

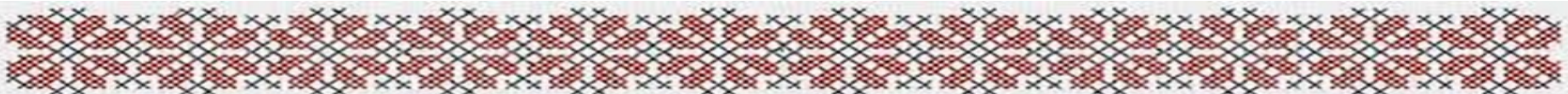


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Fit for Work vs Workability in Romania

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1. Fit for work



The worker's ability, from the medical point of view, to perform their activity at the workplace in the profession/ the position for which medical examination is required.

(Art.9 *HG 1169/2011)

*Government Decree

2. Workability



The possibility to perform an organised activity through which somebody can earn a living for themselves and their family.

It is expressed as the **rapport between**:

- **individual biologic possibilities**
(medically assessed only)
- and
- **professional pressure** (as medical-social element)

It is **determined by**:

- **physical and intellectual abilities**
(genetically determined)
- and
- **socio-professional integration level**
(preparation and experience)

Legal Frame

1. Fit for work	2. Workability
<p>*HG 355/2007 updated through HG 1169/2011 regarding the maintenance of workers' health</p>	<p>Decision nr. 155, on 23 Feb 2011, for the approval of the criteria and norms of clinical diagnosis, functional diagnosis and evaluation of workability, according to which people are assigned to I, II or III invalidity classes</p>
<p>Law 319/2006 – health and security at work</p>	<p>Decree 1418/2010 regarding the approval of the Procedure of classification into classes of invalidity in view of registration for the invalidity pension and the Procedure of checking the classification into invalidity classes.</p>
<p>Law 346/2002 regarding the insurance in case of accidents at work and occupational diseases</p>	
<p>* Government Decree</p>	

The domain of applicability

Occupational Medicine

- Etiological medical specialty which studies the physiological and pathological relationships between the human body and work.
- Monitoring workers' health comprises all the medical services which ensure preventing, finding and treating in-clinic the occupational diseases together with the ones linked to one's profession, as well as maintaining the health and workability of workers. (Art 3 *HG 355/2007)

