



How to Handle Medical Notes for Ergonomic Evaluations or Equipment

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When an employee brings you a note from a medical provider requesting an ergonomic evaluation or a specific piece of equipment, there are several very important things to consider. Issues related to ADA, OSHA, worker's compensation and even EEOC come into play, making this a complicated issue.

The way you respond to the employee must be compliant with local and federal law as well as your own internal policies and procedures. What I am sharing with you is based on my experience with large and small employers based in the United States.

I always recommend legal counsel to fully comply with laws and regulations.

If an employee is presenting medical documentation to change the work or the work environment, you need to know these two things:

- ⚙️ What functional limitations the employee has in regard to the essential functions of the job;
- ⚙️ How long are these limitations expected to last.

In an office setting, these are usually the types of notes we see:

- ⚙️ Vague and generalized: "ergonomic assessment recommended".
- ⚙️ Product based: "ergonomic chair" or "standing workstation".
- ⚙️ Function based: "employee cannot sit more than 4 hours per day and must be able to stand every 30 minutes".



In most cases, by the time an employee is bringing you a note, they have had some level of discomfort for a while. They feel that they need (or have been told that they need) validation from a physician to support their request.

The concerns of the employer usually fall into these categories:

- ⚙️ How do I know if the employee really needs something, or is just wanting it?
- ⚙️ How do I make sure I am doing what I need to do legally?
- ⚙️ If we spend money on an assessment or furniture/equipment, how do I know this will address the problem?
- ⚙️ If I provide equipment for one employee, I fear the other employees will follow suit.

We will address each type of case and follow it with a Best Practices Recommendation.

The employee presents you with a medical note for an “Ergonomic Assessment”.

This statement is vague and is not providing any documentation about any specific limitations or duration. However, any time a medical provider is communicating with the employer, it is important to take steps to address the issue.



To respond to this type of request, consider a few things:

- ⚙ Does your organization already provide ergonomic training or assessments?
- ⚙ Are you able to perform an ergonomic assessment in-house, or will you need to hire someone?
- ⚙ Has the employee been asking for a piece of equipment or reporting any specific discomfort?
- ⚙ Does the employee have a known history of medical issues that impact job functions?
- ⚙ Has the employee tried to make adjustments to their workstation already?
- ⚙ Is the employee asking for something that is not a standard option at your office?
- ⚙ Do you have any policies and procedures that will impact how you are able to handle this request?
- ⚙ Are there other employees who have been given alternative work or work equipment?
- ⚙ Are there already processes that an employee can take to obtain alternative equipment?
- ⚙ Has the employee communicated with their manager?

Often times, the employee is missing some basic information about making adjustments to the workstation. Many complaints can be addressed with proper adjustments to the chair, placement of the equipment and behavioral changes (like micro-breaks and stretching).

If there is a real need for a more substantial change to the work station, this is a great opportunity to address the issue and prevent an injury. The evaluator should know what is already available for the employee. For example, different mice, keyboards, monitor risers. If there are different kinds of chairs in the office and some are not being used, show them the options.

Get your money's worth from a consultant by asking them for their feedback on the office furniture and equipment in general. Even an casual conversation can give you valuable information about what kinds of chairs, desks and equipment present the least risk for users.

Even if you cannot make changes for the office at the time, this can help you prepare for the future.

Best Practice Recommendation:

Provide an ergonomic assessment for the employee to gather objective information and provide an effective solution. Make sure that whoever is doing the ergonomic assessment is professionally trained and knows what resources are already available.

If you use a consultant to do the evaluation, feel free to ask them for alternative suggestions if you cannot comfortably provide what they recommend. Ask that the recommendations be made based on the features of a product that they feel are critical, followed by a specific suggestion.

Make sure that employees have access to self-help training. This will encourage them to take ownership of their comfort and give them the objective information to make proper adjustments. Ask that employees complete the self-help training before providing an ergonomic assessment. This sends the message that their comfort is a joint effort.

