

OMSOC Position Statement:

The Role of Health Professionals in Reviewing “Work From Home” (WFH) Medical Accommodation Requests

1.0 Purpose of this Document

To clarify the roles and responsibilities of treating clinicians and occupational health professionals (both groups constituting “health professionals”) when addressing medical-restriction-based requests for Work From Home (WFH) as a form of accommodation. For treating clinicians this request may originate with their patient. The occupational health professional may receive this request from an employee of the organization for which they are providing occupational health services.

2.0 Background

Since COVID-19 when WFH was common practice for a period of time for those employees who were deemed able to work remote, medical restriction-related requests for WFH have increased. This trend has exposed scope-of-practice challenges for those who work to support patients (treating clinicians) and those who review fitness for work (occupational health professionals). Both groups of health professionals are expected to evaluate the individual’s health status to determine health-related restrictions, limitations and tolerances (“restrictions”) which are communicated to the employer. The employer is expected to consider the restrictions when considering accommodation options. Ultimately the employer is responsible for determining the appropriate accommodation.

3.0 Scope of Practice and Roles

3.1 Scope of Practice for Health Professionals

Treating clinicians and occupational health professionals identify medical restrictions. It may appear to the health professional that WFH is a solution to the restriction an individual is experiencing; however, determining whether WFH is operationally feasible, how work is structured, and how performance is managed lies with the employer, informed by advice from health professionals regarding restrictions.

3.2 Role of the Treating Clinician

Treating clinicians assess, document and communicate health-related restrictions using clinical reasoning. They inform—but do not prescribe—accommodations. Clinicians should communicate medically required restrictions and refrain from statements which are accommodation solutions dealing with job location, structure supported by the clinician’s opinion of productivity or feasibility of WFH. Clinicians generally do not have first-hand knowledge of the productivity or feasibility of WFH, and commentary on how work may be performed from an employee’s home falls outside their training and experience.

For example, while WFH may seem to be the ideal solution for their patient with attention deficit disorder who finds the workplace social environment to be overly distracting, an appropriate restriction might be to ‘avoid visual and auditory distraction’. This will provide the employer with guidance in determining the appropriate work arrangement which may include WFH.

3.3 Role of Occupational Health Professionals

Occupational health professionals assess and interpret medical restrictions in the context of workplace demands. They translate clinically identified restrictions into job-relevant functional implications, advise on risk, ergonomics, and feasibility of potential accommodations, and support informed decision-making by the employer. While they may rely on information provided by treating clinicians regarding an individual’s health status, occupational health professionals focus on the interaction between the worker and the work environment and often facilitate communication among stakeholders, including employers, human resources, unions, and treating clinicians. Occupational health professionals do not determine accommodations unilaterally; rather, they provide expert guidance to support the employer’s responsibility to identify and implement appropriate accommodations.

3.4 Role of the Employer

The employer determines the feasibility of WFH as an accommodation option. Employers evaluate feasibility and implement accommodations aligned with documented individual restrictions and operational needs. Employers are responsible for finding the accommodation and rely on relevant restrictions from the treating clinicians and occupational health professionals.

4.0 Recommendations

Treating clinicians and occupational health professionals should focus on identifying and communicating restrictions supported by clinical reasoning. Restrictions are not equivalent to accommodations. Clinicians should avoid recommending specific arrangements (e.g., WFH). Employers have the responsibility to implement accommodations aligning with employee restrictions and operational requirements. In circumstances where medical restrictions preclude attendance at the workplace, the employer should consider the feasibility of WFH.