

Engaging with Relevant Workplace Parties

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Faculty/Presenter Disclosure

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 - None

Mitigating Potential Bias

- The information presented in this program is based on recent information that is explicitly “evidence-based”.
- This Program and its material is peer reviewed and all the recommendations involving clinical medicine are based on evidence that is accepted within the profession; and all scientific research referred to, reported, or used in this CME/CPD activity in support or justification of patient care recommendations conforms to the generally accepted standards

Learning Objectives



Occupational &
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By the end of this session, participants will be able to:

1. Describe WHY physicians should engage with workplace parties
2. Explain WHEN physicians should engage with workplace parties
3. Describe HOW physicians might engage with workplace parties

Agenda

- Roles in Occ Med
- Ethics and The Law – WHO and HOW
- Privacy – HOW
- Getting it right - CONSENT and COMMUNICATION
- Stakeholders - WHO
- Disability or Occupational Injury Management --- WHY



Occupational &
Environmental Medicine

Roles Served by Occupational Physicians

- Workplace Health Risk Assessment, Risk Management, Risk Communication
- Disability Management
- Occupational Disease Prevention and Surveillance
- Fitness to Work Evaluation
- Health Promotion
- First Aid and Crisis Management
- Policy Development

Ethics

- Consider first the well-being of the patient
- Honour your profession and its traditions
- Recognize your limitations and the special skills of others
- Respect the Confidentiality of Medical Information
- Teach and be Taught

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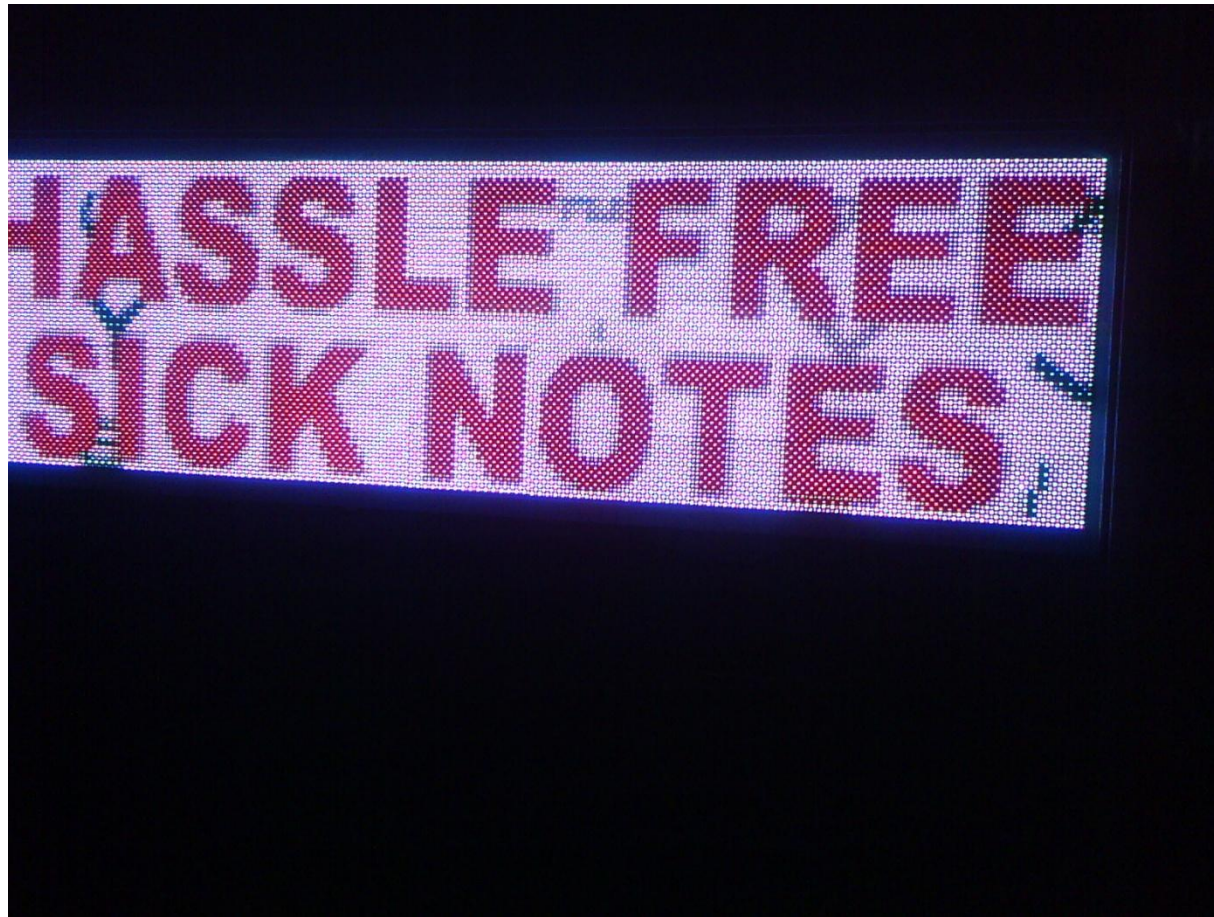


