

What You Need To Know: Fitness for Work

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INTRODUCTION

The assessment of fitness for work is one of the most common procedures that doctors are called upon to do. The issuing of a medical certificate excusing a patient from work is a declaration that he is temporarily unfit for work. While it is evident in many cases that the patient is really unfit for whatever job he may be in, quite often the doctor needs to know the nature of his patient's work in order properly to assess his fitness to do it.

There are therefore two aspects to the assessment of fitness for work. The first is purely medical, to determine his physical and mental condition. The second is to determine or to obtain information on the nature of the patient's work and working environment. It is only by matching these two aspects of the assessment that a proper evaluation can be made as to whether or not a person is fit for work.

Situations when assessments are needed

Assessments for fitness for work are not confined to the clinical situation when a person falls ill or is injured. More often in fact, assessments are requested by a third party outside the doctor-patient relationship. Such situations include -

- before taking up employment,
- before being transferred to another job or another location,
- before returning to work after a long absence from illness or injury,
- statutory requirement,
- medico-legal cases involving litigation.

In these situations, the doctor acts as an independent medical examiner, reporting to a third party his opinion on the examinee's fitness for work. Although the doctor is appointed by the third party to do the examination, he should nevertheless have the examinee's consent for a report to be sent to the party requesting the examination. Except for medico-legal cases and statutory medical examinations, where full clinical details are required, the doctor should not ordinarily divulge clinical information to the third party unless the examinee specifically agrees to this being done. All that the third party is interested to know is whether or not the examinee is fit for work. However if the examinee is found to have any potentially serious

medical condition, which although not presently affecting his fitness for work, it would be prudent for the doctor to disclose this with the examinee's consent.

Pre-placement medical examinations

Pre-placement examinations include pre-employment medical examinations and examinations done before a person is transferred to another job or to another location, especially before a cross-posting overseas.

In all these cases, it is essential that the requirements for the job are known. And of course, the nature of the examination and the extent of the ancillary tests to be done will need to vary with the job requirements. It is a mockery to have one standard medical examination for all jobs within a company, and even worse, to perform a pre-employment examination without knowing what job the examinee is applying for. There are pre-employment examination protocols in which the job is not even stated.

Some companies provide a job description, or even a profile of job requirements when an applicant or employee goes for fitness for work assessment.

The determination of fitness depends on whether the examinee is able to fulfill the job requirements without risk to the health and safety of himself and of others. If these conditions are satisfied, there is no good reason to declare a person unfit for work even though he may have some chronic illness that requires treatment. Guidance on fitness for work in the presence of various medical conditions can be found in *Fitness for Work - The Medical Aspects*⁽¹⁾, in which each chapter is jointly written by an occupational physician and a practising clinician in the various specialties.

With most administrative or clerical jobs, there is no need for very high standards of medical fitness. Indeed, some companies even dispense with the pre-employment medical examination in such cases, depending on a health questionnaire checked by an occupational health nurse as all the medical screening required for such low risk jobs. On the other hand, jobs that expose the employee or others to significant health and safety risks need proper evaluation of fitness. Examples of such jobs include:

- Jobs that expose the employee to hazardous physical, chemical, or biological environmental conditions, eg scaffolders, petrochemical plant workers, and health care workers.
- Jobs that entail possible hazard to work-mates or the community, eg road, rail, sea, or air transport workers, and food handlers.
- Jobs that are physically demanding or carry heavy responsibilities, eg manual workers, police, fire-fighters, and armed forces.

other things, workers to have fitness for work examinations. Examples of the physical and chemical hazards governed by the Regulations include -

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| ■ Arsenic | ■ Manganese |
| ■ Asbestos | ■ Mercury |
| ■ Benzene | ■ Noise |
| ■ Cadmium | ■ Organophosphates |
| ■ Compressed air | ■ Silica |
| ■ Cotton | ■ Tar and Pitch |
| ■ Lead | ■ Vinyl chloride monomer |

