is, treat it as if it is unless or until a Workers' Compensation Board rules otherwise. You do, however, have the right to know what functional limitations, if any, your employees have in order to fulfill the duty to accommodate and make the appropriate adjustments to enable them to remain at work if at all possible, or to return to work as soon as they are safely able to do so.

In terms of prevention, in certain situations employees are obliged to disclose personal medical information, such as when they know they have a life-threatening medical condition that could precipitate a medical emergency at work. Employees are responsible for taking all reasonable and necessary precautions to ensure their health and safety and that of anyone else who may be affected by their work or activities. If this requires the disclosure of personal

medical information, it must still be treated confidentially. Such information can be shared only with the employee’s consent and only for the purposes of making necessary accommodations to ensure the employee’s health and safety. If employees do not disclose information about a life-threatening condition, they cannot hold the employer liable for not responding effectively should a related emergency occur.

4.0 Prevention

The purpose of the prevention component is to promote health and wellness in the workplace, prevent injury and illness arising from risks and hazards in the workplace and its social environment, and protect employee health at work.

4.1 Background

The majority of cases of non-occupational illness or injury in the federal public service are attributable to two main causes: psychological and musculoskeletal. There is abundant evidence that these causes of illness or injury can be prevented. In the workplace, encouraging individuals with early symptoms to take remedial action is one of the most effective and least costly ways to support health and well-being. Table 3 at the end of this section provides an overview of these causes of disability, their prevalence in the public service, and some of the workplace interventions that can help prevent them. (Other significant but less prevalent causes of disability are cancer, accidents and cardiovascular illness.)

Common Causes of Stress at Work

- An excessive workload;
- Lack of control over or knowledge of the tasks to be performed;
- Lack of recognition;
- Lack of consistency between the values of the organization and their daily application in the workplace;
- Interpersonal or organizational conflict, including harassment; and
- Not having enough to do and feeling undervalued.

—From *Mental Health: First Aid in the Workplace*, Canada Revenue Agency

As a manager, it is important to be aware of “presenteeism,” when employees come to work, but for a range of reasons (including poor health) are not working to capacity, if at all. According to experts on health and productivity, presenteeism may be a greater threat to workplace productivity than absenteeism. Some associated conditions include headaches, allergies, arthritis, asthma, diabetes, mental health issues and other pressures causing sleep deprivation, exhaustion and difficulty concentrating.

Encouraging employees to take care of themselves creates a climate that reinforces individual responsibility for maintaining health and well-being. In the core public administration, under the *Directive on Leave and Special Working Arrangements*,^{xxxii} managers

are responsible for ensuring that different types of leave are used appropriately. This means that you can, for example, encourage employees to use sick leave for a day or two when they are feeling unwell or to take appropriate leave with or without pay for the care of family.

Studies show that employees who adopt a healthy, balanced lifestyle and whose employers support their efforts to maintain their health are more likely to be healthy, resilient and productive. Employee assistance programs (EAPs), for example, are instrumental in assisting employees with personal or work-related issues related to stress. The key is early problem identification and referral to support.

4.2 Your Prevention Responsibilities Under the *Canada Labour Code*, Part II

The purpose of Part II of the *Canada Labour Code*^{xxxiii} is to prevent accidents and injury to health arising out of these, linked with or occurring in the course of employment, in any workplace under federal jurisdiction. Under “Duties of Employers,” it spells out what is to be done in the workplace to ensure the health and safety of employees. In tandem with the *Canada Occupational Health and Safety Regulations*,^{xxxiv} employers are required to adhere to regulated requirements and standards concerning, for example, building and equipment safety, exposure limits for hazardous substances, lighting and sound levels, and elimination or control of hazards in the workplace. ★

Under provisions outlined in Part II of the Code, managers are required to be adequately trained in health and safety and informed of their responsibilities under Part II of the Code while acting on behalf of the employer. Broadly speaking, managers’ responsibilities are to ensure that: ★

- ▶ Appropriate hazard prevention programs are in place;
- ▶ Employees under their supervision are made aware of every known or foreseeable health and safety hazard, and each employee is provided with the information, instruction and training necessary to ensure his or her health and safety at work; and
- ▶ When incidents affecting health and safety in the workplace occur, they are investigated and reported, and corrective action is implemented and followed up on. (Consult your OHS advisor for information on your organization’s accident reporting procedures.)

Employees are expected to, among other things:

- ▶ Use any safety materials, equipment, devices and clothing intended for their protection;
- ▶ Follow established health and safety procedures;
- ▶ Cooperate with those charged with carrying out health and safety responsibilities; and
- ▶ Report as soon as possible to their immediate supervisor accidents or any other incidents in the course of their work that have caused them injury or have injured others.

Under Part II of the Code, a workplace that has fewer than 20 employees must have a workplace health and safety representative, those that have 20 or more employees must have a workplace health and safety committee, and those that have 300 or more employees must have a health and safety policy committee. The representative or committees have various powers and duties under the Code aimed at preventing workplace hazards and

implementing changes to improve occupational health and safety. For more information, visit www.rhdcc-hrsdc.gc.ca/eng/labour/health_safety/overview.shtml.^{xxxv}

The *Occupational Health and Safety Directive*^{xxxvi} supplements Part II of the *Canada Labour Code* for the core public administration. Developed by employer representatives and the bargaining agents at the National Joint Council, the directive specifies further employer responsibilities in addition to the ones outlined in Part II of the *Canada Labour Code* and the *Canada Occupational Health and Safety Regulations*. Some of these include:

- ▶ Consulting with the workplace health and safety committee or the health and safety representative on workplace changes that may effect health and safety;
- ▶ Implementing and monitoring the hazard prevention program;
- ▶ Providing first-aid services to employees and ensuring the availability of first-aid kits;
- ▶ Making prompt referrals for medical treatment;
- ▶ Maintaining records of illness or injury in the workplace;
- ▶ Making qualified first-aid attendants available to employees during regular working hours (at least 1 per 50 employees); and

Key Facts About the *Canada Labour Code*

- Applies to employees who work under federal jurisdiction—about 10 per cent of Canada’s labour force.
- Key sectors of the economy to which the Code applies include air, rail and highway transport; pipelines; banks; broadcasting and telecommunications; uranium mines; marine transport and related services.
- Some 40 Crown corporations and agencies, Indian reserves and the entire federal public service are also subject to Part II of the Code.
- Enforcement and administration is the responsibility of Human Resources and Skills Development Canada’s Labour Program, in partnership with Transport Canada and the National Energy Board.

-
- ▶ Posting emergency contact information (e.g., hospital, fire, police and poison control).

Your departmental OHS advisor will be able to tell you what your specific responsibilities are under this directive, such as in first aid, and how to ensure that your unit meets and maintains these.

The directive also supplements provisions in the Code that require workplace health and safety representatives or committees. In the core public administration, the representatives or committees must handle complaints relating to the health and safety of employees; participate in the implementation and monitoring of the hazard prevention program in the workplace; participate in all inquiries, investigations, studies and inspections pertaining to the health and safety of employees; participate in the implementation of changes in the workplace that may affect health and safety; and inspect the workplace on a monthly basis.

Departments and agencies that have more than 300 employees must also have an occupational health and safety policy committee. Its purpose is to help develop and monitor the department or agency's overall health and safety program and to serve as a forum where management and employee representatives can meet to exchange information and address and resolve health and safety issues.

As a manager, you can use these mechanisms to engage employees in promoting a healthy workplace. You can turn to the workplace health and safety representative or committee for advice and assistance in educating your employees on health and safety matters and to implement programs for the prevention of hazards in the workplace. The policy committee can assist in planning changes in the workplace that may affect the health and safety of employees and in improving or developing new health and safety programs.

Consult your OHS advisor to find out how these mechanisms are used in your organization to promote employee health and well-being.

4.3 Your Role in Prevention

Good management practices promote good health and well-being. Clarifying work priorities and employees' roles and responsibilities for each task to be performed is one of the best ways to prevent excessive stress in the workplace and create a climate that promotes good health. Encouraging supportive working relationships among team members and helping employees feel that their work is useful are also important ways to support well-being.

Becoming aware of safe work practices and informing your employees is critical to reducing the risk of illness or injury. Ensuring that employees have the accommodations they need, such as ergonomic chairs and keyboards, large monitors, air filters, supplementary lighting and so on, also reduces the risk of illness or injury.

One of the most important roles you have as a manager is to be attentive—look and listen for signs of emotional stress or physical discomfort in the people who report to you and respond in a timely manner. These signs are an early warning that more serious problems could be developing.

Your role is not to get personally involved or become your employees' confidante, nor is it to diagnose a problem. As a manager, your role is to create a work environment that supports employees' well-being and performance. This involves enabling employees to get help if you see signs of a possible health problem.

Communicating that you are concerned and supportive will demonstrate to employees that you care. Maintaining an “open door” policy—encouraging your employees to come to you at any time to ask about getting help—reinforces your commitment to their health and well-being. The more engaged you are in supporting your employees to take action to maintain their health,

Good Management Practices for Good Health

1. Ensure your expectations are realistic for employees and yourself.

- For example, eliminate roles and activities that are not essential and that help people say no without feeling guilty.

2. Increase employee control over their work.

- For example, delegate decision making where possible and differentiate between work that is essential and work that can wait.

3. Reduce effort and tension.

- For example, facilitate work–life balance with flexible work schedules, involve employees and clients in designing new work procedures, encourage open communication and make use of informal dispute resolution services.

4. Increase rewards and recognition.

- For example, support employees who receive promotion offers, regularly give positive feedback when work is done well, and learn what each of your employees considers to be rewarding in his or her work.

—From *Mental Health: First Aid in the Workplace*, Canada Revenue Agency

the more likely you will gain the trust and confidence of employees who require support to recover from illness or injury and return to work as soon as it is safe to do so.

Be aware of the early signs of possible mental health issues. These could include changes in personality and mood; sadness or crying, tiredness and emotional fragility; impatient, negative and disruptive behaviours; unpredictable outbursts and verbal threats; and changes in absenteeism patterns.

When you see these signs:

- ▶ Mention what behaviours you have observed and their impact in the workplace and indicate your concern. Remind the employee about your organization’s EAP and what it can offer and provide the contact information.
- ▶ Monitor the situation. If you see no improvement, set a time to discuss your concerns with the employee by reviewing specific incidents, changes in behaviour, attendance or performance issues, and what assistance the employee may require.
- ▶ At the meeting, stick to the facts, but make sure you convey your concern. When you ask about what assistance the employee needs, do not ask for medical information. That is private. If the employee spontaneously provides it, treat that information as confidential. If the employee has not contacted the EAP, provide the contact information again and review how the EAP may be able to help. If applicable, suggest that the employee speak with his or her union representative, who may also be able to help with referrals to other services.
- ▶ Depending on what the employee says, review his or her workload and explore changes to his or her schedule or duties. Listen for clues about ways you could support the employee’s job satisfaction.

The Canada Revenue Agency developed *Mental Health: First Aid in the Workplace*^{xxxvii} to help managers take appropriate action in cases of possible mental illness. Its suggestions on what to say to employees to encourage them to use the EAP are summarized in Table 4 at the end of this section.

Be aware of the early signs of possible musculoskeletal disorders. These include unnatural or unhealthy postures while using a computer and infrequent “mobility” breaks—in other words, you rarely observe the employee away from his or her desk moving around. Listen for complaints of numbness and burning sensation in the hand; pain in the wrists, forearms, elbows, neck or back; and frequent tension headaches.

When you see these signs:

- ▶ Take the time to ask whether the employee is in pain or needs a rest break.
- ▶ Encourage the employee to get away from his or her desk and take breaks more frequently.
- ▶ If you see no improvement, set a time to discuss options for modifying work duties or workload, altering the workstation, or changing the employee's work schedule, and to review the merits of an ergonomic assessment of the job, tasks or workstation.
- ▶ Encourage the employee to conduct a self-assessment using the Labour Program's [ergonomics-related hazard identification tool](#)^{xxxviii} developed by HRSDC's Labour Program. Depending on the results, order an ergonomic assessment. Consult your OHS advisor about the procedures to follow in your organization for obtaining an ergonomic assessment.

HRSDC's Labour Program provides a number of helpful resources to assist you in working with your employees to reduce the risk of musculoskeletal injury.



These include:

- ▶ [General Guide for Identifying Ergonomics-Related Hazards](#)^{xxxix}
- ▶ [Guide for Investigating Musculoskeletal Injuries](#)^{xl}
- ▶ [Guide on the Prevention of Musculoskeletal Injuries](#)^{xli}
- ▶ [Guide to Address Ergonomics-Related Hazards with Computer Workstation](#)^{xlii}
- ▶ [Guide to Employee Education on Musculoskeletal Injuries](#)^{xliii}

If an ergonomic assessment recommends modifications to tasks or workstation and/or the use of assistive technologies, you can consult Environment Canada's [Accessibility, Accommodations and Adaptive Computer Technology \(AACT\) Program](#).^{xliv}



It provides advice and assistance, on a cost-recovery basis, to Government of Canada organizations to help integrate employees with disabilities, injuries and ergonomic requirements. (More information about this program is provided in section 6.4 of this handbook.)

4.4 Prevention Checklist for Managers



4.4.1 Prevention Practices That Support Health in the Workplace

Learn about effective prevention practices for the workplace. Health Canada offers a wide range of [workplace health](#)^{xlv} information online, which is useful to managers in all types of workplace settings. You will find detailed information on workplace health strategies you can use to formulate approaches with your employees in order to maintain and promote good health. You can also find information on how to convince senior management about the benefits of [investing in workplace health programs](#).^{xlvi}

On the [Canadian Centre for Occupational Health and Safety](#)'s^{xlvii} website you will find information and tips on simple, low-cost ways to mitigate the health impacts of everything from rotational shift work and substance abuse to coping with critical incident stress. In particular, you may wish to use this resource to understand the value of [flexible work arrangements](#),^{xlviii} [workplace fitness](#),^{xlix} what to do to [reduce occupational stress](#)^l and the risk of [musculoskeletal injuries](#)^{li} in the workplace to [bridge the gap between mental illness and workplace functioning](#).^{lii}

4.4.2 Your Organization's Employment Assistance Program

Being informed about your organization's EAP and encouraging employees to use it is one of the best ways that you can take early action when you notice that mental stress is affecting performance. ★ Have EAP materials with contact information visible and available in the workplace to enable employees to access the service for confidential assistance. Ongoing promotion of the EAP helps alleviate concerns about using the service and hesitancy in reaching out for help. Always have contact information ready to provide to employees. Learn about the basics of your EAP, i.e., what it covers, how referrals are made and how privacy is respected. (See Table 4 in this section for tips on what to say to encourage employees to use this service.)

The EAP can also provide you with immediate guidance if you are confronted with an urgent and troubling employee situation in the workplace. You can also use it when you feel that stress may be affecting your performance or you are feeling overwhelmed by work or personal pressures.

For specific organizational needs such as counselling following a critical incident, additional EAP services, including guidance and coaching, are available on a cost-recovery basis from Health Canada's [Employee Assistance Services' Specialized Organizational Services](#).^{liii} For more information, call **1-888-366-8213** or email info-sos@hc-sc.gc.ca.

4.4.3 Instruments to Help You Assist Employees

Familiarize yourself with the Treasury Board's *Directive on Leave and Special Working Arrangements*^{liv} and its *Telework Policy*.^{lv} You can take advantage of these to assist an employee who is struggling with a mental or physical health problem. In cases of stress, particularly related to work–life balance, you can devise a plan using one or more of these policies to help your employee cope. Flexibility in the workplace to accommodate personal or family needs yields significant benefits, including reduced levels of employee stress and conflict, higher levels of productivity and output, reduced absenteeism, and higher levels of employee satisfaction and motivation.

Special working arrangements such as leave with income averaging can be of enormous benefit to an employee who needs time off to provide care for an ill child or aging parent. Under this policy, the employee can take between 5 weeks and 3 months of leave without pay in

a 12-month period. The employee's pay will be reduced accordingly but will continue to be paid while he or she is away. This time away from work may also be split into two periods over the 12 months but cannot be less than 5 weeks for each period. (Note: The employee will be required to fill out the "Application for Leave with Income Averaging" form [TBS 325-10E].)

Subject to your operational requirements, you can also consider pre-retirement leave to help an employee transition successfully to retirement. This is available to employees who are within two years of retirement, to reduce their work week by up to 40 per cent (i.e., up to 2 out of 5 days). To be eligible, at the end of their transition leave period, employees must also be eligible for an unreduced pension, i.e., they must be 60 years old or have reached age 55 with a minimum of 30 years of service. Pay is adjusted to reflect the reduced hours, but existing pension and benefit coverage continues unchanged. This type of leave can be a particularly useful tool to support experienced employees who are nearing retirement, helping to ensure that they transfer their knowledge to other employees before their departure. (Note: The employee will be required to fill out the "Application for Pre-Retirement Transition Leave" form [TBS 325-9E].)

The *Telework Policy*^{lvi} can also be used to help employees who may require a better balance between their work and personal lives, and as a form of accommodation. It allows employees to carry out some or all of their work duties from a location other than their designated workplace. However, when you make a telework arrangement, be sure to follow up with the employee involved to discuss how well it is working (to reduce his or her stress levels) and consult with the employee's colleagues to assess the impact on your unit's overall workload. This will help you decide whether to renew an arrangement or to use telework with other employees on your team. Special working arrangements should be reviewed on a regular basis, at minimum once a year, to determine whether they should continue.

4.4.4 Occupational Health and Safety

Familiarize yourself with the Treasury Board's *Occupational Health Evaluation Standard*^{lvii} and its *policy on occupational safety and health*.^{lviii} The objective of the standard is to prevent illness, injury and disability arising out of, or aggravated by, conditions of work. It specifies the actions to be taken to safeguard the health of employees, including when to use services mandated under the *Occupational Safety and Health* policy. The policy is aimed at promoting a safe and healthy workplace for public service employees and reducing the incidence of occupational injuries and illnesses. It mandates Health Canada to provide services to departments in the core public administration through the *Public Service Health Program*^{lix} (PSHP). These services include occupational health evaluations—conducted on a routine basis for specific occupational groups exposed to hazards (e.g., firefighters, divers, dangerous goods inspectors, etc.)—and non-routine Fitness to Work Evaluations (FTWEs).

FTWEs are conducted to determine if employees have been affected by workplace hazards and/or are medically fit to safely and efficiently perform the tasks of a specific job.

The standard states that FTWEs should be conducted with the employee's consent and in specific situations when an employee:

- ▶ Has been exposed to an unexpected occupational health hazard, such as a chemical spill;
- ▶ As a result of job changes will be exposed to a different hazard or more strenuous work;
- ▶ Appears to be having difficulty in performing the duties of the position (i.e., decreased function) or the employee's actions appear to be affected by health-related factors;
- ▶ Is absent for a lengthy period and a return date has not been established, or is returning to work after a period of medical leave and there is serious concern about his or her fitness for duty.

