

ICOH Code Review Group Professional Ethics Occupational Health - case scenarios (July 2012)

This series of PPT slides is a working material drafted and edited for ICOH Code Review Group internal use and for ICOH members personal use

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Ethics Case scenario 1

THE CANTEEN WORKER – HIV infection

An employee working in the canteen of an institution, Judith, is frequently absent from work due to ill health. Loss of weight, generally unhealthy with recurrent coughs lasting several days. Workers no longer comfortable eating in the canteen and being served by her.

An HIV/AIDS diagnosis suspected by both canteen manager and staff. The staff request the canteen manager to stop her from coming to work for fear of becoming infected themselves. The canteen manager asked the occupational physician of the institution for advice,

The occupational physician met Judith and proposed a medical examination, including HIV tests to be done. Judith agrees to this on the condition that the results are not to be revealed to any third party whatsoever. In subsequent testing HIV tests and subsequent CD4 counts revealed that the Judith was eligible for ARV treatment.

Judith insists on being examined by an alternative medicine healer. Without such consultation Judith rejects treatment proposals

Issues: Risk assessment. Communication of details to Work colleagues. Confidentiality of HIV Positive test result. Judith's insistence on alternative medicine dealer consultation – is it relevant?

Ethics Case scenario 2

You are an occupational physician providing health services to a cosmetics manufacturing company. The manufacturing processes include use of materials generating nanofibres – carbon nanotubes – for production of skin oils and ointments marketed as health products.

The Company manager requests you to organize health screening of all staff. Adds to request regrets that detailed information on raw materials used in production and also their processing is protected by regulations of industrial secrecy and can not be revealed.

Challenges: Ethical analysis of request. Can it be turned to health benefits for workers? Hidden agendas?

Ethics Case scenario No 3

A staff member, supermarket attendant Jennifer X, 42 yrs of age, is suffering from recurrent mental disorder. She now returns to work after having been absent for some time following recommendation by the treating physician assessing resumption of work to have a beneficial effect. Her conduct at work, however, disturbs the social climate of the workplace and Jennifer's colleagues claim to be unable to carry out their tasks and find her presence at work intolerable. The employer has clearly indicated to you his wish to get rid of Jennifer.

The occupational physician has demanded to arrange a special workplace isolating Jennifer from other workers of the team. This solution is, however, not possible to implement. The OP does not know which interest to set in priority, the health of the worker or the health or life quality of the workers colleagues at work.

Is this a case of real incapacity to work caused by the mental health disorder? Or is this a case of a manifest socio-pathology?

Ethics case scenario No. 4

You are an occupational physician in a Occupational Health service organization providing services to a metal industry enterprise. The client company arranges annual health examination of all staff as a management routine. One of the truck drivers of this company, Alex who is 48 years of age comes to the occupational health surgery for the annual exam. Alex is seemingly in good form. There are, however, some pertinent observations

- 1) Alex has a diabetes type-2 diagnosed one year ago, which is well known by the management and his work colleagues. Oral antidiabetic medication regime has been prescribed with good compliance on part of Alex
- 2) Alex is definitely overweight with a Body Mass Index (BMI) at examination of 33. The BMI has been slowly increasing since Alex was first employed by the enterprise 16 years ago
- 3) Alex has during the last two years observed that he sometimes falls asleep during daytime, He has not informed his foreman about his spells of sleepiness.

Your action plan as an Occupational Physician. Is Alex drivers license to be withdrawn? Can license be made conditional on Alex weight reduction?

Case Scenario 5

You are as Occupational Physician to an investment bank enterprise consulted by one of the staff members, Philippa, on necessary immunizations in view of duty travel in three months time. During the consultation Philippa reveals that she has recently been assessed by a consulted psychiatrist to suffer from a bipolar mental disorder. Judging from the description of the mental disturbance given by Philippa you anticipate spells of recurrent manic behaviour implying a possibility of taking decisions on economic transactions which are not sufficiently well prepared. This is seen as a risk to be carried by the investment bank as employer. No risks seem to be arising to work colleagues or to the public from Philippas mental health disorder.

You advise Philippa to inform her middle-manager about her health condition to allow for an adaptation of the work organization with a view to risk minimization. Philippa declines this since she is anxious not to lose any of her bonuses and benefits associated with her present job status. Philippa declines all proposals to bring matter up with the employer and she strongly holds that no information so whatever is to be communicated to the employer on this discussion of her mental health which started with her consultation about immunizations.

a) Is it ethically defensible to break the confidentiality requirement in informing the employer about what you have been told by Philippa? If it is, in your view, how would you go about it?

