POLICY

Fitness for Work

Scope (Staff): All employees
Scope (Area): CAHS (PCH, Community Health and CAMHS)

This policy does not apply to work related injuries

Contents

Aim ................................................................. 1
Background .................................................................... 2
Risk ........................................................................... 2
Definitions ..................................................................... 2
Principles ..................................................................... 2
Specific Hazards or Fit for Work Issues ......................... 3
  Ongoing or Underlying Medical Conditions .................. 3
  Temporary Short Term Illness or Injury ......................... 4
Prescribed and Non Prescribed Medication ...................... 4
  Alcohol and Prohibited Substances .............................. 4
Fatigue ....................................................................... 4
Visible Medical Treatment ............................................ 5
Independent Medical Assessments .................................. 5
Contractors, Volunteers and Non-employees ..................... 6
Roles and Responsibilities ............................................ 6
  Employee .................................................................. 6
  Manager (or supervisory positions with direct reports) .... 6
  Human Resources .................................................... 7
  Occupational Safety and Health (OSH) ......................... 7
Legislative Obligations .................................................. 7
Record Keeping .......................................................... 7
Compliance ................................................................... 8
Appendix 1: Process from Identification to Management .... 10

Aim

To support employees and managers of the Child and Adolescent Health Service (CAHS) achieve and maintain a safe working environment.
Background
This policy supports the following policies:

- WA Health Code of Conduct
- CAHS Occupational Safety and Health policy
- CAHS Employee Health Infections policy

Risk
Failure to comply with this policy may compromise the organisation and the individual’s obligations in relation to the duty of care to patients, employees and visitors under the Occupational Safety and Health Act 1984.

Definitions
Fit for Work: is when a person is able to undertake their duties, tasks and responsibilities of their role to the normal level of functioning and without any physical or mental health conditions that diminish their level of functioning below the level at which work is normally performed. For employees with identified and recognised disabilities, the level of functioning required is to the standard normally expected on a regular and ongoing basis.

Non-work related injury or illness: is an illness or injury (including physical or mental health condition) that does not arise out of the course of employment.

Principles
- CAHS is required under the Occupational Safety and Health Act 1984 and is committed to the provision of a safe working environment at all CAHS sites and workplace locations.
- CAHS employees are to be fit for work at all times in the workplace. Upon presentation for work and at all times in the workplace, an employee is to ensure they are fit to perform all tasks required of them to the standard specified.
  - For employees with identified and recognised disabilities, this means to the standard normally expected on a regular and ongoing basis.
- CAHS managers will ensure any non-work related injuries or illnesses have been identified and assessed to ensure controls and management processes are in place to adequately eliminate or reduce any risks to the safety, health and wellbeing of the employee, their colleagues and patients and visitors.
- Managers should consult with CAHS Human Resources (HR) when considering implementing control measures for employees either deemed not fit for work or where a reasonable belief is formed an employee is not fit for work.
- Assessment and Control measures may include, but are not limited to, the following:
  - seek further information on the medical status of the employee
  - This may include requesting medical information be provided by the employee.
  - seek an independent medical assessment of the employee
Fitness for Work

- a requirement to cease duties and leave the premises

- First aid and emergency medical attention will be provided immediately to any employee in need of medical attention.
  - Please refer to the CAHS First Aid policy.

- Managers will liaise with HR on issues related to pay and entitlements where:
  - an employee has been required to leave the premises
  - if medical information or an independent medical assessment is being obtained for an employee

- CAHS managers will ensure they have the delegated authority for any decisions or actions taken in compliance with the CAHS Authorisation Schedule.

Specific Hazards or Fit for Work Issues

- Employees are responsible to ensure that their ability to safely and professionally perform their roles is not impacted by:
  - ongoing or underlying medical conditions
  - temporary short term illnesses or injuries
  - prescribed and Non prescribed medication
  - alcohol and / or prohibited substances
  - fatigue

Ongoing or Underlying Medical Conditions

- All employees must undertake a pre-employment health assessment (PEHA) in accordance with the criteria listed within the CAHS Pre-Employment Health Assessment (PEHA) policy.

