



Police Pension Scheme – Permanency Information Sheet.

Definition of ordinary duties/ criteria for disablement, permanent disablement and degree of disablement.

Ordinary duties

Ordinary duties of a member of the force for the purpose of assessing permanent disablement under Regulation H1 of the Police Pensions Regulations are described as the inability to perform any of the ordinary duties as below:

- managing processes and resources and using I.T.
- patrol and supervising public order
- incident management, such as traffic and traffic accident management
- dealing with crime, such as scene of crime work, interviewing, searching and investigating offences
- arrest and restraint
- dealing with procedures, such as prosecution procedures, managing case papers and giving evidence in court

Taking each of these duties in turn, inability, due to infirmity, as defined in the Police Pensions Regulations, in respect of **any** of the following key capabilities renders an officer disabled for the ordinary duties:

- the ability to sit for reasonable periods, to write, read, use the telephone and to use (or learn to use) I.T.
- the ability to run, walk reasonable distances, and stand for reasonable periods
- the ability to make decisions and report situations to others
- the ability to evaluate information and to record details
- the ability to exercise reasonable physical force in restraint and retention in custody
- the ability to understand, retain and explain facts and procedures

Disablement

Disablement means “inability, occasioned by infirmity of mind or body, to perform the ordinary duties of a member of the force...” In practice, this is taken to mean inability to perform all the ordinary duties of a member of the force. In its judgment in 2000 in the case of Stewart, the Court of Appeal held that the reference to “ordinary duties” is a reference to all the ordinary duties of the office of constable.

An officer, who because of infirmity is able to perform the relevant activity only to a very limited degree or with great difficulty, is to be regarded as disabled.

“Infirmity”, for the purposes of medical retirement, must have a recognised medical cause or be a disability as a result of injury. As such, “infirmity” means a disease, injury or medical condition, and includes a mental disorder, injury or condition.



“Permanent” is not defined in the regulations since the word arguably speaks for itself, meaning for the rest of one’s life. If, in a case where the officer is still in the early stages of his or her career, such a long-term view is difficult, the test should be that the officer is likely to remain disabled for the ordinary duties of a member of the force until at least the normal compulsory retirement age for his or her rank, i.e. age 55 or more, depending on the rank and the force concerned.

The definition of “infirmity of mind or body” set out above means that the SMP should describe the cause of a permanent disablement by reference to internationally authoritative guides, such as ICD 10 (International Classification of Diseases) and DSM 1V (Diagnostic and Statistical Manual).

For the purposes of “permanent”, it shall be assumed that the person receives normal appropriate medical treatment for his or her disablement. Regulation A12(1A) of the Police Pensions Regulations qualifies “likely to be permanent” to assume that the person receives medical treatment for his disablement. When assessing whether appropriate medical treatment can be assumed to be given in a particular case, the SMP will have to consider the following:

- the extent to which the treatment is likely to be effective in preventing permanent disablement, taking account of the officer’s condition and of any other factors, such as allergies, which could lead to complications or harmful side-effects
- the extent to which the treatment is tried and tested
- the extent to which the treatment is available to the officer in time for it to be effective, taking account of general availability unless there are special reasons for that not being relevant

The definition of appropriate medical treatment in the Police Pensions Regulations (regulation A12(1A)) expressly excludes treatment to which the officer has a reasonable objection. In a case where the SMP decides that the officer is not permanently disabled because specific appropriate treatment is available to that officer, it will be for the police authority to consider whether any objection by the officer to that treatment is reasonable or not.

The authority should ask for whatever further medical advice or information about religious practices it thinks is necessary. If the authority concludes that the objection is unreasonable, the SMP’s decision will stand. However, if the authority decides that the objection is reasonable the SMP will be asked, with the consent of the officer under regulation H3, to amend his or her report accordingly so that the officer is assessed as permanently disabled. There is a right of appeal under H5 and H6 against a decision of the PCC as to whether a refusal to accept medical treatment is reasonable.