



**Supporting Attendance Toolkit SA08:  
Occupational Health Service and Referral  
Process  
(Version: 1.0)**



<b>Contents</b>	
<a href="#"><u>Introduction</u></a>	Occupational Health Service and Referral Process
<a href="#"><u>Section 1</u></a>	What is Occupational Health?
<a href="#"><u>Section 3</u></a>	When to make a referral
<a href="#"><u>Section 4</u></a>	Making the referral
<a href="#"><u>Section 5</u></a>	Employees Rights and Responsibilities
<a href="#"><u>Section 6</u></a>	The Occupational Health "advice" report

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## Introduction: Occupational Health Service & Referral Process

This toolkit provides managers with information on the Occupational Health Service, its purpose and why and when to refer employees. The toolkit also provides information on how to make a referral, what information to provide, and information on employee's rights in regard to consent and data protection.

Managers should ensure that they read this toolkit before making a referral to Occupational Health to ensure that they get the best out of the referral process.

## Section 1: What is Occupational Health?

Occupational health (OH) is a specialist branch of medicine focusing on the health of employees in the workplace. OH, professionals aim to find out what impact work has on employee's health and make sure that they are fit to undertake the role they are employed to do physically and mentally.

OH, can also provide advice on what adjustments can be made to enable employees to undertake their role effectively and wherever possible, focus on adapting the work to suit the health needs of the employee. OH, specialists can also support organisations through advising on work-related illnesses and accidents, carrying out assessments and monitoring the health of employees.

As well as aligning with the Council's supporting attendance policy and associated procedures the Council's occupational health service is also designed to meet the wider health and wellbeing objectives of the council, now and in the future.

## Section 2: Why make Occupational Health Referrals?

The primary purpose of making referrals to occupational health is to provide managers with up to date competent professional occupational related advice and, occasionally, specialist information to help them support, maintain and protect employees with health issues in the workplace and to enable them to effectively manage the overall attendance of employees in line with the Council's Supporting Attendance Policy.

The referral process is most effective when there is a focus on early intervention, which is proven to support an early return-to-work strategy. It also provides managers and employees with recommendations of how to sustain their attendance and the support/adjustments that are required for this to happen, helping to reduce sickness absence and the associated impact of this.

The occupational health service also provides managers with the medical information they need to make employment decisions throughout the life cycle of an employee e.g. pre-employment health questionnaires, health surveillance, ill health decisions.

Further information on the process for Ill Health referrals can be found in the toolkit SA 09 – Ill Health Retirement.

## Section 3: When to make a referral

There are a number of circumstances that would trigger a referral to occupational health, and these are outlined below.

However normally as a minimum an employee should be referred;

- After a continuous absence of 4 working weeks or earlier if the manager deems it appropriate to do so;
- When an employee has advised that the reason for their absence is work related stress (a referral in these circumstances should only be made either once the work related stress assessment has been completed or an attempt has been made to complete it);
- When an employee has advised that they have an underlying condition that is impacting on their ability to carry out some or all of the duties of their role.

Other Recommended triggers

- An employee has been, or is likely to be, off sick for longer than 4 weeks or where there is no foreseeable return-to-work date.
- An employee has frequent incidences of short-term absence with one or more reported illnesses.
- An employee has had an accident at work and an accurate clinical record of their injuries is required, including RIDDOR incidents.
- A manager believes that an employee's health is being affected adversely by his work (e.g. stress, upper limb disorders or back pain).
- An employee's performance at work may be compromised because of ill health.
- An employee is diagnosed with a critical illness such as psychiatric ill health, cancer or heart disease.
- An employee is thought to be suffering from alcohol, drug or substance misuse.
- An employee has notified you that they are concerned about their own ill health, particularly if they believe their health is being affected by work.
- Advice is required on rehabilitation programmes for sick or disabled employees.
- You require a report regarding an employee's fitness to attend a disciplinary or grievance hearing.

## Section 4: Making the referral

**In order to make a referral to OH, managers will need to be registered on Health Hub the Councils online OH portal. Information on Health Hub, how to register and how to use the portal can be found [here](#)**

The main aim of a referral is likely to be to obtain advice about an employee's fitness for work and any workplace adjustments either temporary or permanent that would benefit the employee and support them in the workplace.

The information sought from the occupational health service by the manager should be to determine:

- whether there is an underlying medical condition which could affect attendance;
- whether there is any direct or indirect employment cause relating to the absence;
- the prognosis on fitness for work and the expected date of return;
- any restrictions to, or adaptations if appropriate, which would be essential in order for the employee to carry out their job;
- the need for, and nature of, a programme of support;

- any permanent ill-health issues, if relevant.

The quality of the advice report will be directly influenced by the quality of the information that is provided in the referral form and therefore providing background information will help the clinicians understand the case more and enable them to provide managers and employees with relevant advice and support.

### Suggested background information

- Provide all relevant information about the colleague's current health status and history. It's important to include any known diagnosis or reasons given for the absence. Details of all medical conditions are not needed, only those that are impacting on the employee's ability to carry out their role effectively and/or attend work.
- Provide information on the current absence time scale e.g. When did the current absence commence? Is there an estimated return to work date? Does the employee have a GP fit note, if so, what is the expiry date?
- If the employee is at work with a health issue, provide information on how this is impacting them in their role. If the employee is unable to perform all aspects of their work, then detail this in the referral.
- Is the employee already working on restricted duties? If so:
  - Why are the restrictions in place?
  - What are the restrictions and how long have they been in place?
  - When they were last reviewed?
- For employees with on-going health issues;
  - What adjustments have you made for the employee?
  - What reasonable adjustments are you able to accommodate?
  - Are there any adjustments that you would be unable to accommodate operationally?

