

Fitness for Employment?

Do Health Assessments do what
they say they do?

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Dilemmas facing the profession

What do we mean by “Fitness”?

Definition:

- Adaptable to purpose
- Suitable
- Qualified
- Competent
- Prepared

Changing attitudes and expectations

More is expected
from the Health Assessment

This affects

- The employer
- The employee
- The Occupational Health Profession

Who decides who is fit, and on what criteria?

A higher percentage of employees are failing pre employment or annual medicals

- Why are employees failing?
- What happens when they fail?
- What are the assessments assessing?

What is expected of the Health Assessment?

What do employers expect?

- An employee who is fit for the role and purpose of the job
- An employee who will be safe in the work place and will not cause others in the workplace to be unsafe

What is expected of the Health Assessment?

- Financial savings from reduced absenteeism.

Can we provide all of this?

What does the employee expect?

- To be found fit and able to start a new job
- To be found unfit and given advice in order to get fit and start a new job.
- To be given health advice on minor health issues that don't affect the job
- To have their privacy and right to confidentiality maintained.

What does the Occupational Health Professional expect?

- To have the correct information about the job, in order to make the decision
- Be able to carry out the appropriate assessment required for the job
- The employer to respect the privacy and right to confidentiality of the employee
- The opportunity to follow up employee health issues with appropriate action.

Dilemmas following these expectations

- The employer does not have a right to all the health information from the medical without the consent of the employee, but may request all the notes with their consent
- The Occupational Health Professional does not have a legal obligation to share health information with the employer if it does not affect his ability to do the job safely

Dilemmas following these expectations

- The ethical dilemma of Occupational Health!
- The employee may have health issues or a health event after the Health Assessment and the employer may feel that the assessment failed.
- The health professional may feel caught between the rights of the employee and the needs of the employer.

Changes in the role of Occupational Health

- Over the past 100 years there has been a massive change.
- Occupational Health started in order to protect employees from the dangers of the workplace.
- The emphasis was on Protective Equipment.
- Protection of hearing, sight and lungs.

The prevention of accidents ... and it still is ...

Changes in the role of Occupational Health

- All the above is important ... BUT... there is more!
- The emphasis is changing from protection of the employee to protection of the employer
- The employer wants more ...

WELLNESS!

The Wellness Dilemma

Does the employer have a right to expect a super fit employee?

- Normal Blood pressure
- Normal Cholesterol
- A regular exerciser
- A non smoker
- The correct BMI range

The Wellness Dilemma

- They do expect the employees to be drug free.
- They do expect them to be able to do the job.
- That is acceptable...but where do we draw the line?

The Wellness Dilemma

If obesity causes poor health ... directly or indirectly ... what do we do?

Check for

- Raised Blood pressure
- Raised cholesterol
- Poor range of movement
- Sleep apnoea
- Poor lung function
- Obesity

What happens when we say “unfit”?

Why are we failing more employees?

- Partly from stricter criteria and more rigorous assessments.
- Partly higher expectations of the employer.
- Rising level of obesity and associated high cardiac risk.

What happens when we say “unfit”?

High risk jobs, such as some driving jobs require a cardiac risk assessment based on the “Framlingham Heart Study.” (USA 1948)

This assesses the risk of a cardiac episode in the next five years.

It is frighteningly accurate!

The employees subjected to this assessment must be below 20% risk level to hold their job.

What happens when we say “unfit”?

- Costly if already employed
- Costly to recruit
- Dangerous to employee
- Causes operational chaos to the company.
- Employee feels unhappy about the outcome and may or may not reduce their risks, depending on follow up available.

What is involved in the Cardiac Risk Assessment?

- Assess Blood Pressure
- Cholesterol and Blood Sugar levels
- Smoking history
- Age
- Exercise level
- Body Mass Index
- Exercise levels
- History

Local Statistics

Out of 78,000 individuals registered with various practices there were:-

- 8 diabetic deaths.
- 39 breast cancer registrations.
- 8 cervical Cancer registrations.
- 8 suicides ... and ...
- 620 to 780 cardiac or stroke events.

The Wellness Dilemma

Can employers afford to “do wellness”?

What do we mean by wellness?

- Happiness
- Prosperity
- Good condition
- Free from disease

This sums up our aims I think!

The Wellness Dilemma

Can we afford NOT to “do wellness”?

How can we ignore the statistics?

It has been proven to save company's money through

- Less absenteeism.
- Less morbidity and mortality and associated costs to company.
- Higher morale equals better productivity.

How do we reduce the risks?

- Change attitudes of employers.
- Change attitudes of employees.
- Change attitudes of Occupational Health Professionals.
- Health promotion and wellness that is targeted, relevant, accessible and effective.
- Follow up where follow up is needed
- A robust system of health monitoring.

Does Wellness cost too much?

- The answer has to be NO.
- Not doing Wellness costs too much!
- Southern Cross Survey showed that NZ companies were spending over a billion a year on absenteeism.
- A study by Motorola showed that every \$1.00 spent on Wellness saved \$4.00.
- Healthy employees have been shown to be three times more productive (Gold 2005).

Simple measures make big differences.

Cardiac Risk Assessments gives us the information.

The Occupational Health Professional has the tools to help employees reduce it.

- Smoking cessation.
- Treatment of Blood Pressure.
- Treatment of raised Cholesterol.
- Nutritional advice...It does make a difference.

Example of progress

A recent group of 25 employees had basic annual health monitoring.

They were found to be “fit” according to the assessments requested by the company.

The nurse made a general comment in the report regarding obesity.

No further Health Promotion was requested.

Example continued

Some months later an employee had a health event causing them to be off work.

The employer felt the medical had failed to predict this event, which was obesity related.

After discussion the employer agreed that medicals for this group of employees needed to be more thorough.

Further investigations were done and 13 (>50%) had further follow up from Health Professionals.

Example continued

- When the medicals were due again the employer ordered job specific medicals, and gave better information about the job description ... and ...
- Continued to follow a programme of Health Promotion for the staff ...
- This improved moral and retention of staff, and potentially the work force will be healthier.

CONCLUSION

- Examples, observations and literature all agree that Occupational Health is more than just a safe working environment.
- The dangers are less tangible, but just as lethal.
- Health Assessments reduce the risks associated with poor health and save money, by reducing absenteeism and increasing productivity.

CONCLUSION (cont.)

- The Occupational Health Professional needs all the relevant information and opportunities to assess the employee appropriately.
- Follow up and Health Promotion needs to be part of the process and not just an “add on”.

Recommendations

What can the Occupational Health Professional do?

- Educate employers.
- Educate Employees.
- Educate other professionals.

There are too many misconceptions and misunderstandings about the value and limitations of a Health Assessment.

Recommendations (cont.)

- There must always be a balance between providing the perfectly healthy employee and the rights of the employee to make their own lifestyle choices. This is an ethical issue.
- The aim is to ensure it is an informed choice.
- In the end it's about **ADDING VALUE** to the Occupational Health Service, the companies they serve, and the employee.