

Certification of Medical Fitness For Correctional Officer/Youth Worker

To be completed by a Physician licensed to practice medicine in Nova Scotia.

Candidate Name:				
The above candidate has made application for employment with the Nova Scotia Department of Justice as a Correctional Officer/Youth Worker.				
This is a custodial and enforcement position dealing with charged and/or sentenced persons; and operating in an environment that is stressful, as well as physically and emotionally demanding.				
Periodically and unexpectedly the Officer may be required to use a maximum physical effort in response to a situation that may involve physical restraint of a violent person. Major factors which may affect employee health includes extensive walking, stairs climbing, tension resulting from awareness of possible offender disturbances, physical trauma or physical demands/ occurrences and the stress factors normally associated with custodial and enforcement duties.				
Due to the nature of the job, physical, mental health and factors associated with the operating environment may become more critical in this position then in most other areas of the workforce.				
As part of our assessment on the suitability of this candidate to engage in Correctional Officer/ Youth Worker duties, it is required that the following medical questionnaire be completed by a Nova Scotia licensed physician.				
A position description has been attached for your consideration in completing the medical questionnaire.				
PATIENT'S CONSENT AND AUTHORIZATION TO RELEASE INFORMATION				
I hereby consent to, and authorize, my treating physician to complete the attached medical questionnaire and provide information relevant to my ability to perform the work functions and activities of a Correctional Officer/Youth Worker as outlined.				
PATIENT'S SIGNATURE: DATE				

1.	Are	you the candidate's regular family doctor?	☐ YES	□ No
2.		you have the necessary knowledge of this candidate's medical history to equately answer this medical questionnaire?	☐ YES	□ No
can (for	dida eac	reviewed the attached position description and based on your know ite, is the candidate medically capable to meet the following position in indicate yes or no; if no, based on objective evidence, please explain. Description of the medical discrepance in the medica	requireme	ents
3.	Phy	sical Requirements		
	a.	Upper and lower body strength to restrain or search inmates of various body weights and physical fitness levels?	☐ YES	☐ No
		If no, explain:		
	b.	Ability to handcuff and physically restrain inmates? If no, explain:	☐ YES	□ No
	C.	Good vision (corrected)? If no, explain:	☐ YES	□ No
	d.	Colour blind? If yes, explain:	☐ YES	□ No
	e.	Good hearing (aided)? If no, explain:	☐ YES	□ No
	f.	Depth perception (visual acuteness and awareness)? If no, explain:	☐ YES	□ No
	g.	Ability to wear a duty belt of 5 lb weight during a 8 to 12 hour shift, on special circumstances up to 16 hours? If no, explain:	☐ YES	□ No
4.	Me	ntal Health Requirements – Previous or current mental health issues that		
	a.	Emotional stability?	☐ YES	□No
	a.	If no, explain:		

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	b.	Ability to deal with stress and trauma?	☐ YES	□ No
		If no, explain:		
	C.	Judgement?	☐ YES	□ No
		If no, explain:		
	al	Ability to cone with verbal conflict, abuse or intimidation from inmetee?	☐ YES	
	u.	Ability to cope with verbal conflict, abuse or intimidation from inmates? If no, explain:		
5.	Ор	erational Requirements:		
	a.	Prolonged sitting, e.g. security postings or escorts?	☐ YES	☐ No
		If no, explain:		
	b.	Ability to undertake shift work that includes rotating days, evenings, nights and weekends including 12-hour shifts? This would involve ability to concentrate and focus throughout a shift schedule.	☐ YES	□ No
		If no, explain:		
	C.	7-day week/24 hour operational environment?	☐ YES	☐ No
		If no, explain:		
	d.	Prolonged walking, e.g. security tours?	☐ YES	☐ No
		If no, explain:		
	e.	Ability to run up three flights of stairs?	☐ YES	☐ No
		If no, explain:		
	f.	Ability to run a distance of 500 metres in the event of an emergency response, including responding to emergency calls outdoors (e.g. recreation, surveillance)?	☐ YES	□ No
		If no, explain:		
	g.	Ability to work in an enclosed and secured environment (confined i.e. locked facility)?	☐ YES	□ No
		If no, explain:		
		-		