Occupational &
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Ethics for Occupational Physicians

- Fair/Objective/Independent
 - Carefully weigh all opinions
- You are not the Patient Advocate
 - You are a Health Advocate
- Occupational Medicine
 - Should not see your own patient (unless no option) for a work evaluation

Ethics



Privacy Legislation Ontario

- Informed Consent
- PHIPA – Ontario (<https://www.ontario.ca/laws/statute/04p03>)
- PIPEDA (<https://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/>)
- CPSO Policy
 - Mandatory Reporting Circumstances

Informed Consent

- For consent to be considered valid, it must be an "informed" consent. The patient must have been given an adequate explanation about the nature of the disclosure as well as the significant risks involved and alternatives available. The information must be such as will allow the patient to reach an informed decision. In situations where the patient is not mentally capable, the discussion must take place with the substitute decision maker.
- The obligation to obtain informed consent must always rest with the physician.

CPSO Policy

General

- Physicians must be aware of and comply with the **legal, professional and ethical reporting obligations** relevant to their practice.
- In order to support a trusting physician-patient relationship, physicians are advised to **communicate with patients about their reporting duties**, where circumstances make it appropriate to do so.
- Physicians are advised to consult with the Canadian Medical Protective Association (CMPA), the Office of the Information and Privacy Commissioner of Ontario (IPC) and/or the College's Physician and Public Advisory Service (PPAS) where they have questions about any of their reporting obligations.

CPSO Policy

- Despite the interpersonal conflict that may arise from trying to provide objective advice that may or may not support what your patients need, it is important to consider relevant ethical frameworks in place.
- CPSO policy on Third Party Reports
- Importance of comprehensiveness, accuracy and objectivity in completing such reports.

CPSO Policy

Mandatory Reporting

- Impaired Driving Ability – Highway Traffic Act
- Facility Operators: Duty to Report, Incapacity, Incompetence and Sexual Abuse
- Communicable Diseases and Diseases of Public Health Significance
- Pilots or Air Traffic Controllers
- Maritime Safety
- Railway Safety
- Occupational Health and Safety
 - Critical incidents and injuries
 - Occupational illnesses under the Designated Substance Regs

Box 7-1. CanMEDS-FM key competencies in the Communicator and Health Advocate role.

Communicator

- Develop rapport, trust and ethical therapeutic relationships with patients and families.
- Accurately elicit and synthesize information from, and perspectives of, patients and families, colleagues and other professionals.
- Accurately convey needed information and explanations to patients and families, colleagues and other professionals.
- Develop a common understanding on issues, problems and plans with patients and families, colleagues and other professionals to develop, provide and follow-up on a shared plan of care.
- Convey effective oral and written information.

Health Advocate

- Respond to individual patient health needs and issues as part of patient care.
- Respond to the health needs of the communities they serve.
- Identify the determinants of health within their communities.
- Promote the health of individual patients, communities and populations.