- Employees are required to disclose any medical conditions impacting work performance to their line manager either prior to commencing employment or during their contract of employment for new conditions.

- When an employee is unable to fulfil a requirement of their role due to a medical condition, the employee is required to provide evidence to the employer’s satisfaction.

- The manager may direct an employee to attend a medical assessment to ascertain an employee’s ability to fulfil a requirement of the role.

- The manager must review medical information provided by an employee, and apply a risk assessment process to determine the appropriate control management strategy.

- If an employee is unable to carry out their contractual obligations based on an existing or new medical condition that may be long term or permanent, managers should liaise with HR as soon as possible.
**Temporary Short Term Illness or Injury**

- An employee with a temporary short term illness or injury that would negatively impact upon the safety, health and wellbeing of either themselves or other persons is to advise their line manager immediately.

- Employees who do not attend the workplace due to a temporary short term illness or injury, or are unable to fulfil a requirement of their role due to illness and injury, must produce medical evidence consistent with the terms of the applicable industrial award and / or agreement.
  - Please refer to the CAHS [Employee Health Infections and Health Screening and Immunisations](#) policy in relation to specific infection control issues.

**Prescribed and Non Prescribed Medication**

- Prescribed and non-prescribed medications **must** only be used in accordance with medical and manufacturer’s instructions.

- If an employee’s performance or functioning is considered diminished due to the taking of prescribed or non-prescribed medication, using a risk management approach, the manager is required to assess, control and manage the risk to the safety and health of people within the workplace.

- Control measures should be implemented immediately and can include: restrictions on tasks or duties, direction to leave the workplace, or request for further medical assessment.
  - For employees who need to self-administer medications whilst in the workplace please read the [Visible Medical Treatment](#) section within this document.

**Alcohol and Prohibited Substances**

- If there is reasonable suspicion an employee’s performance or function is diminished due to the influence of alcohol or prohibited substances, using a risk management approach, the manager is required to assess, control and manage the risk to the safety and health of people within the workplace.

- Control measures should be implemented immediately and, as a safety risk measure, can include immediate removal from the workplace.
  - Suspected breaches of discipline cannot be dealt with under this policy and must be dealt with in accordance with the WA Health [Discipline Policy with Explanatory Notes and Template Letters](#).

**Fatigue**

- Managers must consider the effects of fatigue on employees whenever rostering, allocating overtime or on call duties.

- Employees have a responsibility to avoid behaviours and practices that may contribute to the development of fatigue and they have responsibility to ensure they are fit for work upon presentation and during work.

- It is the manager’s responsibility to manage the fatigue levels of employees within their area.
Fitness for Work

- Employees exhibiting signs of fatigue at the beginning of their shift should be assessed by the manager and appropriate action instigated, for example use of personal leave for the shift.

- Where an employee is sent home, the manager should arrange for safe travel home.
  - Where appropriate, taxi vouchers should be made available for employees if there is a risk to their safety by driving home and no other means are available.

- It is the employee’s responsibility to declare engagement in additional employment by completing a D18 Request to Engage in Additional Employment form.
  - Refer to the CAHS Fatigue Management policy.

Visible Medical Treatment

- CAHS acknowledges that employees may be required to administer prescribed medications or attend to their own medical treatment in relation to either an ongoing or short term injury or illness.

- Visible Medical Treatment may include, but is not limited to:
  - blood testing or injections
  - consuming medications
  - minor dressing changes

- Employees who bring medication into the workplace:
  - must only bring sufficient medications into the workplace to fulfil their short term needs
  - are responsible for their safe storage

- Self-administration of treatments that involve blood testing or giving medication by injection must not occur in open clinical areas or public spaces. Employees must utilise “staff only” areas to undertake their treatment.

