



# Sick of Sick Notes

■ Adrienne Freese, RN, BSN

For a patient, what's worse than having a violent case of diarrhea? Obtaining an employer-required sick note *proving* said diarrhea. Do we, as healthcare workers, watch our patients on the toilet for evidence of diarrhea? Thankfully we don't. Unlike our patients' employers, we take our patients' word for it.

A sick note may seem like a benign issue, but it is surprisingly and unfortunately more complicated. There are policy issues, patient barriers and hardships, safety concerns, and limits to provider resources and time, which need to be considered. Successfully addressing these issues will ultimately require advocating for legislative change—not a small task. In the meantime, there are creative ways to try and lessen the impact a seemingly simple note can create.

### Current Policy for Sick Notes

In the United States, there are no legal federal requirements for paid sick leave.<sup>1</sup> Employers are left to create their own employee illness policies. Some policies require a doctor's note to excuse illnesses—even illnesses that are self-limiting and don't need treatment. The Centers for Disease Control and Prevention recommends staying home and away from others when sick, but some employers might demand the opposite.<sup>2</sup> This contradiction between what an employer requires and what the government recommends creates the potential for increased financial burden to patients, unnecessary exposure to other vulnerable patients, and stress on the healthcare system.

### Patient Barriers

Getting a required sick note is not easy. As many as 100 million Americans have difficulty accessing a primary

care provider. Urgent care clinics may be the backup for those Americans.<sup>3</sup> I work as a charge nurse in a busy urban urgent care center within a safety-net healthcare system. Many of the patients we serve are immigrants, refugees, low-income earners, and other vulnerable populations who have language, cultural, and financial barriers to accessing healthcare.

Many companies that require sick notes are often employers offering minimum wage jobs. Their employees may lack ongoing healthcare, and they rely on urgent care services when health issues arise. An urgent care visit can be costly for these patients, especially if the patient does not need treatment, and they only need a sick note to excuse them from work or a permission note to return to work. Many of our patients rely on public transportation. This adds more hardship to the patient when they already feel sick.

### Safety Concerns

Getting a sick note can be dangerous. As we are still reeling from the COVID pandemic, limiting exposure to others when someone is sick becomes even more important. Many of our patients take public transportation, and they do not mask or take precautions en route to urgent care. This trip then exposes other people to illness just for the sake of getting a note.

The urgent care waiting room is also a safety concern. It is not uncommon for newborn babies to be at urgent care for a weight or bilirubin level check, or for something noninfectious like a rash or belly button concern. This vulnerable baby is often sitting next to a person with a viral upper respiratory infection who only needs a sick note. That baby's exposure to a viral illness could be deadly.

### Provider Challenges

One provider might see up to 60 patients a day, and writing those sick notes can be overwhelming. Not only are providers seeing some patients just for obtaining sick notes, but they are often asked to go back and revise a note because it did not meet the requirements of the employer. The employee may need specifics on their return



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precautions, or the employee may need to extend a previously provided sick note. As a charge nurse, I am usually the one taking those phone calls and interrupting our providers to amend these notes. Once the note is amended, the patient will then have to make another trip to urgent care to pick it up.

### Policy Change

Canadian providers have already had enough, and they spurred the passing of Bill 68 on October 9, 2024.<sup>4</sup> Bill 68 prevents employers from requiring a sick note for the first 3 short-term absences (defined as not exceeding 3 days) in a 12-month period. This kind of legislative change has the potential to help protect employees, minimize exposure when patients are sick, and reduce stress on providers.

I know we are just as annoyed as the Canadians. Let's demand a policy that keeps employers out of our patient's personal health concerns. At a time when viral illnesses are at a 15-year high, it just makes sense for patients to stay home when they are sick.<sup>5</sup> Who will join me in advocating for legislative change?

### Tips for Urgent Care Providers

While awaiting policy change, there are several proactive

measures we can take, beyond taking a deep breath and just writing the note.

- Create a template to streamline the note-writing process.
- Implement a fast-track system for patients who only want a sick note and no other treatment.
- Provide separate waiting areas for contagious and noncontagious patients.
- Consider asking patients with contagious symptoms to wear a mask while in the waiting room. ■

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