

Guidelines for fitness-to-work examinations

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Fitness-to-work examinations require an objective assessment of the physical and mental health of employees in relation to the requirements and working conditions of specific jobs, to ensure that the workers will not be a hazard to themselves or others. Whether conducted by specialists in occupational medicine or other physicians, the proper performance of these examinations requires a clear understanding of the types of examinations and their purposes and how to serve and protect the interests of all three parties: employee, employer and physician. The circumstances in which fitness-to-work examinations are required are listed, and a method to help physicians in judging fitness to work is described. This method balances the rights and obligations of both employee and employer without compromising the physician's need to practise medicine skilfully and ethically.

Les examens d'aptitude au travail comportent l'appréciation objective, eu égard aux exigences et aux conditions de travail de chaque emploi, de la santé physique et mentale des travailleurs, afin que ceux-ci ne représentent pas des dangers pour eux-mêmes ou pour les autres. Qu'ils soient faits par un spécialiste de la médecine du travail ou par un autre médecin, ces examens exigent pour être bien conduits une bonne compréhension de leurs types, de leurs buts et de la

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façon dont ils servent à protéger à la fois les intérêts du travailleur, du patron et du médecin. L'auteur énumère les raisons qui imposent les examens d'aptitude au travail et décrit la manière dont le médecin peut juger de celle-ci. La méthode proposée concilie les droits et devoirs du travailleur et du patron sans compromettre ni l'habileté ni l'honnêteté du médecin.

Medical examinations to determine fitness to work concentrate on the relation between health and workplace and should not be confused with health surveillance tests for actual or potential exposure to toxic materials or harmful physical agents¹ or with company-sponsored periodic health examinations for the promotion and maintenance of health.^{2,3} Because of the dearth of training in occupational medicine in Canada, and despite the absence of any published guidelines, physicians who may have had no experience in relating physical and mental health to working conditions are increasingly being asked to undertake these examinations. This article is written for these practitioners. Although the other two categories of medical examinations also relate to basic issues of workers' health, they require a different approach and are beyond the scope of this report.

Fitness-to-work examinations are required in various circumstances (Table I), and they must be job-related, with judgements of fitness being based on the principle that the employees' state of health in relation to their individual jobs will not be hazardous to themselves or others. This principle is acknowledged in human rights legislation throughout Canada, a good example being that passed in Alberta.^{4,5} Some of the occupational health and safety acts passed by the provinces permit workers to refuse to work where they believe the job or the conditions of work may endanger themselves or others.⁶

Campione⁷ evaluated the pre-employment examination in 1972 and concluded that the examining physician's knowledge of the requirements of a

particular job is one of the most important aspects of such screening. This knowledge enables a physician to determine whether a prospective employee can do the job without adversely affecting his or her own physical or mental health or that of other employees. Other reports of job-related medical examinations have concerned the employment of disabled persons,⁸⁻¹⁰ the classification and type of medical examinations in the workplace,^{10,11} and the context, relevance and current status of such examinations as a preplacement requirement, in general^{12,13} and in relation to disabled Vietnam veterans.⁸

In fitness-to-work examinations the physician is asked to render an informed opinion about a person's health and functional capabilities that will affect the rights and obligations of not only the person but also the employer.¹⁴ With the increasing social awareness of employees, unions and employers, these examinations must be performed with great competence and objectivity; otherwise, the concerned parties will feel unfairly treated and will distrust the outcome of the examination. Furthermore, the physician must bear in mind the doctor-patient relationship, with all the attendant rules of behaviour dictated by professional codes of ethics and laws.¹⁵⁻¹⁸ I will describe a procedure that meets all of these needs in a fitness-to-work examination. The method is not directly applicable to the two other types of medical examinations of workers.

Use of the Job Advisement Record

Since its introduction in 1982 the Job Advice-

Table 1 — Circumstances that require fitness-to-work examinations

Preplacement
When an employee has been offered a full- or part-time job subject to passing a relevant medical examination.
Return to work
When an employee is returning to work after a serious illness or injury and that person's ability to perform the original job is not known.
When an employee has returned to work at a modified job and is still undergoing therapy, rehabilitation or both.
Continuing disability
When an employee remains away from work and must be assessed for continuing short-term or long-term disability payment or workers' compensation.
Employees' health assistance program
When health reasons are identified as the cause of failing job performance and a medical review has been suggested (job not yet at risk) or required (job at risk) by the employer.
Other circumstances
When an employee transfers to a position whose working conditions are significantly different.
When the existing working conditions have been significantly altered.
When health problems have developed that may be aggravated by existing working conditions.

ment Record (JAR) (Fig. 1) has been greatly refined through use in a large, highly diverse Canadian energy and manufacturing company and various smaller industries. The JAR procedure brings together two types of information — the working conditions of a specific job (section A) and the health standards relevant to those conditions and requirements (section B). Consideration of this information in relation to the findings on examination and investigation will enable the physician to form a clinical opinion and thus arrive at an objective, ethical judgement of fitness to work at that job (section C). Fig. 2 illustrates this process, which can be applied to the circumstances listed in Table 1.

