Fitness for Duty Procedures

These procedures are intended to be a guide for implementing University Policy HRM-037, “Evaluating Employee Fitness for Duty”. That policy applies to all employees of the Academic Division of the University of Virginia, including Staff, Faculty, Clinical Staff, Allied Health Professionals and Professional Research Staff, and “covers only those situations in which an employee is (1) having observable difficulty performing his/her duties in an effective manner that is safe for the employee and/or for his or her co-workers, or (2) posing a serious safety threat to self or others.” ([http://uvapolicy.virginia.edu/policy/HRM-037](http://uvapolicy.virginia.edu/policy/HRM-037))

Required Steps

1. Co-workers or others whose observations lead them to question an employee’s fitness for duty must report their observations to the employee’s supervisor.

2. The supervisor will investigate and document those observations using the **Fitness for Duty Initial Observation Report**. The Report should be forwarded to the department HR representative and/or to a University Human Resources (UHR) Consultant who will share the Report with other members of the **Coordinating Team**.

3. The supervisor will contact either their department HR representative or their UHR Consultant to discuss the need for a possible Fitness for Duty Evaluation (FFDE). Per University policy, the Coordinating Team shall determine the appropriateness of a FFDE based on the reported behaviors/circumstances that have raised questions about an employee’s fitness for duty, and shall facilitate the evaluation. The UHR Consultant shall represent UHR on the **Coordinating Team** and shall coordinate aspects of the FFDE process involving the employee and the supervisor.

   **Note (Physicians Wellness Program):** Please contact Carol Caesar ([cc9wh@hscmail.mcc.virginia.edu](mailto:cc9wh@hscmail.mcc.virginia.edu) or 982-5695), School of Medicine’s Senior Employee Relations Specialist, if a Clinician’s fitness for duty is in question. Carol Caesar will work with members of the Coordinating Team and the Physicians Wellness Program.

4. The UHR Consultant will immediately notify Gary Helmuth (Helmuth@Virginia.edu), UHR representative on the Threat Assessment Team, or Marge Sidebottom (mls9m@virginia.edu) of all FFDE’s.

5. The Coordinating Team shall determine the appropriateness of a FFDE within a reasonable time after notification from the supervisor, usually within three business days. A member of the Coordinating Team shall notify the employee of the opportunity to provide any relevant previous medical or psychological treatment information, but this information does not substitute for a FFDE if a FFDE is determined to be necessary. After the Coordinating Team hears the facts and discusses the issue(s) and the FFDE is the recommended course of action, the UHR Consultant will coordinate next steps to include the following actions:
The supervisor will meet with the employee and ask him/her to explain the observed behaviors or impairment and notify him/her in writing (letter generated by UHR) of the observations made and inform the employee of being placed on leave pending the FFDE. The supervisor will document the employee’s response and this information will be shared with the Coordinating Team.

a. The employee is placed on leave and removed from duty while undergoing the FFDE (effort is made to complete this process within two work weeks). As noted in the Policy, during this time “applicable leave policies shall apply” to questions regarding pay.

b. The UHR Consultant will secure an initial appointment with a member of the FEAP for any employee required to undergo a FFDE due to psychological or behavioral issues.

c. If the FFDE is for psychological, behavioral issues, or a neuropsychological concern, a member of the FEAP will arrange an appointment for the employee with the independent licensed health care evaluator/forensic psychologist. FEAP will communicate this information to the employee and to UHR. The cost incurred by the employee’s department to conduct the psychological FFDE is between $750 - $1,200.

d. For situations involving potential substance impairment or a medical condition, the UHR Consultant will arrange an appointment with WorkMed for a medical evaluation which may run concurrently with the psychological FFDE. The UHR Consultant will communicate this information to the employee. The cost incurred by the employee’s department to conduct the medical FFDE will be communicated to the department as soon as the appointment is set up.

e. For any psychological FFDE, the FEAP will send the evaluator the employee’s job description and any background information or documentation of events or behaviors that caused the need for the FFDE. This information will be provided by UHR to the FEAP. If the FFDE is for a medical evaluation, then the UHR Consultant will send the evaluator the employee’s job description and any background information or documentation of events or behaviors that caused need for the FFDE.

6. UHR manages any questions related to leave status. The employee will not return to work until all aspects of the FFDE are completed. However, while the employee is prohibited from appearing for work until completion of the FFDE and approval to return to work is provided, the Coordinating Team shall use its discretion to determine whether to allow the employee to work off-site or to represent the University in any work-related capacity. The employee must be medically released by the FFD evaluator(s) prior to a return to work.

   a. In the initial meeting with FEAP, the employee will be required to sign a written release of information for communication with the appropriate FFD Evaluator and HR representative, and also any treatment provider involved in the FFD process, to include but not limited to WorkMed, the employee’s PCP, psychiatrist, therapist and/or the UVA Threat Assessment Team. If the employee refuses to sign the release of information for this communication, the process stops and the employee is referred back to UHR. Failure to complete the FFDE may result in disciplinary action.

   b. Once the FFDE takes place, the evaluator provides a representative from the FEAP a summary of their assessment, typically within two work days. The assessment may also require further testing or evaluation but will generally be a statement that the employee can:

      I. return to work

      II. cannot return to work until certain conditions are met; or
III. is not fit to return to work.

The evaluator’s full report will be delivered to the FEAP. The evaluator will also provide a written summary statement to FEAP. While FEAP will share the summary statement with UHR and the Coordinating Team, the full report is not sent to UHR or to the supervisor as it usually contains sensitive and personal information less relevant to the findings of the FFDE.

a. If the employee is released to return to work (RTW), UHR and the supervisor will set a date for this return. The supervisor or UHR will communicate the findings to the employee.

b. FEAP, UHR, the supervisor and the employee will hold a RTW transition meeting in which the transition is discussed both logistically and in terms of the supervisor’s expectations and behaviors for the employee.

c. If the evaluator finds that the employee should not presently return to work without conditions or other reasonable accommodations being made, a representative from the FEAP shall communicate this information to the employee. UHR will communicate with the supervisor and will send a written letter to the employee outlining the expectations for compliance with the FFD process. FEAP will outline with the employee what conditions must be met for RTW to occur. A representative from the FEAP will provide further case management as needed for three to six months to assist the employee in connecting with treatment providers. The UHR Consultant shall also refer the employee to UHR Benefits to discuss the possibility of short or long term disability, health insurance questions, etc.

d. If the employee is deemed to be unable to return to work, the employee is then placed into a leave without pay status and the employee can utilize other income replacement options that consist of using available leave balances and/or applying for short-term disability.

e. If the employee complies with the FFD evaluator’s recommendation for treatment, a follow-up evaluation will be scheduled to determine if the employee is suitable for a RTW. FEAP will coordinate the follow up consultation if the FFDE involved a psychological evaluation. The UHR Consultant will coordinate the follow-up consultation if the FFDE was with WorkMed.

f. If the employee is not released to RTW, during this time period, the employee is on protected leave and their position cannot be filled. If temporary backfill is required the department can contact the temporary search group to discuss possible temporary replacement options.

g. Throughout the FFDE process it is the responsibility of the employee to maintain communications with the FEAP regarding required treatment.

h. Employees may obtain a copy of the FFD report from FEAP, UVA-WorkMed or Physician Wellness upon written request.

i. The FFD evaluator submits invoice to FEAP and a copy is given to the FEAP Administrative Specialist to process for payment. The UHR consultant provides the FEAP with the appropriate department’s PTAO and FEAP will process the bill for payment.

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