Faculty of Medicine in Hradec Králové, Charles University

Dean's measure No 8/2018

Title: Occupational Medical Services

Validity and effectiveness: on the day of the Dean's signature

Article 1 Initial Provisions

This Measure regulates the conditions for securing the employer's obligation under Act No. 262/2006 Coll., Labour Code, as amended, Act No 373/2011 Coll., on specific health services, as amended (hereinafter 'the Specific Health Services Act') and Regulation No. 79/2013 Coll., on occupational medical services and certain types of assessment care, as amended (hereinafter 'the Regulation on Occupational Medical Services') to provide employees and persons applying for employment at the Faculty of Medicine in Hradec Králové (hereinafter 'the Faculty') with occupational medical services.

Article 2 Scope of Validity

This regulation is binding to all employees at the Faculty of Medicine in Hradec Králové and applies to all other persons applying for a job at the Faculty.

Article 3 Responsibility

- 1. The Secretary of the Faculty shall be responsible for securing a contract for the provision of medical services with the medical services provider.
- 2. Determining the scope of the occupational medical examination, depending on the category in which the work or activity of the employee has been classified and taking into account whether the health risk according to Annex 2 of the Regulation on Occupational Medical Services (e.g. pressure vessel operation, gas equipment operation, night shift work, working with selected chemicals, work of an electrician, etc.) is associated with the work, is the responsibility of managers at all levels of management within the scope of their functions.
- 3. The extent of the occupational medical examination of persons applying for employment at the Faculty shall be determined in accordance with the preceding paragraph.

Article 4 Assessment of Medical Fitness for Work

- 1. The medical fitness of employees is monitored by a system of occupational medical examinations, as part of the occupational medical services.
- 2. Occupational medical services are excluded from the free choice of a physician, performed exclusively by a provider of occupational medical services.
- 3. The contractual provider of occupational medical services of the Faculty of Medicine is the University Hospital Hradec Králové, the Department of Occupational Medicine (hereinafter 'the University Hospital' and 'the Department of Occupational Medicine').
- 4. Employees of the Faculty, who are also employees of the University Hospital to whom occupational medical examinations are provided by the Occupational Health Centre at the campus of the University Hospital, may also be subject to occupational medical examinations with regard to the Faculty by the same Centre.
- 5. By way of exception and with the prior permission of the Dean, an employee or person applying for a job at the Faculty may be permitted to be subject to a medical examination performed by their general practitioner only if their work is classified in the first category under Act No 258/2000 Coll., on the protection of public health and amending certain related laws, as amended, (hereinafter 'the Public Health Protection Act') and if their work does not include an activity for the performance of which the conditions of medical fitness are laid down by any other legislation.

Article 5 An Application for an Occupational Medical Examination

- 1. The employee or person applying for a job at the Faculty shall be provided by the employer before being referred for a medical examination with the An Application for an Occupational Medical Examination document and Assessment of Medical Fitness for Work form. These documents are annexed to this Measure. Further details on the transfer and receipt of the above documents can be found in the respective documents.
- 2. An Application for an Occupational Medical Examination in two copies, specifying the employee's personal data, the type of work, the category of work, the job title and the mode of work, the risk factors related to their position at the Faculty, and bearing the stamp and signature of the head of the department, shall be completed by the head of the department, where the employee carries out work or where the applicant for a job will carry out their work.

