

## MANUAL OF ADMINISTRATION

<b>TOPIC:</b> HEALTH AND SAFETY	<b>SUBJECT:</b> Illness/Injury Accommodation	<b>Code:</b> HS015
		<b>Date of Issue:</b> Jan 2006
		<b>Revised:</b> May 2013
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### **PURPOSE:**

The purpose of this policy is to keep a written medical record on file, when an employee requires accommodation to his/her schedule due to medical reasons. The policy will clarify the type and duration of accommodation required.

### **PROCEDURE:**

- 1 If an employee requests a scheduling change due to medical reasons, an Avenue II Functional Abilities Form, must be fully completed by a qualified medical practitioner. The employee must also complete the Reasonable Accommodation Request Form.
  - 1.1 The Manager will provide the employee with the forms and once completed they must be returned to the Manager, before it can be determined if accommodation can be made.
- 2 If an employee has a schedule which accommodates an ongoing medical condition, an Avenue II Functional Abilities Form must be completed at least every two years by a qualified medical practitioner.
  - 2.1 The Manager will provide the employee with the form and a date by which the form must be completed. The completed form must be returned to the Manager by the required date.

**Avenue II will reimburse the cost of having the Functional Abilities Form completed when requested by the employer. A receipt must be provided in order to receive reimbursement.**