

Victoria Police Manual

The Victoria Police Manual is issued under the authority of the Chief Commissioner of Police in s.60, Victoria Police Act 2013. Non-compliance with or a departure from the Victoria Police Manual may be subject to management or disciplinary action. Employees must use the VPM Professional and ethical standards to inform the decisions they make to support compliance.

Mobility (members)

Context

This policy outlines the mobility process across Victoria Police for employees covered by the *Victoria Police (Police Officers, Protective Services Officers, Police Reservists and Police Recruits) Enterprise Agreement 2025* (hereafter referred to as the Agreement).

Mobility refers to those members who are unable to perform the inherent requirements of their gazetted position as a result of illness or injury (work or non-work related) and who may be referred to the Police Medical Officer (PMO) to assess their fitness for work.

This policy includes:

- members' and managers' responsibilities in the mobility process
- Police Medical Officer's (PMO) fitness for work assessment process including referral, appointment and final advice
- the three outcomes of a fitness for work assessments namely:
 - fit for gazetted position
 - fit with permanent limitations (accommodation process)
 - unfit for all duties (ill health retirement)

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Definitions

Current Position: the pre-injury position performed by the member (gazetted position), and not one where duties, tasks and/or work schedules are temporarily modified and assigned as part of the occupational rehabilitation (return to work) process.

Direction to Attend (DTA): where a member is directed by the Chief Commissioner's delegate to attend for medical examination by the Police Medical Officer to assess their fitness for work in accordance with clause 125 of the Agreement.

Injury Management Consultant (IMC): a suitably qualified and experienced person who supports Victoria Police compliance with its return to work obligations through consultation with relevant stakeholders and provision of support to ill/injured workers to safely and sustainably stay at work or return to work as soon as appropriate.

Mobility: refers to the process applicable to members who are unable to perform the inherent requirements of their gazetted position as a result of illness or injury (work or non-work related) and who may be referred to the Police Medical Officer (PMO) to assess their fitness for work.

Police Medical Officer (PMO): a qualified and registered medical practitioner employed by the Medical Advisory Unit to assess and determine a member's fitness for duty at Victoria Police.

Registered Medical Practitioner: a registered Doctor of Medicine.

Registered Health Practitioner: a person registered or licensed as a health practitioner under the *Health Practitioner Regulation National Law Act (Victoria) 2009* who is nominated by the member to identify, prevent or treat an illness or injury.

Also refer to the general VPM Dictionary for definitions and acronyms.

Scope and application

This policy applies to Victoria Police members as covered by the Agreement.

The following rules operate when applying this policy:

- natural justice and procedural fairness are preserved
- decisions will be made in a fair and reasonable manner
- open and regular communication between all relevant stakeholders to facilitate and maintain effective partnerships
- member's mobility does not circumvent the discipline system.

The *Occupational Health and Safety (Psychological Health) Regulations 2025 (Vic)* create specific duties for Employers to identify hazards, control risks and review and where necessary, revise risk control measures associated with psychosocial hazards. Psychosocial hazards include high job demands, poor support or fatigue. To assist Employers to comply with their obligations, WorkSafe Victoria has developed a Psychological Compliance Code.

All information will be managed in accordance with relevant privacy and confidentiality legislation.

Responsibilities and procedures

1. Responsibilities

1.1 Members

Members' responsibilities are to:

- actively and cooperatively participate in the mobility process
- comply with the DTA scheduled PMO assessments. Failure to do so may impact on a member's eligibility to receive accident make-up pay or personal leave and they will be considered to have withdrawn their services
- maintain regular contact with their manager and/or local assigned wellbeing contact
- advise their manager and/or local assigned wellbeing contact of any changes to their circumstances that may have an effect on their fitness for work.

1.2 Managers

Managers' responsibilities are to:

- so far as is reasonably practicable, provide and maintain a working environment that is safe and without risks to health (including psychological health). This obligation may prompt management action in relation to concerns about employee capacity in order to assist the Employer in maintaining a working environment that is safe and without risks to health under the *Occupational Health and Safety Act 2004 (Vic)*. This includes proactive management of risks in the workplace, as well as acting to minimise the impact of risks once they are known.
- maintain contact with, and provide support to, the member where appropriate and ensure members comply with the DTA the PMO for assessment
- ensure welfare services are engaged where appropriate for members undergoing the mobility process
- have regular conversations with the member and advise payroll, local business services and any other relevant work unit in the Human Resources Command of any changes (for example, an extended absence)
- engage with and consult the IMC in relation to members who are unable to perform the duties of their current position
- take all reasonable steps to assign meaningful work for the member that complies with their skills, experience, qualifications and medical limitations as prescribed by the PMO
- accommodate temporary or permanent limitations where possible within the division or department
- maintain accurate records of verbal and written communications.

