FAIRFAX COUNTY FIRE AND RESCUE DEPARTMENT STANDARD OPERATING PROCEDURE **SOP** 02.04.03 **ORIGINATOR BUREAU:** Office of the Fire Chief **SUBJECT: FITNESS FOR DUTY DIVISION/SECTION:** Health and Wellness PAGE 1 OF 6 **SUBCATEGORY: CATEGORY:** Personnel Medical and Fitness Standards **APPROVED BY: EFFECTIVE DATE:** December 7, 1987 **REVISION DATE:** August 6, 2021 **CFAI PI: 7G.1** John S. Butler Fire Chief John S. Butler FIRE AND RESCUE DEPARTMENT **FORMS REQUIRED:** FRD-025, Supervisor's Statement for Request Fitness for Duty Evaluation FRD-074, Medical Status Report FRD-158, Fire and Rescue Department Work Status Notification

PURPOSE:

To provide definitive guidance for supervisors to follow when an employee shows signs of being unfit for duty or having physical or psychological conditions that could require medical evaluation. The term employee as used in this document applies both to employees of the Fire and Rescue Department (FRD) and to certified operational members of volunteer departments.

NOTE: Current forms are located on SharePoint.

I. PREFACE

Contributing factors that impair an employee's ability to perform his/her assigned duties may stem from the following causes:

- A. Alcohol and drugs (illegal, prescribed, and over the counter medications).
- B. Injury or illness.
- C. Psychological impairment (emotional or stress related).
- D. Inability to physically perform job.

II. POLICIES

It is the FRD policy that employees shall report to work in such a condition as to perform their assigned duties.

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- A. **Substance Abuse Impairment Policy**: The FRD's Rules and Regulations and Fairfax County's Standards of Conduct, Chapter 16, states that possessing, using, or being under the influence of alcohol or illegal drugs while an employee is at work or on county premises is strictly prohibited.
- B. **Medication Policy**: Employees are to notify their immediate supervisor if they are taking any mood-altering medication whether prescribed or over the counter. They do not need to disclose the medication type or medical condition to the immediate supervisor, rather they must contact a Public Safety Occupational Health Center (PSOHC) physician to confirm their ability to work while taking the reported medication. The PSOHC physician shall follow-up with the immediate supervisor to confirm their work status. Medications that have mood altering effects include, but are not limited to, narcotics, pain medication, antihistamines, opiates, sleep aides, and medication prescribed for anxiety, depression, and stress.
 - 1. Common examples of these types of medications include, but are not limited to, Benadryl, Valium, Librium, Xanax, Darvocet, Vicodin, Tylenol #3, Tylenol #4, Ambien, Lunesta, Lexapro, and Paxil. Questions about whether a drug has mood altering effects should be directed to a PSOHC physician.
- C. **Physical Injury or Illness Policy**: A <u>Supervisor's Statement for Request Fitness for Duty Evaluation (FRD-025) Form</u> shall be considered when an illness or injury affects an employee's performance to such an extent as to hinder the employee's ability to render full, efficient, and safe performance of his/her duties.
 - 1. Employees who come to work with minor orthopedic disabilities or skin conditions that could place them at increased risk for further injury or infection shall have their immediate supervisor consult with a PSOHC physician who will complete a Fire and Rescue Department Work Status Notification (FRD-158) Form. Minor orthopedic conditions that could limit flexibility and functionality should be realized to place the employee at an increased risk for further injury. Any condition of the skin that causes secretion may compromise the integrity of the skin. The compromised skin shall be realized to present an increased risk of infection and can transfer infection. Conditions compromising the integrity of the skin would include burns, sutures, infectious skin conditions, sunburn that has blistered, course rash injuries, new tattoos that are weeping, and poison ivy.
 - 2. If the employee's supervisors, deputy chief, and Battalion Chief of Health and Wellness (BCHW) or designee determines that a fitness for duty is required, an FRD-025 shall be completed.
 - 3. Any employee in the fitness for duty evaluative process is required to meet with PSOHC to be cleared for full-duty. A completed FRD-158 must be obtained and submitted through their chain of command.

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- D. **Psychological Impairment Policy**: A fitness for duty shall be considered when a mental, emotional, or stress related condition affects an employee's performance to an extent as to hinder the employee's ability to render full, efficient, and safe performance of his/her duties. If the employee's supervisors, deputy chief, and BCHW or designee determines an FRD-025 form is appropriate, the employee shall submit for evaluation. Employees who have been on extended medical leave may be required to provide an FRD-074 and be evaluated by PSOHC to be released to full duty, completing an FRD-158 form before they are returned to duty.
- E. **Physical Performance Deficiency Policy**: All department employees shall meet the acceptable physical standards required to accomplish their work assignment. A fitness for duty shall be considered when an employee's physical condition hinders his/her ability to render full, efficient, and safe performance of his/her duties. If the employee's supervisors, deputy chief and BCHW or designee determines an FRD-025 form is appropriate, the employee shall submit to the evaluation, which may include a Work Performance Evaluation (WPE) and/or Bruce Protocol Treadmill Evaluation reaching 12-Met.