- 1. The organization of occupational medical examinations at the Faculty is entrusted to HR officers and HR and Payroll clerks, if the work is carried out under non-employment contracts, and to individual departments of the Faculty.
- 2. HR officer
 - a. is responsible for not establishing an employment relationship with the applicant unless their medical fitness has been assessed;
 - b. records medical fitness assessments of employees;
 - c. maintains and updates a database of occupational medical services;
 - d. forwards a list of those employees who are required to undergo periodic examinations in the following calendar year, including the date by which this is to be done, to heads of departments by 30th November of the calendar year.
- 3. Manager at the workplace, unless otherwise specified
 - a. cooperates in the field of the provision of occupational medical services with the HR officer or the HR and Payroll clerk,
 - b. is responsible for ensuring that all employees undergo a scheduled occupational medical examination by the date specified and that the employees whose medical examination has expired will not be instructed to perform the work until such time as the employees have undergone the examinations,
 - c. is responsible for placing the employee into the work process in accordance with the outcome of the occupational medical examination;
 - d. in the case of a transfer of an employee to work of a kind other than that agreed in the employment contract, in particular where the new job places different medical requirements, they shall, in cooperation with the HR officer, arrange for an initial or final examination in accordance with the Regulation on Occupational Medical Services,
 - e. informs the HR officer in the event of circumstances in which an irregular occupational medical examination is required,
 - f. allows the provider of occupational medical services to access all sites,
 - g. notifies occupational medical service providers of any changes in the workplace that could affect the protection of health at work, such as new technologies, equipment, work practices, materials. To the same extent, they shall inform the occupational health and safety and fire protection technician (hereinafter 'the OH&S and FP technician').
- 4. Employees are required to
 - a. undergo occupational medical examinations at the designated facility of the provider of occupational medical services and at specified times at the request of the head of the department,
 - b. provide the designated provider of occupational medical services with a statement of medical records from their general practitioner, if such statement is required under applicable regulations, except for those employees who are provided both the occupational medical services and the general medical practitioner's services by the Occupational Health Centre at the campus of the University Hospital; a statement of the medical records of the general practitioner is subject to a payment.

5. The cost of the occupational medical examinations within the scope of the Specific Health Services Act and this Measure shall be borne by the employer. The costs incurred will be reimbursed to the employee upon presentation of a proof of payment stating, as the payer, the Faculty of Medicine in Hradec Králové and also the name of the employee.

Article 7 Types of Occupational Medical Examinations

- 1. **Initial examination** shall be carried out for persons applying for employment at the Faculty and for employees before changing the type of work or transferring to another job if the work is carried out is under conditions different from those for which the medical fitness of the employee has been assessed, in order to determine their medical fitness for the work to which they are to be assigned.
- 2. **Periodic examination** shall be carried out in order to detect an early change in the state of health arising from the health challenges of the work being performed or the aging of the organism, where further work may lead to an injury to the employee.
 - a. The heads of departments shall ensure that the employees are referred to a periodic examination, but not earlier than 90 days before the expiry of the current periodic examination.
 - b. If an employee of the Faculty undergoes a periodic examination for a given year for a University Hospital, they may only undergo the examination for both employers if the examination is not carried out earlier than 90 days before the end of the previous examination for the Faculty.
 - c. If, at the earliest 90 days before the expiry of the previous examination, the employee of the Faculty passes a periodic examination for a University Hospital, the employer at the Faculty shall accept, for the purpose of assessing medical fitness to work, the submission of a simple copy of the medical assessment, issued for that purpose for the University Hospital. In that case, it is not necessary for the Faculty to submit an application for a periodic examination.
- 3. **Irregular examination** shall be carried out in order to establish the health status of the employee in the event of a reasonable assumption that their medical fitness for work has been lost or altered, or where the risk level of the work being performed has increased. An irregular examination shall be carried out on the employer's own initiative or on the employee's initiative.
 - a. An irregular examination shall be carried out in particular if
 - it was ordered by the public health authority under the Public Health Protection Act,
 - it is required by the health requirements of specific working conditions during the period in question,