If the last two situations apply, a FTWE can be conducted by the employee's treating physician or by a supplier of occupational health evaluation services that the physician recommends. (Ensure that these professionals receive an up-to-date copy of the employee's job description that outlines the physical and psychological requirements of the job.) The purpose is to confirm the employee's ability to carry out or continue to carry out the duties of the position and, where warranted, what functional limitations should be accommodated. In most cases, once you know what these functional limitations are, you can work with the employee to address them and enable him or her to continue working (or to return to work) without compromising his or her health. Examples of possible accommodations include adjusting the employee's work schedule, modifying his or her workstation, and enhancing the work space such as with additional lighting or air filtration.

If the employee is not receiving treatment and/or cannot get a FTWE conducted via his or her treating physician, you can request a FTWE from Health Canada. Note that Health Canada will *not* perform a FTWE if an employee is receiving benefits pursuant to an approved disability insurance claim (either disability insurance or the Public Service Management Insurance Plan or is on injury-on-duty leave or Workers' Compensation. In these cases, the insurer or the provincial Workers' Compensation Board provides case managers and/or adjudicators who can assist with accessing FTWEs as part of the planning process for return to work. (See section 6 of this handbook for more information.) Before requesting a FTWE, consult your accommodation and/or labour relations advisor. A FTWE from Health Canada can be requested by contacting the regional office of the Public Service Health Program or by sending an email to corporate_whpsp@hc-sc.gc.ca.

4.4.5 Emergency and Traumatic Events

Consult Health Canada’s handbook for managers entitled *Preparing for and Responding to Workplace Trauma: A Manager’s Handbook*.^{lx} It provides helpful step-by-step leadership guidance on what to do and what to say to employees to help them cope after events that can severely affect their emotional health as well as what you should do to be prepared. Traumatic events include witnessing a person die, violent physical attacks, physical threats, bomb threats, explosions, fire, body recovery and site investigation following a major accident or disaster, and attempted or completed suicide. ★

Make the workplace as safe as possible for employees at risk of a health emergency.

Employees have a responsibility to inform you if they have a condition that could cause an emergency health event at work. Examples are a severe allergy, epilepsy or a chronic illness such as ischemic heart disease (a major cause of heart attacks). There are privacy restrictions on the medical information you are entitled to (see section 3.2), but you should encourage your employees to disclose any potentially life-threatening condition and the specific accommodations that it requires so that you can make the workplace as safe as possible for them. Once you are informed, you can develop an emergency plan with the employee, spelling out how you and work colleagues are to respond if the emergency occurs. Remember that witnessing an employee struggling with a life-threatening health emergency is much more likely to be traumatic for *everyone* on your team if they do not know what to do to help.

Prevention Leadership

Never underestimate your influence. One of the most effective ways you can promote health and wellness in the workplace is by setting an example. The easiest way to do this is to make a point of integrating physical activity into your personal workday. Taking the stairs instead of the elevator, conducting a bilateral meeting during a walk outside, walking to an off-site meeting rather than taking a taxi, stepping out of your office to speak to an employee rather than sending an email, and using public transit or riding a bike to work instead of driving—all are all examples of ways that you, as a leader, can model physical activity at work, thus helping build a culture of health and wellness in the workplace.

Table 3. Common Causes of Disability in the Public Service and Potential Interventions

Descriptors	Mental Health Issues	Musculoskeletal Disorders	
Definition	Characterized by alterations in thinking, mood or behaviour—or some combination thereof — associated with significant distress and impaired functioning. Examples include mood disorders, ^{lxi} anxiety disorders ^{lxii} and personality disorders. ^{lxiii}	A group of painful disorders affecting the muscles, tendons and nerves. Examples include carpal tunnel syndrome, ^{lxiv} tendonitis, ^{lxv} thoracic outlet syndrome ^{lxvi} and tension neck syndrome.	
Prevalence (represented employees)	44.5% of DI claims (2008)	14.2% of DI claims (2008)	
Risk Indicators	<ul style="list-style-type: none"> Chronic pain Physical injuries Job insecurity Low level of co-worker support Work stress Role conflicts and ambiguity 	<ul style="list-style-type: none"> Insufficient work Lack of control over work methods and workload Lack of recognition 	<ul style="list-style-type: none"> Overexertion and falls Chronic pain and physical injuries Excessive computer use Job strain (high demand and little control) Mental health issues (e.g., stress, depression) Health habits (e.g., alcohol consumption, smoking, obesity)
Interventions That Work	<p>Promoting Mental Health</p> <ul style="list-style-type: none"> Changing features of the work environment, e.g., workload, schedule, work processes and procedures Addressing job demand and control, e.g., stabilizing work teams, clarifying roles and responsibilities, delegating work, supporting employee discretion and choice Training, e.g., conflict management, stress management, communication skills, relaxation techniques <p>Identifying and Addressing Mental Health Issues</p> <ul style="list-style-type: none"> Training, e.g., psycho-education, stress management, self-awareness, benefits and disclosure training, workplace hardening Stress management, combining skill development, social support and job redesign Work-facilitated treatment, enabling access to psychological care (e.g., cognitive behavioural therapy) 	<p>Primary Engineering Controls</p> <ul style="list-style-type: none"> Workstation redesign and other ergonomic adjustments (e.g., larger monitor, chair with lumbar support, etc.) Using assisted handling devices (e.g., mechanical lifting machines) <p>Secondary Interventions</p> <ul style="list-style-type: none"> Administrative controls (e.g., job rotation) Exercise Work schedules (e.g., rest breaks) Participatory ergonomics (e.g., alternative mouse, new chair, etc.) 	

Adapted from the presentation “Environmental Scan on Workplace Health in Canada,” prepared by Health Canada for the Disability Management Initiative, November 17, 2009.

Table 4. Answers to Employees' Concerns About Using the Employee Assistance Program

If the employee says...	Your answer could be...
I don't have time. It's too far.	<ul style="list-style-type: none"> You can have access to Employee Assistance Program (EAP) during and after work hours. You can talk with someone by telephone. Arrangements can be made to suit you in terms of time and place.
It's none of your business.	<ul style="list-style-type: none"> That's true, but I'm worried about you. I only want to remind you that the EAP is available to you if you need it. You're right, but your work performance is (or your attitude at work is)...
Why don't you worry about your own problems?	<ul style="list-style-type: none"> We're not here to talk about me. I'm worried about you. I only want to remind you that the EAP is available to you. <p><i>Note: Do not get caught up in a discussion about yourself and try not to become defensive. Show empathy, but suggest that the meeting be postponed if emotions are too intense.</i></p>
<i>The employee wants to tell you all about his or her problems and does so.</i>	<ul style="list-style-type: none"> I think you have a lot on your shoulders. Let's focus right now on how I can help you with your work-related pressures. I think the EAP would be more helpful with your personal issues.
You can't force me to use the EAP.	<ul style="list-style-type: none"> That's true, but why not try? It can't hurt. It's up to you. I only want you to know that the EAP is available. I don't need to know if you've used the EAP service. I just want to make sure you know about it. The decision to use it is yours and is a private one.
Are you saying that I have a problem?	<ul style="list-style-type: none"> I don't know if you have a problem or not, but I've noticed that... (<i>describe the attitude or work performance</i>) and only want to remind you that the EAP is available if you want to talk to someone.
I don't think the EAP is confidential.	<ul style="list-style-type: none"> The professionals at the EAP are bound by professional privilege. They strictly respect the confidentiality of clients.
I have the situation under control. I don't need any help.	<ul style="list-style-type: none"> I don't doubt that you're able to get through this alone. But, sometimes, getting a little help and support can make things a lot easier.
<i>The employee becomes emotional (crying or anger).</i>	<ul style="list-style-type: none"> I can see how much this is affecting you. Maybe you could take the time to speak with someone at the EAP. I can see that this is a sensitive topic for you. Maybe you could take the time to go through it with the EAP.

Adapted from *Mental Health: First Aid in the Workplace*,^{lxvii} published by the Canada Revenue Agency.

5.0 Support for Recovery

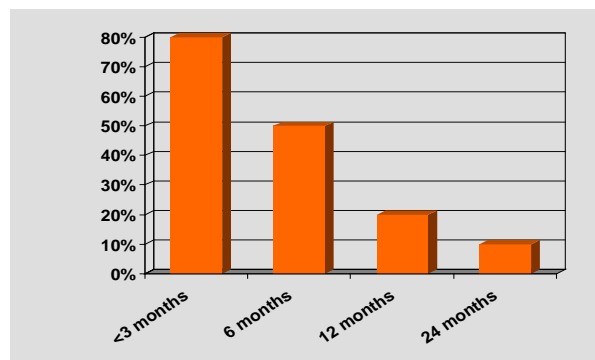
The purpose of the support for recovery component is for ill or injured employees to remain at work whenever possible or to set the stage for a successful return to work.

5.1 Background

The probability that employees will return to any form of employment following an absence from work for illness or injury decreases sharply the longer they are off work.

Numerous studies show that after about 6 months away from the job, only about 50 per cent of employees will ever return to work; after 12 months, only about 20 per cent; and after two years, less than 10 per cent will *ever* return to any form of paid employment (see Figure 2).

Figure 2. Rates of Return to Work of Employees Absent Because of Illness or Injury




The longer injured or ill employees remain away from work, the more likely they will lose their “employee identity,” and with that, many of their social contacts and their sense of self-worth. Consequences for the disabled employee include social isolation, diminished economic prospects, and a higher risk of depression and suicide. Consequences for the employer are the loss of skills and experience and higher costs associated with recruiting, staffing and retraining replacements. Consequences for the economy and society as a whole are reduced workforce capacity and productivity.

Advice from Public Service Managers to Public Service Managers

- Maintain regular contact with employees on leave.
- Work with HR management to handle the staffing process with sensitivity, not just from a legal and operational perspective.
- Each case is different—you need help, understanding and a good team.

—From the *Disability Management Survey for Managers—Summary of Findings*, Employee Assistance Services Bureau,


5.2 Your Responsibilities in the First Days of Absence

Make sure your employees know that they must make every effort to inform you if they are unable to come to work, as early as possible on the first day of absence.  If your organization does not have an established policy for absence notification, establish a procedure of your own that fits in with how your business unit operates and inform your staff. For example, tell employees to inform you first and specify how to contact you. Research shows that the most important ingredient in successful disability management is early and sustained contact by the manager. This starts on the first day of absence.

Make it clear to your employees that there are two main reasons for prompt absence notification: leave policy and their health and safety. As a manager in the core public administration, it is your responsibility under the *Directive on Leave and Special Working Arrangements* to authorize and approve *all* absences from work, including sick leave. To use sick leave, an employee must be sick and you must authorize the absence as paid sick leave. In order to do so, at a minimum, you need to be notified as soon as possible that the employee is not at work for health reasons. If you are not sure about how to verify that leave is being used appropriately, consult your labour relations or compensation and benefits advisor.

The most important reason that employees must notify you of their absence as soon as possible is their own safety. Should an emergency occur at work, such as a fire or chemical spill, as a manager, you must be able to account for *every* employee you are responsible for. At the same time, as your employees' direct report, you are among a handful of people who may be expected to account for their general whereabouts. This can have life or death consequences, particularly for employees who live alone. Failing to show up for work is one of the first signs that a person could be in serious trouble. It is absolutely within your authority to know if an employee who has failed to show up for work as expected is safe, to call them, and to be in touch with their emergency contacts, if necessary, to find out.

In cases where employees have little if any accumulated sick leave and will be absent because of a serious health issue, you need to know as soon as possible. This will allow you to inform the employee of how many sick days they have banked. Consult with your labour relations or compensation and benefits advisor regarding whether to award an employee advance sick leave if he or she requests it. This should be dealt with on a case-by-case basis. (Most collective agreements and the *Policy on Terms and Conditions of Employment* contain provisions for the discretionary advance of sick leave. For represented employees, it is subsequently recovered through deductions from future earned sick leave credits.)

Whether you initiate the first contact or not, you must enquire as to whether an employee's illness or injury is work-related in order to report it to HRSDC's Labour Program *within three days*. 

If an employee states that an illness or injury is work-related, you must report it to the Labour Program regardless of whether you agree or have yet to complete your investigation. (See section 5.3 of this handbook for more information.) Note that if you witnessed the workplace incident that caused the injury or were informed of it at the time of the occurrence, this reporting process should already be well underway.

- ▶ If the employee informs you that the illness or injury is the result of an incident or accident at work, report this *immediately* to the appropriate contact in your department to initiate the *Government Employees Compensation Act* (GECA) process (depending on the process your department has established, you may report this to your OHS advisor or online).

Then, you need to establish approximately how long the ill or injured employee is expected to be away from work to take steps to manage your unit's workload.

- ▶ If the employee is unable or unwilling to answer this question, ask if he or she is getting the care he or she needs, and whether he or she needs help. Remind the employee that the EAP is available at any time and provide the contact information. Suggest that the employee seek medical help if he or she has not already done so. Tell the employee that you will call back in a day or two to find out how he or she is doing and ensure that you do so. You may consider, with the employee's consent, establishing a support network of colleagues who are willing to volunteer their time (outside work hours) to make hospital visits, shop for food and so on. This can be particularly helpful when, for example, the employee lives alone and/or does not have extended family members who can help.
- ▶ Finally and most importantly, if you have any reason to suspect that an employee may be seriously injured or ill and *unable to get help or to help him or herself*, do not hesitate to contact his or her emergency contact person and express your concerns. In cases of severe mental illness, for example, this type of intervention can save a life.

5.2.1 Requesting a Medical Certificate

Depending on your organization's policy, you may need to request a medical certificate signed by the treating physician. You do not need to know, nor should you request, the diagnosis. Rather, this certificate is used to obtain information from the employee's treating physician to:

- ▶ Substantiate the employee's absence as sick leave;
- ▶ Ascertain how much time away from work is expected to be required for recuperation (i.e., the expected return-to-work date); and

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- ▶ Identify what, if any, modifications to work duties or other types of accommodations may be required upon return to work.

Check with your labour relations or compensation and benefits advisor or, if your department has such expertise, your return-to-work coordinator, disability management advisor and/or disability case manager, to find out if your organization has a standard form for requesting a medical certificate. If not, in the case of occupational illness or injury, Workers' Compensation Boards (WCBs) have forms that can be used. A template for requesting this information from the treating physician for non-occupational illness or injury and for obtaining the employee's consent to do so is provided in Appendix B. In federal departments and agencies that have created return-to-work coordinator or disability advisor positions, these professionals may have the functional responsibility to arrange for medical certificates. (Note: You are advised to avoid using email to receive or forward completed medical certificates to HR. Doing so could compromise the employee's privacy. See section 3.2 for more information.)

If you are requesting a medical certificate, take the time to communicate to the employee why it is required. Depending on the specifics of the situation, some reasons to cite could include:

- ▶ Ensuring that the employee gets medical help, if he or she has not already done so;
- ▶ Ensuring that sick leave is accurately recorded and expediting the awarding of advance sick leave and/or sick leave without pay should the employee subsequently need it;
- ▶ Taking the first step to compile the information required to access benefits under Employment Insurance and/or DI or long-term disability (LTD) under the PSMIP, as well as rehabilitation or vocational services provided by the insurer, should the employee eventually need them;
- ▶ Taking the first step toward planning the employee's return to work, including a heads-up on any necessary accommodations in the workplace that the employee may require; and
- ▶ Allowing you to plan how you will manage the workload for the period the employee is likely to be away.

Upon requesting a medical certificate, as the manager, you are advised to open a case file if you have not already done so. This will allow you to record the date and subject of all your subsequent discussions and/or correspondence with the employee, your HR advisors, the employee's union representative (if applicable) and health professionals who may be involved in the accommodation process. It will help you keep track of the employee's leave status and ensure that he or she accesses all the benefits and services required for a successful recovery and return to work. Should you move to another position before the employee returns to work, your replacement will be better prepared to assume his or her managerial responsibilities for the employee. Finally, keeping a case file will enable you to demonstrate your efforts to support an

ill or injured employee and to accommodate his or her needs should future decisions be challenged.

Depending on the severity of the illness or injury or medical condition, the medical certificate may be sufficient to plan the employee's return to work and identify necessary accommodations. This is the best case scenario for the employee and for you as the manager, particularly if the employee has sufficient sick leave credits and/or can be granted enough advance sick leave to cover the period of time required for recovery. You can work with the employee, his or her physician, your HR advisors and the employee's union representative (if applicable), to develop a return-to-work plan to ease the employee back into his or her work routine when his or her physician confirms that it is safe to do so. In cases of occupational illness or injury, the WCBs are an invaluable resource to clarify functional limitations that should be addressed in this plan. Adjudicators and/or nurse case managers can assist in identifying accommodations and in making referrals to additional services to support the return-to-work process.

Note that a medical certificate is not the same as the Fitness to Work Evaluation (FTWE). FTWEs are more detailed. They can be requested after a prolonged absence when there is serious concern about the employee's fitness for duty or that a return to work might endanger his or her health or the well-being of others. FTWEs may also be useful for situations in which the information provided by the treating physician in a medical certificate is not sufficiently detailed to identify appropriate accommodations, or when even with accommodations, the employee may not be capable of performing his or her normal or modified job duties. In the latter case, they may assist you in identifying alternative positions more appropriate to the employee's capacities.

5.3 Fulfilling Your Responsibilities Under the *Government Employees Compensation Act*

If an illness or injury resulting from an accident or incident in the workplace requires professional medical care, pursuant to [GECA](#)^{lxviii} and the Treasury Board's *Workers' Compensation* policy,^{lxix} you must ensure that it is reported to your [designated regional HRSDC Labour Program office](#)^{lxx} *within three calendar days of the occurrence.* In cases of an employee illness or injury that emerges some time after an accident or incident at work, but which did not require and/or receive immediate medical care at the time, or that may be an occupational disease unrelated to a specific incident, *you must still ensure that it is reported within three days of your becoming aware.* ★

To enable you to fulfill this reporting requirement, make sure your employees are aware of their responsibility to disclose work-related injuries or illnesses to you. Employees are responsible for notifying you, as their immediate supervisor, of a work-related illness or injury as soon as possible. If they seek medical help outside working hours for an injury that occurred at work, they must likewise notify you.

Note that workplace injuries that involve first aid only are *not* to be reported to HRSDC's Labour Program. However, you must ensure that minor injuries are recorded by the employee who provided the first aid, including the date, type of injury and first aid provided. You must also ensure that these records are kept for two years.

You, your OHS advisor or, depending on the process your organization has in place, your return-to-work coordinator, disability management advisor or disability case manager, will work with the regional office of the Labour Program. This office will ensure that the compensation claim form is completed, submitted correctly and signed by you as the employee's supervisor and/or another person in charge who has first-hand knowledge of the incident. (You may also need to fill out accident investigation forms administered by your organization's OHS unit, pursuant to requirements under the *Canada Labour Code* for investigating and reporting hazardous occurrences. Consult your OHS advisor about your organization's investigation and reporting process.)

Once you and the employee have provided all the necessary information, the Labour Program will submit the compensation claim form to the respective WCB in the province in which the claimant is employed, triggering the process of adjudication. (Note that this may not be the province in which the employee resides. For example, claims for federal government employees in the National Capital Region who work in Ontario but reside in Quebec would be processed by the Workplace Safety and Insurance Board of Ontario. Claims for employees appointed in Canada but assigned to work outside the country are also processed by the Workplace Safety and Insurance Board of Ontario. Federal government employees in Yukon, Nunavut and the Northwest Territories are considered to be employed in the Province of Alberta and their claims are handled by the Workers' Compensation Board of Alberta.)