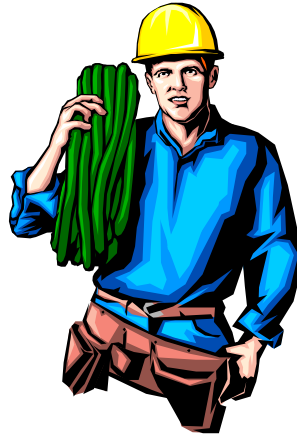
Disability Management

An active process of minimizing the impact of an impairment resulting from injury, illness, or disease on the individual's capacity to participate competitively in the working environment

- It is Proactive
- It is a Process that enables Labour and Management to assume joint responsibility as decision makers
- It promotes Prevention, Active Rehabilitation, and Safe and Timely return to work

(Adapted from Shrey and Lacerte- Principles and Practices of Disability Management in Industry – March 1, 1995)

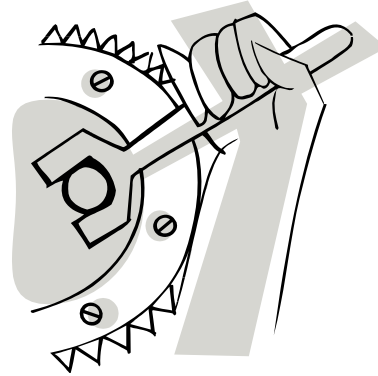
Risk Assessment: Person



Considerations:

- health (past, present)
- social status
- understanding of risks

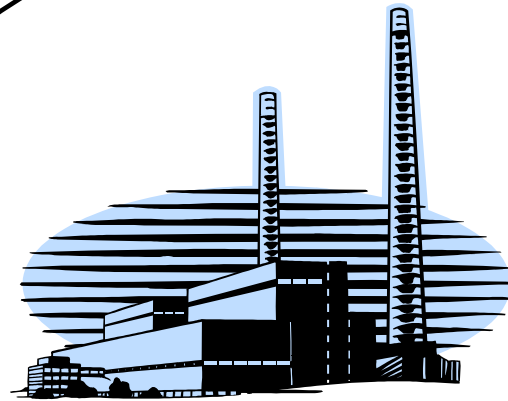
Risk Assessment: Task



Considerations:

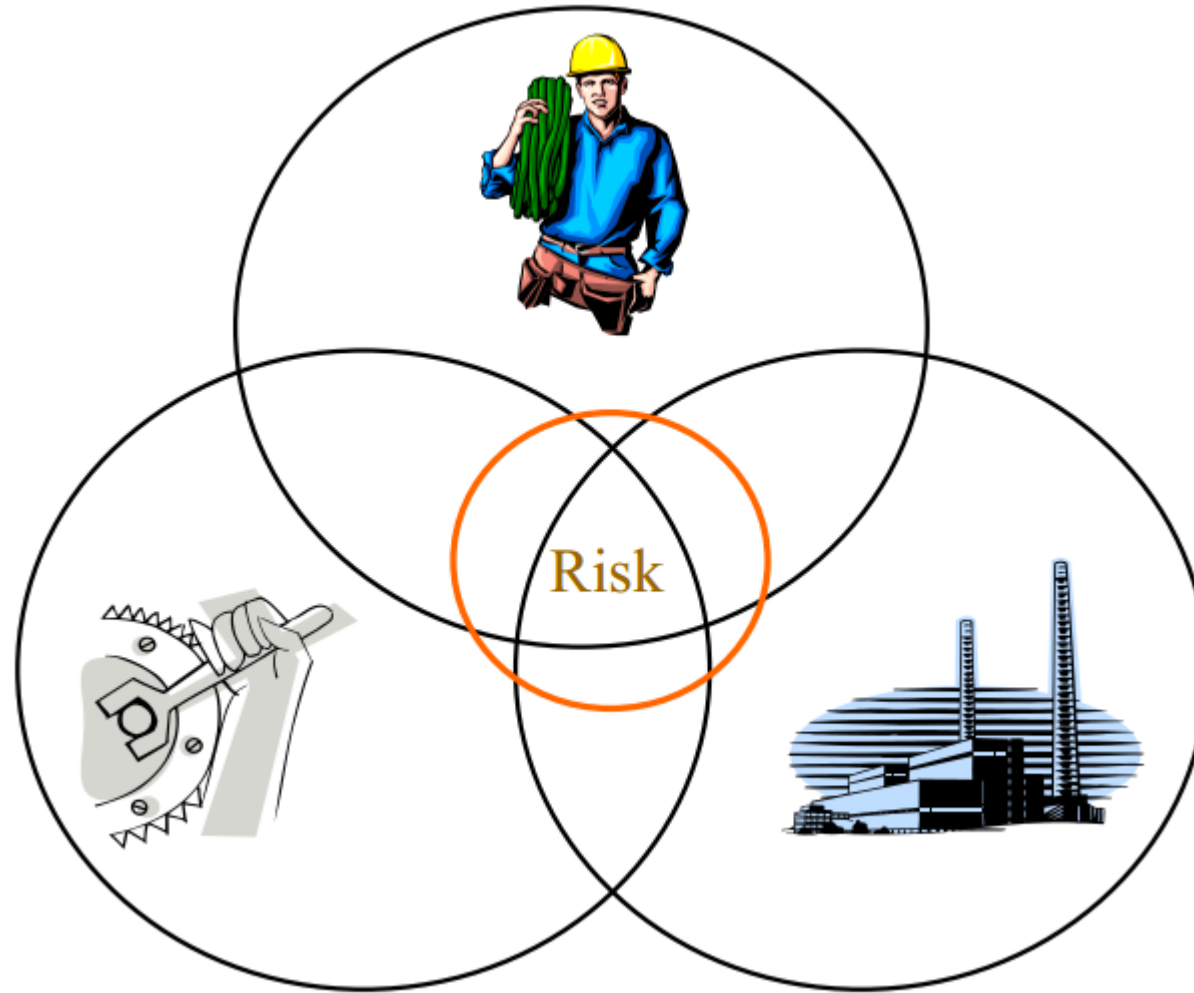
- equipment
- repetitiveness
- materials

Risk Assessment: Environment



Considerations:
- physical
- organizational

Risk Assessment



How Does a Family Doctor Assess Risk?



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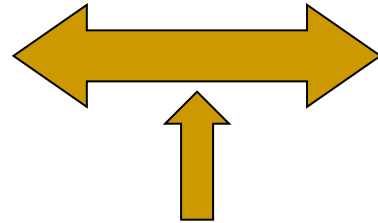


Who are the Key Stakeholders?

- You are the family physician reviewing a factory housekeeping employee who claims to have acquired occupational asthma due to exposure to chlorine bleach cleaning agents.
- In the next 60 seconds, list all the possible stakeholders you might want to communicate with or receive communications from as you work your way through the claim.

Disability Management - Who?