Is the candidate medically capable to participate in the Security Management and Self Defence modules of the training program, in which they would be required to perform physical tasks that would include the *following* (for each indicate yes or no; if no, based on objective evidence, please explain):

Exerting themselves in 3-5 minutes of constant anaerobic exercises involving continuous physic exertion and resistance that may include:				
a.	Jogging (10 min	utes)	☐ YES	□ No
	If no, explain:			
b.	Pushing/pulling		☐ YES	□ No
	If no, explain:			
C.	Push-ups		☐ YES	
	If no, explain:			
d.	Sit-ups		☐ YES	□ No
	If no, explain:			
e.	Jumping jacks		☐ YES	□ No
	If no, explain:			
f.	Squats		☐ YES	□ No
	If no, explain:			
g.	——Planks		☐ YES	□ No
	If no, explain:			
pos	ition or from lying	g on stomach position (up to 5 minute periods) while	☐ YES	□ No
If no	o, explain:			
	exe a. b. c. d. f. Kneposhar	a. Jogging (10 min If no, explain: b. Pushing/pulling If no, explain: c. Push-ups If no, explain: d. Sit-ups If no, explain: e. Jumping jacks If no, explain: g. Planks If no, explain: G. Push-ups If no, explain: Kneeling for extended position or from lying handcuffed from ber	exertion and resistance that may include: a. Jogging (10 minutes) If no, explain: b. Pushing/pulling actions If no, explain: c. Push-ups If no, explain: d. Sit-ups If no, explain: e. Jumping jacks If no, explain: f. Squats If no, explain: g. Planks If no, explain: Kneeling for extended periods of time and standing up from a kneeling position or from lying on stomach position (up to 5 minute periods) while handcuffed from behind?	exertion and resistance that may include: a. Jogging (10 minutes)

8.	Withstanding frequent application of handcuff to the wrists during training exercises? Participants typically experience soreness to the wrist area given the frequency and receptive nature of this exercise.	☐ YE	s 🗌 No
	If no, explain:		
9.	Undertaking physical control techniques (applying techniques to others and being a recipient of these same techniques) which includes physical joint holds and application of mechanical restraints?	☐ YE	s □ No
	If no, explain:		
10.	Defensive stance – squatting for prolonged period of time (up to 5 minutes)? If no, explain:	☐ YE	s 🗌 No
11.	Use of upper and lower body strength, i.e. assisting a person who has been handcuffed from behind, either sitting or kneeling, onto their feet? Adult weights are approximately 110 to 350 pounds	☐ Ye	s 🗌 No
	If no, explain:		
12.	Overall balance? – i.e. they will be expected to control to the ground a student (i.e. tossing them on the ground) and get out of a strangle hold position by placing their hands and arms over their head, spin out quickly and get out of the hold. They will also be expected to demonstrate techniques in which they would manoeuvre someone's arm behind their back and walk them backwards.	☐ Ye	s □ No
	If no, explain:		
13.	Conducting/receiving various pain compliance techniques like pressure points and join lock restrains?	☐ YE	s 🗌 No
	If no, explain:		
14.	Defence from choke techniques that involves students practicing being choked from behind and being tripped to fall?	☐ YE	s 🗌 No
	If no, explain:		

15.	behind while on stomach?	rom	☐ YES	☐ No		
	If no, explain:					
16.	Is there any additional information you could provide to help the employer with determining the suitability of this candidate for Correctional Officer / Youth Worker in an incarceration environment?					
Than	k you for your time and consideration.					
Doct	or's Name:	Date:				
	PLEASE PRINT	`	YYY/MM/DD			
Doct	or's Signature:					

PATIENT TO PLACE THE FORM IN A SEALED ENVELOPE AND SUBMIT TO THE HIRING MANAGER. THIS FORM WILL BE REVIEWED BY A MEDICAL PROFESSIONAL IN CONJUNCTION WITH THE HIRING PANEL.