

Information Resource Sheet No.6

TOUGH QUESTIONS FOR MANAGERS OF A PERSON AT WORK WITH A LIFE-THREATENING ILLNESS.

Care and support

1. *Am I responsible for deciding when my employee is too ill to work?*

Yes. When the person's illness is causing an occupational health and safety risk to themselves, and/or other employees that can no longer be managed, your responsibility is to remove the risk.

2. *My staff want to help him, but don't know what is best. Will we be interfering now he has left work?*

When people in this situation are not sure what to do, they often do nothing. This may exacerbate the loneliness felt by the ill person. Reach out with an enquiry, and be open to the possibility that your offer may not be what is needed. Mostly, those who are ill and their carers appreciate being thought of.

3. *N told me his diagnosis, which was a life-threatening illness. But he didn't seem too worried about it? Is it best to let sleeping dogs lie?*

After the shock of receiving their diagnosis, it is common for people like N to be in denial this is really happening to them. For many people, work is a way of keeping things normal. They need time to adjust to their diagnosis. Give them that time. In the meantime, find out for yourself about the illness N has, how it will affect N's work and work relations, how it will be treated, and how that may affect N's work and work relations. You have a responsibility to all your employees, and clients, to ensure you can manage this situation with respect to occupational health and safety, workplace productivity, and N's dignity and capacity to deal with the diagnosis.

4. *N looks quite different now his illness has progressed. I sense some of his work colleagues now avoid him when they can. I wonder if it would be better for his health if he left soon?*

It is common for people to project their troubled feelings on to the perceived source of their feelings. A trained counsellor may help you discuss with your staff how they are coping with N's illness. Work is often very important for ill people, because it gives them a source of identity and self-worth that the illness is undermining. Maintaining their work identity for as long as possible can support them in dealing with their illness.

5. ***A lot of Ns identity is being an important team member. But he is feeling isolated and has lost his self esteem since stopping work. He thinks some of his colleagues are avoiding him because he looks quite disfigured now. I'm not sure what is best?***

How are you feeling yourself with Ns disfigurement? If you are feeling uncomfortable, then it is difficult to think things through. A trusted friend or counsellor can help you talk about your own feelings, and help you better understand the reasons for your own uncertainty.

When you are feeling more settled, it may be helpful to visit N at home with news of work, and to enquire after Ns health. Let N decide how much you talk about work. One manager used these visits to informally ask Ns advice on an issue N had wide experience with. Your visits may provide an example for other employees to visit N. You can also report to your employees, being careful to respect any confidential details. If your visiting causes you to feel upset or anxious, be prepared to seek support from a trusted friend or counsellor. This is an important process so you are not 'burned out' by the stress that can arise from engagement with the terminal stage of a person's illness.

6. ***I employed N on a casual hours contract as he requested. But now he is ill he is not able to work enough hours to maintain his living arrangements. He does get a disability pension, but it isn't enough. Is there anything I can do?***

Sometimes there is a limit to what you can do! Talk to N about your awareness of his financial need, and the impact of his illness on his ability to work. Listen to any of Ns requests, and promise to evaluate them and give him a response as soon as you are able.

Being truthful about your capacity to provide flexible or alternative employment is respectful of your relationship with N, and indicates your personal support is not limited to your role as an employer/manager. You may be asked to provide information to Centrelink to ensure N receives the entitlements for disability as his health deteriorates.

7. ***If N is to remain at work, I need to change his work role because he isn't able to do everything he used to. But I don't want to cause him stress by giving him new things to do, or removing work that he has clearly enjoyed in the past. What is the best way to handle this?***

The fact you are aware of N's needs is a helpful start. You won't cause him unnecessary stress if you give N new things to do, and he has been part of the decision. Trying to protect N by making decisions on his behalf is more likely to cause unhealthy stress because it can reinforce the powerlessness he may be feeling with his illness. The stress of a new challenge he has been involved in planning may be the energising feeling that contributes to N's enjoyment of work and life.

8. What if a work-mate of the ill person confidentially informs me of the life-threatening illness but stresses the fact that the ill person does not wish the organisation to know about it?

Once you are informed of your employee's health status, your responsibility increases. You are now aware this person may require additional care to maintain workplace health and safety. However maintaining trust and confidence with staff is also essential. It may be helpful to obtain expert outside assistance for the person who approached you so they may encourage the ill employee to volunteer their condition to the company. It is possible the ill person is in shock over the discovery of their illness, or fearful of the future. The trusted work-mate may be supported to help the ill person understand these feelings and move beyond them.