Ensure that your policies and procedures are clear and that employees have access to them. This will let them know what is available, what is required of them and what to do if they need further assistance. Your policies and procedures should do the work for you.



The employee presents you with a medical note that says: Needs Ergonomic Chair or Needs Standing Workstation.



The job of a physician is to diagnose and document medical limitations- not determine the solution or accommodation for the employer.

The employer needs to understand functional limitations of the employee as they relate to the physical demands of the job. Most physicians are not going to think about an “ergonomic chair” in their treatment plan. If they write this on the note, they may not be aware of their role in this process or may have been directed by the employee. I have even seen medical notes that recommend a specific brand of chair!

When an employee presents a note like this, it is usually based on one of these scenarios:

- ⚙️ The employee has seen other employees get a different chair or other equipment after bringing in a note. Maybe there is actually a policy in place requiring a physician note to qualify for a different chair or standing workstation.
- ⚙️ The employee is experiencing discomfort and thinks the chair or sitting is contributing (they may be right, or they may be wrong).

Many organizations use medical notes as a way to control requests for chairs or standing desks. In response, the employees will come back with a note that says exactly that. Unfortunately, this can actually medicalize a non-medical situation.

The root of the problem is that the employer wants to be certain that they are providing what is needed, not just wanted and also wants to control cost.

A better solution is to determine ahead of time what you are able to provide and under what circumstances. For example, if you have one standard chair in the office, know that there will be some employees who actually need something different. Decide on an alternative chair or line of chairs that will be used for these cases.

You will also need to decide if you want to provide any standing workstations. There are many ways to incorporate standing and movement into the work areas and having a pre-determined solution will help you manage these requests.

Any recommendation for an alternative product should come from a professional ergonomic assessment. I have done many evaluations because the employee says they “hate” their chair. However, most of them don't know how to adjust their chair, and often after we do, the problem is solved. It's also really common that the chair is just fine, it's the position of the other equipment that is causing the problem.

It would be a waste of money to provide an alternative chair for someone who really needed something else.

Best Practice Recommendation:

Have a standard chair as well as an alternative chair option.

Decide if you are going to provide any standing work options, and if so, what kinds and under what circumstances.

Have a professional ergonomic assessment to determine if a product is actually needed or not.

Make sure you have a good relationship with the evaluator and that they are aware of your policies and procedures.

Allow employees to ask for an ergonomic assessment, but only after they complete self-help training.



The employee presents you with a medical note that says: Employee cannot sit more than 2 hours per day, recommend standing while working.

This kind of note has been well thought out and intentionally prescribed by the physician. The physician is knowledgeable about the information that is necessary for an employer to make an informed decision.

Here are the questions you should answer to make your plan:

