

TITLE: COVID-19 Related Workplace Accommodation Procedure - Disability (Employee)

Date of Approval: May 31, 2021

**Mandatory Review
Date:
May 31, 2022**

**Approved By:
Human Resources**

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1. PURPOSE

This procedure provides information with respect to the application of the Sheridan Workplace Accommodation Policy, expanding its application to COVID-19 related requests.

2. SCOPE

This procedure applies to all Sheridan employees.

This procedure is distinct from:

- The Sheridan Return to Work Procedure
- The Sheridan Workplace Accommodation Procedure (Job Applicant)

3. DEFINITIONS

Accommodation is a means of adjusting or modifying the work environment or the method of doing work in order to address individual needs of employees to permit them to perform the essential duties of their position.

Disability under Ontario's Human Rights Code ("the Code") means any degree of physical disability, infirmity, malformation or disfigurement; a condition of mental impairment of a development disability; a learning disability; and/or a mental disorder.

Health Care Provider is defined as a doctor of medicine or osteopathy, podiatrist, dentist, chiropractor, clinical psychologist, optometrist, nurse practitioner, nurse-midwife, or a clinical social worker, who is authorized to practice in their province.

Functional Abilities means an employee's capacity to perform physical and cognitive activities that are part of the employee's work and workplace.

Medical Information means information related to the medical condition of an employee, including information about the nature of the employee's condition, and Functional Abilities.

Work Refusal refers to the right that a worker has to refuse work that they believe is unsafe to themselves or another worker. The worker who believes that they are endangered by workplace violence may also refuse work, under the Occupational Health and Safety Act (OSHA).

Undue Hardship means the outer limit of the accommodation obligation, and refers to

activities, impacts or effects that would fundamentally alter the employment relationship between Sheridan and an employee, result in undue and/or excessive costs for Sheridan, or unreasonably interfere with the health and safety or other rights of Sheridan's other employees, or community members. Undue hardship must be considered individually, in the full context in which each request for accommodation rises.

4. PROCEDURE

4.1 Request for workplace accommodation due to COVID-19 (Disability)

Workplace accommodation ("Accommodation") may be:

- Requested by the employee to the Human Resources Business Partner or the Workplace Abilities Office, notifying the employee's manager that a request has been made; Or,
- Identified by the employee's manager to the Human Resources Business Partner or the Workplace Abilities Office.

Upon receiving a request for Accommodation, the Manager/Human Resources Business Partner (HRBP) will acknowledge receipt of the request and will ensure all requests are addressed in a timely manner. The employee will be connected directly to the Workplace Abilities Office.

4.2 Participation of a support person

The employee may request the participation of a support person in any meetings or discussions related to the request for Accommodation, which may be a representative from their Union, if applicable.

4.3 Initiation of the Accommodation process

To initiate the Accommodation process the employee will be asked to complete in writing Sheridan's [Workplace Accommodation Request Form – Disability \(COVID-19 Related\)](#), including providing the form to their health care provider for completion of the appropriate section.

The completed form should be submitted directly to the Workplace Abilities Office.

4.4 Information gathering and assessment

4. 4.1 Supporting Medical Information for Disability-related Accommodation

For requests for Accommodation due to disability, the Workplace Abilities Office ("WAO") will require supporting Medical Information, including information about the employee's Functional Abilities arising from the disability. Medical Information is kept in a separate file with WAO only for confidentiality purposes in accordance with

Sheridan's Record and Information Management Policy and Retention Schedules.

4. 4.2 Assessment of the request

The Workplace Abilities Office will work with the employee, their manager, and the applicable workplace parties, (including where appropriate, the Union representative, Occupational Health and Safety and the HR Business Partner) in order to assess whether the employee has accessibility or other *Code*-related needs that may require Accommodation.

If the assessment of the medical / functional information does not identify Accommodation needs, Sheridan will inform the employee in writing that it is denying the Accommodation request. If the employee refuses to participate in their assigned work duties due to health and safety concerns, the WAO will contact the Occupational Health and Safety team to begin the [Work Refusal](#) investigation process with the Joint-Health and Safety Committee.

Where the assessment identifies that there are Accommodation needs, Sheridan will work with the employee and relevant workplace parties to determine a reasonable Accommodation in light of the employee's needs.

At any stage of the Accommodation process, Sheridan may consult an external party at its own expense and discretion.

While the employee and the workplace parties have a shared responsibility in the Accommodation process, Sheridan has the final decision-making authority for determining whether an employee has Accommodation needs and, where such needs are identified, what is a reasonable Accommodation.

4.5 Formalize an Individual Workplace Accommodation Plan

When a reasonable accommodation has been identified, the details of the accommodation will be documented in a Temporary Accommodated Work Plan (the "AWP"), as appropriate. The content of the Plan will depend on the complexity of the Accommodation(s) provided in the individual circumstances. Details may include scheduling information, functional abilities, or other applicable workplace or job modifications.

Each disability related Plan must include a schedule outlining the times at which the AWP will be reviewed.

The employee, their manager, and the Human Resources Business Partner or the Workplace Abilities Office must sign the completed Plan. A copy of the completed AWP will be provided to the employee and their Manager, outlining functional abilities and the accommodated work duties only. If requested by the employee, the Plan will be provided in an accessible format or with communication supports.

If Sheridan determines that it is not appropriate in a specific case to establish an AWP, Sheridan will provide the employee with the reasons for this determination in

writing.

4.6 Implement, Monitor and Review the Individual Workplace Accommodation Plan

The employee and their manager will implement and monitor the Plan. Sheridan is responsible to assess the appropriateness of, and ongoing need for, the Accommodations provided to the employee.

The manager is responsible to identify changes to the employee's job or scope of job responsibilities, such that a modification to the Plan is necessary and will communicate this to the Human Resources Business Partner or the Workplace Abilities Office accordingly.

A review of the existing Plan will also be carried out when:

- The employee's work location or position changes;
- The nature of the employee's status under the Code changes and the Accommodation is based upon that change;
- The employee or Sheridan believes that the Accommodation is no longer appropriate or required.

The WAO will initiate a review of the Plan as outlined in each plan.

4.7 Responsibility of Manager assuming supervision of accommodated employee

When a manager assumes the supervision of the accommodated employee, the Manager will read and familiarize themselves with the content of the employee's AWP.

RELATED DOCUMENTS/LINKS/FORMS

[Workplace Accommodation Policy](#)

[Workplace Accommodation Request Form – Disability \(COVID-19 Related\)](#)

[Workplace Accommodation Request Form – Disability](#)

[Return to Work Policy](#)

[Return to Work Procedure](#)

[Accessibility Policy](#)

[Occupational Health and Safety](#)

[Workplace Abilities Office](#)

[Employee Relations](#)

[Employment Forms](#)