The WCB will investigate and determine whether the illness or injury is work-related. If the WCB determines that it is, and the employee has taken or is still on sick leave (with or without pay) as a result of the illness or injury, then he or she is eligible for injury-on-duty leave, retroactive to day one of leave connected to the illness or injury. The WCB will inform you of its decision, verifying the period of disability. You are then expected to authorize [injury-on-duty leave](#).^{lxxi}

The sooner the work-related illness or injury is reported by your department and the required paperwork is submitted by the Labour Program to the appropriate provincial WCB, the sooner the claim can be processed and rehabilitation and other services be provided to the employee. Moreover, if there is a potential workplace-based reason for the illness or injury, the sooner that action can be taken to ensure the safety and health of other employees, the better.

Most WCBs facilitate access to medical and rehabilitation services that can make a major difference in terms of recovery time and return to health. WCBs also provide services to support a successful return to work, including functional capacity evaluations and ergonomic evaluations. They may facilitate access to work hardening services—individualized treatment programs to mentally and physically strengthen employees for reintegration into the workplace following a long absence from work for acute care and medical treatment. In cases where an injury or occupational disease leaves the employee with a permanent disability that makes it impossible to resume former duties, some WCBs also provide vocational rehabilitation with retraining for other work.

5.3.1 What to Do While the Employee Is on Injury-on-Duty Leave

In the core public administration, Treasury Board guidelines for [injury-on-duty leave](#)^{lxxii} suggest that in cases of extended injury-on-duty leave, periodic verification be conducted to support the continued provision of this leave. To do this *and* facilitate the return-to-work process, make sure you keep the channels of communication open with officials at the provincial WCB who are adjudicating and/or managing the claim *while the employee is on injury-on-duty leave*. (The WCB will identify whom to contact in its decision correspondence.)

WCB officials will be able to tell you if and when a return to work can be expected and what to do to prepare, supporting a timely return to work with appropriate accommodations required. Use this information to work with the employee to develop an effective return-to-work plan and accommodation strategy. Keep the WCB up to date on progress toward a return to work.

Generally, injury-on-duty leave can be paid up to 130 days (26 weeks) before a review of the claim is suggested. (If the employee is represented, check with the applicable collective agreement for further clarification as to his or her injury-on-duty leave entitlements.) As this point approaches, if the employee has not yet returned to work, contact the WCB to ensure the employee receives the Workers' Compensation wage-loss benefits that he or she may be entitled to. While there are variances from province to province, these are generally 75 per cent of *net* earnings, based on a maximum annual earnings ceiling. (Table 5 at the end of this section provides a summary of insured earnings by province or territory.)

Ensure that the Labour Program at HRSDC is advised of the use of injury-on-duty leave and when and how the return to work will proceed. If applicable, notify the Labour Program as soon as the employee is placed on WCB wage-loss benefits. The Labour Program needs this information to verify billing from the provincial WCB. (Depending on your department's processes, this notification is provided by either you or your OHS advisor or compensation and benefits advisor, or, if your department has them, it may be provided by the return-to-work coordinator, disability management advisor and/or disability case manager.)

If your employee is represented, the union representative can be very helpful throughout this process, from the initial report and filing of forms, through recovery, to return to work. He or she will be able to explain the process to the employee (and to you), answer questions, provide technical advice and help you stay in touch with the employee during injury-on-duty leave. The union representative will work with you, the employee, his or her treating physician, your HR advisors, and the WCB to help develop a return-to-work plan well in advance of the projected return date. Finally, he or she can advocate on your employee's behalf with the WCB to make sure your employee receives all the appropriate rehabilitation and evaluation services the WCB provides to support a successful return to work.

Table 5. Maximum Insured Earnings Under Workers' Compensation (2009)

Jurisdiction	Maximum Insured Earnings	Jurisdiction	Maximum Insured Earnings
Alberta	\$72,600	Nova Scotia	\$49,400
British Columbia	\$68,500	Ontario	\$74,600
Manitoba	No maximum	Prince Edward Island	\$47,500
New Brunswick	\$55,400	Quebec	\$62,000
Newfoundland	\$50,379	Saskatchewan	\$55,000
Northwest Territories and Nunavut	\$72,100	Yukon	\$76,842

5.4 Supporting Employees During a Prolonged Absence

In the federal public service, managers have a great deal to consider when supporting employees who are away from work for a protracted period with a serious health issue.

As in all areas of management, doing this well requires leadership grounded in the values of respect and integrity, as well as professionalism, good judgment and common sense. Staying in touch with the employee is critical. However, for the duration of the absence, you will also need to manage the impact on the other people in your unit, namely on their stress levels. Remember, you are not alone. In most federal organizations, there are HR advisors who can help. In cases involving represented employees, union representatives can also provide assistance.

Following a period of recovery, which varies in every situation, you must establish whether the employee will be able to return to work in the foreseeable future, and if so, to his or her position.

If the employee can return to his or her position, you will need to ensure that all necessary accommodations are identified and provided. If the employee cannot return to his or her position, you will need to establish whether another suitable position can be identified and whether the employee's needs can potentially be accommodated in another organization. Throughout this process, you must respect the privacy of the employee, including when communicating with the employee's colleagues. (See section 6.0 of this handbook for more information on accommodation.)

To make sure you have the support you need to do the right thing at the right time, adopt a case management approach. Proactive case management helps ensure that contact is maintained and support is provided to help the employee recover and, if at all possible, return to meaningful and productive employment. As a manager, you can establish a "case management team" for the injured or ill employee. This will allow you to clearly identify who is handling what, when decisions will be required from whom in order to ensure the employee receives disability benefits and services, and how to keep track of the employee's progress. It will also ensure that you identify the employee's accommodation needs as early as possible so that accommodations are in place when he or she is ready to return to work. You are advised to

Case Management Objectives

- To restore and maintain the productive capacity of employees, which enhances their physical, social and psychological rehabilitation;
- To assist employees with work arrangements or vocational adjustments if necessary to enable them to return to work promptly;
- To directly reduce the workplace costs of injuries/illnesses and reduce the costly consequences that such injuries/illnesses bring to all parties, including the family of the injured person;
- To reduce the incidence of accidental illness/injury in the workplace; and
- To elevate workplace morale and improve the labour relations environment.

include all case management contacts and related information in the case file, which must be stored securely (i.e., under lock and key) and to which access must be carefully monitored.

At a minimum, the members of the case management team should include the employee, you and all your HR advisors (see section 1.1), and the union representative (if applicable).

Because every case is unique, your team may also involve other professionals who can help facilitate a timely return to work. These individuals may include:

- ▶ The employee's treating physician and other medical professionals, such as an occupational health evaluation specialist, to ensure that functional limitations and functional capacities or abilities are identified and cross-matched with job functional requirements to assist with accommodation and return-to-work planning;
- ▶ The WCB adjudicator or nurse case manager, or if the employee claims DI or PSMIP LTD, the insurance provider's claim manager;
- ▶ Facilities and IT experts to provide advice on logistics regarding implementing required accommodations; and/or
- ▶ A representative from your organization's corporate services branch in procurement and/or materiel management, to ensure that any required assistive devices, services or other workplace accommodations are provided in a timely manner for the employee's return to work.

Each team will differ for each case. Depending on the severity of the illness, injury or medical condition and the employee's recovery time, each case will likely involve different combinations of services and supports. Your focus should be on ensuring that every resource that can possibly support the employee in the recovery process is being fully leveraged to maximize the likelihood of a successful return to work.

5.4.1 Access to Disability Benefits and Services

As soon as you are informed that an injured or ill employee will not be returning to work for health reasons within a few weeks, you are advised to work with your labour relations or compensation and benefits advisor to ensure the employee's access to disability benefits and services. You will receive this information either from the employee directly and/or following the provision of a medical certificate from the treating physician (see section 5.2.1).

- ▶ **As a first priority, determine with your compensation and benefits advisor whether the employee has sufficient paid sick leave credits for the anticipated duration of absence.** If not, determine whether and when to authorize advance sick leave and/or sick leave without pay. Make sure your pay office is informed about when the employee's paid sick leave credits will expire, to avoid inadvertently overpaying the employee.

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- In cases of work-related illness or injury, the employee will rely on paid sick leave and potentially advance sick leave and/or sick leave without pay for some time until his or her case is approved by the WCB. (Note: This approval requires you to award injury-on-duty leave and restore sick leave credits.)
 - In the case of a represented employee, the applicable collective agreement may place a cap on the amount of advance sick leave that can be awarded. Be sure to find out from your compensation and benefits advisor or labour relations advisor what this is.
 - Executives may be awarded up to 130 days of special sick leave that does not have to be recovered from future-earned sick leave credits. (This is provided at the discretion of the deputy head pursuant to the Treasury Board’s *Directive on Executive Compensation*,^{lxxiii} section 6.3. It can be awarded only once during the course of an executive’s career in the core public administration.)
- ▶ **No matter whether the illness or injury is or is not work-related or how much sick leave the employee has, you should encourage him or her to apply for benefits and services under either the **Disability Insurance**^{lxxiv} (DI) Plan (for represented employees) or **PSMIP LTD**^{lxxv} (for non-represented employees or those excluded from a collective agreement).** ▲
- This is particularly important if the anticipated duration of absence is 13 weeks or more—13 weeks is the elimination period before an injured or ill employee can receive income replacement under either plan. If the employee does not have sufficient sick leave credits and you cannot grant enough advance sick leave to cover the 13 weeks, then he or she will have to apply for **Employment Insurance (EI) Sickness Benefits**.^{lxxvi}
 - The sooner that the applications are submitted, the more likely the employee will be spared an interruption in income if he or she is approved for benefits. In cases where the illness or injury is work-related and meets the insurer’s definition of disability, by having applied for DI or PSMIP LTD, the employee will receive income until his or her claim to the WCB is decided. Both plans provide 70 per cent of the salary the employee was earning in his or her substantive position.
 - For DI (from Sun Life), claim forms are available at <http://www.tbs-sct.gc.ca/hr-rh/bp-rasp/benefits-avantages/dip-rai/dip-rai-eng.asp>.^{lxxvii} ▲
 - For PSMIP LTD (from Industrial Alliance), claim forms are available at <http://www.tbs-sct.gc.ca/tbsf-fsct/5945-5946-eng.pdf>.^{lxxviii} ▲
- ▶ **In cases where employees have ample banked sick leave, applying for DI or PSMIP LTD as soon as possible is still important.** Employees must exhaust all their available sick leave credits *before* they can receive income replacement and vocational rehabilitation services under either DI or PSMIP LTD. However, it can take a significant amount of time to collect

all the medical evidence required from the treating physician and other medical professionals that the insurer needs to decide whether a claimant is entitled to benefits—the medical certificate alone is not sufficient for this purpose. The insurer cannot commence adjudicating the claim until the initial 13-week minimum elimination period has elapsed. In most cases, if the insurer has the information in hand, the claim is more likely to be processed promptly. If employees wait until their sick leave credits run out before collecting the information the insurer needs, they will probably experience an interruption in income.

- ▶ **If the employee is approved for DI or PSMIP LTD, make him or her aware of the insurer’s rehabilitation program and how this can help with the return to work.** ▲


Encourage the employee to contact the insurer to find out more about the program and to determine with his or her treating physician when he or she may be ready to take advantage of it. Emphasize that when he or she is ready, you will work with him or her and your HR advisors and his or her union representative (if applicable) to develop a plan for a gradual return to work.

- ▶ **Be sure that the employee is informed of the relevant situations in which certain income benefits may have to be paid back.**

In the core public administration, compensation and benefits advisors are trained to provide this information, pursuant to the Treasury Board’s *Policy on the Administration of the Public Service Pension Plan and Group Insurance and Other Benefit Programs*.^{lxxix} However, you are advised to check with the employee to make sure he or she has received this information and understands it. Make it clear to the employee that he or she *must* inform the insurers or the WCB of any change with respect to employment-related income benefits he or she receives from all sources. The most common scenarios are outlined in the following:

- When DI or PSMIP LTD benefits start, they may overlap with EI sickness benefits. ▲
If this happens, the employee will be required to reimburse to EI the full amount of any EI benefits received from the point that DI or PSMIP LTD commenced.
- When the employee has made a WCB claim for the illness or injury and it is approved, he or she will be granted injury-on-duty leave and thus, full pay, back to day one of the illness or injury and potentially, depending on the time away from work approved by the WCB, wage-loss benefits under Workers’ Compensation. Any DI or PSMIP LTD income replacement that may have been received over this period, which would have commenced no earlier than week 14, will have to be reimbursed to the insurers (i.e., Sun Life or Industrial Alliance). ▲
- If the employee applies for and receives a disability or retirement pension under the *Public Service Superannuation Act* (PSSA) and continues to receive DI, PSMIP LTD or Workers’ Compensation income benefits after the date that the pension is awarded, he or she will be required to reimburse the insurers or, potentially, the WCB, that portion of ▲ ●

the income benefit received from these sources equivalent to the pension amount, from the date of the pension award. If the pension exceeds the value of the income benefit, then the employee would be required to reimburse the full amount of the income benefit to the insurers, or possibly to the WCB. (See section 5.5 for more information on the circumstances under which a PSSA pension can be accessed.)

- ▶ **After the first year on DI or PSMIP LTD, you should advise the ill or injured employee to apply for disability benefits under the [Canada Pension Plan^{lxxx}](#) (CPP) or [Quebec Pension Plan^{lxxxi}](#) (QPP) if the insurer has not already done so.**  The insurer can reduce the amount of the income replacement it provides by the amount the disabled employee is eligible for under these plans. Applying after their first year on disability benefits ensures that employees receive the maximum income replacement benefit to which they are entitled.

5.4.2 Managing Without the Ill or Injured Employee

Once you have determined the combination of disability benefits and services that are likely to be used, and when you may need to authorize sick leave without pay (i.e., when the paid sick leave credits for employees claiming DI or PSMIP LTD, and/or Workers' Compensation run out), assess the impact on your *salary dollars* and your team's workload and adjust your plans accordingly.

- ▶ For as long as your employee is on sick leave *with* pay (which depends on how much banked sick leave the employee has) or has been approved for injury-on-duty leave (which, depending on the case, may be reviewed by management at 130 days), ***you cannot access the salary dollars assigned to the position to hire a temporary replacement.*** It is conceivable that, in the event of a non-work-related illness or injury, a long-serving employee may have more than a year and a half's worth of unused sick leave. We recommend that you work with your staffing advisor to identify temporary assignments in your department or other trainee or employee exchange programs that may be available to you for which you do not need salary dollars, to augment the capacity of your unit to meet its business objectives. If you cannot find these additional resources, you are advised to work with senior management to modify its expectations for your unit.

Once the employee moves to sick leave *without* pay, you can use the salary dollars associated with his or her position for a temporary replacement. However, keep in touch with the WCB adjudicator or the insurer's claim manager to find out about any changes to the anticipated period of recovery so that you can plan accordingly. Remember, these contacts will be aware of any rehabilitation services the employee may be using, the employee's progress and the prospects for a return-to-work date. To facilitate a successful return, you may be asked to

create opportunities for a gradual reintegration into the workplace on a part-time basis and/or to modify the employee's work duties and performance goals for a period of time.


- ▶ **The duration of a Workers' Compensation claim will depend on the specifics of the case and whether the employee is at "maximum medical recovery."** In general, you can access salary dollars for a temporary replacement *after* the case has been reviewed at the 130-day point of injury-on-duty leave, when the employee may receive wage-loss benefits under Workers' Compensation and moves to sick leave without pay.
- ▶ **For non-work-related illness or injury, DI or PSMIP LTD provides replacement income for up to two years, pursuant to the "regular occupation" definition of disability.** This means that for up to 24 months *after he or she has exhausted sick leave credits*, an employee may receive income replacement benefits for any physical or mental disability that prevents him or her from performing the regular duties of his or her occupation. As soon as the employee moves to leave without pay, you can use the salary dollars assigned to his or her position for a temporary replacement.
- ▶ **Unless it is clear that the employee will not be able to return to duty in the foreseeable future, you are advised *not* to staff his or her position on an indeterminate basis for the initial 24 months that income replacement benefits are provided.** Strictly speaking, under the *Directive on Leave and Special Working Arrangements*, after a year of leave without pay, or consecutive periods of leave without pay for the same purpose that add up to one year, the employee can be replaced on an indeterminate basis. However, under this directive, you are also urged to approve a period of sick leave without pay to accommodate the recovery needs of the employee and make every effort to provide suitable employment to him or her when he or she is ready to return to work. In most cases, this is more difficult to do if the employee's position has been filled on a permanent basis. Note that under provincial Workers' Compensation legislation, there are also duty-to-accommodate obligations that employers must fulfill in cases of occupational illness or injury, and in some provinces, specific re-employment obligations. Normally, and taking into account operational requirements, if there is a good chance that the employee will be able to return to duty, the period of sick leave without pay should be flexible enough to allow the manager to accommodate the employee's needs, including retraining. Regardless, the directive specifies that managers are to regularly re-examine all cases of sick leave without pay to ensure continuation is warranted. Cases are to be resolved within two years of the leave commencement date, although each must be evaluated on the basis of its particular circumstances.

For non-work related illness or injury where the employee has not returned to work within the initial 24-month claim period, the insurer may precipitate a return to work. ▲

Under both DI and PSMIP LTD, if the employee is still on claim under the "regular" occupation

definition 24 months after income replacement benefits start, the insurer will conduct an assessment to determine whether the disabling condition still prevents the employee from performing the regular duties of his or her occupation. Consult your compensation and benefits, accommodation, and staffing advisors to ensure that any functional limitations identified by the insurer are being addressed in a return-to-work plan to help you implement any necessary accommodations in time for the employee's return.

- ▶ If the insurer determines that the employee can return to his or her substantive position, then you are advised to schedule a return-to-work interview with the employee. If you have already developed a return-to-work plan with the employee and the insurer, then you would begin implementing it at this point. If not, you are advised to begin working with the employee, your HR advisors and, if applicable, the employee's union representative to develop such a plan.
- ▶ If the insurer determines that the disability condition prevents the employee from returning to his or her substantive position, then one of two things can happen:
 - The employee is found capable of performing the duties of a “commensurate” occupation, meaning a job that provides earnings equal to at least two-thirds of the earnings of his or her own occupation and for which he or she is reasonably qualified by education, training or experience. In this case, income replacement benefits under DI or PSMIP LTD cease. However, the insurer may provide the employee with information on his or her functional limitations and the accommodations required to successfully return to work in a commensurate occupation. You are advised to work with the employee, your staffing and accommodation advisors, the return-to-work coordinator and/or disability management advisor (if your department has these professionals), and the employee's union representative, if applicable, to devise a strategy that uses this information to find the employee a suitable alternative position in your organization or another organization subject to the *Public Service Employment Act*. (Section 6 of this handbook provides more information on the programs and services available to help employees find an alternative position.)
 - The employee's disabling condition is found to prevent him or her from performing the duties of a commensurate occupation. This is the definition of “total disability” used under both plans. It means that the employee becomes eligible for continued income replacement benefits until he or she reaches the age of 65, subject to annual assessments by the insurer confirming that he or she remains totally disabled. At this point, a return to work is not possible. You should review the case with your labour relations or compensation and benefits advisor and discuss with the employee his or her options associated with termination of employment. (See section 5.5 for more information.)