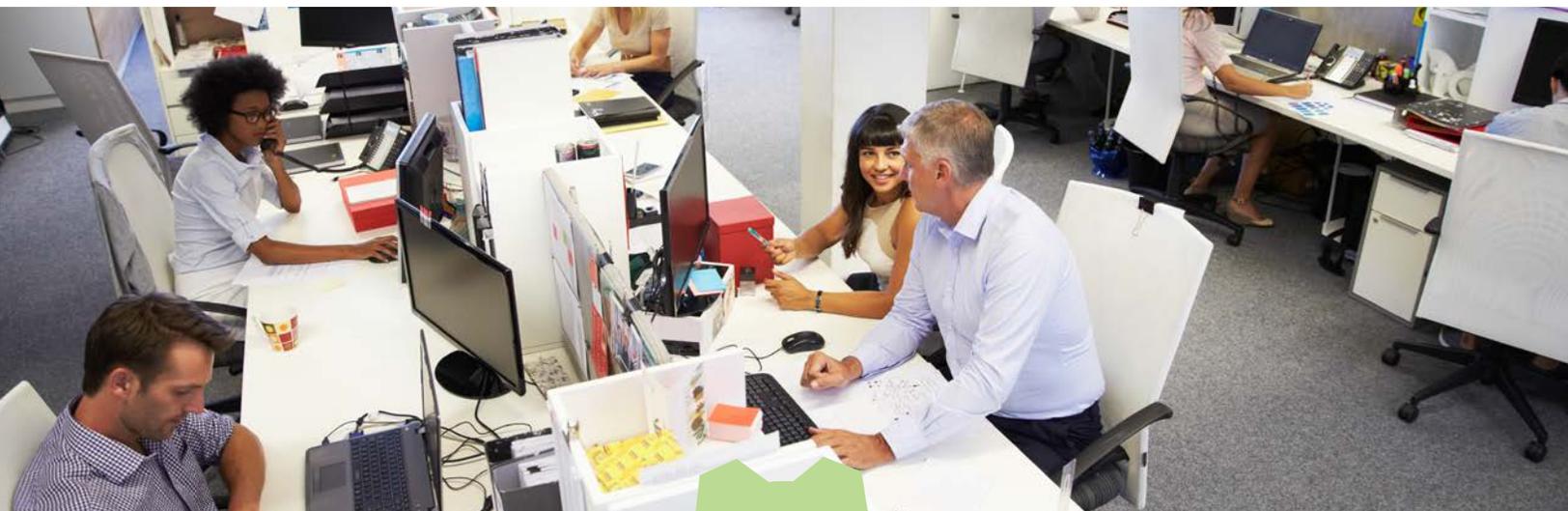
- ⚙️ How long does the physician expect the limitations to last?
- ⚙️ Does the physician seem to understand the essential functions of the job? Unless you have provided them, he probably got information only from the employee.
- ⚙️ Is this recommendation being made based on an injury the employee sustained at work – is this a worker's compensation case? Is this part of a return to work plan?

Best Practice Recommendation

Provide a professional ergonomic assessment for the employee and share the doctor's recommendations with the evaluator.

Follow up with the employee a week or two after the changes have been made to make sure they are doing well.

Don't hesitate to get additional information from the physician if the recommendations aren't clear – or if you feel you made recommendations without full knowledge of the job duties. You need to have good communication to make sure you are getting the best outcome.



ADA

<http://www.ada.gov/pubs/adastatute08.htm#12102>

Here is how the ADA defines disability:

- (A) a physical or mental impairment that substantially limits one or more major life activities of such individual;
- (B) a record of such an impairment; or
- (C) being regarded as having such an impairment

Working is considered a major life activity.

- (A) An individual meets the requirement of "being regarded as having such an impairment" if the individual establishes that he or she has been subjected to an action prohibited under this chapter because of an actual or perceived physical or mental impairment whether or not the impairment limits or is perceived to limit a major life activity.
- (B) Paragraph (1)(C) shall not apply to impairments that are transitory and minor. A transitory impairment is an impairment with an actual or expected duration of 6 months or less.

The definition of a Reasonable Accommodation:

- (A) making existing facilities used by employees readily accessible to and usable by individuals with disabilities; and
- (B) job restructuring, part-time or modified work schedules, reassignment to a vacant position, acquisition or modification of equipment or devices, appropriate adjustment or modifications of examinations, training materials or policies, the provision of qualified readers or interpreters, and other similar accommodations for individuals with disabilities.

The definition of Undue Hardship:

Undue hardship

- (A) In general
The term "undue hardship" means an action requiring significant difficulty or expense, when considered in light of the factors set forth in subparagraph (B).
- (B) Factors to be considered
In determining whether an accommodation would impose an undue hardship on a covered entity, factors to be considered include
 - (i) the nature and cost of the accommodation needed under this chapter;
 - (ii) the overall financial resources of the facility or facilities involved in the provision of the reasonable accommodation; the number of persons employed at such facility; the effect on expenses and resources, or the impact otherwise of such accommodation upon the operation of the facility;
 - (iii) the overall financial resources of the covered entity; the overall size of the business of a covered entity with respect to the number of its employees; the number, type, and location of its facilities; and
 - (iv) the type of operation or operations of the covered entity, including the composition, structure, and functions of the workforce of such entity; the geographic separateness, administrative, or fiscal relationship of the facility or facilities in question to the covered entity.

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