

Fit for Task – Safety Critical Worker Medicals

Under current Health and Safety legislation, employers have a duty of care to safeguard the health and safety of their employees. This is particularly relevant to those carrying out safety-critical tasks. It is important that safety-critical workers are not suffering from medical conditions or undergoing any medical treatment which is likely to cause sudden loss of consciousness or incapacity, impairment of awareness, concentration, balance or coordination or significant limitation of mobility.

The term 'safety critical work' is defined as:

“Where the ill health of an individual may compromise their ability to undertake a task defined as safety critical, thereby posing a significant risk to the health and safety of others.”
(CBH, 2015).

A medical, such as a fitness-for-task health check, as identified in the National Industry Standards for Occupational Health and Constructing Better Health, will go a long way towards ensuring these legal requirements are met.

Workers Health Ltd is a **SEQOHS** and **Constructing Better Health (CBH)** accredited occupational health provider which specialises in providing quality services to the construction industry. We strictly adhere to the HSE, **Highways England** and CBH industry/medical standards when conducting Fit-for-task-safety critical worker medicals.

In the construction industry the following roles have been defined as 'safety critical':

- Asbestos licensed worker
- LGV/HGV Driver
- Plant Operators
- Scaffolder/Rigger
- Slinger/Signaller/Banksman/Traffic Marshall
- Steel Erector Structural/Fabricator
- Steeplejack
- Tunnel Boring Gangs
- Roadside (high speed)
- Tunnelling
- Confined Space workers
- Working at Height where control measures not practicable

(this is not an exhaustive list, always review the job risk assessments)

Fit-for-Task – SCW Medicals consist of the following tests

- A baseline SCW health questionnaire to establish any current or previous medical/psychological health history
- Blood pressure measurement

- Height, Weight & Body Mass
- Audiometry – Hearing test, Industrial standard Audiometry
- Spirometry – Full Lung function test
- Visual Acuity, colour vision and peripheral vision screen
- Urinalysis for diabetes or other health issues
- Muscular skeletal assessment
- Mental health assessment

(CBH and **Highways** England Raising the Bar 12 standards)

RECOMMENDATION FOR APPLICABILITY OF STANDARDS FOR SAFETY CRITICAL WORK TO CONSTRUCTION WORKERS

The requirement of fitness for Safety Critical Work should only be applied where it is necessary and not used as a form of medical selection and potential disability discrimination. Where an activity was safety critical and an essential job requirement, it may be reasonable not to employ an individual even if the Disability Discrimination Act was likely to apply if the risk was of harm to third parties. (However legal advice should be sought to check this view)

SUMMARY RECOMMENDATIONS

General Recommendations for safety critical work

It is recommended that a suitable risk assessment of any activity should identify whether it has a safety critical nature and whether in the event of worker incapacity this would be likely to result in a significant risk of harm to the individual worker performing the task or to others i.e. third parties.

All workers undertaking safety critical work are to be examined to the above general health standards of safety critical work and that where individuals do not meet these standards employers are advised of this restriction. It may be possible to restrict an individual from “safety critical work” or the specific aspects that would be problematic. A record of the fitness standard achieved should be recorded indicating “fitness satisfactory for safety critical work”.

Where the risk associated with the activity is to the individual worker a careful explanation of these risks and consequences should be given to the worker.

VISUAL ACUITY REQUIREMENTS

There are also specific visual and hearing requirements of the rail standards and the applicability to construction workers who will not be undertaking “train working” is discussed below.

The visual acuity of 3/60 means that someone can see at 3m distance an object that should be seen at 60m distance by someone with 6/6 vision. Vision below 3/60 allows certification

for blindness i.e. the person would be considered unable to do any work for which eyesight is essential. The rail standard for visual acuity is the same as that for new entrants to Class 2 driving.

Colour vision is a particular requirement of the rail standards because of the need to see signals and these are often red or green coloured. There may be trades within construction that require colour vision e.g. electrical and the testing of colour vision would highlight to individuals if they may have a problem. Most tradesmen will either already be aware and / or have adapted to any difficulty.

Recommendations for visual acuity standards for the construction industry

It is recommended that the Visual Acuity Standards for safety critical construction workers are the same as those for the rail standards but where individuals fail to achieve an aided binocular visual acuity of 6/12 it should be recognized that they may have other difficulties in the working environment. It therefore important to determine whether they are capable of undertaking the required tasks, with or without reasonable adjustments. A record of the vision standard achieved should be recorded indicating “vision satisfactory for safety critical work” and any advised restrictions.