For work-related (occupational) cases, the time period for a return to work depends on whether the employee is expected to improve or has reached “maximum medical recovery” (MMR). This is determined by the WCB, which will also identify if, at MMR, the employee has any residual (permanent) limitations and, if so, whether the employee can perform pre-injury duties with or without accommodation. 

Highlights from the *Directive on Leave and Special Working Arrangements*

- ✓ Introduced on April 1, 2009, the directive replaces all previous Treasury Board leave policies except for injury-on-duty leave.
- ✓ All absences from work must be approved by the manager with the delegated authority to do so, in accordance with the applicable collective agreement or terms and conditions of employment.
- ✓ Whenever possible, managers are expected to schedule absences taking into account operational requirements.
- ✓ If a series of continuing medical or dental appointments are necessary, managers must ensure that these absences are charged to the employee’s sick leave credits.
- ✓ In situations of illness or injury, where employees have exhausted their sick leave credits or injury-on-duty leave, the manager is to consider granting sick leave without pay.
- ✓ If managers are satisfied that there is a good chance an employee will be able to return to duty, the period of sick leave without pay should take into account the time required to accommodate the needs of the returning employee, including time for retraining.
- ✓ If it is clear that the employee will not be able to return to duty in the foreseeable future, the manager is to consider granting sick leave without pay for a period sufficient to enable the employee to make necessary personal adjustments and preparations for separation from the core public administration on medical grounds.
- ✓ Managers are to regularly re-examine all cases of sick leave without pay to ensure that it is warranted by current medical evidence. Sick leave without pay situations are to be resolved within two years, although each case must be evaluated on the basis of its particular circumstances.
- ✓ With the exception of persons on leave without pay to serve in the Canadian Forces Reserve, employees on authorized leave (with or without pay) can be replaced only on an indeterminate basis if the period of leave or consecutive periods of the same type of leave exceed one year. Periods of different types of leave cannot be combined for the calculation of the one-year period. If the person is replaced, the manager with the delegated authority to approve the leave is to make every effort to provide suitable employment for the person following the leave of absence.
- ✓ Managers are to consult with their HR advisors when employees are ready to return to work but are no longer able to carry out the duties of their position.

5.5 When a Return to Work Is Not Possible

In some situations, when the prognosis is very poor and/or the treating physician reports permanent and severe limitations that make a return to work highly unlikely, it may be clear early on that a return to work will not be possible. As a manager, the leadership, sensitivity and compassion you exhibit in managing these cases sends a powerful message to all your employees. For individuals for whom it is clear a return to work is not possible, depending on the severity of the functional limitations caused by the illness or injury, the employee may not be in a position to discuss or review options concerning termination of employment. In this case, whoever possesses power of attorney will likely be your main point of contact.

Normally, in cases where it is highly unlikely the employee will be able to return to duty, under the *Guidelines for Termination of Employment and Demotion for Reasons Other Than Discipline (Medical Incapacity)*,^{lxxxii} a number of options for separation from the public service should be reviewed. First however, *after* the employee has exhausted sick leave credits, you should authorize enough sick leave without pay for the employee and/or his or her power of attorney to work with you and your team of HR advisors to make preparations for separation on medical grounds. At a minimum, your advisors should include your labour relations and compensation and benefits advisors, as well as the employee's union representative (if applicable).

The options to present to the employee are outlined in the following:

- ▶ Resignation, in which case, depending on years of service and the collective agreement, he or she may be entitled to severance pay (but would lose entitlement to health and dental benefits and, if the employee is unrepresented, some benefits provided under PSMIP);
- ▶ Termination of employment for medical incapacity, in which case he or she may be entitled to more severance pay than with resignation, particularly if the employee has fewer years of service;
- ▶ Retiring on medical grounds and applying for a disability pension under the PSSA, in which case Health Canada certifies whether the employee's condition meets the PSSA's definition of disability; or
- ▶ If the employee is aged 50 or older, applying for a retirement pension under the PSSA, potentially with a reduction because of age and/or insufficient years of pensionable service.

Each of these options will have different ramifications for the income and benefits a disabled employee receives after employment ceases. All factors, such as the employee's age, years of pensionable service, and whether he or she has been found eligible to receive Workers' Compensation, CPP/QPP disability benefits and/or income replacement benefits under DI or PSMIP LTD under the insurers' definition of "total disability," need to be considered. For

example, depending on the option selected, the employee may not be eligible for continuing coverage under the Public Service Health Care Plan or Dental Plan; he or she may lose coverage under the Supplementary Death Benefit Plan, and his or her survivors may not be eligible for certain survivor benefits under the PSSA. Refer to www.pensionandbenefits.gc.ca^{lxxxiii} for helpful information on [how pensions are calculated](#),^{lxxxiv} including in cases of retirement because of disability. Specific information on the PSSA is available at www.tbs-sct.gc.ca/pubs_pol/hrpubs/pensions/psppg-corporfp-eng.asp.^{lxxxv}

You are advised to ensure that the employee (or his or her power of attorney) fully understands the implications of the termination options before a final decision is made.

The goal should be to ensure that the employee and/or his or her power of attorney are provided with all the necessary information to make *the best possible decision for the employee and his or her family*.

What Employees Should Know About Their Disability Entitlements and Benefits

- ✓ **You cannot receive income replacement under DI or PSMIP LTD until you have exhausted your sick leave credits. However, you should apply for DI or PSMIP LTD as soon as possible, even if you have a great deal of accumulated sick leave.** Ask your organization's compensation advisor for the necessary forms. Applying as early as possible helps ensure that all the medical information the insurer needs to process your claim is collected in time to approve the claim with no interruption in your income benefits.
- ✓ **If you run out of sick leave credits, your manager may be able to award you advance sick leave** if you request it. When you return to work, the sick leave credits you earn will be applied to what you owe before they start accumulating again. Alternatively, you can apply for Employment Insurance to bridge the gap between sick leave and receiving DI or PSMIP LTD income replacement benefits.
- ✓ **If you are injured or ill because of an incident at work, you may receive full pay under injury-on-duty leave for up to 26 weeks and Workers' Compensation benefits after that, but only if your illness or injury is determined by a Workers' Compensation Board to be work-related.** However, it takes time for a Workers' Compensation claim to be approved, and you may have to rely on your sick leave credits while you wait for a decision. They will be credited back to you if your claim is approved.
- ✓ **After you have been on sick leave without pay for a period of one year (at one time or consecutively), you can be replaced on an indeterminate basis.** If there is a reasonable prospect that you can return to work, your manager may be able to extend this up to two years. Therefore, it is important to work with your manager, your union representative if you are represented, and your disability benefits provider (Sun Life or Industrial Alliance, or the Workers' Compensation Board) to access rehabilitation services as soon as possible. If you are not working on a return-to-work plan and your insurance provider determines that you can return to work after one year, there is no guarantee that your previous position will be available to return to. You may have to wait for a new appointment, during which time you will not receive income replacement benefits.
- ✓ **If you decide to apply for a disability pension, you cannot assume that you will qualify for DI or PSMIP LTD to age 65.** Your file will be assessed by Health Canada to determine if you qualify for disability pension under the Public Service Pension Plan. If you do, and if you qualify for disability benefits under the Canada Pension Plan or the Quebec Pension Plan, this does not necessarily mean that you will be found totally disabled by the DI or PSMIP LTD insurers. Each source of benefits uses a different definition of disability. Also, your claim will be reviewed periodically by the insurer until you reach age 65 to ascertain that you continue to meet its definition of total disability.

6.0 Accommodation

The purpose of the accommodation component is to create a welcoming workplace for ill or injured employees so that they can stay at work or successfully return to work from an absence due to illness or injury.

6.1 Background

Employees do not need to have been absent from work for a protracted period of time for health reasons to have their work duties modified or to receive accommodations in the workplace. Appropriate and timely accommodations can *prevent* employee injuries and illnesses. Suggestions for how and when managers should consider taking preventive action to accommodate the needs of employees are discussed in section 4.0 of this handbook.

In cases that involve a prolonged absence from work, the goals of the accommodation component are to create a welcoming workplace for the returning employee and support a successful return to work. Reintegration into the workplace is a vital step in the recovery process following an illness or injury. In the vast majority of cases, reconnecting with work colleagues helps build self-confidence and a sense of belonging and purpose, both of which contribute to restoring and maintaining optimal health.

6.2 Duties of Accommodation

All employers in the federal public administration have a duty to accommodate. ★

This is a legal obligation under the *Canadian Human Rights Act*, which has been affirmed and clarified by the courts, including the Supreme Court of Canada.

For organizations in the core public administration, the duty to accommodate is further clarified under the Treasury Board's *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service*.^{lxxxvi} The *Employment Equity Act*, the purpose of which is to achieve equality in the workplace, reinforces the duty to accommodate. In the core public administration, it requires that the conditions of disadvantage in employment experienced by persons with disabilities be corrected to give effect to the

More on the Duty to Accommodate

Including disability, there are 11 prohibited grounds of discrimination under the *Canadian Human Rights Act* (CHRA). The others are race, colour, religion, sex, marital status, age, national or ethnic origin, sexual orientation, family status and criminal conviction for which a pardon has been granted.

An employer's failure to accommodate needs related to any of these grounds, knowingly or unknowingly, is effectively considered discrimination. As the CHRA explains, employers need to examine how rules and procedures in the workplace affect employees' rights in order to ensure that they are preventing discrimination.

A generic process map for federal public service managers on the duty to accommodate is available at <http://www.tbs-sct.gc.ca/ee/dw/nd/dorf-eng.pdf>.

principle that employment equity means more than treating persons in the same way; it also requires special measures and the accommodation of differences.

You may need to request a Fitness to Work Evaluation (FTWE) to identify appropriate accommodations if the information provided in a medical certificate is not sufficient. Pursuant to the *Occupational Health Evaluation Standard*,^{lxxxvii} if the employee is absent for a lengthy period and a return date has not been established, or he or she is returning to work and you have serious concern about his or her fitness for duty, you can request a FTWE to verify whether the employee can safely return to work.

The FTWE will tell you what, if any, functional limitations the employee has and what specific accommodations or modifications to work duties he or she requires. With the employee's consent, the FTWE can be conducted:

- ▶ By his or her treating physician or by an occupational health evaluation professional to whom the physician makes a referral;
- ▶ By the insurer or a Workers' Compensation Board if the employee is receiving disability benefits (in which case, it is called a functional capacity evaluation or assessment); or
- ▶ By Health Canada through the Public Service Health Program.

Note that Health Canada will not perform a FTWE if an employee is receiving either Disability Insurance (DI) or long-term disability (LTD) benefits under the Public Service Management Insurance Plan (PSMIP) or is on injury-on-duty leave or Workers' Compensation. In these situations, the evaluation can be arranged by the insurer or the provincial Workers' Compensation Board to assist in planning for the employee's return to work.

Examples of Accommodations for Employees with Disabilities

- Large screen monitors for employees with low vision;
- Attendant services or reader services for blind / visually impaired employees;
- Interpreters for employees who are deaf or who have a speech impairment;
- Adaptive technologies and equipment;
- Flexible work arrangements, including modified work schedules, task modifications or other alternative work arrangements;
- Changing work processes, modifying practices, or substituting job duties;
- Providing work space and furnishings appropriate to the nature of the disability;
- Providing accessible parking for employees with a health condition or disability;
- Adapting training programs to the needs of employees with disabilities, including learning disabilities; and
- Telework arrangements where feasible.

—From *Duty to Accommodate in the Workplace—A Shared Responsibility*, HRSDC Guidelines, Human Resources Services Branch, Human Resources and Skills Development Canada, March 2010.

Ensure that the professional conducting the FTWE receives an up-to-date copy of the employee’s job description that outlines the physical and psychological requirements of the job. Consult your occupational health and safety and/or accommodation advisor about the procedures to follow to request an FTWE (or if the employee is receiving disability benefits, a functional capacity evaluation or assessment). In federal departments and agencies that have created return-to-work coordinator or disability advisor positions, arranging for a FTWE may be a function that these professionals perform.

Note that the FTWE report may give the employee additional information that, for reasons of privacy, will not be provided to you. This information could include the identification of previously undiagnosed conditions and recommendations for additional or alternative treatments or investigations, both of which can be of invaluable assistance in enabling the employee to maintain and improve his or her health.

As manager, ensure that all accommodation options have been explored and that you have discussed them thoroughly with the employee, his or her union representative (if applicable), and your human resources (HR) advisors. The chosen option should be consistent with the recommendations of the employee’s treating physician and/or the findings of an occupational health evaluation professional. It should be the one that best meets the needs of the employee and the employer, and in situations involving co-workers, the one that is least likely to interfere with collective agreement rights. Note that should a represented employee opt not to include his or her union representative in the return-to-work and accommodation process, you must still consult that representative if the accommodation arrangement has implications for the applicable collective agreement. For more guidance on the duties of accommodation, please refer to the Canadian Human Rights Commission’s *A Guide for Managing the Return to Work*, which is available at http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf.^{lxxxviii}

6.3 Undue Hardship

Under the *Canadian Human Rights Act*, employers and service providers are expected to build accommodation into their policies and practices and address the needs of specific employees who require individualized adjustments in the workplace, up to the point of undue hardship. ★ The Canadian Human Rights Commission (CHRC) describes undue hardship as “the limit of an employer’s capacity to accommodate without experiencing an unreasonable amount of difficulty.”⁹

9 *A Guide for Managing the Return to Work*, Canadian Human Rights Commission, page 7, available at http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf.

There is no precise legal definition for undue hardship or formula for determining when the point of undue hardship has been reached. Each situation must be evaluated individually. For an accommodation to be considered too much of a burden, section 15(2) of the *Canadian Human Rights Act* states that “it must be established that accommodation of the needs of an individual or a class of individuals affected would impose undue hardship on the person who would have to accommodate those needs, considering health, safety and cost.”

If accommodating a person poses an undue risk to the health or safety of that person or others, an employer may be able to establish undue hardship. For most situations in the federal public administration, cost is unlikely to be a valid reason. According to the Commission, “unduly high cost” would occur when “it affects the very survival of the organization or business, or if it threatens to change its essential nature.”¹⁰ In most situations in the federal public administration, this threshold is unlikely to be reached.

An employee who is denied accommodation can file a grievance under the collective agreement (if represented) and/or a complaint with the Canadian Human Rights Commission. Complaints can be made in relation to any aspect of employment, including pre-employment testing, the working environment, training and promotions.

6.4 Accommodation Scenarios

While in most cases of employee illness or injury a return to work is feasible, as a manager you may be facing one of several scenarios. (See section 5.5 on what to do when return to work is not an option.) Circumstances will differ depending on whether a returning employee has any functional limitations that prevent him or her from performing his or her normal or modified job duties, and whether, over the period of absence from work, his or her position has been filled on an indeterminate basis or no longer exists.

Resources and services are available to assist you. Be sure to consult your accommodation, labour relations and staffing advisors as well as your return-to-work coordinator, disability management advisor and/or disability case manager, if your organization has this expertise.

In all cases, a return-to-work plan is strongly advised. This plan should be developed by you and the employee, with input from your HR advisors and, if applicable, the employee’s labour representative, as well as his or her treating physician and/or the insurer’s or WCB’s adjudicator or case manager. Table 6 outlines four basic scenarios that you and the employee may face, and the actions to consider, including the return-to-work plan.

10 *A Place for All: A Guide to Creating an Inclusive Workplace*—Part 1: “Questions and Answers About the Duty to Accommodate,” Canadian Human Rights Commission, available at www.chrc-ccdp.ca/discrimination/APFA_UPPT/page1-en.asp.^{lxvix}

Table 6. Scenarios and Possible Manager Activities in the Return-to-Work Plan

<p>1. Return to regular work in the same job (i.e., no functional limitations): Employee returns to his or her substantive position, with the same responsibilities and workload.</p> <ul style="list-style-type: none">• Schedule a return-to-work interview with the employee, in advance of the return-to-work date.• With his or her consent, consider scheduling a second meeting with work colleagues to brief the employee on developments affecting the team and its work over the period the employee has been on leave. Establish with colleagues that the purpose of the group meeting is to welcome back and brief the employee.
<p>2. Return to the same job, but with a period of modified work including temporary or permanent accommodations (i.e., functional limitations are temporary or permanent but in either case can be accommodated): Employee returns to his or her substantive position, initially with modified work duties and tasks and reduced workload.</p> <ul style="list-style-type: none">• Taking into account operational requirements and based on the recommendations of the employee's treating physician and/or the insurer's or Workers' Compensation Board's (WCB's) rehabilitation plan to accommodate the employee's medical needs and/or functional limitations, identify modified work duties and tasks, and/or a modified schedule suitable for the employee, as well as any required ergonomic accommodations or assistive devices.• Discuss the use of instruments, including special working arrangements and telework to modify the employee's schedule, as required, with your accommodation advisor.• Establish the period of time that the modified work duties are to be maintained and when and how to resume normal duties, work schedule and workload, supported by other appropriate accommodations that may be temporary or permanent, depending on the employee's functional limitations and needs.• Schedule one or more return-to-work interviews with the employee, in advance of the return-to-work date, to review and discuss planned modifications and accommodations. Encourage the employee to include his or her union representative (if applicable) if he or she wishes.• Ensure ergonomic accommodations or assistive devices are in place on or by the return-to-work date.• With the employee's consent, arrange a return-to-work meeting that includes the employee's work colleagues to welcome the employee back and brief him or her on developments affecting the team and its work over the period of his or her leave.
<p>3. Return to a different position involving similar work (i.e., functional limitations are permanent and cannot be accommodated in the employee's substantive position): The employee is transferred to a similar job better suited to his or her functional limitations and needs in the same workplace or organization, or to another organization with which a lateral transfer can be arranged.</p> <ul style="list-style-type: none">• Taking into account the recommendations of the employee's treating physician and/or the insurer's rehabilitation plan, work with your staffing and accommodation advisors to identify alternative positions in your workplace or organization or another organization with which you can execute a lateral transfer using the deployment mechanism, suitable for the employee's current skills and experience and his or her medical needs and/or functional limitations. (Note that using the deployment mechanism for lateral transfers between organizations is permitted only among departments and agencies that are subject to the <i>Public Service Employment Act</i>.)• If the employee will be reporting to a new manager, arrange as many meetings as necessary to familiarize his or her new manager with the return-to-work plan and encourage the manager to hold briefing meetings with the employee in advance of the return to work.

- If ergonomic accommodations, assistive devices and/or training will be required, and the employee is being transferred to a new organization, arrange to cost-share these expenses with the new organization if possible. Otherwise, pursuant to the *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service* and the responsibility of deputy heads to allow employees with disabilities to retain assistive devices should they move to another position within the federal public service, arrange to have these costs paid for by your department.

