



SOMERSET PARTNERSHIP NHS FOUNDATION TRUST

REFERRAL FOR OCCUPATIONAL HEALTH ASSESSMENT



F-MD-077

Somerset Partnership

NHS Somerset

GP Practice

NHS Dental Service

* Please ensure these fields are completed, we are unable to process requests without this information.

Team name*

Date of Request

Manager's name*

Contact No:

Tel. No.*

Mgr email address:

HR Advisor/Business Partner Name

Email address*

Serco Occupational Health accepts this request on the understanding that the employee below is fully aware of this referral. The referral will not proceed if the employee informs SOH that they have not been made aware of the referral. SOH will contact employee for informed consent.

Employee's name*

Date of birth*

Sex

Home address* (inc postcode & tel no.)

Office address* (inc postcode & tel no.)

Is the employee at work or absent? *

Job Title

Attach Job Description

Yes

No

Certified cause of current/recent sickness absence

Please provide any dates or periods the employee will NOT be able to attend an appointment

Main Reason(s) for Referral - Please indicate with ✓

1.

Short term sickness absence – HR to attach sickness absence record

2.

Long term sickness absence – HR to attach sickness absence record

Date employment commenced:

Date absence commenced:

3.

Fitness for work concerns

4.

Report after accident at work (please attach details)

5.

Job modification / pre-promotion

6.

Performance deterioration

7.

Other reason (please specify)

Are there any disciplinary warnings in force in relation to this referral?

Yes

No

Has the employee been consulted about this referral?

Yes

No

Please advise if you would like the report to be sent via a password protected email to HR.

Yes

✓

No

This referral should be completed by the Line Manager of the referred employee

LINE MANAGER'S REFERRAL

Part A – Information for the Occupational Health Professional:

Please give description of the employee's duties. Give details of the tasks that they perform including physical and mental demands and the nature of their work environment.

Does the employee use any equipment as a part of their job e.g. keyboard and display screen:

If yes, please give details of the equipment and state what percentage of time they spend using it?

What are the employee's normal hours? Does the employee regularly work additional hours in excess of their normal contractual hours? If yes, please give details.

Have you noticed any change in the employee's performance or have they advised you of any problem that they have been experiencing? For example: difficulty in using equipment, travelling to work, general attitude, discipline, behaviour towards colleagues, domestic/personal problems, coping with change, health (long term/short term absence or other factors that they have identified). Please give details and explain the impact on the working environment in terms of colleagues and day-to-day operations (continue on a separate sheet if necessary).

Has there been any change in the employee's timekeeping or general motivation recently:
If yes, please give details.

Please give details of actions taken so far to address the problems outlined in this report. Continue on a separate sheet if necessary. Please relate any actions taken in respect of the following:

- Change of duties
- Change of location
- Redesign / amendment to normal duties
- Request for or actual change of hours
- Workstation assessment or employee assessment
- Aids and adaptations provided
- Additional training/mentoring/support from Line Management; any change in Line Manager
- Any referral to Employee Assistance Programme (if applicable)
- Involvement of rehabilitation services
- Any other actions you feel would be relevant.

Long Term Absences (28 working days or longer)

In order to prevent absent colleagues becoming isolated and to encourage them to return, it is important that arrangements are made to keep in touch with them. We would advise you to keep records of such contacts to show that you have acted as a reasonable employer.

Please state what arrangements you have made. Give details of any Keep In Touch visits/discussions you have undertake, including the records of any visits/interviews held.

Indicate whether there are any difficulties in maintaining contact with the employee. Please also comment on their expectation of a return to work, and any information they have given to you about their health, absence and circumstances.

If appropriate, give details of any possible difficulties that the employee has indicated in being able to travel.

Part B – Referral Questions you wish to be addressed by the Occupational Health Professional:

Below is a standard list of questions that can be covered in the report following referral. Please tick if a response is required and use the space provided to detail any other questions that you would like answered.

<i>Questions for the Occupational Health Professional</i>	✓
1. Is the reason for ill-health permanent / fluctuating / progressive / resolvable?	
2. Is there evidence of any work related element to the health problem?	
3. Is the employee fit to carry out their normal duties at present?	
4. When is a return to work likely? Please outline the timescales anticipated.	
5. Is a gradual return to work recommended? If so, what rehabilitation arrangements are appropriate?	
6. In your medical opinion, is the employee disabled under the terms of the Disability Discrimination Act?	
7. Are there other actions/adjustments that the employer could make to support the employee at work or help facilitate a return to work?	
8. Is a further OH review recommended?	