It is recommended that the Colour Vision Standards for safety critical construction workers are the same as those for the rail standards. Testing colour vision would allow employers to be aware of any colour vision deficiency and a “trade test” or practical test could be used to determine whether in practice this a problem, thereafter making any reasonable adjustment. A record of the colour vision standard achieved should be recorded indicating “colour vision satisfactory for safety critical work” and any advised restrictions.

RECOMMENDATION FOR HEARING STANDARDS FOR SAFETY CRITICAL CONSTRUCTION WORKERS

The rail standards guidance suggests that an audiometric assessment shall be carried out and hearing loss in either ear should not exceed 30dB, averaged over frequencies of 0.5, 1 and 2 kHz. Providing this requirement is met without use of a hearing aid, hearing aids may be used to improve hearing further. No pathological condition likely to cause unpredictable fluctuation in hearing levels should be present.

The rail standards are high and may not be met by a significant number of employees who have worked in a noise-exposed environment. The Fire and Rescue Services guidance suggests for retained firefighters that undertaking safety critical work is compatible with a standard of:

(1) The sum of Low Frequency thresholds (0.5, 1 and 2 kHz) [60 dB Hearing Loss (2) The sum of High Frequency thresholds (3, 4 and 6 kHz) [80 dB Hearing Loss (3) The sum of the Speech Frequency thresholds (1, 2, 3 kHz) [60 dB Hearing Loss and (no value > 25 dB HL).

Assessment to any such standards requires audiometric testing. However, audiometry at baseline and regular intervals is required for construction workers who may be likely to be

exposed to significant noise at work (The Control of Noise at Work Regulations 2005). Therefore, occupational health providers and construction employers should have access to such testing and the mechanism for incorporating within health surveillance for safety critical roles.

Recommendations for hearing standards for the construction industry

It is recommended that the Hearing Standards for safety critical construction workers are the same as those suggested for the Fire and Rescue Services Retained Firefighters standard given above. A record of the Hearing standard achieved should be given to the employer indicating “hearing satisfactory for safety critical work” and any advised restrictions.

RE-ASSESSMENT OF FITNESS FOR SAFETY CRITICAL WORK

The rail standards guidance further requires medical assessment for safety critical work periodically; and states that medical fitness shall be assessed and re-certificated as follows:

Age at date of medical assessment	Maximum validity of certificate
Less than 40 years	10 years
From 40 to 49 years inclusive	6 years
From 50 to 59 years inclusive	4 years
60 years and over (unless revoked earlier)	2 years

and in the event of:

- (1) any episode of convulsion, loss of consciousness, disturbance of consciousness or dizziness;
- (2) any episode of visual disturbance;
- (3) prescription of long term medication;
- (4) any incident or accident where there is reason to believe that the physical or mental health of the person might have been a causal factor or adversely affected by it;
- (5) any other circumstances or medical condition which might impair the person’s ability to carry out safety critical duties; whether or not the person has been absent from duty, or (6) any absence certified as being due to a psychiatric disturbance.

RECOMMENDATION FOR RE-ASSESSMENT OF FITNESS FOR SAFETY CRITICAL WORK FOR CONSTRUCTION WORKERS

The rail standards do not provide an evidential basis for the re-certification periods although the frequency increases as age increases. Group 2 driving licenses are normally issued at age

21 and valid till age 45. Group 2 licenses are renewable thereafter every five years to age 65 unless restricted to a shorter period for medical reasons. From age 65 Group 2 licenses are renewable annually without upper age limit. The basis for the age related periodic review of driving fitness is informed by accident data from motor insurers. The further reasons for reviewing fitness for safety critical work under the rail standards may be summarised as, “any substantial change in medical circumstances”.

Recommendations for re assessment in the construction industry

It is recommended that the standards for re assessment of fitness for safety critical construction workers be set at a fixed periodic review after first assessment. Adopting such a policy avoids any suggestion of an age discriminatory bias in an area where little objective data may support alternative schedules. Since audiometry is a suggested requirement of safety critical fitness it may be sensible to link re assessment to the 3 yearly review of hearing that is required under the provisions of The Control of Noise at Work Regulations 2005. Re assessment of fitness for safety critical construction work with any substantial change medical circumstances also recommended. Such an assessment need only address the specific change in medical circumstances with full re assessment when next scheduled.

DRUGS AND ALCOHOL

The rail standards have specific requirements of contractors to have established a Drug and Alcohol policy which conform to set criteria. These standards require testing for Drugs and Alcohol prior to rail working, “with cause” (in the event of an incident or accident) and random unannounced testing.

