

DEPARTMENT OF FIRE AND RESCUE SERVICES



GENERAL ORDER

110.09



Originating From	Issue Date	Revision Date	Attachment
Administration	05/10/1995	N/A	N/A

SUBJECT: Modified Duty

APPLICABILITY: All Personnel

POLICY:

When an employee, due to medical considerations, is unable to work at a full performance status, the Howard County Department of Fire & Rescue Services (DFRS) shall consider a modified duty assignment for that employee. The DFRS shall consider each request or recommendation based on anticipated duration, abilities and capabilities of the individual, physical limitations, and medical status.

1 DEFINITIONS:

- 1.1 **Full Performance Assignment:** An assignment associated with operational activities.
- 1.2 **Full Performance Status:** The status of an individual considered to be medically capable of performing in an operational mode.
- 1.3 **Modified Duty Assignment:** An assignment which excuses an employee from specific operational activities.
- 1.4 **Modified Duty Status:** The status of an employee who is not capable of performing in a fully operational mode.

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- 2.1 Consideration for each request for modified duty shall be based on anticipated duration, abilities and capabilities of the individual, physical limitations, and medical status.
- 2.2 All requests for modified duty assignments shall be submitted to the Operations Section Chief and shall require a certificate from the treating physician stating the degree of incapacity, special limitations and considerations, and a projected time frame for the assignment.
 - 2.2.1 Once an individual is placed on modified duty status, a physician's certificate is required to return to the full performance status.

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- 2.3 Request for modified duty assignments may be denied.
- 2.4 Modified duty personnel shall keep the Chief Deputy or the Deputy Chief of Field Operations informed about their present assignment and location for each day. This may be accomplished through the assigned Section Chief. It is important they also advise the secretarial staff of where they will be throughout the day, in the event they need to be contacted.
- 2.5 Approved modified duty assignments shall be evaluated where appropriate on a 30 day basis.

3 PAYROLL AND LEAVE

- 3.1 Modified duty personnel shall be given a sign in and out sheet. Personnel shall sign in and out daily, and enter all leave hours. (annual, sick, personal, workers comp., or other)
- 3.2 Modified duty personnel are classified as 48 hour per week employees, although the actual work week is 40 hours.
 - 3.2.1 Leave is accrued the same as 48 hour full performance personnel.
- 3.3 Leave shall be deducted at 9.6 hours per full day. Leave requests for less than a full day shall be deducted hour for hour.
- 3.4 Requests for leave shall be submitted to the appropriate Section Chief or the Bureau Chief where modified duty personnel are assigned.
- 3.5 Approved leave requests shall be forwarded to the Senior Payroll Clerk, and then sent to the employee's shift supervisor.
- 3.6 It is the responsibility of the shift supervisor to track all leave accrual and usage during a modified duty assignment of their assigned personnel.
- 3.7 If modified duty personnel are working out of a Fire Station, a payroll sheet shall be faxed to Headquarters each Friday.
- 3.8 Doctor appointments associated with a job related injury/illness will be entered on payroll as Workers Compensation.

4 JOB RELATED INJURY/ILLNESS

Modified Duty

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- 4.1 Personnel unable to work at full performance status due to medical considerations resulting from a sanctioned job related activity, but capable of sedentary type work, shall be placed in a modified duty assignment at the discretion of the Fire Chief.
- 4.2 It shall be the employee's responsibility to notify his/her immediate supervisor as soon as possible they have been placed in a modified duty status by a physician. The supervisor shall then notify the shift Battalion Chief.
 - 4.2.1 The employee must provide the supervisor with verbal information about the physician's evaluation. This shall include; the date the employee may begin a modified duty assignment, the anticipated duration of the modified duty assignment, activity limitations, and the physician's name and phone number. Written documentation from the treating physician may be requested at this time.
 - 4.2.2 In the absence of the immediate supervisor, the employee may contact his/her Battalion Chief.
- 4.3 The Battalion Chief shall notify the Operations Section Chief and make recommendations to approve or disapprove a modified duty assignment.
- 4.4 All modified duty assignments must have the approval of the Operations Section Chief.
- 4.5 After approval of a modified duty assignment, the Battalion Chief or immediate supervisor shall contact the employee and notify them of the following; date and time to report for modified duty assignment, specific location of assignment, name of modified duty supervisor they shall report to, and they must bring written documentation from the physician if not already submitted.

5 NON-JOB RELATED INJURY/ILLNESS

- 5.1 Personnel unable to work at full performance status due to medical considerations of a non-job related injury/illness, but capable of sedentary type work, may request a modified duty assignment.
- 5.2 It shall be the employee's responsibility to notify his/her immediate supervisor they are under a physician's care and are requesting a modified duty assignment. The supervisor shall then notify the shift Battalion Chief.
 - 5.2.1 The employee must provide the supervisor with verbal information about the physician's evaluation. This shall include; the date the employee may begin a

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modified duty assignment, the anticipated duration of the modified duty assignment, activity limitations, and the physician's name and phone number. Written documentation from the treating physician may be requested at this time.

5.2.2 In the absence of the immediate supervisor, the employee may contact his/her Battalion Chief.

5.3 The Battalion Chief shall notify the Operations Section Chief and make recommendations to approve or disapprove a modified duty assignment.

5.4 All modified duty assignments must have the approval of the Operations Section Chief.

5.5 After approval of a modified duty assignment, the Battalion Chief or immediate supervisor shall contact the employee and notify them of the following: date and time to report for modified duty assignment, specific location of assignment, name of modified duty supervisor they shall report to, and they must bring written documentation from the physician if not already submitted.

5.5.1 The Battalion Chief shall notify the employee if the request for modified duty has been denied. The employee will be charged with disability leave unless other arrangements have been made.

Approved:

A handwritten signature in cursive script that reads "Joseph A. Herr".

Joseph A. Herr
Fire Chief