With regard to those with significant medical conditions, even though they are fit for the job applied for, some employers may be reluctant to accept them for fear of later incurring high medical expenses. That however, is an administrative decision. The doctor is required only to consider whether the examinee is fit or unfit to do the job for which he is to be engaged, while at the same time, with the applicant's consent, informing the employer of any important potentially serious medical condition that the applicant may have, together with the prognosis. While fitness for work is a medical decision and employability a management decision, companies would arrive at fairer decisions if they received proper medical advice. It would be unwise for a job applicant to refuse consent for the doctor to disclose any relevant medical condition because he may later be subject to dismissal should work capability be impaired or an accident occurred owing to the concealed condition.

Return to work examinations

When a worker has been absent from his job for a long while, either because of illness or injury, his fitness should be evaluated before he returns to his old job. This is to ensure that he has fully recovered. Perhaps he still has some residual impairment that requires a temporary adjustment to his work load or work schedule. Such adjustments should be specifically described - for example, to be excused from climbing and carrying heavy loads for the next two weeks. A general recommendation for "light duties" leaves many a supervisor wondering what light duties mean. If there is any doubt, a discussion with the supervisor will invariably resolve the matter and appropriate work accommodations found to help with the convalescence.

If there are permanent residual impairments that render the person no longer fit for the job he was doing before the illness or injury, recommendations need to be made for a transfer to another job, or in some cases even for a medical retirement.

Statutory medical examinations

Some jobs that expose workers to physical or chemical hazards that can cause occupational diseases are governed by the Factories (Medical Examinations) Regulations which require among

Statutory medical examinations can only be done by doctors who have undergone a course of training and are registered with the Ministry of Labour as Designated Factory Doctors⁽²⁾.

Pre-employment examinations are required to ensure that workers are fit and do not have medical conditions that will pre-dispose them to occupational disease. Anaemia, for instance, would render a person unfit for work involving benzene or lead. Or chronic renal disease would make him unfit for work involving cadmium, lead, or mercury.

For as long as the worker is engaged, his fitness for work is continually monitored through periodic (usually yearly) medical examinations that include history taking, physical examination and relevant ancillary tests. Results of these examinations are notified to the Department of Industrial Health, Ministry of Labour.

Medico-legal cases

Counsel for injury cases that come up for litigation often request disability assessments and opinions on fitness for work in view of permanent residual impairments. The question is whether the casualty (invariably the plaintiff) is fit to resume his old job, and if not, what other work he is fit to do. The second part of the question is open ended, and to address it requires inquiry into the victim's education, vocational training, hobbies, occupational history, and of course a thorough physical examination and relevant ancillary tests.

Knowledge of the victim's previous job content and work environment is essential, as also alternative work opportunities that fit into his residual abilities. There is the possibility also that because of the compensation element, the victim may tend to accentuate his impairments. Such assessments therefore demand greater vigilance.

Unlike fitness for work assessments for the purpose of employment, when clinical details need not be divulged to the third party, medico-legal assessments require a thorough report to be sent to counsel, detailing clinical findings and evidence to support the doctor's opinion, which may be challenged in court.

CONCLUSIONS

In determining fitness for work, it is vitally important to know the nature of the examinee's work and work environment. The presence of a

physical abnormality or impairment does not necessarily make a person unfit to work. All depends on what the person's job responsibilities are.

It is more positive to think in terms of what the person is fit to do despite his impairments, rather than to concentrate on what he is unable to do. Often, with appropriate medical advice, work can be adjusted to suit a person's residual capabilities. This is surely more productive for both the employer and the employee.

REFERENCES

1. Fitness for Work - The Medical Aspects. 2nd edition. Cox RAF, Edwards FC, and McCallum RI editors. Oxford University Press, 1995.
2. Guidelines for Designated Factory Doctors. 2nd edition. Compiled by Phoon WH, Chan M, and Ho SF. Department of Community, Occupational and Family Medicine, National University of Singapore, 1995.

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