



This guide is intended to highlight some of the common issues that surround diabetes in the workplace.

Most people with diabetes have fulfilling and productive careers until retirement. After retiring from the paid workforce many continue to remain active and contribute to their communities in many ways.

As a person living with diabetes, whether newly diagnosed or for some time, if you face difficulties at any stage of your working life, be assured you are not alone. Diabetes NSW & ACT are here to support you.

If you need help or support with your rights and/or responsibilities at work contact us on 1300 342 238.

DIABETES IN THE WORKPLACE

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YOUR RIGHTS AND RESPONSIBILITIES IN A WORKPLACE

Discrimination

There are laws to ensure that a medical condition cannot be used as unfair grounds for refusing you a job or promotion, or for dismissal.

Under the New South Wales Anti-Discrimination Act (1977), ACT Discrimination Act (1991) and other Acts including the Federal Disability Discrimination Act (1992), an employer cannot discriminate against someone because they are living with diabetes either directly or indirectly.

Direct discrimination is when someone is treated less favourably because of their diabetes. Examples of direct discrimination include if an employer:

- Refuses to employ you after an employment medical identifies you have diabetes, or fires you.
- Limits your job responsibilities.
- Refuses promotions and training.

Indirect discrimination occurs when a workplace has requirements or practices that may appear fair but in fact discriminate against people on the basis of a particular characteristic. Examples of indirect discrimination include if an employer is unwilling to:

- Accommodate your need for regular meal or snack breaks.
- Provide a private location where you can check blood glucose levels.
- Provide a private location where you can administer insulin.

Often, discrimination in the workplace occurs because employers and co-workers do not understand diabetes and how it is managed.

WHAT SHOULD I DO IF I FACE DISCRIMINATION?

In the first instance, use internal processes at your place of employment. Speak to a manager or employee representative.

If this does not resolve the complaint, discrimination complaints can be lodged with the NSW Anti-Discrimination Board. Forms are available at www.antidiscrimination.justice.nsw.gov.au. These should be lodged within twelve months, unless there are exceptional circumstances. In the ACT, the Human Rights Commission has a complaint form available at <https://hrc.act.gov.au/discrimination>.

Unfair dismissal cases can be heard by Fair Work Australia, but must be lodged within 21 days. Find more information at www.fairwork.gov.au/ending-employment/unfair-dismissal.

WHAT IS NOT DISCRIMINATION?

If you are unable to perform the reasonable requirements of your job, or your performance is questioned separately from your diabetes, your employer is allowed to take action. If you are not treated differently from your colleagues because of your diabetes, it would be difficult to establish any grounds for discrimination.

If your diabetes affects the safety of your colleagues, your employer can remove you from duties, or the job altogether if the duties are an inherent part of it.

There are some exemptions to discrimination, including allowing particular employers to impose medical requirements on their employees for safety reasons, meaning restrictions for people living with diabetes.

Some examples of this are:

- **The Australian Armed Forces:** If you require insulin, you cannot serve in the Armed Forces. All members of the Armed Forces must meet specific

employment criteria. Unlike other employers, the military does not have a duty to accommodate those who do not meet their criteria.