III. PROCEDURES FOR SUBSTANCE IMPAIRMENT (ILLEGAL SUBSTANCES, ALCOHOL, AND PRESCRIBED AND/OR OVER THE COUNTER MEDICATIONS)

- A. In addition to alcohol and illegal drugs, certain prescription and over the counter medications may impair an employee's work abilities and may not be appropriate for an employee in the work setting. If an employee's explanation that his/her observed behavior is due to the use of over the counter or prescribed medication, it shall not deter from proceeding with the drug screen.
- B. The following steps shall be accomplished within two hours when it is suspected that an employee may be under the influence of alcohol or drugs (illegal, prescribed, or over the counter drugs).
 - 1. **NOTE:** If the cause of an employee's impairment is thought to be over the counter and prescribed medication, the BCHW or the Executive Officer shall consult via telephone with the appropriate on-duty PSOHC physician to determine if a fitness for duty evaluation is needed for the employee.
 - 2. If the PSOHC physician determines that a fitness for duty evaluation is needed, the employee shall be placed on administrative leave until the employee can be examined by the PSOHC physician.
 - a. Immediately relieve the employee from any assigned duties and responsibilities.

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- b. Keep the employee at the work location. Do not allow the employee to consume any food or drink.
- c. Notify the chief officer (battalion chief, deputy chief) of the situation and of the actions taken. If the employee's supervisors, deputy chief, and BCHW or designee, determine that a fitness for duty evaluation is appropriate, proceed with the evaluation and complete the FRD-025.
- d. Notify the Professional Standards Office to begin steps to have the employee immediately tested for drugs and alcohol.
 - i. The employee shall be given the forms that explain testing requirements and authorization.
 - ii. The employee shall be transported to the selected location for testing as soon as possible.
- e. The following actions shall be taken when any employee is ordered to submit to testing for drugs and for alcohol.
 - i. The employee shall be placed on administrative leave following testing.
 - ii. The chief officer (battalion chief, deputy chief) shall make arrangements for the employee to return home.
 - iii. The Fire Chief or designee shall be notified of the testing results.
 - iv. The employee shall remain on administrative leave until the results of the test are returned.

NOTE: An employee with positive blood alcohol content shall be considered impaired. An employee who tests positive for drugs shall be considered impaired.

- f. If the testing indicates negative for drugs or alcohol, the Fire Chief or designee shall consider if further action is necessary based on the circumstances and the employee's behavior and may make arrangements to return the employee to his/her duty station.
- g. Prior to the employee returning to duty, the PSOHC physician shall prepare a work status notification and send it to the Fire Chief for approval.

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IV. PROCEDURES FOR PHYSICAL INJURY OR ILLNESS, SUSPECTED PSYCHOLOGICAL IMPAIRMENT, AND PHYSICAL PERFORMANCE FITNESS FOR DUTY EVALUATIONS

- A. The following procedures shall be used when an employee appears to be unfit for duty based on illness, including extended absences for medical reasons, physical injury, suspected psychological impairment, or physical performance deficiencies.
- B. Notify the chief officer (battalion chief, deputy chief) of the situation and of the actions taken. If the employee's supervisor, battalion chief, and deputy chief or executive officer determine that a fitness for duty evaluation is appropriate, proceed with the evaluation.
 - 1. Relieve the employee from any assigned duties and responsibilities as appropriate.
 - 2. Fill out an FRD-025 form stating the reason(s) for relieving the employee of his/her signed duties.
 - 3. The BCHW or designee shall be notified immediately so that an FRD-025 form and consultation can be arranged with the PSOHC physician. The BCHW or Executive Officer can be contacted at his/her office or cell phone. If the battalion chief is not available, the on duty PSOHC physician may be contacted through the executive officer for a consultation. The employee shall be placed on administrative leave until a PSOHC physician can examine the employee which may include either a WPE or Bruce Protocol Treadmill Evaluation reaching 12-Met.

NOTE: The Mobile Crisis Unit from the Woodburn Mental Health Center and the Crisis Response Team may be contacted through the Department of Public Safety Communications (DPSC) for assistance.

- 4. The physician will notify the BCHW or Executive Officer of the findings of the evaluation and the employee's work status. The PSOHC physician will refer the employee to the proper treatment plan and determine when the employee will be allowed to return to full duty.
- 5. Prior to the employee returning to duty, the PSOHC physician shall prepare an FRD-158 form and route to the BCHW or designee for approval signature and coordination.

NOTE: Additionally, EAP referral should be considered in a case requiring a fitness for duty evaluation.

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V. CONFIDENTIALITY STATEMENT

Confidentiality shall be maintained at all times. Fitness for Duty records must be kept confidential, maintained in secured files, and physically separate from personnel files. Medical information shall be protected from inappropriate disclosure in a manner that ensures full compliance with all relevant federal and state laws.