- there has been a worsening in working conditions in terms of increasing the level of risk with the risk factor for which the employee's medical fitness has already been assessed,
- instances of exceeding of the limit values of the biological exposure test parameters have been repeatedly detected,
- a change in the health status of the employee was identified during the occupational medical examination, which implies a change in the medical fitness to work within a period shorter than the period for the periodic examination.
- b. In addition, an irregular examination shall be carried out if the work has been interrupted:
 - for reasons of illness for more than 8 weeks, with the exception of work in category one under the Public Health Protection Act and if the work or activity does not involve a risk to health,
 - as a result of an accident with serious consequences, an illness associated with unconsciousness or other serious injury, or
 - for different reasons for longer than 6 months.
- 4. **Final Examination** is carried out in order to determine the health status of the employee at the time of termination of their work, with an emphasis on identifying changes in the state of health that are likely to be related to the health challenges of the work performed.
 - a. A final examination shall be carried out at the end of the employment relationship, in particular
 - if the employee has performed a risk work classified under Public Health Protection Act in category 2 with a risk, or 3, or category 4,
 - if at the time of work at the Faculty, an occupational disease or a risk of occupational diseases was recognized for the employee;
 - if at the time of the work, the employee suffered an accident at work and as a result a repeated temporary incapacity for work has been recognized,
 - before transferring the employee to another job or before changing the type of work if this means ceasing the work with a risk.
 - b. In addition, a final examination shall be carried out in case of termination of the employment relationship at the employer's own initiative, for example, if the employer suspects unusual behaviour of the employee in connection with the termination of the employment relationship, termination of the employment relationship happens after a previous long-term sick leave, etc., or at the employee's initiative.
 - c. The head of department requests a final examination in agreement with the HR officer.

Final Provisions

- 1. In case of a change in the conditions that may affect the provision of occupational medical services for the purpose of assessing the medical fitness of employees or persons applying for a job at the Faculty, the matter shall be discussed by the managers in cooperation with the HR officer and the EH&S and FP technician and the management of the Faculty.
- 2. Directive No. IPTO_S_01 Occupational Medical Examination of 10th June 2013 is hereby repealed.
- 3. This Measure shall be valid and take effect on the date of the Dean's signature.

<u>Appendix:</u> An Application for an Occupational Medical Examination Assessment of Medical Fitness for Work

In Hradec Králové on 10th May 2018

prof. MUDr. RNDr. Miroslav Červinka, CSc. Dean of the Faculty

AN APPLICATION FOR AN OCCUPATIONAL MEDICAL EXAMINATION

Charles University, Faculty of Medicine in Hradec Králové, IČ 00216208 Šimkova 870, 500 03 Hradec Králové

