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MODIFIED DUTY/RETURN TO WORK POLICY ACKNOWLEDGEMENT FORM ...... 5
I. OBJECTIVE:

This policy establishes procedures for providing temporary modified-duty assignments work related and non-work related. This policy is not intended to affect the rights or benefits of employees under federal or state law, local rules, or collective bargaining agreements. Subject to operational considerations, the public agency may identify temporary modified-duty assignments for employees who have an injury or medical condition resulting in temporary work limitations or restrictions.

II. DEFINITIONS:

**Modified Duty Assignment:** A temporary job assignment other than the employee’s regular and customary duties, such as modification of regular and customary duties or assignment to alternative work tasks. Assignment may be made by another department.

**Work Restrictions:** A limitation or restriction of work duties as determined by the employee’s treating or evaluating physician.

**Treating Physician:** A Physician licenses by the State of California and designated as the physician of record for treatment of the injured worker.

**Employee:** An individual who holds permanent or probationary status, and is currently employee by the County of Trinity.

III. APPLICATION:

Priority consideration for temporary modified-duty assignments will be given to employees with work-related injuries or illnesses that are temporary in nature. Employees having disabilities covered under the American with Disabilities Act (ADA), the California Fair Employment and Housing Act (Government Code § 12940 et seq.) or the Pregnant Workers Fairness Act shall be treated equally, without regard to any preference for a work-related injury.

No position shall be created or maintained to accommodate a temporary modified-duty assignment.

Temporary modified-duty assignments are a management prerogative and not an employee right. The availability of temporary modified-duty assignments will be determined on a case-by-case basis, consistent with the operational needs of the public agency. Temporary modified-duty assignments are subject to continuous reassessment, with consideration given to operational needs and the employee’s ability to perform in a modified-duty assignment. Modified-duty assignments shall be for thirty days, upon approval of Human Resource Director/Risk Manager. An employee may apply to the Human Resource Director/Risk Manager for an extension of the modified-duty assignment. The Department Head, in consultation with the Human Resource Director/Risk Manager, may extend the modified-duty assignment up to a minimum of ninety-days. The modified-duty assignment shall only be extended beyond ninety days if it has determined by the Department Head, Human Resource Director/Risk Manager if the employee has a pending return to work date and there is no undue hardship on the County. Such extension does not create precedent or create a permanent position.
IV. PROCEDURE:

Employees may request a temporary modified-duty assignment for short-term injuries or illnesses.

Employees seeking a temporary modified-duty assignment should submit a written request to the HR Director or the authorized designee. The request should, as applicable, include a certification from the treating medical professional containing:

(a) An assessment of the nature and probable duration of the illness or injury.
(b) The prognosis for recovery.
(c) The nature and scope of limitation and/or work restrictions.
(d) A statement regarding any required workplace accommodations, mobility aids or medical devices.
(e) A statement that the employee can safely perform the duties of the temporary modified-duty assignment.

The HR Director will make a recommendation to the Department Head about availability and suitability of a modified duty schedule.

V. MEDICAL EXAMINATIONS:

The Department reserves the right to require a fitness-for-duty examination of any employee assigned to a modified-duty assignment or of any employee having been on such assignment, in accordance with the Fitness for Duty Policy.

Prior to returning to full-duty status, employees shall be required to provide certification from their treating medical professionals stating that they are medically cleared to perform the essential functions of their jobs without restrictions or limitations to Risk Management and their Home Department.

VI. EMPLOYEE RESPONSIBILITIES:

The responsibilities of employees assigned to temporary modified duty shall include, but not be limited to:

(a) Communicating and coordinating any required medical and physical therapy appointments in advance with their supervisors.
(b) Promptly notifying their supervisors and Risk Management of any change in restrictions or limitations after each appointment with their treating medical professionals.
(c) Communicating a status update to their supervisors and Risk Management no less than once every 30 days while assigned to temporary modified duty.
(d) Submitting a written status report to the Department Head that contains a status update and anticipated date to return to full-duty when a temporary modified-duty assignment extends beyond 60 days.
(e) All employees shall sign and acknowledge the Modified Duty/Return to Work Policy Acknowledgement form. (See Attachment A)
VII. SUPERVISOR RESPONSIBILITIES:

The employee’s immediate supervisor shall monitor and manage the work schedule of those assigned to temporary modified duty. The responsibilities of supervisors shall include, but not be limited to:

(a) Periodically apprising the Department Head and Risk Management of the status and performance of employees assigned to temporary modified duty.
(b) Notifying the Department Head and Risk Management to ensure that the required documentation facilitating a return to full duty is received from the employee.
(c) Ensuring that employees returning to full duty have completed any required training and certification.

VIII. SALARY/BENEFITS:

An employee assigned to Modified Duties will be paid his or her regular salary and benefits during the modified-duty assignment. The salary and applicable benefits will be paid by the home department.

IX. SICK LEAVE:

Eligibility for Sick leave may be determined by the medical professional’s recommendations for the modified-duty assignment.

Any employee who fails or refuses to work a modified duty assignment approved by his or her medical professional shall be ineligible for sick leave benefits.

X. PREGNANCY:

If an Employee is temporarily unable to perform regular duties due to a pregnancy, childbirth or a related medical condition, the employee will be treated the same as any other temporarily disabled employee (42 USC § 200e(k)). A pregnant employee shall not be involuntarily transferred to a temporary modified-duty assignment.

XI. PROBATIONARY EMPLOYEES:

Probationary employees who are assigned to a temporary modified-duty assignment shall have their probation extended by a period of time equal to their assignment to temporary modified duty.

This policy shall supersede any previous policies adopted on August 21, 2001.

[Signature]
Jeremy Brown, Chairman
County of Trinity, Board of Supervisors

Dated: 12-21-2021
ATTACHMENT A

MODIFIED DUTY/RETURN TO WORK POLICY ACKNOWLEDGEMENT FORM

TRINITY COUNTY
COUNTY OF TRINITY'S ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF THE MODIFIED DUTY/RETURN TO WORK POLICY

I acknowledge that I have been given the opportunity to review the Modified Duty/Return to Work Policy. I have read and understand my responsibilities under the policy, and I agree to abide by it. I understand that I may be subject to discipline for violating this Policy, or subject to other appropriate sanctions for failing to fulfill my responsibilities as outlined in this policy.

I understand that the Policy is available for my review at any time on the County's website. If I have trouble accessing the Policy, I will contact the Human Resources Department.

Print Name

____________________________

Signature

____________________________

Date

____________________________