2. Return to Work

- Victoria Police assists members to remain at or return to work when injury or illness impacts on their ability to perform the duties of their current position. This may involve the provision of temporary suitable duties.

- The member's line manager should consult the IMC for advice about any ill or injured member who is unable to perform the duties of their current position. Where appropriate, the IMC will coordinate Return to Work planning in consultation with the registered medical or health practitioner, the line manager and the member. Refer to **VPM Management and return to work of ill/injured employees**.
- Where a Return to Work is not appropriate at that time for the ill or injured member, a PMO referral may be considered (see section 3 of this policy). The member's absence should be managed in accordance with **VPM Leave** or other relevant policy.

3. PMO Referral

- Where the superintendent/VPS equivalent is concerned that an injury or illness is affecting a member's fitness for duty, the superintendent/VPS equivalent may direct a member to attend the PMO in accordance with clause 125.2 of the Agreement. A DTA may be made where:
 - the member has been on personal leave for personal illness for at least 28 days and provides a medical certificate indicating ongoing incapacity for the duties of their position
 - the member provides a medical certificate (certificate of capacity) indicating a permanent and/or ongoing incapacity to perform the duties of their position
 - the member fails to attain mandatory qualifications for the position they own because of a verified medical condition
 - the member indicates a severe or chronic medical related condition as a result of the Victoria Police mandatory physical fitness assessment process
 - on reasonable grounds, the employer has genuine concerns about the member's fitness to undertake the duties of their position.
- To initiate a DTA, management must complete the **Referral to the Police Medical Officer Form**. Management must advise the member of the reasons for their referral and provide them with all related documentation including all written material and notes of telephone calls regarding the referral. The provision of written material and notes of telephone calls extends to exchanges that occur between management and the PMO during the assessment process.
- The member may request to meet with management to be provided with the reasons for the DTA and the related documentation.
- Members directed to attend the PMO will be reimbursed reasonable costs associated with attending scheduled PMO appointments.
- Victoria Police will be responsible for costs where it is directed by the PMO that a member seek treatment, furnish additional reports, undertake testing or procedures.

4. PMO appointment

- The Medical Advisory Unit must inform the member in writing of their scheduled PMO appointment.
- Members may bring a support person to their appointment however, they are there in a support capacity only and must not advocate on the member's behalf.
- Following the appointment, the PMO may require further medical information or a specialist opinion before issuing a PMO report.

- The PMO report must be provided to the member, relevant management representative(s) and the IMC. The report may be interim or final advice.
- A member who refuses to attend a PMO appointment will be managed in accordance with clause 125.15 of the Agreement. This includes a member who does not attend or continuously delays attendance without valid reason. The member's personal leave or accident make-up pay may be ceased and they may be considered to have withdrawn their services which can ultimately lead to termination of employment.
- Members who are suspended (with or without pay) from duty are still required to attend their PMO appointment unless expressly advised by Professional Standards Command that their attendance would be in contravention of their suspension notice. If a suspended member refuses, or fails to attend their scheduled PMO appointment, they may be subject to disciplinary action as their actions constitute a breach of discipline pursuant to section 125(1)(i) of the *Victoria Police Act 2013*.
- Offsite PMO appointments may be arranged at the discretion of the PMO where requested from the member or their manager.

5. Interim Medical Advice

- Interim advice is issued when the PMO requires further examinations to assess the member's fitness for work.
- Interim reports may be issued multiple times between initial DTA and final advice dependent on the number of PMO appointments attended.
- Interim advice will detail any temporary limitations that must be considered by management in providing suitable duties.

6. Final Advice

- Where the PMO issues Final Advice they will make a final recommendation about whether the member:
 - can return to full duties of their current position
 - can return to duty, but with medical limitation or restrictions as prescribed (accommodation process)
 - cannot return to any duties at the current time and/or is likely to continue indefinitely to have no work capacity (unfit for duties at Victoria Police).

7. Review of medical advice

- Where the member's registered medical or health practitioner disagrees with the opinion of the Police Medical Officer, the member must provide written advice from their registered medical or health practitioner that states the nature and extent of the variation in the member's capacity for duty.
- A review of the Police Medical Officer's medical advice may also be requested where:
 - the member's condition has improved
 - new or additional specialist medical information has been obtained.
- To initiate the review process, the member or manager (depending on who is requesting the review) will be required to complete the relevant form **Request for Review of PMO Advice**

(Police Member initiated) Form or Request for Review of PMO Advice (Management initiated) Form.

