

# Patients, their employment and their health

How to help your patients stay in work

## General Comments

**Managing certification is an active part of managing the patient**

- Consider certification in the same category as writing a prescription.
- Used appropriately, certification can support recovery and rehabilitation.

**GP advice is important in shaping patient and employer beliefs and influencing return to work**

- As time away from work goes on significant adverse health effects can occur – depression and other psychological problems increase whatever the original diagnosis.
- The longer a patient is off work the lower the chances of returning. Less than 50% of people with 6 months sickness absence ever return to work and few people return to any form of work after 1–2 years absence irrespective of further treatment.
- Strategies directed towards job retention are of proven value: they are needed in the first months of sickness absence<sup>1</sup>. These include:
  - Cognitive Behavioural Therapy [CBT]
  - Specific work counselling.
- Return to work after acute symptoms of depression have eased, but before it has completely resolved, may aid recovery.

<sup>1</sup> Vocational Rehabilitation: The Way Forward. British Society for Rehabilitation Medicine. London, 2001

## Assessment and Management

**Use The “Remarks Section” of the Med 3 to support work resumption**

- Suggest work adjustments, where appropriate, rather than signing the patient off work

*It is possible to issue a Med 3 without putting the patient off work while writing in the “remarks” section advice to the employer about workplace adjustments*

- Suggest work adjustments if the patient is off sick – to enable an early return to work. *Consider nature of medical condition and functional limitations - use appropriate clinical guidelines.*
- Prescribe graduated work and/or transitional arrangements. *Change in working hours, change in shift arrangements, etc. A ‘buddy’ system may be available.*
- Suggest workplace assessment by workplace occupational health professional.

**Distinguish between work problems and other factors**

- If other factors are the main problem, getting back to work may aid recovery. Signing patients off work may risk their job and add to their problems

Say as you advise the patient:

***“There will come a point at which work will make you feel better – we don’t want to miss that.”***

or:

***“There will come a point at which work will help to support your recovery and will make you feel better – we don’t want to miss that.”***

**Dispel the myth that employers cannot dismiss the patient while off sick.**

**Consider referring patient to:**

- A JobcentrePlus Personal Adviser if they require advice about benefits and work. Specific information is available at [www.jobcentreplus.gov.uk](http://www.jobcentreplus.gov.uk)
- Personal Advisers can refer patients to:
  - A job broker if they are claiming benefit and need help to be work ready.
  - A Disability Employment Advisor (DEA) if they require support for training or work.
  - GPs can refer directly to a DEA by adding a note in the “remarks” section of the Med 3. See IB204 at [www.dwp.gov.uk/medical](http://www.dwp.gov.uk/medical)

**Would any reasonable adjustments to the patient’s workplace or working arrangements help them to carry out the duties of the job?** Examples of reasonable adjustments could include:

- Adjustments to physical features of premises or equipment
- Allocating some of the job to someone else
- A gradual return to work
- Transferring the person to another existing vacancy
- Altering the person's working hours eg to part-time or flexible time
- Assigning the person to a different location or home
- Allowing absence during working hours for rehabilitation, assessment or treatment
- Providing training or additional supervision
- Modifying the mode of giving the person instructions or modifying procedures and reference manuals
- Modifying procedures for testing or assessment
- Providing a reader or interpreter

## Writing Medical Reports

**Any request from an employer for a medical report** should contain a description of the person's duties at work and where and with whom the employee works.

**Reports for employers** should contain only information that the employer needs to know to assist the employee in commencing or returning to work and ideally should be tailored to the intended audience.

To provide any information to an employer you need the informed [express] consent of your patient and ensure that you comply with the Data Protection Act [1998] and the Access to Medical Reports Act [1988].

Reports on an employee or potential employee requested from a doctor should contain the following information:

1. General description of the condition[s].
2. How long these conditions have been present.
3. How long each condition is likely to last and whether it is likely to deteriorate.
4. Side effects of any medication and any effect on everyday activities.
5. Frequency of any other treatment [e.g. outpatient treatment is required weekly for six weeks].
6. Whether any reasonable adjustments to the person's workplace or working arrangements would help them in carrying out the duties of the job.

