GUIDANCE NOTES ON REFERRALS TO GP-PLUS OCCUPATIONAL HEALTH SERVICE
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GP-PLUS OCCUPATIONAL HEALTH SERVICE

GUIDANCE FOR MANAGERS ON REFERRING EMPLOYEES
FOR HEALTH ASSESSMENT

These guidance notes have been prepared to help HR Operators and Managers obtain the best service from Occupational Health. The quality of the response from occupational health is significantly influenced by the quality of the initial referral and the supporting information provided.

Please refer to your own operational process for Sickness Absence and Capability Policies for details of when to refer to Occupational Health.

1. REASONS FOR REFERRAL FOR HEALTH ASSESSMENT

Health Assessment will be provided in the course of employment to assist in the management of problems such as:-

- Short-term sickness absence.
- Long-term sickness absence, including return to work and rehabilitation.
- Capability issues.
- Termination of employment on ground of ill health, including ill health retirement.
- Where health problems otherwise impact on work.
- Consideration of adjustment/modifications in relation to Equality Act 2010

2. HOW TO REFER

(i) Where to send the referral letter

Appointments are arranged at GP-Plus via the Human Resources department. A member of the team should call GP-Plus on 0845 1996 049 or email our reception team on reception@gpplus.com.

(ii) Format of the Referral

a) Referrals should be made by letter, on letterhead paper of the appropriate employer. A full postal return address must be included.

Memo formats are not appropriate as we cannot identify the employer.

b) The letter should be addressed to "The Occupational Health Physician" or "Medical Advisor" not to a doctor by name. (The only exception is if the referring manager has already discussed the case with one of the doctors, in which case the letter should be addressed to that doctor).

c) The letter may be marked "Confidential" but should not be marked Personal, Addressee only, etc as this will delay processing.
d) The referral letter should be copied to the employee and the HR Advisor, and must have the following attachments:

i. A copy of your letter to the employee confirming the outcome of your meeting with them to discuss their sickness absence.

ii. Sickness absence records - see below.

(iii) **Urgent Referral**

For urgent referrals where an appointment may need to be made before the referral letter arrives in the OH department you must contact GP-Plus. Clerical and Nursing staff do not always have the authority to arrange appointments prior to receipt of a referral letter. Urgent appointments are only given for medically urgent reasons as assessed by the Occupational Health Medical Advisor.

3. **INFORMATION TO BE INCLUDED IN REFERRAL LETTER**

- Name, date of birth, occupation, contact address and telephone number for the employee.
- Job title and job requirements (job description if available).
- Pattern or duration of sickness absence (previous sickness absence over two years, tabulated by dates, duration, type of certificate (MED 3/SC1) and reason/diagnosis - do not just send raw data, copies of sick notes etc. (See appendix for example of appropriate layout).
- Medical information already known (cause of sick leave, known health problems).
- Incidents or behaviour at work - clear description.
- Background information that it might be useful for Occupational Health to know.
- Management intervention including any disciplinary action in progress.

4. **QUESTIONS YOU MIGHT ASK**

The questions you ask will be specific to each situation, these are examples.

- Is the employee medically fit for their full job or part of their job? If not, can the Occupational Health Service estimate when he or she might become fit and give a likely date of return to work?
- Is the employee receiving appropriate treatment and advice?
- Has the employee's job affected his/her other health?
- How can I help in the employee's rehabilitation?
- Does the employee's health problem put the employee, colleagues, clients or members of the public at any risk? If so, how can those risks be reduced?
- Is the employee's medical problem likely to count as a disability within the meaning of the Equality Act and do I therefore need to take this into account?
• On return to work, will there be any residual disability?

• In the view of the employee’s long-standing health problem and continued absence, are the criteria met for ill health retirement under the appropriate Pension Scheme?

5. **DO**
   - Explain to the employee the reason for referral to the Occupational Health Service.
   - Be clear in the referral letter about the reason for the referral.
   - Consider attaching a copy of your letter to the employee confirming your meeting to discuss their sickness absence.
   - Let us know if you are aware of any reason why the employee may not be able to attend on specific dates, eg if on holiday.
   - Send a copy of the referral letter to the employee and the HR Advisor.

   **DO NOT**
   - Expect the Occupational Health Service to provide you with any medical details about the employee’s health problem unless the employee gives us informed consent for us to do so.
   - Just send the employee to Occupational Health for a “full medical” because this will not usually provide you with information that you need.
   - Contact the employee’s GP or Specialist directly for medical information. The Occupational Health Service should make this approach, if appropriate.
   - Use referral to the Occupational Health Service as a punitive measure.
   - Tell the employee to contact OH for an appointment themselves – you will receive no feedback unless you write to us formally (or email etc).

6. **WHAT HAPPENS NEXT?**

On receipt of an adequate referral letter, once the appointment has been arranged between HR & GP-Plus, reception will ensure this documentation is passed to the relevant Occupational Health Physician/Medical Advisor prior to the assessment.

**If the employee attends** - the Occupational doctor will respond to the referring manager in writing. You should generally have the letter within a maximum of 5 business days of the appointment. A copy of our letter will be sent to the employee along with the HR Manager.

If you need to clarify any issues in the doctor’s reply, contact that doctor directly by phone. Any subsequent correspondence relating to the same referral episode should be addressed to the occupational doctor who saw the employee initially.
If the employee fails to attend - we will notify the referring person, asking you to investigate the reasons for this and to let us know if a further appointment is appropriate. Please check the reasons for non-attendance: sometimes you may have given us the incorrect address or the person may be away. If a further appointment is appropriate, please send a new referral letter, recording the reason for the non-attendance.

If the employee fails to attend on a second occasion we will advise you of this, but we will not offer a further appointment except in exceptional circumstances.

If the employee rearranges their appointment we will tell you this, the reasons given, and the new appointment details. GP-Plus has a standard late cancellation policy.
### Example of Sickness Absence Record Presentation:

Jane Smith  
D.O.B. 01.01.01

<table>
<thead>
<tr>
<th>Dates</th>
<th>Duration</th>
<th>Med 3/SC1</th>
<th>Reason Given</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 2nd – Feb 4th</td>
<td>3 days</td>
<td>SC1</td>
<td>D&amp;V</td>
</tr>
<tr>
<td>Aug 16th – Aug 22nd</td>
<td>6 days</td>
<td>Med 3</td>
<td>Bronchitis</td>
</tr>
<tr>
<td>Oct 30th - Dec 28th</td>
<td>59 days</td>
<td>Med 3</td>
<td>Hysterectomy</td>
</tr>
</tbody>
</table>

#### 2010

<table>
<thead>
<tr>
<th>Dates</th>
<th>Duration</th>
<th>Med 3/SC1</th>
<th>Reason Given</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 8th</td>
<td>1 Day</td>
<td>SC1</td>
<td>Migraine</td>
</tr>
<tr>
<td>March 30th</td>
<td>1 Day</td>
<td>SC1</td>
<td>UTI</td>
</tr>
<tr>
<td>April 19th to date</td>
<td>Days/weeks</td>
<td>SC1 + Med 3</td>
<td>Stress</td>
</tr>
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**Signature:** ........................................

**Date:** ........................................