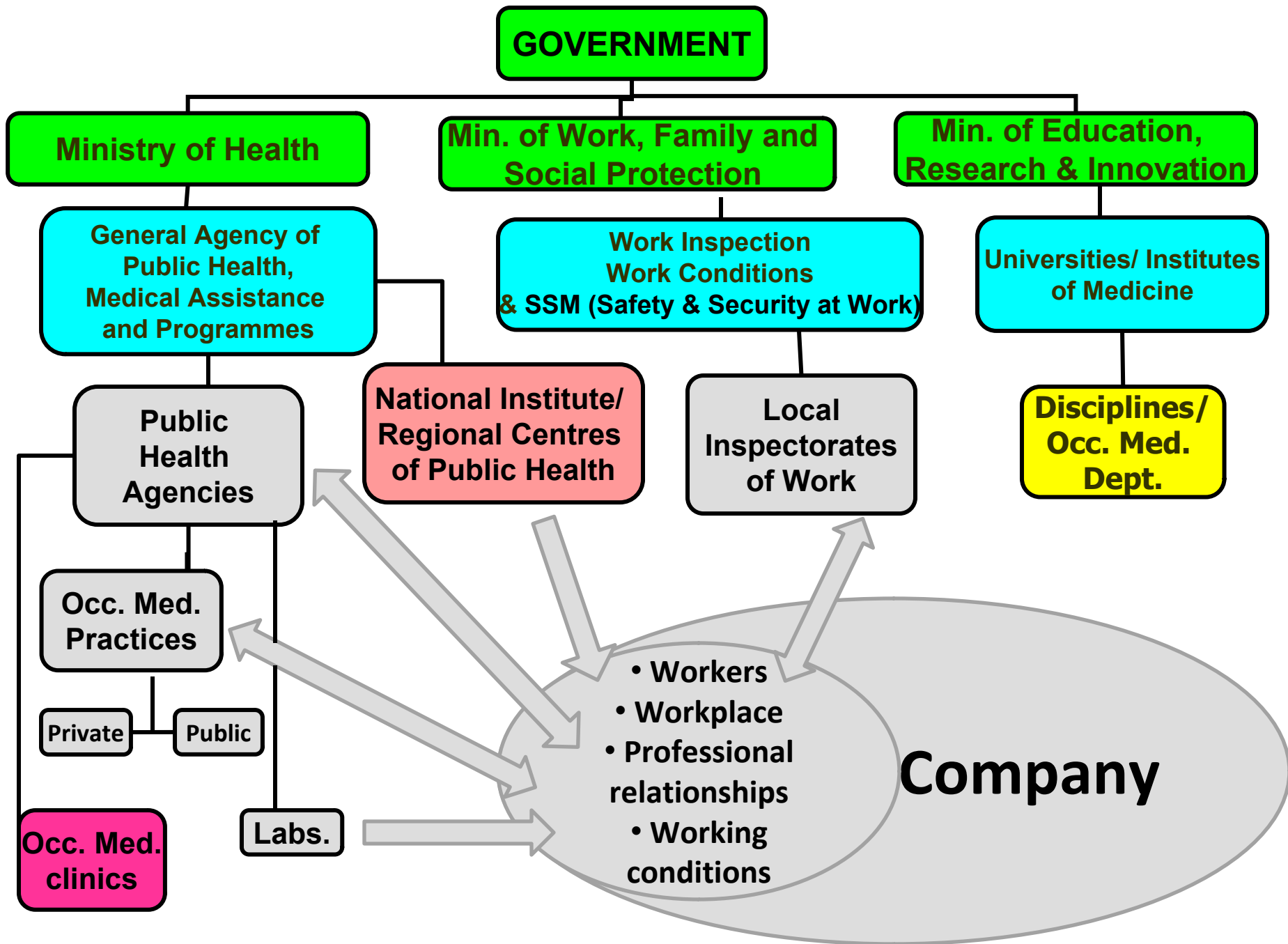
*Government Decree

Workability Expertise

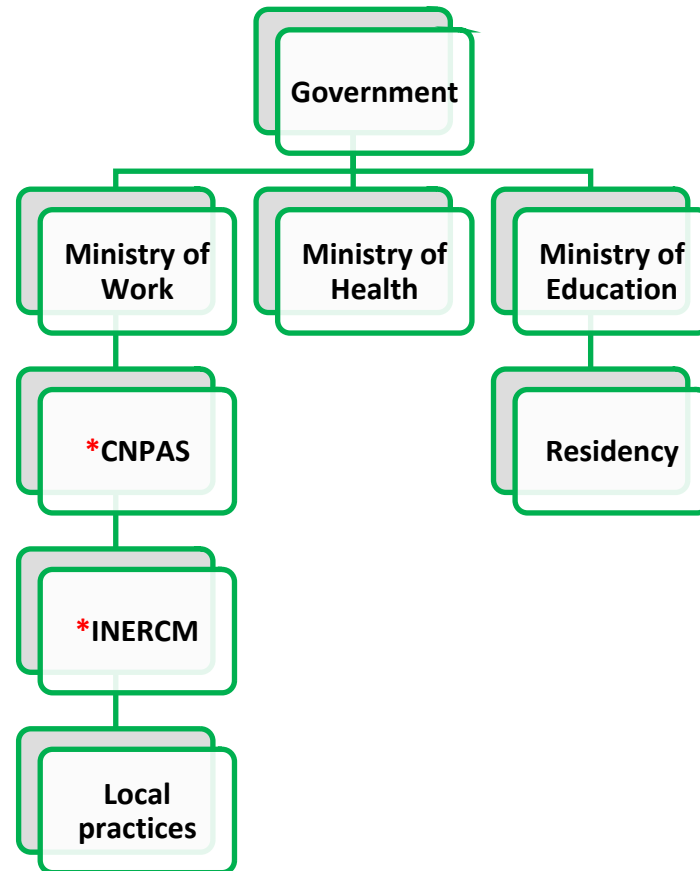
- It is a medical specialty, which through specific techniques and methods evaluates the workability of people who present different morphological and functional disorders, in view to offer them social insurances (social insurances medicine).
- The specific procedures of this activity are focused on the invalidity prevention and the recovery of workability, the aim being to reintegrate socio-professionally the insured people who were affected by diseases or accidents.