4. Alternative position (may or may not have functional limitations, but cannot return to substantive position): The employee applies for a new position in the federal public service.


- When the employee is ready to return to work and either cannot return to his or her substantive position because it has been backfilled or abolished and/or he or she has functional limitations that preclude a transfer to a similar job, schedule a meeting with the employee to discuss the Public Service Commission's priority appointment process. More information about various priority entitlements is available at <http://www.psc-cfp.gc.ca/prad-adpr/guide/val-eng.htm>.^{xc} Be sure to consult your staffing and accommodation advisors concerning this option.
 - If, during his or her absence, the employee's position was backfilled indeterminately, the employee has a priority entitlement as a **leave of absence returnee**. This starts on the date the position was backfilled indeterminately and lasts for the remainder of the leave period, plus one year after that.
 - If the employee's substantive position has been abolished, he or she has priority entitlement as a **surplus employee**. This begins on the date the position was abolished and ends when the employee is indeterminately deployed or appointed to a new position, or refuses a reasonable job offer, or is laid off. In cases where an employment opportunity can be predicted, the employee may receive a "guarantee of a reasonable job offer" and the surplus priority entitlement lasts until he or she accepts or refuses a reasonable job offer. In cases where a guarantee cannot be made, the employee has 120 days to select one of several options in Part VI of the *Work Force Adjustment Directive*, one of which is a surplus priority entitlement of 12 months. If the employee selects this option and is not appointed or deployed indeterminately during this period, he or she is laid off and granted a layoff priority of one year's duration.
 - Finally, the employee may have priority entitlement as an **employee who has become disabled**, which extends for up to two years from the date that a competent authority certifies that the employee is ready to return to work.
- After obtaining the employee's consent, arrange with your staffing advisor to have him or her registered with the Public Service Commission's (PSC's) Priority Information Management System (PIMS).
- Taking into account the recommendations of the employee's treating physician and/or the insurer's rehabilitation plan, work with your staffing and accommodation advisors to identify alternative positions in the federal public service suitable for the employee's current skills and experience and his or her medical needs and/or functional limitations. Bring these to the attention of the employee.
- Identify and make arrangements with the insurer, WCB and/or your department to provide the vocational services and support the employee may need for a successful career transition, potentially including:
 - Career counselling and advice;
 - Training; and
 - Coaching to enable the employee to actively participate in the priority registration and referral

process, conduct independent job searches and self-refer if he or she identifies an advertised position for which the employee believes he or she meets the essential qualifications.

- If the employee is ready to work but no indeterminate appointment opportunity or reasonable job offer is imminent, discuss with your staffing advisor and the employee the implications of accepting a specified-period appointment (i.e., a term position or contract opportunity).
- When the employee is appointed to a new position, schedule a meeting with the hiring manager to review the employee's accommodation requirements, if applicable (e.g., ergonomic accommodations and/or assistive devices). Ensure that the hiring department is able to provide these. If not, arrange to cost-share these expenses with the new organization if possible. Otherwise, arrange to have these costs paid for by your department.

6.5 Accommodation Services and Options


Advice on Accommodation

Environment Canada's **Accessibility, Accommodations and Adaptive Computer Technology (AACT) Program**^{xci} offers advice and assistance in helping you integrate employees with disabilities, injuries and/or ergonomic requirements. 

Working with you and your organization's corporate service providers (i.e., advisors in HR, IT, materiel management and/or facilities management), the program can help you identify barriers and plan, source and implement solutions to give disabled or injured employee access to systems, programs, information, computers and computer resources. Services are available on a cost-recovery basis.

The AACT Program also conducts accessibility testing in its lab, including product evaluations, application accessibility evaluations and website and Web content accessibility evaluations. It provides adaptive computer technology (ACT) training services, including hands-on training for technicians on supporting ACT; customized accessible training courses for persons with disabilities, injuries and ergonomic requirements; customized training sessions for other audiences on topics related to ACT and accommodation; and equipment demonstrations. The AACT Program also provides support to other ACT centres in federal organizations.

Priority Appointments for Employees Who Become Disabled

In cases of prolonged absences due to illness or injury, this option can be part of a return-to-work plan for employees who are ready to return to work but are unable to carry out the duties of their substantive position as a result of a disability. This opportunity is available pursuant to the *Public Service Employment Act*^{xcii} (PSEA) and provisions in section 7 of the *Public Service Employment Regulations*^{xciii} (PSER). Within five years of becoming eligible for disability benefits, employees have the right to be appointed in priority to positions in the public service for which they meet the essential qualifications. They have this entitlement for 

a period of up to two years following the determination that they are ready to return to work. To qualify for these priority appointments, employees must have received disability compensation benefits under one of the following: the Canada Pension Plan or Quebec Pension Plan; the *Public Service Superannuation Act*, the *Government Employees Compensation Act* (i.e., Workers' Compensation), or a public service group disability insurance plan (e.g., DI or PSMIP LTD).

If this is a viable option for your employee, you may need to make provisions in the return-to-work plan to provide additional support for a career transition. This could include provision for career counselling and advice, and training. The employee may also need coaching to actively participate in the priority registration and referral process, conduct independent job searches, and self-refer.

Work with your staffing advisor to register the employee with the PSC's PIMS. The following documents will be required:


- ▶ A PIMS Electronic Registration Form completed by your HR advisor. A link to PIMS is available at <http://www.psc-cfp.gc.ca/prad-adpr/index-eng.htm>,^{xciiv}
- ▶ A PIMS consent form signed by the employee (available at <http://www.psc-cfp.gc.ca/prad-adpr/guide/cnf-eng.pdf>^{xciiv}) and retained in his or her personnel file;
- ▶ A current version of the employee's CV;
- ▶ Evidence that the employee qualified for disability benefits; and
- ▶ Evidence from a competent authority certifying that the employee is ready to return to work but not in his or her substantive position, issued within five years of the effective date on which the employee qualified for disability compensation benefits (i.e., the date the insurer recognized the employee as being disabled).

The entitlement to a priority appointment due to disability ranks after surplus and leave of absence on the priority list. In cases where another employee has been appointed or deployed into the disabled employee's substantive position on an indeterminate basis (i.e., the disabled employee's position has been backfilled), he or she becomes entitled to the higher-priority appointment under leave of absence. If the employee's substantive position is abolished, he or she becomes entitled to the higher-still surplus priority. In either case, inform the employee of the change in entitlement in writing, and make sure your staffing advisor updates the registration in the PIMS and provides the PSC with a copy of the letter of offer backfilling the position or of the Notice of Affected Position and a copy of the letter informing the employee of his or her change in priority entitlement.

Note that a priority person ceases to be an employee on the date that his or her priority period expires, or, in the case of layoff, the date that he or she is laid off (not when the layoff priority expires). This means that the individual may need to resign at least one day in advance of this date to protect severance benefits. Consult closely with your compensation advisor and ensure that you and your employee understand all the implications of using this option.

More information on the priority appointment process for employees with disabilities is available from the PSC at <http://www.psc-cfp.gc.ca/prad-adpr/guide/prt2-ch5-eng.htm>.^{xcvi}

Guide for Accommodating Persons With Disabilities in the Staffing Process

In cases of protracted absence, helping disabled employees return to work may involve changing or modifying the assessment procedure so that they can compete for a new job. 

Employees disabled by illness or injury who have been on sick leave without pay or injury-on-duty leave / Workers' Compensation *for over a year* may not have a job to return to. When a disabled employee is ready to return to work but his or her previous job has been staffed on an indeterminate basis, as the manager you are expected to make every effort to help your employees find a new job. The Public Service Commission's *Guide for Assessing Persons with Disabilities*^{xcvii} provides step-by-step guidance for how managers (and assessment boards) can ensure the participation of disabled job applicants in the appointment process in a manner that fulfills responsibilities to accommodate persons with disabilities.

7.0 About the Disability Management Initiative

The Disability Management Initiative (DMI) is an interdepartmental collaboration, facilitated by the Office of the Chief Human Resources Officer (OCHRO), Treasury Board of Canada Secretariat. The goals of the DMI are to:

- ▶ Support deputies and their senior management teams in advancing effective people management through the proactive management of disability;
- ▶ Improve the fiscal sustainability of group benefits and insurance plans; and
- ▶ Design a more effective, fair and sustainable disability management regime for the federal public service that promotes employee health and wellness.

Across federal departments and agencies, the number of incidents of disability is rising and the duration of medical leave is increasing. Meanwhile, managers who are unsure about the rules and procedures have difficulty engaging injured and ill employees and various types of leave are misused. A complex suite of legislation and policies that differ for work and non-work-related illness and injury, in addition to inconsistent disability management practices, have led to the perception that the system is unfair.

While it is not possible to prevent all cases of illness and injury, there are opportunities to reduce employee risk of psychological and musculoskeletal disorders. More can also be done to support ill or injured employees to recover their health while at work or, if they must take medical leave, to return to work earlier.

Under the DMI and with the ongoing engagement and collaboration of departments, bargaining agents and disability service providers, tools are being produced and partnerships are underway to address these challenges. Departments are being assisted in the proactive management of disability through, for example, the development and distribution of this handbook. A manual to help departments build their capacity for effective disability management is also being developed, along with generic work descriptions for return-to-work coordinators and the classification of these positions to expedite staffing by departments and enable collective recruitment.

OCHRO is reviewing the central HR policies that affect disability management. Partnerships are moving forward to implement training on disability management; improve services provided centrally that support departments in prevention, return to work and workplace accommodation; and strengthen the ability of departments to track and assess the costs of disability and the effectiveness of their efforts to reduce the incidence and duration of medical leave and disability claims.

To find out more about the DMI, please visit [GCPEDIA](#).

Appendix A: Frequently Used Terms

A number of terms used repeatedly in this handbook have meanings specific to disability management. In this context, those terms and their definitions are as follows:

- ▶ **Accessibility** (*accessibilité*)—Refers to measures taken to ensure that persons with disabilities can access the physical environment, transportation, information and communication systems and tools, and any other facilities and services available to others.
- ▶ **Accommodation** (*mesures d'adaptation*)—In the context of disability management, refers to the process and implementation of changes to a job that enable a person with a disability to perform the job productively and/or to the environment in which the job is accomplished.
- ▶ **Assistive devices or assistive technology** (*dispositif ou technologie d'aide*)—Refers to an item, piece of equipment or product—whether acquired, modified or custom-designed—that is used to increase, maintain or improve the functional capabilities of an employee with a disability.
- ▶ **Barriers** (*obstacles*)—Refers to factors in a person's environment that, through their absence or presence, limit functioning and create disability. These include aspects such as a physical environment that is inaccessible, lack of relevant assistive technology and negative attitudes of people toward disability, as well as services, systems and policies that are either non-existent or hinder employee engagement.
- ▶ **Confidentiality** (*confidentialité*)—Refers to the principle that information is not to be disclosed to another party under legislative requirements, policies and procedures or professional requirements. Information can be disclosed with permission, provided it is used for the purpose it was collected for.
- ▶ **Disability** (*incapacité*)—As defined by the *Employment Equity Act*, is a long-term or recurring physical, mental, sensory, psychiatric or learning impairment. Persons with disabilities under the Act are persons with one or more of these impairments who consider themselves disadvantaged in employment by reason of the impairment(s) or who believe that an employer or potential employer likely would consider them disadvantaged in employment by reason of the impairment(s). This includes persons whose functional limitations owing to their impairment have been accommodated in the current job or workplace. Note that each source of disability benefits has its own technical definition of disability that claimants must meet, notably disability insurance (DI) and long-term disability (LTD) under the Public Service Management Insurance Plan (PSMIP), the *Public Service Superannuation Act* (PSSA), Employment Insurance (EI) and the Canada Pension Plan (CPP) / Quebec Pension Plan (QPP).
- ▶ **Disability benefits** (*prestations d'invalidité*)—Refers to all forms of income replacement in the event of a serious health issue requiring a protracted absence from work, including

benefits under Workers' Compensation, DI, PSMIP LTD, as well as disability benefits under the CPP/ QPP, and a medical pension under the PSSA.

- ▶ ***Disability Insurance (DI) Plan and Public Service Management Insurance Plan (PSMIP LTD)*** (*Régime d'assurance-invalidité (RAI) et Régime d'assurance pour les cadres de gestion de la fonction publique (RACGFP)*)—In addition to organizations in the core public administration and separate agencies, many other federal organizations that are separate employers participate in these employee benefit plans. Information on the employer participants is available in the plan documents. For the DI plan document, visit www.tbs-sct.gc.ca/hr-rh/bp-rasp/benefits-avantages/dip-rai/dip-rai-eng.asp.^{xiv} For the PSMIP plan document, visit www.tbs-sct.gc.ca/Pubs_pol/hrpubs/TB_863/psmipolicy-eng.asp.^{xv}
- ▶ ***Disability management*** (*gestion de l'incapacité*)—Refers to managing the risks that employee health issues present to the business of a department or agency and to the Government of Canada as a whole, and to providing information, services, leave and disability benefits as required under legislation, management policy, collective agreements, and applicable health benefits and group insurance plans, in a manner that promotes wellness and workforce engagement, facilitates ill or injured employees' recovery, and their return to meaningful and productive employment as soon as possible and if applicable.
- ▶ ***Duty to accommodate*** (*obligation de prendre des mesures d'adaptation*)—Generally refers to an employer's obligation to take appropriate steps to eliminate discrimination against employees, prospective employees or clients resulting from a rule, practice or barrier that has—or can have—an adverse impact on individuals with disabilities. Under the Treasury Board's *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service*,^{xcviii} managers are obliged to accommodate persons with disabilities as employees or candidates for employment to the point of undue hardship considering issues of health, safety and cost.
- ▶ ***Employee Assistance Program (EAP)*** (*programme d'aide aux employés (PAE)*)—Refers to a program provided by an employer that offers assistance to employees (and with most programs, their family members) to deal with distressing personal or work-related matters.
- ▶ ***Functional capacity evaluations (or functional capacity assessments)*** (*évaluation de la capacité fonctionnelle*)—Refers to evaluations that are more detailed than independent medical examinations and are conducted for one or more of the following reasons: providing information required for a rehabilitation plan, clarifying prognosis for a return to the employee's regular job, assisting in identifying work abilities that may be needed to assess employability for other occupations, or assisting in outlining appropriate treatment.

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- ▶ **Functional limitations** (*limitations fonctionnelles*)—As defined by the Public Service Commission, refers to limitations that result from disabilities restricting an individual’s functioning that hinder the ability to perform tasks or activities.¹¹
 - ▶ **Government Employees Compensation Act / Workers’ Compensation** (*Loi sur l’indemnisation des agents de l’État / indemnisation des accidents de travail*)—Applies to employees working in federal public administration organizations, with the exception of any person who is a member of the Canadian Forces or the RCMP’s regular force. In the RCMP, “regular force member” refers to police officers and civilian members.
 - ▶ **Maximum medical recovery** (*rétablissement médical maximum*)—As defined by the Ontario Workplace Safety and Insurance Board, employees reach maximum medical recovery (MMR) when they have reached a plateau in their recovery from a medical impairment and it is not likely that there will be any further significant improvement.¹²
 - ▶ **Medical leave** (*congé de maladie*)—Refers to all types of leave an injured or ill employee may use, including sick leave with pay, sick leave without pay, and injury-on-duty leave.
 - ▶ **Non-work-related illness or injury and non-occupational disability** (*maladie ou blessure non liée au travail et incapacité non professionnelle*)—Refers to serious health issues and related disability experienced by employees (including mental health–related illness or injury) that are not eligible for Workers’ Compensation, but require the use of medical leave and may be eligible for disability benefits under DI and PSMIP LTD.
 - ▶ **Occupational health evaluation** (*évaluation de santé professionnelle*)—Refers to an assessment conducted to evaluate the health of employees in the context of the requirements of a particular job, pursuant to the *Occupational Safety and Health* policy and the *Occupational Health Evaluation Standard*. These evaluations, specific to job risk requirements, include pre-placement and periodic health assessments and Fitness to Work Evaluations. Additionally, assessments for criteria under the Public Service Pension Plan are carried out to certify retirement on medical grounds.
 - ▶ **Occupational health professional** (*professionnel de la santé au travail*)—As set out in the *Occupational Health Evaluation Standard*, applies to qualified physicians, nurses or mental health specialists hired or delegated by the occupational health service provider (Health Canada).
 - ▶ **Occupational health services** (*services de santé au travail*)—Refers to health services that essentially have a preventive function and that are responsible for advising the employer as

11 <http://www.psc-cfp.gc.ca/plcy-pltq/guides/assessment-evaluation/apwd-eph/ch1-eng.htm>^{xcix}

12 <http://www.wsib.on.ca/en/community/WSIB/OPMDetail?vnextoid=a130ae75e15d7210VgnVCM100000449c710aRCRD>^c

well as the employees and their representatives on the requirements for establishing and maintaining a safe and healthy working environment to facilitate optimal physical and mental health in relation to work.

- ▶ **Persons with disabilities** (*personnes handicapées*)—As defined in the *Employment Equity Act*, refers to “persons who have a long-term or recurring physical, mental, sensory or learning impairment and who a) consider themselves to be disadvantaged in employment by reason of that impairment, or b) believe that a employer or potential employer is likely to consider them to be disadvantaged in employment by reason of that impairment, and includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.” In practice, disability management in the core public administration is not limited to this definition—it also encompasses temporary conditions such as recovery from injuries, recuperation from surgery, etc.
- ▶ **Psychosocial limitations** (*limitations psychosociales*)—Refers to those limitations that negatively affect an individual’s ability to work effectively and behave appropriately in the social context of the workplace.
- ▶ **Public Service Employment Act (PSEA)** (*Loi sur l’emploi dans la fonction publique (LEFP)*)—In addition to all organizations in the core public administration identified in Schedule I of the *Financial Administration Act* (FAA) and most organizations in FAA Schedule IV, applies to some of the separate agencies identified in FAA Schedule V. More information on federal organizations subject to the PSEA is available at www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp.^{xii}
- ▶ **Public Service Superannuation Act (PSSA)** (*Loi sur la pension de la fonction publique (LPFP)*)—Applies to organizations whose employees participate in the federal public service pension plan, which includes all organizations in the core public administration as well as most separate agencies in FAA Schedule V and many other federal organizations, including Crown corporations. More information is available at www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp.^{xiii}
- ▶ **Serious health issue** (*problème de santé grave*)—Refers to a disorder, disease or injury affecting mental and/or physical well-being that compromises an employee’s ability to work and for which treatment and/or rehabilitation is required for the individual to return to optimal health and functioning.
- ▶ **Sick leave without pay** (*congé de maladie non payé*)—Refers to leave required for medical reasons, specifically for treatment and recovery from illness and/or injury requiring a prolonged and continued absence from work, normally granted to employees who are on an approved DI or PSMIP LTD claim, and/or Workers’ Compensation (in the case of a work-related illness or injury.) Note that an employee may be on sick leave without pay and not in receipt of DI or PSMIP LTD.