Reason for the medical examination*, except for periodic examination: *according to Dean's measure No. 8/2018 Occupational Medical Services Employer Charles University, Faculty of Medicine in Hradec Králové Employee First and Last Name: Date of Birth: Permanent Residence: (or place of residence, in case of foreigners) Job Title, Type and Mode of Work: Department: WORK IN CATEGORY 1 Over 50 years of age YES □ NO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment numbers 2, 2R, 3 or 4, cross out the other fields) Operation of the gas installations □ YES □ NO YES □ NO Oust Chemicals Noise Vibration Operation of the gas installations □ YES □ NO YES □ NO Working position Heat strain Cocial muscle stress Visual strain □ YES □ NO Working with biological agents Antineoplastic agents No (flame, electric arc) Operation of low-pressure boilers □ YES □ NO NO NO Night shift work □ YES □ NO	INITIAL DERIODIC	🗆 IRREGULAR 🗆 FINAL								
Employer Charles University, Faculty of Medicine in Hradec Králové Employee First and Last Name: Date of Birth: Permanent Residence: (or place of residence, in case of foreigners) Job Title, Type and Mode of Work: Department: Department: WORK IN CATEGORY 1 Over 50 years of age YES NO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) Work WORK WITH A RISK TO HEALTH Operation of pressure equipment (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) Operation of pressure equipment (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) Dust (chemicals Noise Operation of Regulations YES NO (incl. gas pressure cylinder) YES NO Occid strain (Cod strain Norking position YES NO (flame, electric arc) Operation of hoisting equipment YES NO (pulley tackles) Operation of low-pressure boilers YES NO (pulley tackles) YES NO Operation of low-pressure boilers YES NO NO <th>Reason for the medical examination*, exception</th> <th>t for periodic examination:</th>	Reason for the medical examination*, exception	t for periodic examination:								
Employee First and Last Name: Date of Birth: Permanent Residence: (or place of residence, in case of foreigners) Job Title, Type and Mode of Work: Department: WORK IN CATEGORY 1 Over 50 years of age YES NO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment numbers 2, 2R, 3 or 4, cross out the other fields) Work on electrical of the gas installations YES [Noise Operation of the gas installations YES [NO Oust Chemicals Noise Chemicals Noise Operation of the gas installations YES [NO NO Working position Heat strain Cold strain YES INO NO Wedder YES INO NO Working with biological agents Monieoplastic agents Operation of low-pressure boilers YES [NO Working with biological agents Antineoplastic agents Operation of low-pressure boilers YES [NO NO Operation of low-pressure boilers YES [NO NO No YES INO	*according to Dean's measure No. 8/2018 Occupational Medical Services									
Employee First and Last Name: Date of Birth: Permanent Residence: (or place of residence, in case of foreigners) Job Title, Type and Mode of Work: Department: WORK IN CATEGORY 1 Over 50 years of age YES NO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment numbers 2, 2R, 3 or 4, cross out the other fields) Work on electrical of the gas installations YES [Noise Operation of the gas installations YES [NO Oust Chemicals Noise Chemicals Noise Operation of the gas installations YES [NO NO Working position Heat strain Cold strain YES INO NO Wedder YES INO NO Working with biological agents Monieoplastic agents Operation of low-pressure boilers YES [NO Working with biological agents Antineoplastic agents Operation of low-pressure boilers YES [NO NO Operation of low-pressure boilers YES [NO NO No YES INO										
Date of Birth: Permanent Residence: (or place of residence, in case of foreigners) Job Title, Type and Mode of Work: Department: WORK IN CATEGORY 1 Over 50 years of age WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment [Vibration Qperation of the gas installations □ YES [Noise No Vibration Operation of the gas installations □ YES [Noise No Vibration □ YES □ NO Working position □ YES □ NO Heat strain □ YES □ NO Working position □ YES □ NO Heat strain □ YES □ NO Working with biological agents NO Antineoplastic agents Operation of low-pressure boilers □ YES [NO NO (pulley tackles) Operation of low-pressure boilers □ YES [NO NO Mental stress ○ Operation of low-pressure boilers □ YES [NO NO Moltal stress ○ Operation of low-pressure bo	Employer Charles University, Faculty	of Medicine in Hradec Kralove								
Department: WORK IN CATEGORY 1 Over 50 years of age YES DO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 WORK WITH A RISK TO HEALTH (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Dust Operation of pressure equipment [Dust Operation of the gas installations DYES [Noise Operation of the gas installations DYES [Non-ionizing radiation Physical stress Local muscle stress Overk on electrical equipment according to Regulation No. 50/1978 Coll.) Welder YES DNO (flame, electric arc) Operation of hoisting equipment DYES [NO NO Working with biological agents Operation of low-pressure boilers DYES [NO NO Working with biological agents Operation of low-pressure boilers DYES [NO NO Working with biological agents Operation of low-pressure boilers DYES [NO NO Working with biological agents Operation of low-pressure boilers DYES [NO NO Working with biological agents NO Minteoplastic agent	Date of Birth: Permanent Residence	e:								
WORK IN CATEGORY 1 Over 50 years of age YES □ NO WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment [Dust Operation of pressure equipment [Noise Vibration (ncl. gas pressure cylinders) Operation of the gas installations □ YES [Non-ionizing radiation Physical stress □ YES □ NO NO Local muscle stress □ YES □ NO (work on electrical equipment according to Regulation No. 50/1978 Coll.) Welder □ YES □ NO (flame, electric arc) Operation of hoisting equipment □ YES [NO Visual strain ○ Operation of low-pressure boilers □ YES [NO (pulley tackles) Operation of low-pressure boilers □ YES [NO NO	Job Title, Type and Mode of Work:									
WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment numbers 2, 2R, 3 or 4, cross out the other fields) Operation of pressure equipment (PES □ NO Dust Chemicals Noise Vibration Operation of the gas installations □ YES [NO Non-ionizing radiation Physical stress Local muscle stress Operation of the gas installations □ YES [NO Working position Pleat strain Working with biological agents Operation of hoisting equipment □ YES [NO Visual strain Working with biological agents Working with biological agents No Might shift work YES □ NO Operation of low-pressure boilers □ YES [NO	Department:									
WORK WITH A RISK FACTOR FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) WORK WITH A RISK TO HEALTH Operation of pressure equipment numbers 2, 2R, 3 or 4, cross out the other fields) Operation of pressure equipment (PES □ NO Dust Chemicals Noise Vibration Operation of the gas installations □ YES [NO Non-ionizing radiation Physical stress Local muscle stress Operation of the gas installations □ YES [NO Working position Pleat strain Working with biological agents Operation of hoisting equipment □ YES [NO Visual strain Working with biological agents Working with biological agents No Might shift work YES □ NO Operation of low-pressure boilers □ YES [NO										
FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) Dust Dust Chemicals Noise Vibration Physical stress Local muscle stress Working position Heat strain Cold strain Working with biological agents Antineoplastic agents Moneulastic agents	WORK IN CATEGORY 1 Over 50	years of age UYES DNO								
	FOR CATEGORY 2, 2R, 3 OR 4 (according the Job Category Chart write in numbers 2, 2R, 3 or 4, cross out the other fields) Dust Chemicals Noise Vibration Non-ionizing radiation Physical stress Local muscle stress Working position Heat strain Cold strain Mental stress Visual strain Working with biological agents	Operation of pressure equipment [YES □ NO (pressure vessels, pressure cylinders) Operation of the gas installations □ YES [NO (incl. gas pressure cylinder) Electrician □ YES □ NO (work on electrical equipment according to Regulation No. 50/1978 Coll.) Welder □ YES □ NO (flame, electric arc) Operation of hoisting equipment □ YES [NO (pulley tackles) Operation of low-pressure boilers □ YES [NO NO (pulley tackles) Operation of low-pressure boilers □ YES [NO NO NO NO YES □ NO								
(DIDIASSIODAD		(professional)								

