Employer Requirements to Work during Emergency Responses: Key Ethics Considerations

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Local health departments (LHDs) are at the forefront of emergency preparedness, response, and recovery. LHD workers participate in epidemiological investigations, staff vaccination clinics, and implement response plans for scenarios ranging from floods to salmonella outbreaks. LHD workers provide crucial disaster services. For instance, when lower Manhattan lost power after Hurricane Sandy, LHD workers coordinated evacuation of over 6,000 patients from multiple health care facilities. Yet, studies have found that, depending on the emergency scenario, between seven and 40 percent of LHD workers would not report to work. This can greatly compromise a response, as many LHDs need “all hands on deck” to effectively meet increased demands. While the precise reasons are unknown, LHD workers’ lack of willingness may be due to several factors, including unclear or inconsistent explanations about work requirements during emergency responses.

To address concerns about employee participation in emergency responses, LHDs have implemented varied policy strategies to ensure that their employees do report to work. This article first describes different approaches LHDs have used to convey work expectations during emergencies. Next, it briefly identifies and explores key ethics considerations that arise for LHDs when employees are required to report to work for emergency responses. Finally, the article discusses how these ethics considerations may inform LHD practices intended to promote robust emergency responses.

Employee Notification of Work Requirements

While every LHD is unique, most expect at least some employees to report to work during an emergency. As part of a project to develop ethically and legally sound practices to promote response willingness among LHD workers, we conducted focus groups and in-depth interviews with LHD employees. Among the topics discussed were how staff are informed about roles and responsibilities for emergency responses. We learned that there is a lack of consistency among processes for disclosing emergency response roles and responsibilities, which may leave employees without a thorough understanding of employers’ expectations. LHDs that convey their emergency response expectations typically do so in one or more of the following ways: (1) language included in an employment contract; (2) during new employee orientation; or (3) through routine communication with a supervisor.

When staff roles and responsibilities are conveyed through an employment contract, it may occur via specific language about reporting to work during emergencies. Next, it briefly identifies and explores key ethics considerations that arise for LHDs when employees are required to report to work for emergency responses. Finally, the article discusses how these ethics considerations may inform LHD practices intended to promote robust emergency responses.

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legal obligation could result in disciplinary action and, in the most extreme cases, lead to employment termination. Yet, in our interviews and focus groups, many LHD employees and supervisors stated that they did not know, or had not thought through, consequences for non-response. Several even noted that contractual language might be ignored with no consequences for failure to comply with an emergency response work requirement. Though our study participants did not mention this option, an LHD worker could theoretically even prefer to risk job termination rather than face the real or perceived risk of reporting to work under certain circumstances. These reactions suggest that, in the context of emergency response work requirements, traditional legal mechanisms (e.g., signing a contract) may not be effective to promote response willingness.

Regardless of whether a contract is signed, expected emergency response roles and responsibilities may be shared during an LHD’s new employee orientation. This information is generally mentioned to an audience of several new employees, either via a human resources representative or during an emergency preparedness module. If the information is conveyed by a supervisor, it is often discussed during an annual one-on-one conversation or correspondence (e.g., yearly review or assessment). In both instances, employees usually have an opportunity to ask questions to clarify what is expected of them. No matter how roles and responsibilities are conveyed, trainings and exercises intended to prepare employees for an emergency response may be offered through the LHD, but participation may not be required.

Ethics Considerations for Work Requirements

This section briefly identifies ethical justifications that support LHD actions intended to increase the likelihood that staff report to work and participate in infectious disease emergency responses.

Respect for Persons, Building Capacity

LHDs should appreciate that providing knowledge and skills will enhance individuals’ ability, and likely their willingness, to respond to emergencies. In the absence of education and training, an employee will be unable to understand the importance of his or her role and responsibility, or how their role and responsibility are essential to the overall response. Therefore, at a minimum, LHDs should have a standardized protocol for disclosing to each employee whether she is expected to respond in an emergency and, if so, the details of her expected role. However, disclosure alone is inadequate. If employees are expected to respond, the LHD must assure they are adequately prepared. As a start, each employee should have the opportunity to ask questions about his role at the time of disclosure and be provided with information about how he will be equipped, mentally and physically, to assume his emergency response role.