- Sharps such as needles used for injections or lancets used for blood sugar testing must be disposed into a sharps container.
  - Refer to the CAHS Sharps Management policy.

- Any equipment that may present a biological hazard needs to be disposed of according to established guidelines.
  - Refer to the CAHS Waste Management policy.

- Employees will comply with the principles of hand hygiene and environmental cleaning (where relevant) before, during and after procedures.
  - Please refer to the CAHS Hand Hygiene and Environmental Cleaning policies.

Independent Medical Assessments

- CAHS may decide an independent medical assessment is necessary to determine if an employee is fit for work. Any requests for medical assessments will be in accordance with the applicable industrial agreements.
• A decision to proceed with a medical assessment must be undertaken by the level of management as outlined in the Authorisations Schedule or as specified in an industrial agreement, and the process must be facilitated by CAHS HR.

• A recommended Occupational Physician or Specialist service can be utilised by managers to assist in fitness for work determination for complex cases.
  o Managers must liaise with CAHS HR to initiate this process.

Contractors, Volunteers and Non-employees

• All CAHS managers will identify and remove any contractor, volunteer and non-employee, undertaking work or work-related duties within their department from site if there is reasonable suspicion that they are not in a fit and proper condition to perform their duties.

• CAHS will notify the appropriate employing authority or organisation responsible, and reference will be made to the appropriate policy governing these groups.

Roles and Responsibilities

Employee

• The employee is responsible for the following actions:
  o ensure they are fit for work
    - This includes when presenting to work or carrying out work-related activities, ensuring their functioning is not diminished in a manner which will potentially impact upon the safety, health or wellbeing of themselves or other persons.
  o as soon as possible, inform their manager if there has been a change in their capacity or fitness, either on a temporary or permanent basis
  o as soon as possible, inform their manager if they are taking any medication that may affect their fitness for work
  o encourage colleagues to disclose fitness for work issues

Manager (or supervisory positions with direct reports)

• The Manager is responsible for the following:
  o promote workplace health, safety and wellbeing
  o identify, address and minimise workplace hazards and other factors that may contribute to compromising an employee’s fitness for work
  o ensure compliance with duty of care obligations to patients, employees and visitors, under the Occupational Safety and Health Act 1984
  o identify, control and manage an employee’s fitness for work in consultation with HR in accordance with this Policy and Appendix 1: Process from Identification to Management, undertaking early intervention where applicable
Fitness for Work

- ensure that appropriate support is offered and made available to employees to manage their fitness for work, including access to the Employee Assistance Program (EAP)
  - Refer to the CAHS Employee Assistance Program policy.

**Human Resources**

- The Human Resources team are responsible for:
  - providing advice to managers and employees on managing fitness for work issues and options available to employees
  - corresponding with General Practitioners and arrange fitness for work assessments as required

**Occupational Safety and Health (OSH)**

- The OSH team are responsible for providing the following:
  - subject matter expertise in reviewing medical information as it relates to occupational setting
  - Job Safety Analysis (JSA) or duties register if necessary
  - support managers in drafting a Temporary Work Plan for non-work related injury / fitness for work cases
  - support for first 4-6 weeks of an employee returning to work if absent including conducting a work area assessment during the first week
  - Ongoing case management remains within the manager remit.

**Legislative Obligations**

- There are legislative obligations in relation to this policy and non-compliance may result in penalties being applied.
  - Refer to the Occupational Safety and Health Act 1984, Part III, Division 2, Sections 19, 20 and 22.
  - For employees registered with AHPRA, under the Health Practitioner Regulation National Law, the Professional Board or Body may require the Practitioner to undergo a health assessment if it reasonably believes that the practitioner has, or may have, an impairment that does or may adversely affect their capacity to practice.
  - Refer to AHPRA Health assessments.
  - Penalties may apply if it is found that the practitioner has obtained their registration by giving false or misleading information, regarding their capacity to carry out their duties.