- Upon receiving the request for a review of advice, the PMO will review the member's capacity for duty and either re-affirm the original advice or provide an amended advice. This may be the original PMO, or an alternate PMO if this is more appropriate in the circumstances.
- Where the PMO's opinion remains unchanged, the member may elect to be referred to a suitable registered medical practitioner from the agreed independent list in accordance with clause 125.13 of the Agreement. The PMO and the registered medical or health practitioner may provide medical reports to the independent specialist. The independent specialist will provide the final medical advice in accordance with the criteria set out in clause 125.8 of the Agreement.

8. Fit for gazetted position

If the PMO concludes in their Final Advice that the member can return to the full duties of their current position, the member must return to the full duties of their current position on an appropriate date. If required, consultation may occur with the IMC and/or the member's registered medical or health practitioner prior to returning to full duties.

If required, consultation may also occur with local management prior to the member's return to full duties where there are health and safety concerns with that location for the member or other employees.

9. Fit with permanent limitations (accommodation process)

- If the PMO concludes in their Final Advice that the member can return to duty, but with medical limitation or restriction as prescribed, the Business Partnering and Workplace Relations Division (BPWRD) will initiate the accommodation process.
- The accommodation process begins with an assessment by the superintendent/VPS equivalent to determine if the member's medical limitations or restrictions can be accommodated in the member's current position or another position within the division.
- Where the member's medical restrictions cannot be accommodated in their position or another position within the division, the department head will assess whether the member can be accommodated in another position in the department. If a suitable position is:
 - identified: the superintendent/VPS equivalent and assistant commissioner will complete the section 33 transfer documentation to place the member into the vacant position
 - not identified: the member will be informed in writing by the department head that they will be referred for redeployment. Refer to **VPM Redeployment (members)**.
- The superintendent/VPS equivalent and the department head must document their assessment in the Accommodation Report and return the report and supporting documentation to BPWRD.

10. Unfit for all duties (Ill health retirement)

- If the PMO concludes in their Final Advice that the member cannot return to any duties at the current time, and/or is likely to continue indefinitely to have no work capacity, BPWRD will commence the ill health retirement process. Note this will only occur once any entitlement to

accident make up pay or personal leave has been exhausted, as per clause 125.17 of the Agreement.

- The commencement of the ill health retirement process is subject to the member exhausting their entitlement to accident make-up pay as defined in clause 77 of the Agreement or for a non-work related illness or injury, their entitlement to further personal leave under clause 115.2 of the Agreement.
- Where the member has, or is about to, exhaust their entitlement to accident make-up pay or personal leave, BPWRD must inform the member in writing of the intention to recommend that they be retired from Victoria Police on the grounds of ill health. The member will have 21 days from the date of receiving the notice to make a written submission to the Director, BPWRD. The Director, BPWRD, must consider any written submission before a final decision made regarding their ill health retirement.
- If the Director, BPWRD, determines that the member is to be ill health retired, the member must be provided with at least 21 days' notice in writing of their final day of employment with Victoria Police.

11. Periodic Medical Assessments

- A member may be required to attend periodic medical assessment/s by the PMO if they were notified of this requirement by the PMO at the start of their employment. Victoria Police will be responsible for costs associated with any additional reports required by the PMO to support these assessments.

Related documents

- VPM Management and return to work of ill/injured employees
- VPM Redeployment (members)
- VPM Deployment (members)
- *Victoria Police Act 2013*
- *Victoria Police Regulations 2024*
- *Fair Work Act 2009* (Cth)
- *Workplace Injury Rehabilitation and Compensation Act 2013*
- *Disability Discrimination Act 1992*
- *Equal Employment Opportunity Act 2010* (Vic)
- *Occupational Health and Safety Act 2004* (Vic)
- *Occupational Health and Safety (Psychological Health) Regulations 2025* (Vic)
- *Health Practitioner Regulation National Law Act* (Vic) 2009
- Victoria Police (Police Officers, Protective Services Officers, Police Reservists and Police Recruits) Enterprise Agreement 2025

Further advice and information

For further advice and assistance regarding this policy, contact BPWRD by email at WRD-GENERAL-MGR.

Update history

DATE UPDATED	SUMMARY OF CHANGE	FORCE FILE NUMBER
27/09/2023	Rewrite to contemporise and reflect current process and updates from the 2019 Agreement. Redeployment and Mobility processes have been separated and are now stand-alone policies.	FF-130739
06/10/2025	Updates to incorporate changes from <i>Victoria Police Enterprise Agreement 2025</i> and to reflect recent organisational changes.	FF-272218
26/02/2026	Policy amended to remove reference to applications for Payment in Advance for Accident Make-Up Pay and Accrued but Untaken Personal Leave and inclusion of employer obligations in response to the <i>Occupational Health and Safety (Psychological Health) Regulations 2025 (Vic)</i> .	FF-272218