Preparation in the specialty

Occupational Health	Workability Expertise
4 years	3 years
<p>1st year – Occupational Medicine - physiology, ergonomy, toxicology, industrial hygiene, radiations, statistics, occupational psychology</p>	<p>1st year - functional investigations - 6 months - occupational medicine – 1 month -recovery, physical medicine and balneology - 1 month - orthopaedics and trauma - 1 month - Internal medicine - 3 months</p>
<p>2nd year – Occupational medicine - clinic</p>	<p>2nd year - internal medicine - 3 months - neurology - 3 months - psychiatry - 3 months - expertise and recovery of workability - 3 months</p>
<p>3rd year –internal medicine , pneumology, alergology, clinical toxicology, neurology, infectious diseases, psychiatry, dermatology, surgery, orthopaedics, forensic medicine, ophtalmology, ENT</p>	<p>3rd year - expertise and recovery of workability - 7 months - praxis - 4,5 months - medical bioethics - 2 weeks</p>
<p>4th year - bioetics, medical recovery , legislation, praxis</p>	



The structure of services of workability expertise



1. Fit for Work

- Target population
- Active population who wishes to find employment or is already employed

1. Fit for Work

- It is established by the occupational health doctor in accordance with the law (HG 1169/2011)
- According to the **professional exposure** proven through:
 - Identification to professional risk factors record
 - Request form
 - Visit at the workplace
- **Health status** evaluated through:
 - Clinical examination
 - Specific paraclinical investigations

Conclusions to Fit for Work

- **Fit**
- **Conditionally fit (medical causes)**
- **Temporarily unfit**
- **Unfit**

Fit for Work aims at:

- a) **compatibility/incompatibility** between **any health conditions** present at the moment of the examination and the **future workplace**;
- b) **presence/ non-presence** of a **health condition** which **endangers** the health and the security of the **other workers** in the same workplace;
- c) **presence/ non-presence** of a **health condition** which **endangers** the **security of the unit** and/ or the **quality of the final products** or of the **performed services**;
- d) **presence/ non-presence** of a **risk** for the **health of the population** who benefits from the services.

Fit for Work is necessary for:

- Medical examination at employment
- Adaptation medical check-up
- Regular medical check-up
- Medical examination when returning to work
- Special monitoring for:
 - people between 15 -18 years old turned
 - people over 60 years old turned
 - pregnant women
 - people with handicaps
 - drug-addicts, alcohol-addicts
 - left-handed people
 - people with monocular vision
 - people with registered chronical diseases

2. Workability

- Target population
- People found in different conditions of social risk, who can benefit from social insurances:
 - extended medical leave (ITM)
 - request invalidity pensions
 - people with handicaps
 - occupational accidents and occupational diseases

2. Workability

It is evaluated through:

- Functional deficiency
- Incapacity to adapt
- Functional diagnosis

The relationship "functional deficiency - adaptive incapacity – degree of invalidity" is given on a **negative scale** which shows the **functional loss**

<u><i>Functional diagnosis</i></u>	<u><i>Adaptive incapacity</i></u>	<u><i>Degree of invalidity</i></u>
<i>Without functional deficiency</i>	<i>0-19%</i>	<i>not determine invalidity</i>
<i>Slight deficiency</i>	<i>20-49%</i>	<i>not determine invalidity</i>
<i>Medium deficiency</i>	<i>50- 69%</i>	<i>III</i>
<i>Accentuated deficiency</i>	<i>70- 89%</i>	<i>II</i>
<i>Severe deficiency</i>	<i>90-100%</i>	<i>I</i>

The evaluation conclusion of workability means establishing the degree of invalidity:

- Invalidity of 1st degree – total loss of workability and self-serving ability
 → permanent personal assistant;
- Invalidity of 2nd degree – total loss of workability, self-serving ability preserved;
- Invalidity of 3rd degree – loss of at least half of workability → ability to work part-time, in adequate workplaces.

Common Points

Fit for work

Workability

Active population

**Multidisciplinary medical
branches**

Relationship with the work

Rehabilitation

Dissimilarities

Fit for work

Active population, generally healthy or presenting non-invalidating monitored diseases.

Establishes the direct compatibility relationship among the health status, profession and the workplace.

Subordinated to the Ministry of Health.

Workability

Active population, but with invalidating health conditions.

Quantifies workability and establishes the degree of invalidity.

Subordinated to the Ministry of Labour.

Weak Points

- Terms misunderstanding in legal documents (art. 64 in the Labour Code – “... *with the workability established by the occupational medicine doctor*”).
- The absence of the *Expertise and Recuperation of Workability* stage from the preparation curricula in Occupational Medicine

***I would like us to have the workability
so that we should be able to meet for as
many EASOM sessions as possible!***

Thank you!