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- ▶ **Undue hardship** (*contrainte excessive*)—According to the Canadian Human Rights Commission,¹³ refers to the limit of an employer’s capacity to accommodate without experiencing an unreasonable amount of difficulty. Employers are obligated to provide accommodation “up to the point of undue hardship.” This means an employer is not expected to provide accommodation if doing so would bring about unreasonable difficulties based on health, safety and/or financial considerations. There is no precise legal definition of undue hardship, nor is there a standard formula for determining undue hardship. Each situation is unique and should be evaluated individually. Undue hardship usually occurs if an employer cannot sustain the economic or efficiency costs of the accommodation.
 - ▶ **Vocational rehabilitation** (*réadaptation professionnelle*)—Refers to those rehabilitation services, including training and work hardening (see below), that are required to restore an individual to a state in which he or she is capable of resuming paid work.
 - ▶ **Wellness** (*mieux-être*)—In the context of the Disability Management Initiative, is defined as workplace and workforce health that promotes employee attachment and productivity.
 - ▶ **Work hardening** (*conditionnement au travail*)—Is an interdisciplinary, individualized, job-specific program of activity whose goal is returning the employee to work. Work hardening programs use real or simulated work tasks and progressively graded conditioning exercises that are based on the individual’s measured tolerances. Work hardening provides a transition between acute care and successful return to work and is designed to improve the employee’s bio-mechanical, neuromuscular, cardiovascular and psychosocial functioning.
 - ▶ **Work-related injury and illness and occupational disability** (*maladie ou blessure liée au travail et incapacité professionnelle*)—Referring to all work-related injuries or illnesses for which medical attention is sought and any disability arising from these illnesses/injuries. Pursuant to the *Government Employees Compensation Act*, Workers’ Compensation benefits are paid to employees in the federal public administration who experience personal injury, including (in most provinces) psychological injury caused by an event or unusual occurrence arising out of and in the course of employment, or who are disabled by reason of an industrial disease due to the nature of the employment.

13 *A Guide for Managing the Return to Work*, Canadian Human Rights Commission, 2007, page 7, available at http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf.^{ci}

Appendix B: Template for Requesting a Medical Certificate

Instructions on Using This Template for Requesting a Medical Certificate

The purpose of a medical certificate is to obtain three key pieces of information from the employee's treating physician:

- ▶ **Verification that the employee is absent from work for health reasons** and thus that sick leave is being used appropriately. This, among other things, can help the employee avoid an interruption in income;
- ▶ **An assessment of the expected duration of absence** and/or the earliest date that a return to work could safely commence, which you need to know to manage workload during the employee's absence; and
- ▶ **Any accommodations that will be needed**, which you would subsequently discuss with the employee and make arrangements to put in place in time for the return-to-work date to help facilitate a successful return to work.

To obtain this information, the following steps are recommended:

- 1) Obtain the name and mailing address of the employee's treating physician from the employee.
- 2) Obtain proof of the employee's consent to have his or her physician provide you with the information. A sample employee consent form is provided in this appendix.
- 3) Obtain a copy of the employee's job description and ensure that it is up to date.
- 4) Compose a letter to the employee's treating physician requesting that he or she complete a Medical Certificate Form, explaining why it is needed and providing a brief summary of the duties of the employee's job and workplace conditions. A sample letter to the physician is provided in this appendix. Areas in red and within square brackets indicate where you would input specific information about the employee and his or her job.
- 5) Provide a Medical Certificate Form to be completed and signed by the treating physician to make supplying the required information as straightforward as possible for the physician. A sample form is provided in this appendix. Areas in red indicate where you would tailor the form to include the name of the employee and other pertinent information.
- 6) Obtain a blank postage-paid envelope addressed to you, into which the physician would insert the completed Medical Certificate Form.

In summary, you would mail a package to the treating physician containing:

- ▶ Your letter requesting the completion of the Medical Certificate Form;
- ▶ The employee's signed consent form;
- ▶ An up-to-date copy of the employee's job description;
- ▶ A Medical Certificate Form that you have tailored to include the employee's name, address, etc.; and
- ▶ A postage-paid self-addressed envelope.

You are advised to keep a full copy of this package for your records.

Sample Employee Consent Form

[Employee name, title, address]

Consent to have my treating physician provide specific information to my employer for the purposes of producing a medical certificate

I hereby authorize my treating physician to provide the following information to my employer by mail:

- 1) Verification that I am experiencing an injury/illness and/or medical condition that currently precludes me from performing the duties of my job.
- 2) Whether a return to work will be possible, and if so approximately when.
- 3) What, if any, accommodations should be made to my job duties or in the workplace to enable me to safely return to work.

I understand that my employer will provide me with a copy of the medical certificate.

Signature

Date

Name (please print)

Witness signature

Date

Name (please print)

Sample Letter to the Treating Physician

Date: **[dd-mm-yyyy]**

Dear Dr. **[Name]**:

Re: **[Employee Name]**, **[Address]**

I am writing to you as **[Mr./Ms./Mrs. last name]**'s **[manager, supervisor]** to request a medical certificate for employment purposes. As you may be aware, **[employee's full name]** is currently absent from work at **[Name of Department / Agency]** for health reasons. **[Mr./Ms./Mrs. last name]** works as a **[job title]**.

I am writing to you, **[Mr./Ms./Mrs. last name]**'s treating physician, to request:

- 1) Formal verification that **[Mr./Ms./Mrs. last name]** is experiencing an injury/illness that currently precludes **[him/her]** from working, which is required to substantiate the use of sick leave and help **[Mr./Ms./Mrs. last name]** avoid an interruption in income;
- 2) Whether a return to work will be possible and if so approximately when, which will help us to manage workload during the duration of **[Mr./Ms./Mrs. last name]**'s absence; and
- 3) What, if any, accommodations we should make for **[Mr./Ms./Mrs. last name]** to ensure **[he/she]** can safely return to work, including on a graduated basis if that is your recommendation. (More information on the demands of **[Mr./Ms./Mrs. last name]**'s job, and our commitment to accommodation is provided below.)

A form to gather this information from you is attached, along with a consent form signed by **[Mr./Ms./Mrs. last name]** permitting me to request this information from you and **[Mr./Ms./Mrs. last name]**'s job description. I would appreciate it if you could complete the Medical Certificate Form and return it to me in the postage-paid self-addressed envelope as soon as possible.

Job Details

[Mr./Ms./Mrs. last name]'s job generally involves **[brief description of the job tasks, demands and working conditions, such as whether the employee works alone or in a team, interacts with clients, requires physical stamina to do the work, such as having to be able to stand for the majority of the workday, works to demanding deadlines, works in an environment that is loud, bright or subject to temperature changes, works shifts or**

overtime on a regular basis, and/or must travel or drive frequently as part of the job.]

(Please see the attached job description for more information.)

Our Commitment to Accommodation

There is a large and growing body of scientific evidence that a return to work as soon as it is safe to do so supports better health outcomes for employees who experience illness and/or injury. Our organization is committed to making all necessary accommodations to assist our ill/injured employees in returning to work, pursuant to an assessment from their treating physician.

These accommodations can include different job tasks, flexible work arrangements such as shorter hours, ergonomic adjustments to the workstation and other job or workplace adaptations to ensure the employee can safely return to work.

At **[name of department/agency]**, we take the health and safety of our employees very seriously. I will share a copy of the completed Medical Certificate Form with **[Mr./Ms./Mrs. last name]**. Whatever recommendations you make regarding return to work will help me work with **[Mr./Ms./Mrs. last name]** and our HR team to develop a plan for a successful return to employment.

If there is anything further we can do to support **[Mr./Ms./Mrs. last name]** that would help improve **[his/her]** health status, please do not hesitate to let me know. Note, however, that we do not need, nor are we requesting confidential medical information including the diagnosis or prescribed treatment. We respect the privacy of our employee's personal medical information at all times. If you believe we need certain medical information in order to ensure a healthy and safe workplace for **[Mr./Ms./Mrs. last name]**, please discuss this with **[him/her]**. The final decision as to whether to share this information with us will be up to **[Mr./Ms./Mrs. last name]**.

We thank you in advance for your time and effort in responding to this request and for assisting us in supporting the health, safety and wellness of a valued employee.

Sincerely,

[Manager, supervisor name]

[Signature block]

Sample Medical Certificate Form

Medical Certificate Form

[To be completed by the manager before sending to the treating physician:]

- ▶ Employee's name:
- ▶ Home address and telephone number:
- ▶ Date of birth:
- ▶ Job title:
- ▶ Name of employer and work address:
- ▶ Brief job description **[nature of the work, physical/intellectual requirements]:**
- ▶ Date of commencement of absence due to health reasons:

This section to be completed by the treating physician.

Note: The information provided will be treated as confidential. We are interested in the employee's anticipated return-to-work date, any expected functional limitations upon return to work, and your recommendations for accommodation measures. We do not require information about diagnosis and treatment.

- 1) This patient is currently experiencing an illness/injury or medical condition that precludes him/her from performing the duties of his/her job.

Yes No

- 2) I anticipate that this patient will not have completed treatment and recovery and be ready to begin assuming work duties before _____ (day/month/year).

- 3) Accommodations will be required to facilitate the patient's return to work.

Yes No

- 4) I have reviewed the patient's job description and determined that the following accommodations will be required:

- Graduated return to work with reduced hours**

(If selected, please specify below how many days in a five-day week the employee can safely begin working and for how long the reduced hours should be maintained.)

Modified work duties

(If selected, please specify any and all work-related activities that the employee should not be undertaking and for what period of time.)

Physical adjustments to the workstation/area

(If selected, please specify the required adjustments.)

Adjustments to the work environment

(If selected, please specify the required adjustments.)

Assistive devices and/or other special equipment

(If selected, please provide details.)

Physician's signature

Date

Appendix C: Disability Management Policies, Directives, Standards and Guidelines

Policy, Directive, Standard, Guideline or Agreement	Purpose and Key Features / Requirements (relevant to disability management)
Prevention	
<p><i>Occupational Safety and Health policy</i>^{cii}</p>	<p>To promote a safe and healthy workplace for public service employees and to reduce the incidence of occupational injuries and illnesses.</p>
<p>★ See also: <i>The Canada Labour Code, Part II</i>^{ciii} <i>The Manager's Handbook: Canada Labour Code, Part II</i>^{civ}</p>	<p>The purpose of the policy is to see to it that employees in the core public administration are provided with a safe and healthful working environment and specific occupational health services. These services include those provided under the Labour Program, administered by Human Resources and Skills Development Canada (HRSDC), and the Public Service Health Program (PSHP), administered by Health Canada.</p> <p>Under this policy, organizations in the core public administration must:</p> <ul style="list-style-type: none"> • Implement the requirements of the <i>Canada Labour Code, Part II</i> and its regulations and comply with authorized HRSDC Labour Program directions; • Establish and maintain effective occupational health and safety programs consistent with Treasury Board policies, standards and procedures; • Comply with Health Canada directives on the OHS of employees; • Assign departmental OHS personnel according to the size, complexity and operating risks of the department; • Post documents including, but not limited to, a copy of the <i>Canada Labour Code, Part II</i> at a place or places accessible to all employees; • Provide OHS training and information to employees; and • Provide employee assistance services. <p>HRSDC's Labour Program acts as the regulator for the public service on OHS matters, with the responsibility of monitoring and enforcing the <i>Canada Labour Code, Part II</i> in the core public administration. It has designated safety officers and regional safety officers whose duties include conducting inspections and accident and refusal-to-work investigations, and stipulating corrective measures.</p> <p>Through the PSHP administered by Health Canada, departments and agencies in the core public administration access services to help them manage their responsibilities under the <i>Occupational Safety and Health</i> policy, including health assessments of employees (e.g., pre-placements, "periodics," pre-posting and return from posting for out-of-country assignments, and Fitness to Work Evaluations), communicable disease services (e.g., provision of immunizations), and advice on limitations that must be addressed to accommodate a worker's disability and his or her rehabilitation. The PSHP's services are preventive and advisory and should not interfere with or replace those available through private physicians and community health agencies.</p>

**Occupational Health
Evaluation Standard^{CV}**

To prevent illness, injury and disability arising out of or aggravated by conditions of work.

The purpose of this standard is to set out the conditions under which the health of employees and candidates is to be evaluated. Evaluations are permissible in order to:

- Establish that employees are able to continue working without detriment to their health or safety or that of others;
- Establish that candidates are able to meet the health requirements of the job prior to appointment;
- In the case of postings, assess if individuals or their dependants have a health condition that may require resolution prior to posting, ongoing medical attention during posting or possible evacuation at posting; and
- Establish the conditions under which employees with illnesses, injuries or disabilities are able to continue working.

Health evaluations or assessments are normally conducted for:

- Individuals assigned to occupations that have an inherent element of risk to their health and safety;
- Where actions by employees could result in a threat to their health and safety or to that of another;
- Prior to postings to isolated, remote or foreign locations; and
- Where another policy, directive, standard or guideline provides that such evaluations may be requested.

The standard sets out the circumstances under which evaluations are to be conducted under the Public Service Health Program provided by Health Canada's Emergency Preparedness and Occupational Health Directorate. These include routine health evaluations for specific occupational groups (e.g., firefighters, divers, dangerous goods inspectors, etc.) and non-routine Fitness to Work Evaluations (FTWEs), to determine if an employee has been affected by a workplace hazard and/or is medically fit to safely and efficiently perform the tasks of a specific job.

The FTWE is carried out with the employee's consent and with input, where warranted, from his or her treating physician. It is directed toward confirming the employee's health capability to carry out or continue to carry out the duties of the position and, where warranted, what limitations should be considered.

The standard requires that departments arrange for an FTWE where an employee:

- Has been exposed to an unexpected occupational health hazard, such as a chemical spill;
- As a result of job changes, will be exposed to a different hazard or more strenuous work (Appendix A of the standard identifies the group, activity or occupation where this applies);
- Appears to be having difficulty performing the duties of the position, or the employee's actions appear to be affected by health-related factors;
- Is absent for a lengthy period and a return date has not been established, or an employee is returning to work after a period of medical leave and there is concern about his or her fitness for duty.



	<p>To request an FTWE, departments must contact the appropriate regional office of the Emergency Preparedness and Occupational Health Directorate of Health Canada.</p> <p>(Under the heading “Accommodation” in the third section of this table, you will find more information on how the standard applies to the reintegration process following medical leave.)</p>
<p>Occupational Health Assessment Guide</p>	<p>To help direct occupational health professionals in performing occupational health assessments under the Public Service Health Program as stipulated in the <i>Occupational Safety and Health</i> policy and the Treasury Board’s <i>Occupational Health Evaluation Standard</i>, through Health Canada’s Emergency Preparedness and Occupational Health Directorate.</p> <p>The guide provides:</p> <ul style="list-style-type: none"> • Guidelines on medically related requirements necessary to perform jobs safely and effectively and based upon a risk assessment; • A summary of considerations that should be borne in mind when determining the medical fitness of a particular individual for his or her duties; • Assistance to the occupational health professional who, while maintaining confidentiality, advises organizations on the fitness of the individual to carry out the tasks of the job and to define any limitations; • Guidance concerning the periodic occupational health assessments of employees exposed to specific hazards; and • Recommendations concerning immunization and screening related to the job.
<p>Policy on Employee Assistance Program^{cv}</p>	<p>To foster and maintain the well-being and productivity of employees by providing confidential assistance or short-term counselling to those who are experiencing personal or work-related problems.</p> <p>The purpose of the <i>Policy on Employee Assistance Program</i> is to motivate employees who have problems, including those related to substance abuse, to seek assistance or treatment at an early stage.</p> <p>Under this policy, departments and agencies in the core public administration are to make available to employees a confidential and voluntary Employee Assistance Program (EAP) that can be accessed without prejudice to job security or career progression.</p> <p>Among other measures, departments and agencies are required to:</p> <ul style="list-style-type: none"> • Have an EAP coordinator appointed; • Provide employees with EAP services that include short-term counselling, referral to appropriate resources within the public service or the community and follow-up; • Ensure EAP services are accessible to disabled employees and are available in both official languages; • Keep employees informed about the program and how to access its services, and ensure managers and supervisors are provided with education on the program and their responsibility to refer employees with work performance problems related to personal difficulties to their departmental EAP; and


	<ul style="list-style-type: none"> • Where employees are likely to be involved in critical incidents because of the nature of their work, a procedure must be established to provide an initial stress-debriefing session as soon as possible after such an incident and EAP follow-up if required. <p>Under Appendix D of the policy, “Guidelines on Employee Assistance Program Services,” a request for service should be responded to as soon as possible, preferably within one working day. A first counselling session should occur within two weeks, and follow-up should be an integral part of the EAP service, usually by meeting with the client.</p> <p>The policy gives departments and agencies the option of expanding EAP services to the dependants of all their employees. However, they must ensure that reasonable access to their EAP services is provided to dependants of employees who live, have lived, or will live outside Canada under the provisions of the <i>Foreign Service Directives</i>, or who are subject to the <i>Isolated Posts and Government Housing Directive</i>, or in exceptional circumstances, such as a work-related hostage-taking incident.</p> <p>Under this policy, on request, Health Canada, through its Employee Assistance Services, shall:</p> <ul style="list-style-type: none"> • Provide professional and technical advice about the EAP to departments; • Provide or arrange for medical diagnosis or initial counselling on alcoholism or other health problems and refer clients to community agencies for subsequent treatment; and • Provide consultative services to departments and the Public Service Commission with respect to the health/medical aspects of training programs.
<p>Directive on Leave and Special Working Arrangements^{CVII}</p>	<p>To ensure that departments within the core public administration manage paid and unpaid absences from work and special working arrangements in a sound, consistent and effective manner.</p> <p>The expected results of this directive are that:</p> <ul style="list-style-type: none"> • Persons appointed to the core public administration are accorded leave benefits in accordance with their relevant collective agreement or terms and conditions of employment; and • Absences from work and special working arrangements are administered and managed in an accurate, equitable, transparent and timely manner. <p>Under this directive, criteria are established in appendices to be followed in the management of certain authorized paid and unpaid absences from work:</p> <ul style="list-style-type: none"> • Under Appendix A, “Leave with Pay or Time Off with Pay,” authorized (by the manager) paid absence from work in accordance with the relevant collective agreement or terms and conditions of employment is permitted for, among other things, personal, medical and dental appointments, up to half a day, if they are routine, periodic checkups. When a series of appointments are necessary for treatment of a particular condition, managers must charge absences to the employee’s sick leave credits.