After work requirements have been disclosed but before an emergency has occurred, LHDs should ensure that a variety of trainings are offered. Of note, in some instances this may be necessary to meet legal duties to prepare employees to participate in responses. Required trainings should correspond to the role an employee will have during a response, and should be easy to access. For example, for some employees completion of online training modules may be enough preparation. For others, tabletop exercises or specific trainings may be more appropriate. Certain trainings, such as donning and doffing of personal protective equipment (PPE), should be offered in person. During PPE trainings, the LHD should explain measures in place to ensure that everyone who might risk exposure during a response will receive PPE. Limited data suggest that, if LHDs took certain steps such as guaranteeing access to and training about PPE, response willingness might increase.

As training is essential to employees’ capacity to fulfill their responsibilities during an emergency, trainings and drills should be offered during standard work hours. Employees should not be expected to participate in trainings outside of their standard work week (e.g., at night, on the weekend). If circumstances only allow for trainings and/or drills to be offered during non-work times, then employees should be compensated through overtime pay or flex time hours, if such arrangements are permitted by their employer. Adequately reimbursing employees for their time acknowledges that their role during an emergency is an essential component of their public service. Asking for voluntary participation in trainings and/or drills may convey an impression that participation is optional. A request for participation in uncompensated training may also suggest that the institution does not value staff members’ time, or perhaps even their person, which could erode the trust and respectful relationship necessary to encourage maximum participation.

An important benefit of attending training and engaging in drills is that employees see the value of their role and how their contribution is key to a response’s success. Research has shown that willingness to respond may lie in employees’ understanding of how the response is dependent on their contribution and how failure to respond will leave their colleagues to take on additional burdens.

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Respect for Persons, in Relationships
Having a specific role in a response can inflict a potentially significant burden on LHD workers, including time away from family and friends, temporary shifts in work responsibilities, and exposure to hazardous or frightening situations. Failing to acknowledge or address these burdens and fears may increase the likelihood that some LHD workers — even those well trained — will be unwilling to report to work for an emergency response. By taking actions to address these factors, LHDs can accomplish the twin goals of promoting response participation and minimizing the burdens they impose on their employees. As a starting point, the following are steps that LHDs can take to minimize the burdens and risks that emergency response work requirements impose on their employees.

Leadership should explore creative solutions, including having some dependents shelter-in-place with employees at the workplace. LHDs should also explore options for working remotely during disasters, by routing access to data systems and phone lines to employee homes. Staff might be more likely to attend work when needed if they knew genuine efforts minimized the number of staff needed for the response. Finally, LHDs may wish to ask employees about the types of assistance they would find helpful to fulfill their duties. Communication strategies that include listening, as well as informing, signal the mutual respect needed for cohesive disaster responses.

As part of emergency preparedness, employees should, on an annual basis, receive dedicated work time to develop plans for care of their dependents and/or pets should their response participation occur outside of a standard work week. Once the emergency occurs and employees are required to report to work, LHDs should continue to minimize the burden their employees face. When the emergency involves an infectious disease or hazardous exposure, LHDs should ensure that their employees receive prompt access to vaccinations or countermeasures. Priority should be given to those who are frontline responders, and thus most likely to face exposure, but ideally all employees who respond should be granted priority access to these measures. By taking this step, LHDs acknowledge the risks their employees may face during a response and help to mitigate them. Extending this priority allocation to immediate family members of LHD employees acknowledges the peace of mind that can come from knowing family members are safe and first in line for needed resources when faced with potential exposure.

In addition, LHDs should create response work-plans that minimize the likelihood that employees who report to work will have to work longer than anticipated or during sequential shifts. This can be accomplished by developing a system in which multiple “back-up” employees are available should someone not report to work during the emergency response. Such a system is critical to evenly distribute responsibilities and ensure that those who report to work as required are not unintentionally punished by working longer hours to compensate for those who are not present. During some emergencies, it may be impossible to avoid extended shifts (e.g., flooding makes roads impassable). Leadership should explore creative solutions, including having some depen-
ness to participate in a response may decrease despite requirements to report to work. Given current data about lack of response willingness among LHD workers — and the difficulties associated with responses fielded by a limited workforce — LHDs should look favorably on steps they can take to improve response willingness.

Although employment contracts typically establish work requirements, LHD employees and supervisors have indicated that they are not adhered to, or treated consistently by staff, during an emergency response. Therefore, because traditional legal mechanisms will not necessarily yield robust response participation, LHDs should be open to other measures that might improve response willingness. By augmenting current processes and policies with lessons learned from this brief exploration of key ethics considerations, LHDs have an opportunity to improve the experiences of their employees and, thus, the quality of their emergency responses.

References
5. See supra note 4.