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MOHS Resources

Fitness Standards for Safety Critical Workers

The Purpose of this document

Safety Critical Fitness Standards can be confusing, particularly when the same standard is applied arbitrarily to different classes of worker with different roles and risks.

By publishing our standards, we hope to bring some clarity to our fitness decision making process and, at the same time, help you to understand the context of these decisions and the implications that they may have for both employers and employees.

Fitness Standards for Safety Critical Work

Component	Fitness Standard	Recall
Skin	Symptoms may require Tier 3 or 4 review.	Annual
Respiratory	FVC and FEV1 should be 80% or above prediction. FEV1/FVC ratio 70% & above. Repeat FVC or FEV1 be less than 30ml difference. Symptoms may require referral to the employees GP regardless of fitness decision, and/or Tier 3 or 4 review.	Annual
HAVS 1&2 (if exposed)	No symptoms. Positive HAVS or CTS symptoms require Tier 3 review. A positive tier 3 outcome will require Tier 4 review with a physician.	Annual
Audiometry	Category 1 or 2. Worse results may require adjustments and a functional assessment. Unilateral results do not usually affect fitness decisions but conventionally require referral to the employees GP. New/progressive indications of noise induced hearing loss require Tier 3 & 4 review.	Between 1 & 3 years, depending on result.
Blood Pressure	General work, less than 180/110. Heavy plant & HGV less than 180/100	Up to 3 years.
Vision (Distance)	General work minimum 6/12 in one eye Heavy plant & HGV operation minimum 6/7.5 in one eye and 6/60 in the other	Up to 3 years.
Vision (Peripheral)	No deficits. Problems should be referred to optician	Up to 3 years.
Vision (Colour)	Ishihara test, normal result. Deficits may require adjustment or functional assessment.	Up to 3 years.
Vision (Near)	N6 both eyes. Deficits referred to optician but do not usually affect fitness decisions.	Up to 3 years.
Mental Health	Free from mental health issues that may affect concentration or decision making. Where there is a safety risk, employee's fitness should be deferred, and should be referred to their GP or a mental health practitioner for review.	Up to 3 years.
Urinalysis	No Anomalies – Positive results should be referred to employee's GP. If signs of diabetes, consider symptoms and defer if risk of unconsciousness is evident.	Up to 3 years.
Musculoskeletal issues	Free from issues that might affect safety including climbing and safe vehicle operations	Up to 3 years.

Understanding our decisions

When assessing an individual's fitness for Safety Critical Work, we look at each individual standard, but also at the person as a whole. In many cases we also consider the work that they are likely to undertake. Occasionally, employees are found permanently unfit for Safety Critical Work and require redeployment to other types of work.

Timely Review

Employees will require re-certification of certain assessment components on an annual basis (and the General Medical component every 3 years). Employees health can and will change over this time meaning that not all workers may be found fit on the day. Leaving re-certification until the last minute may mean that some employees will not be available for the start of new projects or time critical work.