Four copies of the form are usually distributed: to the employee's medical file, the employee, his or her supervisor and the personnel department.

EMPLOYEE'S NAME	DATE	
EMPLOYEE'S SOCIAL SECURITY	WORKING UNIT	
EMPLOYMENT NUMBER	WORKING TITLE	
PHYSICIAN'S NAME AND ADDRESS	PHYSICIAN'S TELEPHONE NUMBER	
SECTION A WORKING CONDITIONS		
SECTION B HEALTH STANDARDS (FOR MEDICAL STAFF USE ONLY)		
SECTION C FITNESS TO WORK (APPLIES TO THIS JOB ONLY IF JOB CHANGES CONTACT THE MEDICAL STAFF)		
<input type="checkbox"/> FIT	<input type="checkbox"/> UNFIT	<input type="checkbox"/> FIT SUBJECT TO WORK MODIFICATIONS
<input type="checkbox"/> TEMPORARILY	<input type="checkbox"/> PERMANENTLY	FOLLOW UP DATE
COMMENTS		
FOR MEDICAL STAFF USE ONLY		
ASSESSOR'S NAME	ADDRESS	
ASSESSOR'S PHONE	PHONE NO.	DATE OF ASSESSMENT

Fig. 1 — Job Advisement Record (JAR): form used to record requirements and working conditions of specific job, health standards and fitness-to-work judgement.

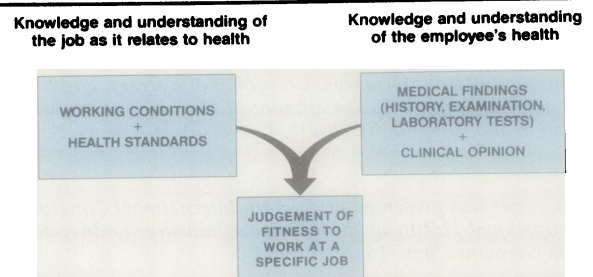


Fig. 2 — Process used to determine fitness to work.

(The distribution may vary according to the structure and requirements of each organization.) Section B, however, is completed only on the copy destined for the medical file, to ensure confidentiality.

Determining the working conditions (section A)

The information recorded in this section should accurately and concisely describe the working conditions of the job, both the environment and the way in which work is performed. A complete, detailed account of every aspect of the job, usually known as a job description, is not necessary; preferable is specific information such as hours of work, level of stress, job location, and exposure to potential physical injury, noise, heat and toxic or biologic hazards. In large organizations the information is typically obtained from the employee, the immediate supervisor, the personnel department, the occupational hygienist, the safety specialist and the medical staff. In smaller organizations, which may have few or no health and safety professionals, there is bound to be someone who is knowledgeable about the working conditions.

Determining health standards (section B)

The health standards are determined by the physician, often with the help of an occupational health nurse and sometimes with input from the occupational hygienist and safety expert. The standards are based on the physician's understanding of the body systems that may be affected by the working conditions; for example, if one of the conditions is a requirement that an employee work for up to 8 hours in isolation operating a motor vehicle, the physician will identify the central nervous system (CNS) as one body system that should be functioning within acceptable limits. The extent of the physical examination and the laboratory tests needed to characterize the system will be determined by the specific details of the working conditions. Thus, in the example given, a thorough examination of the CNS is required, and a seizure disorder requiring medication for control would be a contraindication to undertaking the job. The history, findings at physical examination, test results and clinical opinions are recorded in the usual manner on the employee's medical chart and treated confidentially. The overall clinical opinion is based on only those health standards that are relevant to the working conditions.

Judging fitness to work (section C)

The confidential clinical opinion is rendered as a fitness-to-work judgement in this section. There are six possible judgements, which depend on the

type of fitness-to-work examination being done: fit; temporarily fit; fit, subject to work modifications; temporarily fit, subject to work modifications; temporarily unfit; and permanently unfit.