Much of the debate (RSSB 2004) on the value of workplace drug testing appears polarised with some suggesting that there is good data to support the value of testing improving safety, while others question its value. An HSL review (Beswick 2002) highlighted the paucity and low quality of data available to answer such questions. A later study funded by HSE (RR193 HSE 2004) states, “on the whole the evidence suggests that there is no systematic relationship between drug use and workplace accidents, and it seems unlikely that working whilst actually under the influence of drugs is highly prevalent”. The study itself did not find an association between work place accidents and drug use. It also comments that “much of the existing research in this area has also found little evidence for an association between drug use and workplace accidents.... rather work in this area more often suggests an association with higher absenteeism and employee turnover” (RR193 HSE 2004). However, there have been high profile incidents within construction work where drug use was involved. One of the difficulties in testing for drugs and alcohol is that only for alcohol is there a clear relationship between the test result and the level of likely impairment. For all other drugs, the detection of parent drug or their metabolites only indicates use at some prior time and has no significance about any impairment at the time of testing. This has led to issues about the legality of such drug testing in the light of recent human rights legislation. A recent

review on workplace drug testing did conclude that current testing based on the presence or absence of drug metabolites would not counter UK law for safety critical activities (Rowntree Foundation 2004). Functionality or impairment testing for drugs based on eye pupil responses to light stimuli are being trailed in the transportation sectors in the US and Australia.

Given the above, it is recommended that construction employers employ suitable Drugs and Alcohol policy for safety critical workers

Recommendations for a drugs and alcohol policy in the construction industry

It is recommended that construction employers employ suitable Drugs and Alcohol policy. The standards for drugs and alcohol for safety critical construction workers should be the subject of further consideration taking account of known data on such substance use in this demographic group, evidence from others sectors on the value of any testing and the likely impact of alternative approaches.

VOCATIONAL DRIVING

The Health and Safety at Work etc Act 1974 requires employers to ensure, so far as is reasonably practicable, the health and safety of all employees while at work. There is also a responsibility to ensure that others are not put at risk by any work-related driving activities. (Self-employed people have a similar responsibility to that of employers.)

Under the Management of Health and Safety at Work Regulations 1999, there is a responsibility to manage health and safety effectively. This means there should be an assessment of the risks to the health and safety of employees, while they are at work, and to other people who may be affected by their work activities and this should be periodically reviewed. Although there is no legal requirement for medical assessment there is an implied duty in ensuring a safe system of work that drivers are medically fit.

Some drivers will hold class 2 driving licenses and be subject to statutory relicensing by the DVLA because of the size of vehicle driven (over 3.5 tonnes for a new license and over 7.5 tonnes for those holding a current Group 1 license issued prior to 1997). There is also specific guidance issued by HSE in relation to lift trucks and this recommends medical standards for operators (HSG 6). It is suggested that fitness to hold a class 1 driving license will usually be sufficient but that subject to risk assessment of the work e.g. when moving highly toxic or explosive materials, working in a particularly demanding environment, working at night, or if large, heavy trucks are to be operated. In these instances, some or all of the medical standards equivalent to that of Group 2 entitlement may be appropriate. Periodic screening for fitness is also recommended, after the age of 40 at five-yearly intervals and annual assessments after age 65. This is a requirement above that of a class 1 driving licence. Assessment is also recommended after an absence of more than one month or after a shorter absence if it is likely that the illness may have affected fitness to operate lift trucks. The guidance specifically points out that fitness to return to work when "signed off" by a GP may not indicate fitness to operate a lift truck.

Recommendations for vocational driving in the construction industry

As advised by INDG 382 Driving at Work Managing work related road safety employers should develop and implement a policy on Driving at Work. This should cover driving whether on the public highway or on site.

Where a job requires an employee to hold a driving licence (Class 1 or 2) the employer should ensure that the employee remains fit to drive for work purposes by:

- Monitoring absences to identify conditions that may impair driving
- A requirement to cease driving in the presence of medical conditions as specified by DVLA in their at a glance guide ([http: www.dvla.gov.uk/medical/ataglance.aspx](http://www.dvla.gov.uk/medical/ataglance.aspx))
- Informing staff that they should not drive, or undertake other duties, with a medical condition or while taking a course of medicine that might impair their control or judgment. In cases of doubt they should seek the view of their GP or occupational health provider.

Where a job requires driving but the employee does not need to hold a driving licence the medical fitness guidance given in HSG 6 is recommended. Fitness to class 1 standard can usually be confirmed by the occupational health provider reviewing a suitable questionnaire.

A record of “fitness to drive at class 1 equivalent” should be given to the employer with the recommended age-related review period.