You may also review the 'Model Company Policy' and have a policy in place for your organisation. This can contribute to establishing confidence in the workforce and management that the issues will be dealt with appropriately.

9. What if the above happens but the colleague also reports the ill worker is struggling and/or other staff members are becoming resentful because they don't know the circumstances?

Again obtaining guidance for the work colleague so they may be able to encourage the ill employee to make a disclosure. Disclosure will enable arrangements to be put in place to satisfy any reduced capacity without overloading the other employees. Eventually if work performance deteriorates and no direct disclosure has been made the employer will need to address these issues as part of performance review. This provides the employee with an opportunity to explain their decline in performance. If they do so help can then be discussed.

10. Will the company and I as a manager be forever judged on how we handle this situation?

Poor managers are prone to ignore hard decisions. In society living with illness and dying is something most people seek to avoid. This is an opportunity to demonstrate that you as a manager and the company as an organisation are capable of handling the most difficult of situations well. To do this,

- Decide to manage rather than ignore the situation.
- Consult as broadly as privacy and confidentiality permit.
- Utilise resources.

Grief and loss

11. ***I shut out of my mind how serious Ns diagnosis really was. I tried to remain positive for his sake, but now he has died. Did I do the right thing?***

It is common to feel guilt after a person dies. Feeling guilty can be part of our grief. We wonder if there was something we could have done to prevent what happened. Feeling powerlessness is a common response to the power of death to take from us people we value. You can accept you did the best you could, and accept your own feelings as part of your own grieving. There may be a time later when you can review whether you may handle matters differently in the future if you had to.

12. ***I didn't know how to talk to my employee when his physical appearance declined so much. Now he is dead. Did I miss the boat by not visiting him?***

This is a similar tough question to the previous question, and a similar response is suggested.

13. ***Ns illness has had a big impact on some of my hard working staff and on me. Do I really want to work that hard? How do I respond to others who are thinking again about their priorities?***

Being confronted by death often causes people to reassess their priorities. We think more deeply about what is important in our lives. It is healthy that this happens. But making big decisions in the early stages of grief is generally not advised. Talk to a trusted friend about how you are feeling. Become aware of changes in your energy level at different possibilities. Be willing to explore those possibilities that energise you. A process like this can also equip you to listen non-judgmentally to others reviewing their priorities. Sometimes a counsellor can support you with this work.

Compensation

14. ***If I allow the worker to continue at work could I end up with a compensation claim that increases my workers' compensation insurance premium?***

Yes, you could.

Workers' compensation is payable to a worker if a pre-existing condition is aggravated, accelerated, worsens, is exacerbated or reoccurs, but only if employment has contributed in a 'significant' way to that worsening. The courts have determined 'significant' to mean 'not minimal.'

However if a sudden physiological change occurs at work this has been identified by the law as a 'new injury' and as such no requirement to show work was a significant contributing factor exists in the case of a new injury. A sudden physiological change would include a rupture of an organ or a seizure. The fact that the event may be due to the progress of a disease or terminal illness is irrelevant.

Heart attacks and strokes are specifically excluded from being compensable unless work has significantly contributed to the occurrence of that new injury.

15. *If the employee dies at work will the company be exposed to a death claim?*

In the circumstance of a person with a life-threatening illness, it is likely the death results from a sudden onset change. If that sudden change occurs at the workplace and the death results as a consequence (whether at or away from the workplace) then except for heart attacks and cerebral strokes any dependents of the employee would be entitled to compensation.

Not all life-threatening illnesses contain the possibility of a sudden onset death. So the chances of a death occurring at the workplace might be very low indeed. If this is a concern talk to medical advisers as well as obtaining the worst case cost scenario from your state WorkCover. This information can then be incorporated into a risk assessment and an assessment made of the organisation's level of exposure and the organisation's capacity to manage the financial impact.

16. *If the person with a life-threatening illness dies or has an episode at work, will I get compensation claims from workers who witness it or are affected by it?*

A claim for mental injury commonly occurs when people at work witness a death or traumatic episode involving a colleague or customer. A person with a diagnosed life-threatening illness may be no more likely to die or fall suddenly ill while at work than those without such a diagnosis.

If such a claim is made the compensation system provides paid access to counselling. That could mean the person is back and productive quicker than had they claimed sick leave for the same matter.

The Occupational Health and Safety Guidelines (Information Resource Sheet No.5) also provide a framework for procedures that would minimise the impact of many traumatic events that workers may be exposed to in the course of their employment.