Please use the space on the following page for any other questions that you would like the Occupational Health Professional to answer, continuing on a separate sheet if necessary.

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Referring Manager's Signature:		Date:	
Employee's Consent Signature:		Date:	

PLEASE ENSURE YOU SAVE A COPY IN YOUR OWN PERSONAL FOLDERS, NOT THE INTRANET.

- Referring Manager prints completed management referral, employee to sign form to give consent
- Referring Manager provides employee with copy of form to take to OH appointment and Q & A information sheet which is attached

Send completed form to Oh.nhstaunton@serco.com

Advice Sheet

Issued by Serco Occupational Health, Boundary House,
2 Wythall Green Way, Middle Lane, Wythall, Birmingham, B47 6LW

Employee Question & Answer Briefing Information about your Occupational Health Assessment

Who is Serco Occupational Health?

Serco Occupational Health is part of Serco Health. We provide occupational health services to a wide range of organisations and operate a fleet of purpose built mobile clinical units that allow us to bring occupational health screening to you at the workplace.

What is Occupational Health (OH)?

Occupational Health (OH) is a specialist branch of healthcare concerned with the *effects of work upon health and also the effects of health upon work capacity*. OH can advise on issues such as fitness for work, sickness absence, disability, rehabilitation, ill-health retirement, travel health, health promotion, or indeed any health and work issue.

What is an OH Assessment?

An OH assessment provides independent, impartial advice to you and your employer about your health and fitness for work. The assessment may be performed by an OH Adviser (a nurse trained in OH) or an Occupational Physician (a doctor trained in occupational medicine).

Why Do I Need an OH Assessment?

Your line manager will usually have referred you for the OH assessment. The benefit of attending the assessment is that it gives you the opportunity to discuss any health problems with the OH professional, and how this impacts on your work. The OH professional can look at all the circumstances, and provide your employer and you with the advice about your health and fitness for work.

Do I have to attend an OH Assessment?

If you are unhappy about why you have been referred, or if you don't wish to attend, then you should discuss this further with your HR Adviser or line manager. Please advise Serco Occupational Health as soon as possible if you are unable to attend your appointment within 72 hours. If you do not attend your appointment, your employer may have to make decisions about your employment without the benefit of OH advice.

Now that I am attending an OH Assessment – what happens next?

Your consultation with the OH professional is likely to last around 30-60 minutes. The OH professional will ensure that you understand the purpose of the assessment and their role in providing independent, impartial advice. Your consent will be sought for the assessment to proceed and for a written OH report to be sent to your employer. If a medical examination is necessary, your permission to proceed with this will also be sought.

What information is passed to the employer?

The report to your line Manager and Human Resources will provide advice about your health in relation to work. This is likely to include advice about your fitness for work, how this might change in the future and any workplace adjustments that might help you. The report may include limited clinical (medical) information, but this will only be included where it is relevant. The report will not disclose unnecessary clinical detail regarding conditions that do not have a bearing upon your fitness for work. The aim is to assist you and your employer to manage any health problems that are impacting upon your capacity for work.

How are my confidential OH records maintained?

Your OH records are maintained to the same high standard of confidentiality as hospital or GP medical records, in accordance with the Data Protection Act (DPA) 1998. Your OH record will not be disclosed to anyone else outside of Serco Occupational Health without your consent.

Do I have the right of access to the OH reports written about me?

Yes. If you require access you should ask your HR Adviser or line manager for a copy of the relevant report. Alternatively you can contact Serco Occupational Health in writing for a copy.

Will there be any need for you to contact my GP or Hospital specialist?

Occasionally the OH professional will seek (with your written consent) a medical report from your GP or hospital specialist. This is usually necessary if the OH professional requires further clinical information about your health, (e.g. information regarding your diagnosis, results of investigations, treatment, future plans etc) prior to advising you / your employer. The process is subject to the *Access to Medical Reports Act 1988*. This gives you certain rights (including a right to see your doctor's report, if you wish, before it is sent to us). Under some circumstances the OH professional may write to your GP, with your consent, giving information about the outcome of your OH assessment. This can be particularly helpful where there are clinical findings or work arrangements that the OH professional believes your GP should be informed of.

What should I bring with me to the assessment?

- copy of referral with your signed consent
- your appointment letter.
- any medication or a list of medication that you have been taking.
- glasses and/or contact lenses, if worn, and if you are attending for a medical examination
- any other information that you think may be relevant