- **Police, Fire and Ambulance Services:** Requirements of entry for jobs within state police, emergency and paramedic services vary across Australian states and territories. NSW Police will now consider case-by-case applications, including people living with type 1 diabetes, based on their ability to manage blood glucose levels. This is judged in the context of the risk of hypoglycaemia in unexpected or emergency situations, and the ability to discharge duties at all times. More information is available at www.uhg.com.au/wp-content/uploads/2017/05/NSW-Police-MEDICAL-STANDARDS.pdf. The Australian Federal Police, and through them Policing ACT, have requirements for both type 1 and type 2 diabetes recruits based on glycaemic control and sustained HbA1c results, but type 1 recruitment is currently under review. More information is available at www.afp.gov.au/careers/vacancies/frequently-asked-questions/faq-entry-level-sworn-recruit-roles#5. The Ambulance Service will also assess on a case-by-case basis, with the health requirements of the applicant weighed against the inherent components of the job, including shift work, irregular meal times, fatigue and stress. More information is available at https://www.ambulance.nsw.gov.au/_data/assets/pdf_file/0020/552323/Graduate-Paramedic-Intern-role-description.pdf and <https://esa.act.gov.au/join-us/careers/actas>.
- **Passenger transport services:** Taxi and bus drivers - In New South Wales and the ACT an individual is required to have driver authorisation which includes a medical certificate when driving with diabetes. Contact Roads and Maritime Services, or find more information at www.rms.nsw.gov.au/roads/licence/driver/index.html, or Access Canberra www.accesscanberra.act.gov.au/app/answers/detail/a_id/1581/~/_act-driver-licence-information#!tabs-6.
- **Transporting hazardous materials or large cargo** e.g. explosives and petrol; and jobs involving the use of potentially dangerous machinery
- **Corrective Services and Youth Justice:** Some positions require medical certifications and might not be compatible with diabetes.
- **Pilots and flight cabin crew:** For those requiring insulin, there are restrictions which require assessment on a case-by-case basis by the airline's medical adviser. Flight work is restricted to multi-crew flights with commercial airlines. Pilots are required to meet required standards including holding a CASA medical certificate.

Do I have a right to reasonable adjustments at the workplace?

A reasonable adjustment is any change or modification that is made at a workplace that enables people with diabetes to work safely. Employers are obliged to make reasonable adjustments in the workplace unless this results in an 'unjustifiable hardship' (usually cost) to their business.

Some examples of reasonable adjustments in the workplace include:

- Maintaining confidentiality about your medical condition.
- Flexibility with breaks, meeting times, medical appointments and shifts.
- Regular scheduled breaks in addition to the minimum award provisions to meet the requirements for snacks.
- Provision of a private and clean place to monitor blood glucose levels and administer insulin.
- Installation of emergency 'hypo' prevention and treatment provisions at your work station and a first aid kit.
- Installation of a sharps disposal container for the safe disposal of medical waste.
- Enlarged computer screen for those with impaired vision.

The federal government provides funds for employers to help with costs for eligible workplace adjustments under the Employment Assistance Fund.

Can I expect privacy at work in regard to my diabetes?

In the workplace, safety will be top priority, so you are entitled to privacy unless it causes a risk to the safety of yourself or your co-workers.

This will apply to disclosing your diabetes, in particular if you are employed around heavy machinery, transport, or emergency situations.

You can expect that your employer will respect your privacy and keep your medical condition confidential.

It will also affect issues such as administering insulin in private. This can be done in whatever space you prefer, as long as there is no safety risk. Your employer should provide you with a clean, private space if you request one, but you are also able to administer medication in public spaces. However, care should be taken in ensuring those public spaces are away from thoroughfares and busy areas, to reduce the risk of needlestick injury to yourself and others. Proper disposal of sharps is also required.

If injecting in a public space at work, it is recommended to discuss this with colleagues who work in the immediate area. Some people may have needle phobia, and good communication can help to avoid disputes.

Driving

It is a legal obligation that drivers who have been diagnosed with type 1 or type 2 diabetes notify the Department of Roads and Maritime Services or Access Canberra of their diabetes. In addition, if you drive a company car, you must also let your employer know of your diabetes.

If you are driving at work without having notified Roads and Maritime Services or Access Canberra and you are involved in a crash, you could be sued under common law and/or charged with driving offences. In addition, your employer's insurance company may not provide cover.

Disclosing diabetes

It is a matter of personal choice whether you disclose your diabetes in most cases.

You should tell your employer of your diabetes if:

- You are driving a company vehicle
- You are operating heavy machinery or working in situations with risk
- The side effects of your medication can impact your work
- You are seeking reasonable adjustments to your work conditions
- WorkCover and insurance require your disclosure.

Note that if you have an accident/injury at work and your diabetes was a contributing factor and you have not disclosed your diabetes in writing to your employer prior to the accident/injury, a claim for WorkCover may not be approved.

If you are applying for a job, you do not have to disclose your diabetes, but it is advisable to do so if it will affect your ability to undertake core roles in your jobs, or if your diabetes could create a safety risk for you or your coworkers.