Fit: Such a judgement means the employee is able to perform the job without danger to self or others, without reservations. The subcategory "temporarily" can be used for all types of medical assessments except preplacement. The subcategory "permanently" should never be used with a judgement of "fit".

Fit, subject to work modifications: A judgement in this category means the employee would be a hazard to self or others if employed in the job as described but would be considered fit to do the job if certain working conditions, such as the way the work is performed or the working environment, were modified. The modifications required must be clearly described in the comments section. If they can be accommodated, the employee is considered fit for the modified job. If, however, they cannot be reasonably accommodated, the employee is deemed temporarily or permanently unfit. "Temporarily" means that if the person's condition improves with time, the requirement for work modifications may be lifted. "Permanently" means that the employee will never be fit for the job without the modifications. In either instance a follow-up visit must be arranged in case circumstances change, and the findings at the follow-up visit must be recorded either in the comments section or on a new JAR. Any employee who is considered fit subject to work modifications must be fully informed of both the medical findings and the modifications.

Unfit: This category describes the employee who is unable to perform the job without being a hazard to self or others. This judgement and the subcategories "temporarily" and "permanently" can be used with any type of fitness-to-work examination. "Temporarily" means that the medical condition(s) may improve with time, thus allowing return to work or transfer to some other job. "Permanently" usually means that the employee will never be fit for the job and that no modification of the working conditions is reasonably possible or medically relevant; if it means that the employee is unable to do any available job, with or without work modifications, a statement to this effect should be made in the comments section.

Any employee who is considered unfit, whether temporarily or permanently, must be fully informed of the medical findings. In the case of a preplacement medical assessment no follow-up visit is required, as the hiring process has stopped. Otherwise, however, a follow-up visit must be arranged in case circumstances change.

Discussion

The physician arrives at a fitness-to-work

judgement by evaluating the information in sections A and B of the JAR against a clinical opinion based on a relevant physical examination. In addition, at least two other factors must be taken into account before the final judgement is made: the reason for the examination and the limitation of the assessment to present findings and conditions.

The reason for the examination must be absolutely clear to the physician, the employee and the employer. In general, there are three situations in which examinations are conducted. One is at the initiation of the employer, for any of the types of examinations listed in Table I. The most difficult circumstance occurs when job performance is clearly failing, allegedly for health reasons, and the employee risks being disciplined or losing the job. A fitness-to-work examination is required by the employer to find out whether a health problem exists that will cause poor job performance. Here the physician's judgement will have an immediate effect on the person's continued employment: if the person is found fit to work without reservation, the result will probably be discipline or discharge; if, on the other hand, the employee is found to have a health problem that has legitimately affected performance, discipline or discharge will not occur.

In the second situation a somewhat different approach is taken when performance is not yet failing but there is concern that it may do so. Here a medical examination may be suggested by the employer to clarify whether a correctable health problem is a factor. The employer will not force the examination upon the employee.

In the first and second situations the JAR procedure will be followed.

The third situation is one in which the employee voluntarily seeks confidential medical advice, and the employer is not officially involved; in this case the JAR procedure is followed only as a guide, and copies of the completed form are distributed to the personnel department or supervisor, or both, only if both the physician and the employee consider this action to be in the employee's best interest.

The second factor that physicians must keep in mind is that the fitness-to-work judgement must be based on the employee's current working conditions and health status. Decisions must not be influenced by speculation on what might happen in the future, but they must reflect clinical acumen in detecting signs of incipient conditions.

Resolution of cases in which the judgement is "fit, subject to work modifications" or "unfit" requires close communication between the personnel department, the supervisor and the health professional. A telephone conversation or meeting may be required to supplement the JAR. Moreover, the physician, armed with a clear knowledge of both the employee's medical status and the working conditions, must be able to provide comprehensive advice to the personnel department and supervisor without using medical terminology or

giving a diagnosis. However, the employee (and any person whom the employee may designate by signing a form for the release of medical information) must be fully informed of all the medical findings and the health standards upon which the judgement was made.

In conclusion, if the process of developing specific health standards is based on a clear understanding of actual working conditions, and if the clinical opinion is in turn based on a medical examination that is relevant to those health standards, a proper fitness-to-work judgement can be made. Such a judgement will be viewed as fair and valid not only by the employee and the employer but also by concerned observers, such as union representatives, proponents of human rights, legislators and other health professionals. Finally, the physician will be able to act ethically by protecting the patient's right to confidentiality of medical information, because only the outcome of the process will be revealed — the fitness-to-work judgement.

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