



## **Briefing on Department of Education and Skills Covid-19 Occupational Health Process**

**25<sup>th</sup> August 2020**

Fórsa members working in our schools undergoing the DES Occupational Health Assessment process (provided by Medmark) are being instructed to attend work where they clearly fall into the of High Risk category should they contract Covid-19.

The assessment is carried out through a remote on-line process. The resulting decision determines if the employee is in a Very High Risk category in which case the employee is advised to work remotely or if the employee is in the High risk category where they are instructed to attend work.

HSE advice is that where High Risk staff have to attend work they should maintain social distancing. Medmark are aware that this is not possible for SNAs who have to work very closely with students. Medmark advise that an SNA in the High Risk category should attend work and use PPE. This deviates from published HSE health advice. Fórsa has asked for clarification from the HSPC and the Deputy Chief Medical Officer however no such clarification has been provided.

Fórsa estimates the number of affected SNAs, Caretakers and Secretaries to be relatively small and probably below 500 across the schools service.

We have set out below some of the examples of how this blanket policy will affect the small cohort of staff with serious underlying health conditions. Each example is based on an actual case where an SNA, School Secretary or Caretaker has been through the OH process.

- An employee with end Stage Renal Failure, has dialysis 3 times a week, on a range of immunosuppressant medication, with Consultant's opinion stating they are at very high risk – categorised by Medmark as High Risk
- Immunosuppressed employee at risk of infection with both GP & Consultants letters to say they are very high risk - categorised as high risk
- An employee with Gastro Intestinal Motility not categorised as high risk despite GP & Consultants letters to the contrary
- An employee who is a Type 1 Diabetic with neutropenia (low white blood cell count rendering them very liable to infection) classified as high risk
- An employee with long term Chronic Obstructive Pulmonary Disease – classified as High Risk despite GP letter declaring it very high risk sent to Medmark

- An employee over 60, Splenectomy, High Blood pressure & Osteopenia – deemed to be High Risk and fit to work normally
- An employee over 60 Idiopathic Cough, Hypertension – deemed High Risk at instructed to attend work
- An employee with a cancer diagnosis with radiotherapy treatment to begin this Wednesday, awaiting Medmark response as to categorisation
- An employee with Swyer James Syndrome, member has only one lung following a pneumonectomy, GP and Consultant both describe this person as Very High Risk, Medmark deem them to be high risk, the employee can only work part time and claims disability benefit for the rest of the working week.
- An employee on immune suppressant injections as they have spondyloarthritis, deemed to be high risk contrary to the opinion of their treating Specialist.
- An employee with severe rheumatoid arthritis and on immunosuppressive therapy. Who also has scleroderma deemed to be high risk and fit to attend work by Medmark
- An employee who is asthmatic and has experienced four bad recent asthma attacks in the school resulting her treated taken to hospital or by the GP surgery, GP maintains it would be too risky for the employee to return to work as an SNA due to Covid risks, Medmark deem them to be fit to return to work as they are not in the very high risk category.
- An employee who is 65 years of age suffers from obesity and asthma, has been told she is only high risk and that “where social distancing is problematic, working closely with others is possible providing that adequate controls (e.g. screens, face coverings, PPE) are effective in managing the risk”
- An employee with a history of cardio vascular disease including myocardial infarction (heart attack) who has been treated with an internal cardiac stent, she also has hypertension (high blood pressure) for which medication is prescribed and was diagnosed with breast cancer 5 years ago. This employee is deemed not to be high risk by Medmark and has been instructed to attend work.

In every instance quoted above the member in question has not been able to discuss their health status with anyone from Medmark. The process appears to be a box ticking exercise to ensure staff return to work without the usual clinical assessment by a physician. It is also concerning that when members telephone the Company to try and discuss these assessments with the treating physician they are informed that they cannot speak to anyone. There is no right of appeal.

This OHS process should be scrapped and staff should have the right to a clinical assessment with an Occupational Health Doctor who will take account of the totality of their health status rather than apply a algorithm which solely determines High Risk or Very High Risk status.

[ends]