Another consideration in disclosing your diabetes within a work place is to discuss with some managers or colleagues what to do if you have a hypoglycaemic episode at work. If you do have an episode and they are not aware of your diabetes, they will not be able to react appropriately or immediately.

DO I HAVE A RESPONSIBILITY TO DISCLOSE MY DIABETES TO MY SUPERANNUATION FUND OR INSURANCE COMPANY?

Terms and conditions can vary across superannuation funds. You need to check the fund's product disclosure statement to be clear about what you are covered for and whether you have to tell the fund about your diabetes.

Check if a particular insurance policy requires you to fill out a health questionnaire. Not disclosing your diabetes may mean that your insurance policy can be cancelled and/or you may not be able to make a claim.

MANAGING DIABETES IN THE WORKPLACE

How can diabetes affect work performance?

Diabetes could become an occupational health and safety issue if your condition impacts on your ability to exercise judgment, or if your co-ordination, motor control, concentration and alertness are impaired. This could lead to an increased risk of workplace injury to yourself or others.

Hypoglycaemia

Low blood glucose levels (BGLs) occur when your blood glucose falls below normal (3.5 to 7.8mmol/L). Hypoglycaemia (commonly known as a hypo) impairs judgment and cognitive function (thinking, reasoning) and can cause blurred vision, drowsiness, weakness, shaking, and may progress to unconsciousness if not treated early.

The ability to drive safely has been shown to be impaired when BGLs fall below 5mmol/L.

Check with your pharmacist to see if any of your medicines have the side effect of hypoglycaemia.

HYPOGLYCAEMIA UNAWARENESS

People with long-standing diabetes, who are insulin treated and have frequent hypos may not experience the usual symptoms. BGLs can become dangerously low and if untreated this can result in unconsciousness. Hypos can be unsafe and can potentially put you and others at risk. If you are at risk of hypoglycaemia or are 'hypo unaware' it is recommended that you tell a trusted colleague, first-aid worker or human resources manager, particularly if you work in a hazardous or safety-sensitive job.

MANAGING HYPOGLYCAEMIA AT WORK

If you choose to tell trusted colleagues about hypos, tell them what to expect, how they can best help you if you require assistance and where you keep your hypo treatment.

- Tell your co-workers to call an ambulance by calling 000.
- Give co-workers a copy of the Hypoglycaemia Emergency Information sheet at the back of this booklet.
- Describe your usual signs and symptoms of hypoglycaemia.
- Warn colleagues that during a hypo you may not be very co-operative and may even resist their attempts to help.
- If you have a mobile phone, put the abbreviation 'ICE' (In Case of Emergency) and your emergency contact's details into your phone number list. This will alert emergency medical staff that this is the person to call in case of an emergency.
- Make up a 'hypo kit' to keep at your workplace. This will include your emergency information sheet and contact numbers for your next of kin, doctor and hospital; some fast acting carbohydrates such as jelly beans, glucose tablets, non-diet soft drink or Lucozade®; some slow-acting carbohydrate such as muesli bars or small packet of dry crackers.

Could I lose my job if I am having hypos at work?

If you cannot perform the core duties of your job because of regular hypos, or if you are putting yourself or others in danger, then you could lose your job.

In keeping with employment and equal opportunity and human rights laws, your employer would be required to go through a formal process before this could occur.

As part of the process, your employer could organise a medical assessment to help determine your ability to perform the inherent requirements of your job.

They can also help to identify if there are changes at work that can be made to assist you in being able to retain your job. Your employer would need to consider a range of things to help you, which could include redeployment to a different work area.

If you experience regular or severe hypos, it is important to have this reviewed urgently by your doctor, endocrinologist and/or diabetes educator. They will be able to review your diabetes management plan and suggest changes aimed at preventing regular hypos.

Can my employer ask to see my blood glucose results?

No, your employer does not have the right to ask you for the results of your monitoring. This is an invasion of your privacy.

If your employer believes that your diabetes is affecting your ability to carry out the job as described in your position description, they can ask you to prove that you are medically fit to carry out your job. You may be asked for a letter from your endocrinologist commenting on your medical fitness to carry out the essential duties of your work.