Manager



Employee

Human Resources

Health and Safety Professional

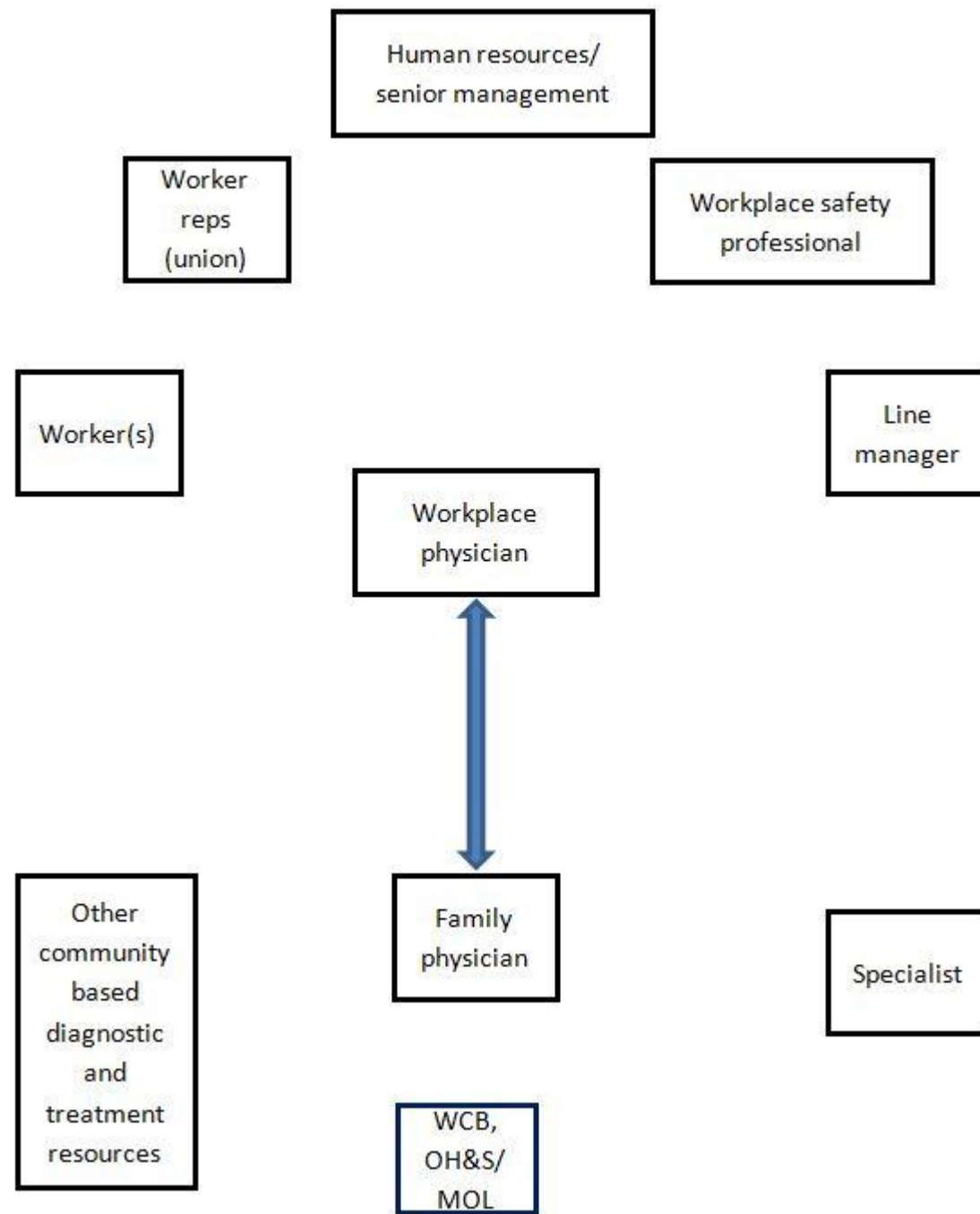
Occupational Hygiene

WSIB or Insurer Case Manager

Union

Legal

Personal HCP/Specialist



Disability Management - How?

Guiding principles are that:

- Team efforts are focused on a safe, timely and sustainable return to work
- The disability case management model is behavioural, not primarily medically-based
- The Disability Case Management Specialist, Occupational Health Nurse and Corporate Advisor are health advocates not employee or employer advocates
- Successful outcomes are predicated on early intervention to establish the proper course of action, and,
- Supervisors/managers and employees are key team members whose relationship is critical to successful interventions

OCCUPATIONAL HEALTH, SAFETY & WELLNESS
ATTENDING PRACTITIONER REPORT

EMPLOYEE INFORMATION AND CONSENT (to be completed in full by employee ONLY)

NAME (Last, First): _____ CONTACT NUMBER: _____ STATUS: ☐ FT ☐ PT ☐ TEMP
MANAGER: _____ DEPARTMENT: _____
OCCUPATION: _____ FIRST DAY ABSENT: _____

I hereby authorize the practitioner, by completing and signing this form, to fill out and release all sections of this form to my employer's Occupational Health, Safety & Wellness Department (OHSW) for the purposes of validating and managing my medical leave of absence, as it relates to my fitness for work. I understand that OHSW will keep my medical information confidential and it will be used to facilitate my return to work. I consent to allow OHSW to release the status of my absence, the duration, and my ability to return to work (including any restrictions) to only those individuals necessary to facilitate my medical leave, return to work, and/or accommodation.