	<ul style="list-style-type: none"> • Under Appendix C, “Pre-Retirement Transition Leave: A Special Working Arrangement,” to help employees better manage their work and personal lives while meeting operational requirements at a reasonable cost. • Under Appendix D, “Leave with Income Averaging: A Special Working Arrangement,” to help employees better balance their work and personal lives while helping departmental managers manage salary budgets.
<p><i>Telework Policy</i>^{cvi}</p>	<p>To allow employees to work at alternative locations, thereby achieving a better balance between their work and personal lives while continuing to contribute to the attainment of organizational goals.</p> <p>Under this policy, departments are encouraged to implement telework arrangements, where it is economically and operationally feasible to do so, in a fair, equitable and transparent manner.</p> <p>The policy defines telework as a flexible work arrangement whereby employees have approval to carry out some or all of their work duties from a telework place. A telework place is defined as the alternative location where the employee is permitted to carry out the work otherwise performed at or from their designated workplace.</p> <p>Managers must ensure that:</p> <ul style="list-style-type: none"> • The nature of the work to be performed at the telework place is operationally feasible; • The overall quality and quantity of work carried out in the designated workplace is sustained by the teleworker in the telework place; • The work done at the telework place should be cost-effective. Certain up-front costs are permissible, provided they can be recouped over a reasonable period; • The terms and conditions of employment, provisions of relevant collective agreements and the application of existing policies and legislation will continue to apply in telework situations; • Official language requirements and service to the public are not compromised by the telework arrangement; and • The details of the telework arrangement must be discussed and agreed upon between the employee participating in the telework situation and the supervisor and, at the request of either party, these details will be put in writing. Details must include: <ul style="list-style-type: none"> – The voluntary nature of the arrangement; – The duration of the arrangement; – The specific days the employee will telework; – Hours of work; – Whether the arrangement will be regular or episodic; – The telework location; – Work objectives and expected results; – Issues of liability (personal and equipment); – Responsibility for costs associated with telework (utilities and insurance);

	<ul style="list-style-type: none"> - Health and safety responsibilities; - Impact on colleagues; and - The requirement to adhere to all aspects of government policies, rules and regulations. <p>A telework arrangement can be terminated at any time, with reasonable notice by either party.</p>
Recovery (including disability benefits)	
Sick Leave	<p>Pursuant to collective agreements^{cx} for represented employees, and the Policy on Terms and Conditions of Employment^{cx} and Directive on Executive Compensation^{cxii} for unrepresented or excluded employees, sick leave with pay is provided based on a formula that calculates the number of hours/days of paid sick leave to be awarded based on the number of hours/days worked. These sick leave credits can accumulate when employees claim fewer sick days than they are entitled to under the applicable formula based on how many days they have worked.</p>
<p>Relevant collective agreement available at http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/coll_agre/siglist-eng.asp^{cix}</p>	
<p>Directive on Leave and Special Working Arrangements^{cxiii}</p>	<p>To ensure that departments within the core public administration manage paid and unpaid absences from work and special working arrangements in a sound, consistent and effective manner.</p> <p>The expected results of this directive are that:</p> <ul style="list-style-type: none"> • Persons appointed to the core public administration are accorded leave benefits in accordance with their relevant collective agreement or terms and conditions of employment; and • Absences from work and special working arrangements are administered and managed in an accurate, equitable, transparent and timely manner. <p>Introduced in April 2009, the directive replaces the previous leave without pay policy (from 1981) and supersedes the previous leave with pay, leave with income averaging, and pre-retirement transition leave policies, which have been rescinded and are incorporated in the directive as appendices.</p> <p>Under this directive, persons with the delegated authority to approve leave (i.e., managers) are responsible for:</p> <ul style="list-style-type: none"> • Seeking advice and direction from human resources advisors in cases of leave without pay due to illness and in any cases where political activity pursuant to the <i>Public Service Employment Act</i> is involved; • Ensuring that all applications for discretionary leave and special working arrangements are approved or not approved in a fair, consistent and transparent manner; • Ensuring that requests for leave are only approved in accordance with the applicable authority, in other words, the relevant collective agreement or terms and conditions of employment; • Ensuring that appropriate approval of requests for time off work or to participate in special working arrangements, such as pre-retirement transition leave and leave with income averaging, are considered and, if appropriate, approved in accordance with this directive; • Considering all operational factors before approving leave or special working arrangements;

	<ul style="list-style-type: none"> Directing persons to the appropriate sources of information and, when necessary, to the departmental compensation organization before approving leave or special working arrangements that have an effect on the person's pay or benefits; and Providing, in a timely manner, the departmental compensation organization with approved applications to process leave without pay or special working arrangements. <p>Under Appendix A of this directive, "Leave with Pay or Time Off Work with Pay," all absences from work must be authorized by the person with the delegated authority to approve the specific absence (i.e., the manager).</p>
<p>Workers' Compensation^{cxiv}</p>	<p>This policy sets out how Workers' Compensation employment injury benefits are to be provided for employees of the Government of Canada pursuant to the <i>Government Employees Compensation Act</i> and the <i>Flying Accidents Compensation Regulations</i>.</p>
<p>See also:</p> <ul style="list-style-type: none"> Employers' Guide to the Government Employees' Compensation Act <p>This and other materials are available from www.rhdcc-hrsdc.gc.ca/eng/labour/workers_compensation/federal/index.shtml.^{cxv}</p>	<p>The benefits include:</p> <ul style="list-style-type: none"> Compensation for loss of earnings (if an injured employee is not entitled to injury-on-duty leave); Medical, hospital and related services; Rehabilitation services; A pension and/or other financial award (some provinces provide awards that are not related to future loss of income), if an injury results in a permanent disability; and Pensions to dependants of employees who are fatally injured in the course of their employment.
<p>Injury-on-Duty Leave^{cxvi}</p>	<p>Provides management guidelines for the award of paid leave pursuant to the confirmation of a Workers' Compensation Board (WCB) that an employee's disability is the result of an occupational illness or injury.</p> <p>The guidelines require that an injury report be submitted to Human Resources and Skills Development Canada's (HRSDC's) Labour Program, within three days of occurrence.</p> <p>Verification should be obtained from the applicable provincial WCB or Labour Program before approving injury-on-duty leave. In the case of a disabling injury which prevents the employee from returning to work for the next regular shift or any subsequent workday, departments should, prior to granting or terminating injury-on-duty leave, ensure that the claim and the period of lost time has been approved by the WCB.</p> <p>In cases involving extended periods of injury-on-duty leave, periodic verification should be requested from the WCB and, failing that, from the appropriate regional office of the Labour Program, to support the continued provision of this leave. Injury-on-duty leave should not be granted beyond the date that the employee is fit for work.</p> <p>Should the total period of injury-on-duty leave granted to an employee with respect to an illness or injury reach 130 working days, a special departmental review of the case should be carried out and a decision made as to whether or not the continued provision of such leave beyond this period is warranted.</p>

<p><i>Policy on the Administration of the Public Service Pension Plan and Group Insurance and Other Benefit Programs</i>^{cxvii}</p>	<p>To promote enhanced accountability and sound management practices in the administration of the Public Service Pension Plan and group insurance and other benefits plans.</p> <p>An expected result of this policy is that employees and plan members receive accurate and timely information about the plans to assist them in making informed decisions.</p>
<p> See also:</p> <ul style="list-style-type: none"> • Disability Insurance Plan^{cxviii} • Public Service Management Insurance Plan^{cxix} 	<p>Among other responsibilities under this policy, deputy heads are required to ensure that their compensation advisors have the necessary knowledge required for effectively supporting the plans, including through access to training, and will ensure that their managers understand the legal and financial implications associated with the provision of information on the plans.</p>
<p>Long-Term Disability Insurance^{cxx}</p>	<p>This policy sets out the coverage to be provided to public service employees excluded from collective bargaining who are members of the Public Service Management Insurance Plan (PSMIP) for the provision of long-term disability income benefits to replace a substantial portion of earnings lost as a result of extended periods of total disability.</p>
<p> See also:</p> <ul style="list-style-type: none"> • Public Service Management Insurance Plan^{cxxi} 	
<p><i>Guidelines for Termination of Employment and Demotion for Reasons Other Than Discipline (Medical Incapacity)</i>^{cxxii}</p>	<p>To assist organizations in managing situations where action to demote or to terminate an employee's employment is being considered for reasons other than discipline, such as medical incapacity.</p> <p>In making a decision to demote an employee or terminate employment for incapacity, the delegated manager should ensure that:</p> <ul style="list-style-type: none"> • The employee has been unable to work due to illness or disability for an extended period and has exhausted his or her sick leave credits and may have been granted leave without pay; • The employee will not be able to return to duty in the foreseeable future. This determination should be based on an assessment of the employee's health, either by physicians of Health Canada and/or other medical practitioner(s) deemed qualified by the employer; • Where the employee, after having been examined by physicians of Health Canada and/or other medical practitioner(s) deemed qualified by the employer, is determined to be "fit for work with limitations," efforts have been taken to accommodate the employee's condition to the point of undue hardship taking into consideration issues of health, safety and cost; • The employee has been made aware of Employee Assistance Program services; and • Other options such as resignation or retirement on medical grounds have been presented to the employee for consideration. <p>Departments and agencies must notify the employee in writing when they decide to demote or terminate employment. This notification must state the reasons for the decision and the effective date, and must inform the</p>

	employee of the right to counter the decision. The policy requires that departments consult the Employer Representation Group of the Labour Relations Division, Treasury Board of Canada Secretariat, prior to taking demotion or termination action.
Accommodation	
<i>Employment Equity Policy</i> ^{cxxiii}	To achieve equality in the federal public service so that no person is denied employment opportunities or benefits for reasons unrelated to ability and to improve human resources management.
 See also: <i>Employment Equity Act</i> ^{cxxiv}	<p>Departments are to inform managers and employees of the policy and obtain the commitment and active support of all managers in order to ensure successful policy implementation.</p> <p>Under the policy, deputy heads are expected to provide a supportive work environment that will encourage employees to self-identify as designated group members and attract and retain designated group members. (Persons with disabilities are a designated group.) They are also required to integrate employment equity objectives into managers' accountability statements and performance assessments, and to communicate with employees using media that are accessible to employees with disabilities.</p> <p>Policy guidelines recommend that to provide for a supportive work environment, departments should demonstrate a commitment to employment equity at all levels by hiring, promoting, developing and retaining members of designated groups, by using all existing initiatives including special programs, using bridging, mentoring and outreach strategies, and supporting flexible work arrangements and developmental assignments, and by expecting accountability on the part of managers to set and achieve employment equity goals and objectives.</p>
<i>Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service</i> ^{cxxv}	To ensure the full participation of persons with disabilities in the federal public service whether as candidates for employment or as employees.
	<p>This policy is to be implemented by:</p> <ul style="list-style-type: none"> • Identifying and removing barriers to employment, career development and promotion of persons with disabilities unless doing so would result in undue hardship; • Designing all employment systems, processes and facilities to be accessible by building accommodation into workplace standards, systems, processes and facilities; and • Accommodating individuals when such barriers cannot be removed. Such accommodation must be made to the point of undue hardship, taking into consideration issues of health, safety and cost. Accommodation must also be based on the circumstances of each case and must respect an individual's right to privacy and confidentiality. <p>Deputy heads are responsible for the implementation of this policy within their departments. They and their delegates must:</p> <ul style="list-style-type: none"> • Create and maintain an inclusive, barrier-free work environment that is accessible;

	<ul style="list-style-type: none"> • Inform all employees of this policy and the procedure for obtaining accommodation; • Ensure that employment opportunities are advertised in an accessible format; • Ensure that all managers within the department abide by this policy; • Make available the resources necessary for implementing this policy; • Examine all systems to identify any barriers to employees with disabilities and remove those barriers; • When barriers cannot be removed, accommodate individual employees with disabilities up to the point of undue hardship; • Consult employees with disabilities, including employees with learning disabilities, with respect to: <ul style="list-style-type: none"> – any design, changes or upgrades to physical structures, new or existing systems or equipment so that the workplace is accessible to employees with disabilities; and – the planning and design of work-related events and conferences so that all events and opportunities are accessible to employees with disabilities; • Provide training to employees with disabilities on the use of any new or upgraded equipment or systems; • Ensure that employees with disabilities are provided with information in a timely fashion and a usable format; • After general barriers have been removed and general accommodation measures have been put in place, proceed with individual accommodation requests of persons with disabilities by: <ul style="list-style-type: none"> – consulting with the employee to identify the nature of the accommodation; – if necessary, consulting appropriate medical and rehabilitation advisors and others, with the employee’s consent, to determine the accommodation appropriate to that person; and – accommodating the employee; • Consult and collaborate with bargaining agents or other employee representatives where accommodation affects other employees or where the employee being accommodated requests that the bargaining agents or other employee representatives be consulted; • Provide and pay for technical aids, equipment and services for employees with disabilities as well as repairs to such aids and equipment; • Respect individuals’ right to privacy and confidentiality; and • Allow employees with disabilities to retain technical aids, equipment and support materials should they move to another position within the federal public service and accommodation is still required.
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	<p>Under this policy, employees must:</p> <ul style="list-style-type: none"> • Inform their supervisors of their employment-related needs; • Collaborate with the department or its representatives in finding the most appropriate means to accommodate their employment-related needs; and • Notify the department when attendant or other services, technical aids or equipment are no longer needed, and return the equipment.
<p>Occupational Health Evaluation Standard ^{cxxvi}</p>	<p>To prevent illness, injury and disability arising out of, or aggravated by, conditions of work.</p> <p>The purpose of this standard is to set out the conditions under which the health of employees and candidates is to be evaluated. Health Canada is responsible under the <i>Occupational Safety and Health</i> policy for determining and carrying out the occupational health evaluations of public service employees as the occupational health service provider.</p> <p>The standard sets out the circumstances under which evaluations are to be conducted under the Public Service Health Program provided by Health Canada's Emergency Preparedness and Occupational Health Directorate. It states that departments should arrange for Fitness to Work Evaluations (FTWEs) when an employee is absent for a lengthy period and a return date has not been established or an employee is returning to work after a period of medical leave and there is concern about his or her fitness for duty.</p> <p>However, in rehabilitation/return-to-work cases where an action plan has already been developed and approved by the attending/assessing physician and the insurance company's/WCB's rehabilitation staff, it is not mandatory for departments to request FTWEs from Health Canada. Only in those instances where there is concern about an employee's fitness to carry out his or her modified duties through the return-to-work plan or through a job change that referrals can be made to Health Canada.</p> <p>To request a FTWE, managers must contact the appropriate regional office of the Emergency Preparedness and Occupational Health Directorate of Health Canada.</p> <p>With respect to accommodation, the standard requires that departments work with the individual employees to find the means of accommodating the employee at work. Additional input may be required from the employee's treating physician.</p> <p>The FTWE is carried out by occupational health physicians at the request of the departmental manager with the employee's consent and with input, where warranted, from his or her treating physician. Managers are advised to:</p> <ul style="list-style-type: none"> • Inform the employee of the reason for the evaluation and obtain the employee's cooperation and consent; • Provide a letter of explanation containing factual, objective and pertinent information related to the purpose of the referral to Health Canada, as well as a completed Job Analysis Form to be forwarded to the occupational health physician (Health Canada will determine if other records or information are required throughout the process);

	<ul style="list-style-type: none"> • Avoid using information that is not recorded and avoid collecting, using or disclosing personal information about third parties (i.e., hearsay); and • To ensure transparency, the employer should share information provided to Health Canada with the employee, including the reasons for the disclosure to Health Canada. <p>The occupational health physician will only disclose to the manager, in the form of an assessment report, information that enables the employer to take appropriate measures, i.e., information on limitations related to the health requirements of the position. Confidential medical information is not provided. In cases involving a Workers' Compensation claim, the disclosure of information must be consistent with Treasury Board policies on injury-on-duty leave and Workers' Compensation or according to the legislation and procedures of the Workers' Compensation Boards and a copy of the consent form signed by the employee.</p> <p>An employee may see a private physician. The department shall provide the approved Health Canada medical form and a description of the work, including the hazards. The private physician enters the results on the form provided and, with the written consent of the employee, forwards the form along with laboratory test results in confidence to the Health Canada occupational health professional, who will determine if the form is complete and the necessary tests have been carried out. The employee's written consent should also include an agreement for the assessing health professional to communicate with the employee's examining physician. The assessment report is forwarded by the Health Canada occupational health professional to the department and the employee. All requests for evaluations from outside consultants must follow this procedure, with the possible exception of Workers' Compensation claims.</p> <p>If the employee does not consent to undergo a Fitness to Work Evaluation, the manager should consult the labour relations advisor.</p>
<p><i>Policy on the Administration of the Public Service Pension Plan and Group Insurance and Other Benefit Programs</i>^{cxxvii}</p>	<p>To promote enhanced accountability and sound management practices in the administration of the Public Service Pension Plan and group insurance and other benefits plans.</p> <p>An expected result of this policy is that employees and plan members receive accurate and timely information about the plans to assist them in making informed decisions. Among other responsibilities under this policy, deputy heads are required to ensure that employees returning to work from extended sick leave receive the support required for an effective re-integration into the workplace, taking into account the employer's duty to accommodate persons with disabilities.</p>

Overarching

<p>Treasury Board <i>Guidelines for Discipline</i>^{cxxiii}</p>	<p>To motivate employees to accept those rules and standards of conduct which are desirable or necessary to achieve the organization's goals and objectives.</p>
	<p>The guidelines define specific disciplinary measures, from oral reprimand to termination of employment; specify which measures should be recorded on the employee's personnel file; under what types of circumstances certain measures should be imposed; and the responsibilities of managers and employees with respect to discipline.</p>
<p><i>Policy on Prevention and Resolution of Harassment in the Workplace</i>^{cxxix}</p>	<p>To foster a respectful workplace through the prevention and prompt resolution of harassment.</p>
<p>See also: <i>Restoring the Workplace Following a Harassment Complaint: A Manager's Guide</i>^{cxxx}</p>	<p>Deputy heads are responsible for fostering a work environment free of harassment. Employees are expected to act toward other individuals professionally and respectfully. Managers are expected to lead by example and to act respectfully in dealings with employees and other persons working for the public service.</p>

Appendix D: Useful Resources and Websites

- *Creating a Welcoming Workplace for Employees with Disabilities*^{cxxxix} is a Treasury Board of Canada Secretariat publication that provides basic tips for managers on making the workplace inclusive of persons with disabilities.
- *Disability Insurance: A Handful of Tips for Alliance Members (2010)*^{cxxxix} is a Public Service Alliance of Canada (PSAC) publication to help employees understand what disability insurance benefits are for and how to access them. Through its Disability Insurance Program, PSAC provides advice, representation and technical assistance to members regarding disability insurance. More information is available at <https://www.pfac-afpc.org/what/disability/di-index-e.shtml>.^{cxxxix}
- *Duty to Accommodate*,^{cxxxix} a Public Service Alliance of Canada guide for local representatives, provides an overview of the accommodation process, including the role of the employee's union representative.
- *Duty to Accommodate: A Roadmap for Managers*, Treasury Board of Canada Secretariat, is available at <http://www.tbs-sct.gc.ca/ee/dorf-eng.asp>.^{cxxxix}
- *Employers' Guide to the Government Employees' Compensation Act, the Labour Program, Human Resources and Social Development Canada*, is available at www.hrsdc.gc.ca/eng/labour/publications/workers_compensation/geca_employer/page01.shtml.^{cxxxix}
- *A Guide for Managing the Return to Work*,^{cxxxix} an online publication of the Canadian Human Rights Commission, outlines the steps for managing the return-to-work process and explains the principle of undue hardship.
- *Guide to Planning Inclusive Meetings*,^{cxxxix} an online publication from Human Resources and Skills Development Canada, also available as a [downloadable PDF](#),^{cxxxix} provides comprehensive advice on how to ensure meetings accommodate persons with disabilities.
- *A Place for All: A Guide to Creating an Inclusive Workplace*,^{cxi} an online publication from the Canadian Human Rights Commission, also available as a [downloadable PDF](#),^{cxi} helps employers understand their legal obligations regarding the duty to accommodate and how to create their own workplace accommodation policies and procedures.
- *Preparing for and Responding to Workplace Trauma: A Manager's Handbook* is available from Health Canada as a [downloadable PDF](#).^{cxl} A more comprehensive online [eGuide](#)^{cxl} is also available.
- *Services for People with Disabilities* is a comprehensive guide to Government of Canada services available from Service Canada as a [downloadable PDF](#)^{cxliv} or online.
- *What You Need to Know About Mental Health: A Tool for Managers*, Conference Board of Canada, is available at <http://www.conferenceboard.ca/documents.aspx?did=1433>.^{cxliv}
- Answers on a range of questions related to occupational health and safety from the Canadian Centre for Occupational Health and Safety are available at www.ccohs.ca/oshanswers.^{cxlvi}
- Tips and information on procuring equipment that meets universal design principles and assistive technology, available from Industry Canada at www.apc.gc.ca/.^{cxlvi}
- A single source of comprehensive information about Workers' Compensation administration across Canada is available from the Association of Workers' Compensation Boards of Canada at www.awcbc.org/en/.^{cxlvi}
- The Canadian Human Rights Commission provides a wide range of helpful resources on prevention, support for recovery and accommodation at www.chrc-ccdp.ca/publications/prevention_prevention-en.asp?lang_update=1.^{cxlvi}