Hyperglycaemia

Hyperglycaemia (high blood glucose) occurs when BGLs rise to 10mmol/L or higher. Hyperglycaemia can cause tiredness, lethargy, irritability, thirst, going to the toilet more frequently and blurred vision. High blood glucose can also affect thinking, concentration, memory, problem solving and reasoning.

Diabetes complications

Diabetes complications include neuropathy, retinopathy, cardiovascular disease, peripheral vascular disease, anxiety, depression and/or mental illness. Your diabetes management and care plan should include strategies to help you undertake requirements of your work safely.

Examples of such strategies include:

- Wear protective footwear. If your workplace requires safety footwear, make sure you speak to your podiatrist about this.
- Avoid standing for long periods.
- Ensure annual leave is taken.

If you are worried that your work may be contributing to or are concerned about developing any of these complications it is recommended talk about it with your endocrinologist, doctor or diabetes educator.

Tips for staying safe at work:

- Check your blood glucose level before undertaking hazardous tasks, operating machinery or driving. Make sure that your BGL is above 5mmol/L and below 10mmol/L before starting and during tasks.
- Check your blood glucose regularly if undertaking lengthy tasks.
- If you need to, take regular meal breaks and snacks.
- If you experience signs or symptoms of hypoglycaemia, or your blood glucose levels are less than 3.5mmol/L, even if you have no symptoms, stop and treat it immediately.

If you work shifts,

- Ask for regular days, hours and fewer changes of shift.
- Ask for regular times for meal and snack breaks.
- Monitor your blood glucose levels regularly to check the effect of different work hours so you can work out if you need to make changes to your diabetes medication/insulin.
- If you require medication and/or insulin to manage your diabetes, the times you

take them will need to be adjusted to accommodate your different working, sleeping and eating times.

- If shift work is adversely affecting your diabetes care, you may be able to negotiate more suitable hours with your employer. This will require a medical certificate or letter from your endocrinologist.

Your individual diabetes management and care plan should include a section on work. It is recommended that you discuss the detail of your work with the members of your diabetes health team.

This is a general checklist of items to discuss with your health professionals:

- Update your plan if there are episodes of hypoglycaemia or hyperglycaemia.
- Negotiate a place to check your BGLs and store your meter that is accessible.
- Have a plan in place for checking your BGLs if you are hypo unaware.
- Have a clean and private place to use your insulin.
- Work out how and where to safely store your insulin.
- Know your entitlements and rights about time off to attend medical appointments.
- Have a sick day plan in place.
- Make insulin and food intake adjustments that take account of any increased physical activity as part of your job.
- Work on ways to remove/reduce workplace stress.
- Work out ways to safely dispose of your sharps and medical waste.
- Plan to deal with shift work including menu and snack plans while on night duty.
- Plan for travelling if required for work.

For more information contact Diabetes NSW & ACT on 1300 342 238
www.diabetesnsw.com.au

Hypoglycaemia Emergency Information

1. Hypoglycaemia is a blood glucose level that falls below 3.5mmol/L even if there are no symptoms.

SYMPTOMS OF HYPOGLYCAEMIA

Early signs	Late signs
Sweating	Confusion
Weakness	Drowsiness
Pale skin	Changes in mood or behaviour
Trembling	Lack of coordination
Dizziness	Slurred speech
Heart palpitations	Loss of consciousness
Hunger	Seizures

2. Treat quickly. If the person is conscious give glucose or sugar immediately; e.g. one of the following:
 - o 6 – 7 jelly beans.
 - o ½ can of regular soft drink, or 100ml of Lucozade®. Not diet soft drink.
 - o 3 teaspoons of sugar or honey dissolved in water.
 - o Glucose tablets equivalent to 15 grams of carbohydrate.

You might need to coax the person to eat or drink. Symptoms should improve in 10 - 15 minutes. Stay with the person and ask them to re-test their blood glucose after 15 minutes.

Normal activity can be resumed if blood glucose levels are over 5mmol/L and symptoms have improved. A long-acting carbohydrate snack such as milk or dry biscuits may also be needed.

3. **Emergency action. If the person is too drowsy to eat or drink, has a seizure or is unconscious, get emergency help!**

Turn the person onto their left side and do not give fluid or food. Call 000 for an