By signing below, I acknowledge my understanding of the information above and I agree to provide my consent accordingly.

EMPLOYEE SIGNATURE: _____ DATE: _____

PRACTITIONER'S REPORT (to be completed in full by MD, NP or Physiotherapist ONLY)

Please complete this form to assist us in determining your patient's eligibility for sick leave due to total disability. Please note that if your patient is not able to perform the regular duties of their job, we may be able to provide suitable modified work. Please complete all applicable sections and return this form promptly to ensure continuation of wages and/or benefits for your patient.

If this is a workplace injury or illness, STOP! Do not use this form. Complete a WSIB Form 8.

1. Nature of illness/injury (no diagnosis required), e.g. neurological, orthopedic, respiratory, mental health: _____

☐ Communicable disease potentially reportable to Public Health ☐ Surgical Matter: OHIP Covered ☐ YES ☐ NO
☐ Hospitalized or fully bedridden from _____ to _____ ☐ Recurrent condition

2. First date of injury/illness: _____ Date of first visit for current health issue: _____

3. Is the patient participating in an active treatment plan? ☐ YES ☐ NO

4. If the patient is participating in an active treatment plan (e.g. medication/physiotherapy/counseling, etc.) please provide details

Please note: if your patient is a Registered Nurse, hired by PRHC prior to January 1, 2006, you do not need to complete question #4.

5. Is the patient presently under the care of a physician/other specialist? ☐ YES ☐ NO If no, has a referral occurred? ☐ YES ☐ NO ☐ N/A

6. Unable to perform job duties as of this date: _____ Expected return to regular duties: _____

FUNCTIONAL ABILITIES (to be completed by qualified MD, NP, or Physiotherapist)

Was a formal assessment, testing, or measurement done to determine functional abilities? ☐ YES ☐ NOPHYSICAL ABILITIES Physical limitations ☐ N/A

Lifting floor to waist	<input type="checkbox"/> 5-10kg	<input type="checkbox"/> up to 5kg	<input type="checkbox"/> other: _____
Lifting waist to shoulder	<input type="checkbox"/> 5-10kg	<input type="checkbox"/> up to 5kg	<input type="checkbox"/> other: _____
Lifting at or above shoulder	<input type="checkbox"/> 5-10kg	<input type="checkbox"/> up to 5kg	<input type="checkbox"/> other: _____
Reaching	<input type="checkbox"/> no over shoulder	<input type="checkbox"/> no overhead	<input type="checkbox"/> other: _____
Sitting/standing/walking	<input type="checkbox"/> up to 60 min.	<input type="checkbox"/> up to 30 min.	<input type="checkbox"/> other: _____
Pushing/pulling	<input type="checkbox"/> occasional		<input type="checkbox"/> other: _____
Bending/crouching/kneeling/climbing	<input type="checkbox"/> occasional		<input type="checkbox"/> other: _____
Hand function	<input type="checkbox"/> avoid gripping/pinching		<input type="checkbox"/> other: _____

COGNITIVE ABILITIES Cognitive limitations ☐ N/A☐ Concentration ☐ attention ☐ memory ☐ communication
☐ Judgment (explain) _____
☐ Ability to use motorized vehicle, machinery and/or equipment
☐ Medication side effects: _____
☐ Other: _____

COMMENTS: _____

Practitioner's Stamp

Practitioner's Full Name: _____

Professional Designation/Specialty: _____

Signature: _____ Date: _____

Attending Practitioner Report (APR)

Key Considerations:

- Is the consent block signed?
- What are you entitled to release?
- Answer all questions accurately, objectively, comprehensively and LEGIBLY
- Avoid editorial comments “you have no right to this information”
- Review the report with the patient

Disability Management - Supplementary?