## Time line for managing patients of working age

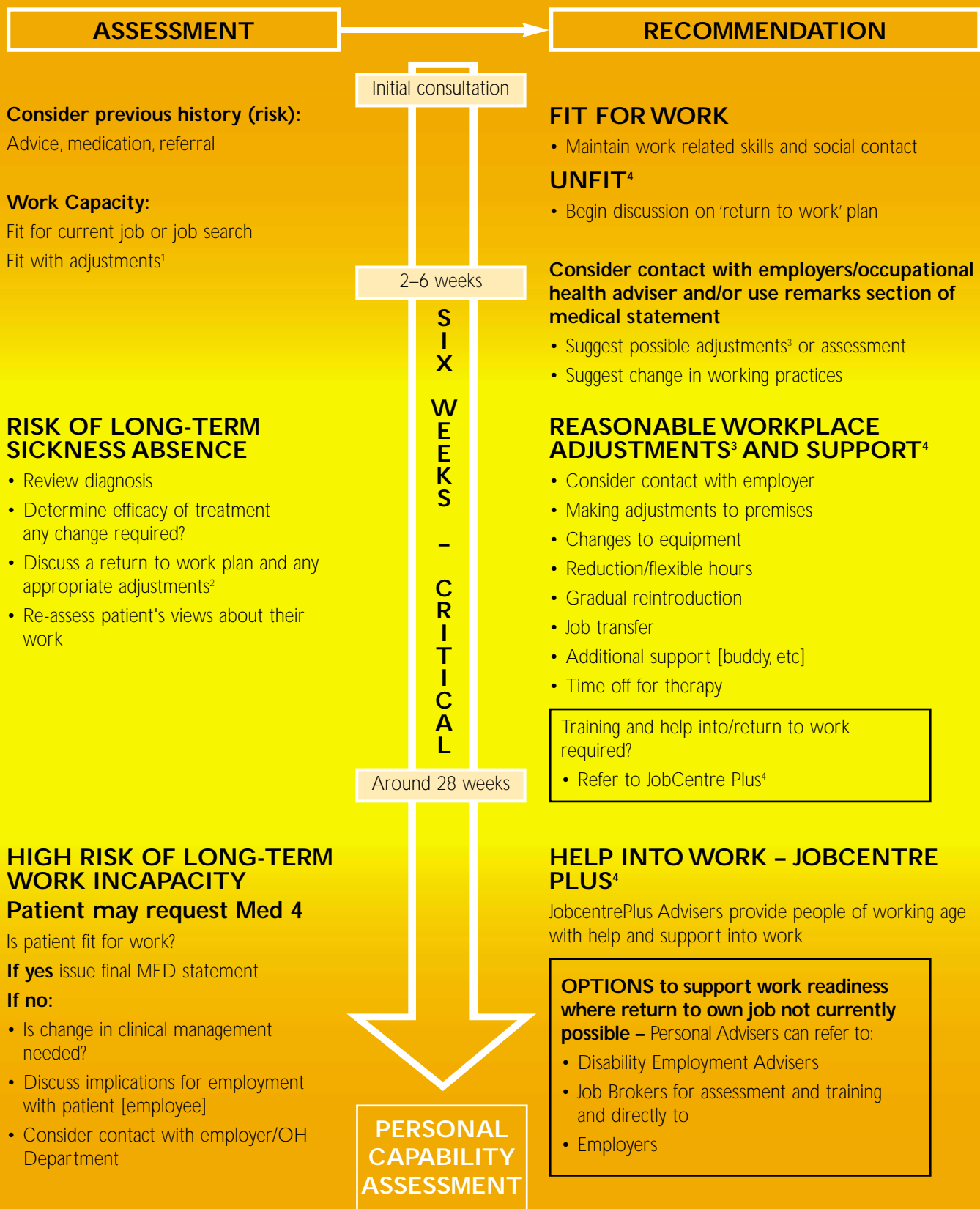
The time line on the next page provides suggestions for managing your patients of working age as part of your normal consultations.

The left hand side of the time line deals with the factors you need to consider when assessing patients and the right hand side provides possible options for advice and guidance.

[www.dwp.gov.uk/medical](http://www.dwp.gov.uk/medical)

# Sickness Certification

## Time Line for Patient Management



### Notes

1. Issue Med 3 for no more than 2-4 weeks. Think carefully about whether clinically the patient would be better served with support or adaptations to maintain them at work. You can issue Med 3 and choose box (a) "You need not refrain from work" and provide the employer with appropriate information in the 'remarks' section. See [www.dwp.gov.uk/medical](http://www.dwp.gov.uk/medical).
2. Comments to the employer about work place adjustments or suggesting a workplace assessment should be made in the 'remarks' area of the Med 3 statement.
3. These 'reasonable adjustments' may be required under the Disability Discrimination Act (DDA) 1995 [as amended] – see [www.drc-gb.org](http://www.drc-gb.org) for details.
4. JobcentrePlus Personal Advisers can help people to become work ready and provide advice about benefits and work. Specific information about referral procedures is available at the JobcentrePlus website: [www.jobcentreplus.gov.uk](http://www.jobcentreplus.gov.uk)