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- For a best-practice example of a policy to accommodate mental illness, please see the Canadian Human Rights Commission’s internal policy and procedural guidelines at www.chrc-ccdp.ca/legislation_policies/ami_mmm/toc_tdm-en.asp.^{ci}
 - Information on the Workplace Health System—a proven, practical, flexible formula for designing and implementing effective workplace health policies and practices that meet employees’ real needs—is available at www.hc-sc.gc.ca/ewh-semt/occup-travail/work-travail/whr-rmt-eng.php#a.^{ci}

Appendix E: Handbook Contributors

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Laporte-Stark, Marie	Public Service Commission
Lauzon, Marie-Josée	Infrastructure Canada
Leblanc, Nathalie	Natural Resources Canada
Leclair, Chantal	Parks Canada
Leclaire, Marc	Canada School of Public Service
Legault, François	Health Canada
Leindecker, Ted	Treasury Board of Canada Secretariat
Lepage, Carole	Public Health Agency of Canada
Levasseur, Eric	Industry Canada
Loomes, Richard	Treasury Board of Canada Secretariat
Maheux, Luc	Health Canada
Malara, Yann	Treasury Board of Canada Secretariat
Malo, Anne	Human Resources and Skills Development Canada
Marquis, Annette	Public Service Alliance of Canada
Marushko, Irene	Health Canada
Mathison, Bill	Professional Institute of the Public Service of Canada
McDougall, Jody	Veterans Affairs Canada
McGovern, Cathy	Treasury Board of Canada Secretariat
Merriam, Barbara	Department of Justice Canada

Michaud, Sonia	Royal Canadian Mounted Police
Mignault, Elaine	Canada School of Public Service
Mombourquette, H�el�ene	Canada Border Services Agency
Morissette, Yves	Canada School of Public Service
Mosielski, Jasmin	Health Canada
Nadel, Heni	Public Works and Government Services Canada
Normand, Louise	National Council of Federal Employees with Disabilities
Novielli, Cesarea	Canadian Dairy Commission
Ouelette, Sylvie	Indian and Northern Affairs Canada
Oulton, Doris Mae	Treasury Board of Canada Secretariat
Patry, France	Canadian Heritage
Pickering, Darryl	Service Canada
Pierre-Louis, Myriam	Canada Revenue Agency
Pilon, Allison	Public Service Alliance of Canada
Plisell, Randi	Transport Canada
Quinty, Sylvie	Canada Border Services Agency
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Rancy, Ruth	Public Works and Government Services Canada
Redstone, Chuck	Treasury Board of Canada Secretariat
Roberts, David Charles	Treasury Board of Canada Secretariat
Roussille, Ginette	Citizenship and Immigration Canada
Roy, Kathryn	Human Resources and Skills Development Canada
Roy, Louise	Royal Canadian Mounted Police
Sakiris, Christine	Human Resources and Skills Development Canada, Labour Program
Saouab, Abdou	Human Resources and Skills Development Canada
Saurette, Lionel	Canadian Association of Professional Employees
Seaman, Rick	Treasury Board of Canada Secretariat
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Sullivan, Julie	Canadian Radio-television and Telecommunications Commission
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Thwaites, George	Fisheries and Oceans Canada
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Willbond, Jeff	Human Resources and Skills Development Canada
Wilson, Erin	Health Canada
Wright, Janelle	Public Service Commission

Researcher, Writer and Editor

Hurman, Sarah	Consultant
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Appendix F: Links

- i *Canada Labour Code, Part II: Occupational Health and Safety*
<http://laws-lois.justice.gc.ca/eng/L-2/index.html>
- ii *Canadian Human Rights Act*
<http://laws-lois.justice.gc.ca/en/H-6/FullText.html>
- iii *Employment Equity Act*
<http://laws-lois.justice.gc.ca/en/E-5.401/FullText.html>
- iv *A Guide for Managing the Return to Work*, Canadian Human Rights Commission
http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf
- v Core public administration
http://www.tbs-sct.gc.ca/pas-srp/report-rapport_e.asp?cat=c
- vi *Canada Labour Code, Part II: Occupational Health and Safety*
<http://laws-lois.justice.gc.ca/eng/L-2/index.html>
- vii *Government Employees Compensation Act*
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- viii *Financial Administration Act*
http://laws.justice.gc.ca/eng/F-11/page-2.html#anchorbo-ga:l_I
- ix *Financial Administration Act*, Schedule I
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- x *Financial Administration Act*, Schedule IV
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- xi *Financial Administration Act*, Schedule V
<http://laws.justice.gc.ca/eng/F-11/page-12.html>
- xii *Public Service Employment Act (PSEA)*. More information on federal organizations subject to the PSEA is available at
http://www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp.
- xiii *Public Service Superannuation Act*. More information is available at
http://www.tbs-sct.gc.ca/pas-srp/overview-apercu_e.asp.
- xiv Disability Insurance Plan
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- xv Public Service Management Insurance Plan
http://www.tbs-sct.gc.ca/Pubs_pol/hrpubs/TB_863/psmippolicy-eng.asp
- xvi *Guidelines for Discipline*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12596§ion=text>

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- xvii *Policy on Prevention and Resolution of Harassment in the Workplace*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12414>
- xviii *Restoring the Workplace Following a Harassment Complaint: A Manager's Guide*
<http://www.tbs-sct.gc.ca/gui/rwfhc-eng.asp>
- xix Conflict resolution mechanisms
<http://www.tbs-sct.gc.ca/gui/confli-eng.asp>
- xx *Mental Stress Claims*, Safety Compliance Insider, page 11, April 2010, available through subscription at <http://www.ohsinsider.com/marketing>.
- xxi Labour Program offices
http://www.hrsdc.gc.ca/eng/labour/contact_us/labour.shtml
- xxii Injury-on-duty leave
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- xxiii *Population Affiliation Report*
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- xxiv Collective agreements
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- xxv *Directive on Leave and Special Working Arrangements*
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- xxvi Disability Insurance Plan
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- xxvii Terms and conditions of employment
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- xxviii *Directive on Executive Compensation*
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- xxix *Directive on Leave and Special Working Arrangements*
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- xxx Public Service Management Insurance Plan
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- xxxi Bargaining agents in the federal public service and the specific federal organizations whose employees they represent
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- xxxii *Directive on Leave and Special Working Arrangements*
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- xxxiii *Canada Labour Code, Part II*
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- xxxiv *Canada Occupational Health and Safety Regulations*
<http://laws.justice.gc.ca/en/L-2/SOR-86-304/index.html>
- xxxv The representative or committees have various powers and duties under the Code aimed at preventing workplace hazards and implementing changes to improve occupational health and safety.
http://www.rhdcc-hrsdc.gc.ca/eng/labour/health_safety/overview.shtml
- xxxvi *Occupational Health and Safety Directive*
<http://www.njc-cnm.gc.ca/directive/index.php?did=7&lang=eng>
- xxxvii *Mental Health: First Aid in the Workplace*
http://www.managers-gestionnaires.gc.ca/documents/hot/Mental_Health_Guide_final_eng.pdf
- xxxviii Labour Program's ergonomics-related hazard identification tool
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- xxxix *General Guide for Identifying Ergonomics-Related Hazards*
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- xl *Guide for Investigating Musculoskeletal Injuries*
http://www.hrsdc.gc.ca/eng/labour/publications/health_safety/investigation_msi/page00.shtml
- xli *Guide on the Prevention of Musculoskeletal Injuries*
http://www.hrsdc.gc.ca/eng/labour/publications/health_safety/prevention_msi/page00.shtml
- xlii *Guide to Address Ergonomics-Related Hazards with Computer Workstation*
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- xliii *Guide to Employee Education on Musculoskeletal Injuries*
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- xliv Accessibility, Accommodations and Adaptive Computer Technology Program
<http://www.ec.gc.ca/aatia-aaact/default.asp?lang=En&n=EDE49A88-1>
- xlv Workplace health
<http://www.hc-sc.gc.ca/ewh-semt/occup-travail/work-travail/index-eng.php>

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- xlvi Investing in workplace health programs
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- xlvii Canadian Centre for Occupational Health and Safety
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- xlviii Flexible work arrangements
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- xlix Workplace fitness
http://www.ccohs.ca/oshanswers/psychosocial/active_living.html
- l Reduce occupational stress
<http://www.workhealth.org/prevention/prred.html>
- li Musculoskeletal injuries
http://www.worksafebc.com/publications/health_and_safety/by_topic/assets/pdf/msi_workers.pdf
- lii Bridge the gap between mental illness and workplace functioning
http://www.comh.ca/publications/resources/dwf/Work_Depression.pdf
- liii Health Canada's Employee Assistance Services' Specialized Organizational Services
<http://www.hc-sc.gc.ca/ewh-semt/occup-travail/empl/sos-eng.php>
- liv *Directive on Leave and Special Working Arrangements*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=15774§ion=text>
- lv *Telework Policy*
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- lvi *Telework Policy*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12559>
- lvii *Occupational Health Evaluation Standard*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12561>
- lviii *Occupational Safety and Health policy*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12560>
- lix Public Service Health Program
<http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/rapb-dgrp/whpsp-psstsp/index-eng.php#cc>
- lx *Preparing for and Responding to Workplace Trauma: A Manager's Handbook*
http://www.hc-sc.gc.ca/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/man_hand-livret_gest/trauma-traumatique-eng.pdf

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- lxi Mood disorders
http://www.phac-aspc.gc.ca/publicat/miic-mmacc/chap_2-eng.php
- lxii Anxiety disorders
http://www.phac-aspc.gc.ca/publicat/miic-mmacc/chap_4-eng.php
- lxiii Personality disorders
http://www.phac-aspc.gc.ca/publicat/miic-mmacc/chap_5-eng.php
- lxiv Carpal tunnel syndrome
<http://www.ccohs.ca/oshanswers/diseases/carpal.html>
- lxv Tendonitis
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- lxvi Thoracic outlet syndrome
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- lxvii *Mental Health: First Aid in the Workplace*, Canada Revenue Agency
http://www.managers-gestionnaires.gc.ca/documents/hot/Mental_Health_Guide_final_eng.pdf
- lxviii *Employers' Guide to the Government Employees' Compensation Act*
http://www.hrsdc.gc.ca/eng/labour/publications/workers_compensation/geca_employer/page04.shtml
- lxix *Workers' Compensation* policy
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- lxx Labour Program offices
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- lxxi *Injury-on-Duty Leave* policy
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- lxxiii *Directive on Executive Compensation*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=14220>
- lxxiv Disability Insurance Plan (for represented employees)
http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/tb_865/disinsplan-eng.asp
- lxxv Public Service Management Insurance Plan, long-term disability (for non-represented employees or those excluded from a collective agreement)
http://www.tbs-sct.gc.ca/Pubs_pol/hrpubs/TB_863/psmippolicy-eng.asp

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- lxxvi Employment Insurance sickness benefits
<http://www.servicecanada.gc.ca/eng/sc/ei/benefits/sickness.shtml>
- lxxvii Disability insurance claim forms (Sun Life)
<http://www.tbs-sct.gc.ca/hr-rh/bp-rasp/benefits-avantages/dip-rai/dip-rai-eng.asp>
- lxxviii Public Service Management Insurance Plan, long-term disability claim forms (Industrial Alliance)
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- lxxix *Policy on the Administration of the Public Service Pension Plan and Group Insurance and Other Benefit Programs*
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- lxxx Canada Pension Plan disability benefits
<http://www.servicecanada.gc.ca/eng/sc/cpp/disability/disabilitypension.shtml>
- lxxxi Quebec Pension Plan disability benefits
http://www.rmq.gouv.qc.ca/en/programmes/regime_rentes/prestations_invalidite/Pages/prestations_invalidite.aspx
- lxxxii *Guidelines for Termination of Employment and Demotion for Reasons Other Than Discipline (Medical Incapacity)*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12609§ion=text>
- lxxxiii Public service pension and benefits
<http://www.pensionandbenefits.gc.ca>
- lxxxiv How pensions are calculated
http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/Pensions/ypp1-eng.asp#Toc497204654
- lxxxv Specific information on the *Public Service Superannuation Act*
http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/pensions/psppg-corprfp-eng.asp
- lxxxvi *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12541§ion=text>
- lxxxvii *Occupational Health Evaluation Standard*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12561>
- lxxxviii *A Guide for Managing the Return to Work*, Canadian Human Rights Commission
http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf
- lxxxix *A Place for All: A Guide to Creating an Inclusive Workplace—Part 1, “Questions and Answers About the Duty to Accommodate,”* Canadian Human Rights Commission
http://www.chrc-ccdp.ca/discrimination/APFA_UPPT/page1-en.asp

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- xc Information about various priority entitlements
<http://www.psc-cfp.gc.ca/prad-adpr/guide/val-eng.htm>
- xcI Accessibility, Accommodations and Adaptive Computer Technology Program
<http://www.ec.gc.ca/aatia-aaact/default.asp?lang=En&n=EDE49A88-1>
- xcii *Public Service Employment Act*
<http://laws.justice.gc.ca/PDF/Statute/P/P-33.01.pdf>
- xciii *Public Service Employment Regulations*
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- xciv Priority Information Management System
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- xcv Priority Information Management System consent form to be signed by the employee
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- xcvi Information on the priority appointment process for employees with disabilities
<http://www.psc-cfp.gc.ca/prad-adpr/guide/prt2-ch5-eng.htm>
- xcvii *Guide for Assessing Persons with Disabilities*, Public Service Commission
<http://www.psc-cfp.gc.ca/plcy-pltq/guides/assessment-evaluation/apwd-eph/index-eng.htm>
- xcviii *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service*
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- xcix Functional limitations as defined by the Public Service Commission
<http://www.psc-cfp.gc.ca/plcy-pltq/guides/assessment-evaluation/apwd-eph/ch1-eng.htm>
- c Maximum medical recovery as defined by the Ontario Workplace Safety and Insurance Board
<http://www.wsib.on.ca/en/community/WSIB/230/OPMDetail/24347?vgnextoid=5f13fcea9bfc7210VgnVCM100000449c710aRCRD>
- ci *A Guide for Managing the Return to Work*, Canadian Human Rights Commission
http://www.chrc-ccdp.ca/pdf/gmrw_ggrt_en.pdf
- cii *Occupational Safety and Health* policy
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- ciii *Canada Labour Code, Part II*
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- civ *Manager's Handbook: Canada Labour Code, Part II*
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- cv *Occupational Health Evaluation Standard*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12561>
- cvi *Policy on Employee Assistance Program*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12542>
- cvii *Directive on Leave and Special Working Arrangements*
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- cviii *Telework Policy*
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- cix Collective agreements
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- cx Collective agreements
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- cxii *Policy on Terms and Conditions of Employment*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=15771>
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- cxix Disability Insurance Plan
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- cxix Public Service Management Insurance Plan
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- cxx *Long-Term Disability Insurance policy*
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- cxxii *Guidelines for Termination of Employment and Demotion for Reasons Other Than Discipline (Medical Incapacity)*
<http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12609§ion=text>
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- cxxiv *Employment Equity Act*
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- cxxv *Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service*
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- cxxvi *Occupational Health Evaluation Standard*
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- cxxviii *Treasury Board Guidelines for Discipline*
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- cxxix *Policy on Prevention and Resolution of Harassment in the Workplace*
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- cxix *Creating a Welcoming Workplace for Employees with Disabilities*
http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/tb_852/cwwed-eng.asp
- cxix *Disability Insurance: A Handful of Tips for Alliance Members*
https://www.pfac-afpc.org/documents/what/di_ai-e.pdf
- cxix *Disability Insurance Program*
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- cxix *Duty to Accommodate: A PSAC Guide for Local Representatives*
http://www.pfac-afpc.org/documents/what/duty_to_accommodate-e.pdf
- cxix *Duty to Accommodate: A Roadmap for Managers*
<http://www.tbs-sct.gc.ca/ee/dorf-eng.asp>

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- cxxxvi *Employers' Guide to the Government Employees' Compensation Act, Labour Program, Human Resources and Skills Development Canada*
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- cxxxvii *A Guide for Managing the Return to Work*
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- cxxxviii *Guide to Planning Inclusive Meetings*
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- cxxxix Online publication from Human Resources and Skills Development Canada
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- cxl *A Place for All: A Guide to Creating an Inclusive Workplace*
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- cxli Online publication from the Canadian Human Rights Commission
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- cxlii *Preparing for and Responding to Workplace Trauma: A Manager's Handbook*, Health Canada
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- cxliii *Preparing for and Responding to Workplace Trauma: A Manager's eGuide*, Health Canada—a more comprehensive online eGuide
http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/e_guide-man_gest/index-eng.php
- cxliv *Services for People with Disabilities* is a comprehensive guide to Government of Canada services available from Service Canada.
http://www.pwd-online.ca/pdf/Disability_Guide_ENG.pdf
- cxlv *What You Need to Know About Mental Health: A Tool for Managers*, Conference Board of Canada
<http://www.conferenceboard.ca/documents.aspx?did=1433>
- cxlvi Canadian Centre for Occupational Health and Safety
<http://www.ccohs.ca/oshanswers>
- cxlvii Industry Canada Accessible Procurement Toolkit
<http://www.apr.gc.ca/>
- cxlviii Association of Workers' Compensation Boards of Canada
<http://www.awcbc.org/en/>

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- cxlix Canadian Human Rights Commission resources on prevention, support for recovery and accommodation
http://www.chrc-ccdp.ca/publications/prevention_prevention-en.asp?lang_update=1
- cl Canadian Human Rights Commission's internal policy and procedural guidelines
http://www.chrc-ccdp.ca/legislation_policies/ami_mmm/toc_tdm-en.asp
- cli The Workplace Health System
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