Re: Your Patient

To: Dr. Doctor,

Thank you for your support towards Ms. XYZ's well-being and safety at work. I am the disability case specialist assisting Ms. XYZ's occupational health writing from CAMH's Health, Safety, and Wellness department. Ms. XYZ is currently a case worker on the Child and Youth unit at CAMH.

Attached please find Ms. XYZ's medical release consent.

To identify how CAMH may aid Ms. XYZ, we need objective medical evidence that would support Ms. XYZ's request. CAMH is sincerely committed to the health and wellness of its employees and makes every reasonable effort to offer safe and meaningful work to those who require medical accommodations.

Disability Management - How?

Please assist and support by answering the following questions:

1. Ms. XYZ submitted the March 25th, 2021 medical documentation noting she may not work night shifts due to mood disturbance.
 - a) Is she medically able to work non-rotating shifts of night shifts only? Please provide specific medical rationale in why or why not.
 - b) Is she medically able to work some night shifts (i.e. 80% day shifts, 20% night shifts; 3-4 day breaks after night shifts)? Please provide specific medical rationale in why or why not.
 - c) Is there anything that the workplace may do to help mitigate Ms. XYZ's symptoms so that she may perform her full scope of shift assignments? Please provide specific medical rationale.
2. Are there other barriers that the workplace may help mitigate to assist Ms. XYZ in working night shifts?
3. For what duration will Ms. XYZ require this accommodation? Please provide specific medical rationale (i.e. 6 months due to length of treatment plan).
4. Has Ms. XYZ been adhering to an appropriate treatment plan to manage her symptoms regarding this workplace accommodation?

Disability Management - How?

- Written Communications
 - APR
 - Supplementary Letter
 - Request for reports
- Verbal Communications
 - Outgoing
 - Incoming – "Doc-to-Doc" call

WSIB Reportability

Forms

- 6?
- 7?
- 8?



Occupational &
Environmental Medicine

WSIB Reportability

Forms

- 6 - Employee
- 7 - Employer
- 8 - HCP

Do you have to report a workplace injury to the Board?

WSIB Reportability

Reports re: Health care

37 (1) Every health care practitioner who provides health care to a worker claiming benefits under the insurance plan or who is consulted with respect to his or her health care shall promptly give the Board such information relating to the worker **as the Board may require**.

WSIB Reportability

A physician may also need to act as a 'guide' or advocate for his or her patient on occasions:

- A report from a treating physician, clearly stating information that is needed to decide a claim, can greatly speed up the processing of a claim, while using the wrong word or phrase on a form can produce delay.
- Understanding how certain phrases and terms are used in this setting, and that they may have specific implications, can help with this.
- Delays in filing compensation claims can also occur in cases where patients may minimize their injuries and avoid submitting a compensation claim for reasons such as a fear of losing their jobs or being treated poorly by their employers.
- Some patients may also present with a more longstanding medical problem and only mention that their health problem is work-related several visits later

WSIB Reportability

The WSIB has several stages of appeal if one of the parties (worker, employer, or interested third party) disagrees with initial adjudication:

1. File review by the case manager may be requested in writing.
2. An appeal can be made to the Appeals Services Division, where an Appeals Resolution Officer will conduct a written or oral hearing and render a decision.
3. Workplace Safety and Insurance Appeals Tribunal (WSIAT), an independent quasi-judicial tribunal.

Snarky or Inappropriate Notes

- The “Bossectomy” note
- The “I’m going to tell you exactly where to place this person” note
- The “I know so much more than you” do
- The “ I’m a genius and you’re an idiot” note
- The “ Totally opposite to the Science” note

The Bottom Line

- Understand your legal obligations
- Advocate for your patient's health
- Understand the key stakeholders
- Communicate professionally, accurately, timely, objectively, legibly
- Stay in your lane
 - Stick to fitness to do the job - Restrictions or Limitations
 - Do not opine on accommodation unless asked

Questions?