**Record Keeping**

- Records produced as a result of this policy will be maintained in accordance with:
  - CAHS Record Keeping Plan 2015027
General Disposal Authority for State Government Information (Section 67.1 Occupational Safety and Health)

Compliance

- Each CAHS Executive Director is responsible for monitoring the requirements to be met within this policy.
- Breach of this policy may result in disciplinary action.
  - Refer to the WA Health Notifying Misconduct Policy and Discipline Policy with Explanatory Notes and Template Letters.

Related CAHS internal policies, procedures and guidelines

- Occupational Safety and Health (CAHS Policy Manual)
- Employee Health Infections (CAHS Policy Manual)
- Health Screening and Immunisations (CAHS Infection Prevention and Control Manual)
- First Aid (CAHS Policy Manual)
- Sharps Management (CAHS Infection Prevention and Control Manual)
- Hand Hygiene (CAHS Infection Prevention and Control Manual)
- Environmental Cleaning (CAHS Infection Prevention and Control Manual)
- Waste Management (CAHS Policy Manual)
- Employee Assistance Program (CAHS Policy Manual)
- Fatigue Management (CAHS Policy Manual)
- Pre-Employment Health Assessment (PEHA) (CAHS Policy Manual)
- Incident and Hazard Reporting (CAHS Policy Manual)
- Transport - Staff and Non Passenger Journeys (PCH Operational Manual)
- Fatigue Management (CAHS Policy Manual)
- CAHS Record Keeping Plan 2015027

References and external legislation

1. Code of Conduct (WA Health Mandatory Policy MP0031/16)

2. Health Practitioner Regulation National Law (WA) Act 2010 (Western Australian Legislation)

General Disposal Authority for State Government Information (State Records Office of Western Australia)
## Fitness for Work

**Occupational Safety and Health Act 1984** (Western Australian Legislation)

**Notifying Misconduct Policy** (WA Health Mandatory Policy MP0029/16)

**Discipline Policy with Explanatory Notes and Template Letters** (WA Health Mandatory Policy MP0040/16)

### Useful resources (including related forms)

- **CAHS Authorisations Schedules** (CAHS Corporate Services HealthPoint Page)
- **CAHS Fitness for Work Hub** (CAHS Human Resources HealthPoint Page)
- **Managing a Non-Work Related Injury or Fitness for Work Condition** (CAHS Human Resources HealthPoint Page)
- **Health assessments** (Australian Health Practitioner Regulation Agency – AHPRA)
- **D18 Request to Engage in Additional Employment** (HSS Forms)

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Appendix 1: Process from Identification to Management

**Identify**
- A manager who has reasonable suspicion that their employee may be impaired on presentation to or during a shift needs to identify the issue and take action. A fitness for work concern may also include an employee returning to work after an extended period (3 months); frequent personal leave; physical/mental struggles in undertaking duties; reports ongoing physical restrictions from doctor.
- Employees are to advise their manager if they have a medical condition or are taking any medication that may affect their fitness for work.
- Employees who have reasonable suspicion that another employee may be impaired should report this to their manager immediately.

**Assess**
- The manager must assess the situation and take action immediately to prevent injury to the employee, other employees or patients/visitors. They should also advise their own manager.
- Refer to the CAHS First Aid Policy immediately if medical attention is required.

**Control**
- Refer to the CAHS Managing a Non-Work Related Injury/Fitness Condition - A Manager's Guide.
- The manager should consider appropriate control measures which could include: exclusion from the workplace; limiting the employee’s tasks; or referral for medical review. Advice can be sought from CAHS HR.
- Where an employee is sent home, the manager should arrange for safe travel home. Where appropriate, taxi vouchers should be made available for employees if there is a risk to their safety by driving home.

**Manage**
- The manager should liaise with CAHS HR to determine the best way to manage the employee’s fitness for work.
- Management must review medical information provided by an employee or treating physician and apply the risk management process to determine management strategy.
- Refer to the Notifying Misconduct or Discipline Policy if applicable.