**It is important that managers advise OH if there are any adjustments that could not be supported e.g. removing a driver from driving duties on a permanent basis. This will prevent such recommendations being made.**

- Is the employee being performance managed?
- Is the employee currently involved in grievance, disciplinary or legal proceedings? This is particularly important and relevant.

Managers should be careful not to give personal opinion in a referral form unless this has been fully discussed with the employee beforehand e.g. manager notes a change in the employee's behaviour.

### Additional Questions

The referral form allows for managers to ask additional questions in the form of free text.

These questions should be specific to the case and kept to a minimum. The clinician will be unable to ask the employee questions on the manager's behalf and therefore it is important that any specific questions are discussed directly with the employee before the referral is made. Some examples of good and poor questions are noted below.

Good Questions	Poor Questions
<p>What short term adjustments could you recommend to assist Mr. X back to work?</p> <p>What is Mr. X likely recovery period and when could we expect him to resume his duties.</p> <p>Please can you review Mr. X current adjustments and restrictions to see if they are still appropriate?</p> <p>Can Mr. X work in a cold storage area given his heart condition?</p>	<p>Please ask her about...</p> <p>Please find out why....</p> <p>How will she react to others critiquing her work?</p> <p>Is salt intake impacting on his blood pressure?</p> <p>What options are available to him to improve his lifestyle?</p> <p>How will he cope with future change?</p>

### Referral tips

- Make sure that you complete all the sections of the referral form as missing information such as employee date of birth will result in delays to the processing of the referral.
- Append supporting documents such as absence records, previous medical reports and job descriptions and any other relevant documents
- Keep it factual and concise. Please avoid information overload.
- Avoid assumption and emotion.
- Ensure that the employee is aware of what is a happening and is comfortable with the process.
- Tell us about any dates or times where the employee is unavailable to help minimise appointment late cancellation and no show charges.

## Section 5: Employees Rights and Responsibilities

Employees are contractually obliged to comply with all aspects of the Supporting Attendance Policy including attendance at OH assessments and other medical assessments that the council deem necessary to support the employee in the workplace or manage their attendance at work.

However, before making a referral it is important that managers discuss with the employee the reason for the referral, the content and the information that will be sought from occupational health. Failure to do this may result in the employee being unwilling to consent to the assessment on the day. The employee also has the right to obtain a copy of the referral from in accordance with Data Protection.

The employee must be advised that they are required to attend an appointment with the occupational health physician/ advisor in line with their contractual responsibilities as set out in Section 1.6 of the Supporting Attendance Policy and that failure to comply with this requirement without reasonable cause may be considered under the Council's disciplinary procedures.

In line with the terms of the Access to Medical Reports Act 1988, Access to Medical Records Act 1990 and the General Medical Council (GMC) guidance, employees have a right to access the information provided by the health professional. If the employee is unwilling to sign the medical

consent form for the medical assessment, they should be advised that a decision will be taken regarding employment based on the information available to the manager.

The GMC also require all occupational health physicians and clinical advisors to offer an option to send employees a copy of the medical advice report prior to it being sent to the Council. The only changes which an employee is able to make to the medical report will relate to factual accuracy (e.g. dates of treatment).

Section 6 of the Supporting Attendance Policy has further information on Data Protection and Employee Consent in relation to employment with the Council.

Further information on how HML collect, use and store employee's data can be found [here](#)

## Section 6: The Occupational Health "advice" report

Following the occupational health assessment, the manager will receive a report giving advice on the following:

- The employee's fitness to work
- Restrictions on employment (including recommending alternative work capability options)
- A prognosis on returning to work
- Agreed return to work plan
- Target return-to-work date
- Recommended steps to facilitate an earlier return to work (if appropriate and taking into account relevant disability legislation)
- Appropriate attendance or capability targets
- The likelihood of further absences
- Whether the condition is work- or lifestyle-related
- Eligibility for ill-health retirement (if applicable).

The advice will be based on functional terms rather than medical terms (i.e. what the person can or can't do rather than what is 'wrong' with them). Where medical detail is included this is to assist with the manager understanding of someone's condition and is only done with the consent of the employee.

The report will also answer any specific questions that have been asked in the referral by the manager. If a manager does not believe that all the relevant questions have been answered they should either email occupational health directly or speak to their Employee Relations Advisor.

The report may advise that it is likely as a result of the impact of the employees' health condition on their day to day life that the disability provisions of the Equality Act 2010 will apply to the employee. In those circumstances the Council has a duty under the Act to make reasonable adjustments to enable the employee to not be disadvantaged in their ability to attend work. Please refer to Section 4.2 of the Supporting Attendance Policy and Procedure for further information as to a manager's responsibilities in relation to the Equality Act and reasonable adjustments.

Once the manager has received this report they should review this and arrange to meet with the employee to discuss the report in accordance with the supporting attendance policy/procedure or other relevant policy such as the Discipline Policy, if the referral was made to assess an employee's fitness to attend a hearing.

The employee may still be at work or has returned to work before the report has been received. In those cases a formal meeting may not be required, however the manager should still arrange to discuss the content of the report with the employee to address any outstanding concerns and review any recommend adjustments that may need to be implemented.

Managers should contact Employee Relations for advice on when a formal meeting to discuss the report is required.

Please also contact Employee Relations should you require any further information on the Councils Occupational Health Service.