Date:

Stamp and signature of the head of department

.....

.....

MEDICAL FITNESS FOR WORK ASSESSMENT NUMBER:

Charles University, Faculty of Medicine in Hradec Králové, IČ 00216208 Šimkova 870, 500 03 Hradec Králové

Based	on	the	results	of	the	medical	examinatio	on ca	arried	out	on		
person (erson under assessment (see first page for the information of the assessed person)												
is me	mark with a cross) ☐ is medically FIT ☐ is medically UNFIT												
	is	r	nedically		FIT	SUBJ	ECT	то	CC	ONDITI	ON:		
Ceased to be MEDICALLY FIT FOR WORK IN THE LONG TERM: due to general disease due to occupational accident that occur on: due to an occupational disease due to an occupational disease due to an occupational disease													
□ We c	onfirm	that the	e assesse	ed pers	on has	undergone	FINAL EXA	MINAT	ION.				
Date o	of iss	sue c	of the	asses	ssment		sician, stam	Name	e and	•	 ure		

Notice:

If the person assessed or a person who acquires rights or obligations that arise from the application of the medical assessment suspects a misjudgement, they may, according to Article 46(1) of Act No. 373/2011 Coll. on specific health services, as amended, within 10 working days of the date of its demonstrable transfer, submit a proposal for its review to the provider who issued the assessment. The application for reassessment of a medical assessment shall not have suspensive effect if its conclusion shows that the assessed person is medically unfit for the purpose for which they have been assessed, is medically fit, subject to condition, or has ceased to be medically fit for work in the long term pursuant to Section 43(3) of Act No. 373/2011 Coll. on specific health services, as amended. The right to review the medical assessment may be waived.

The person assessed is aware of and fully understands the hazards of the work, the assessment conclusions and the notice. The assessed person received this medical assessment.

On:

Signature of the assessed person:

The assessed person waives the right to review this medical assessment.

On:

Signature of the health care professional:

Signature of the assessed person:

.....