Ethics Case scenario 6

You are a full time occupational physician hired by a bank and in charge of reviewing the health exam results and deciding work fitness of workers. Recently, they are exposed to heavy stressors. Therefore, the company made separate contract with an employee assistance program (EAP). EAP will meet the workers without reporting anything to the company or to you. Though EAP staffs are coming temporarily and often changing, you noticed they also advise managers about necessary accommodation at work without knowing the real working environment. You think all health info must be communicated to you to promote adaptation of workers; however, the company is afraid, if you know too much, their legal liability will be also widely known within the company. Also, the trade union claims that your standpoint may be communicated to the employer.

How can you keep fairness and independence? Can this situation be remedied or avoided? How?

Ethics Case Scenario no. 7

You are the Occupational Physician appointed by the Ministry to oversee the health and safety of workers in the informal sector in a medium-sized African city. You have set up systems to provide training, skills in basic risk assessment and simple safety measure for implementation in local informal markets.

However, one day a child is poisoned as a result of accidental consumption of a pesticide concentrate being sold by a local vendor. The child drank the contents of an unlabelled bottle by mistake and died within hours. There is a public outcry and the Ministry wants to prosecute not only the particular vendor involved but all vendors involved in informal retailing of pesticides, since it is technically illegal to sell pesticides without a license.

You are faced with a dilemma. If the State pursues a strategy of prosecution, it may drive the vendors underground who will continue to distribute products, because of their known effectiveness and de facto demand for domestic pest control products. However, distribution may continue to generate safety risks and vendors who most likely evade any contact with the health system, perhaps exacerbating the problems created by the pesticides.

What are your ethical obligations under the circumstances?

Ethics Case Scenario no. 8

You are the Occupational Physician for a medium-sized mining operation in a developing country. Management has allocated part of its production targets to a component which outsources operations to small business and self-employed miners as part of employment creation opportunities in a country with high unemployment. Management has also indicated that those small businesses & self-employed miners with consistent high production may eventually, be allocated some part ownership of the mining concession. Government officials have also praised mine management as a 'model employer' willing to create local jobs and to share some of its profits and ownership with marginalized indigenous entrepreneurs.

The miners are paid per kg of ore produced so are reluctant to take safety precaution, nor will they spend their scarce resources on proper safety measures.

Given the desperate situation they and many of their families are in, no amount of safety and health education appears to persuade them to follow safety measures that will slow down their production or reduce their already slim profit margins.

What are your ethical obligations under the circumstances?

Case scenario 9 - Testing for Drugs ?

You are an occupational physician providing OHS services to a small company in the X region of Northern Scandinavia manufacturing component parts to landing systems of aeroplanes. The company is doing well and the prospects of expanding market shares are promising. The majority shareholder is a major international corporation. The company staff is 50 – 60, most of them highly qualified technical specialists with universit. Unemployment rate in the region high - a cause of concern. Major shareholder indicates that significant, large new orders are in expectation, due to the current turnover of aeroplane stock of airline companies. It is implied that quality requirements , including performance standards, on company products are likely to be enhanced.

New employment of workers, specialists and managerial staff is a likely scenario.

The major owner corporation has signalled requirements to organize compulsory drug testing of all staff at new employment repeated with irregular, at random chosen points of time in the course of production. The explicit motive given by majority owner is an objective to make the company drug-free. Staff members found to have used drugs may be referred for further examining. Some of them may lose their job.

Your value sources in considering a decision? Is the drugtesting program ethically acceptable ? Can you advise to accept proposed drugtesting program on these grounds.

Ethics Case scenario 10

You are an occupational physician of an engineering company. According to the law, the employer shall conduct health exam and ask the opinion of the occupational physician on measures for maintaining the workers' health. This year, you found metastatic lesions on the chest x-ray of Mr. Suzuki, who had been treated for chronic hepatitis. At interview, however, Mr Suzuki did not report any symptoms or any recent change of therapeutic regimen. You decided to call his treating doctor, finding to your surprise that the doctor had told Mr Suzuki that his estimated life expectancy is less than 6 months. You supposed he did not wish the company to know his real condition. On the other hand you also know that he should avoid working hard and aim at handing over his important job to somebody else in the company.

To whom and what kind of advice should you deliver?

How can you protect the dignity of this patient-worker?

Ethics Case scenario 11

You are a part-time occupational physician of an oil refinery. You are also active as an epidemiologist. So far the company and their trade union have allowed you to use the workers' data as far as you are using the title of “Clinical Professor of X University” and not including the name of the company anywhere in the article. Recently you found an increased morbidity among a group of workers using a certain chemical in the company and sent your manuscript to a journal. Then, the journal editor requested you to declare the conflict of interest within your manuscript.

Is there an ethical conflict? If so, which values are in conflict? Is the request of the journal editor reasonable? How may you publish the data?