

Fit Notes Q&A

1. Background

1.1 What's changed?

From 6 April 2010 the sick note is changing to become a fit note. Across the UK, doctors will be using the new fit note system to advise that their patient is either unfit for work, or may be fit for work. The doctor will give a 'may be fit for work' statement if they think that their patient's health condition may allow them to work if they get suitable and timely support from their employer.

1.2 Why change?

The government is making the change in recognition that for many people, work can help recovery. The change is not about trying to get people back to work before they are ready, but about removing any challenges in returning to work. A doctor will be able to suggest ways the FC can help someone return to work. This could mean:

- a phased return to work;
- altered hours;
- amended duties; and/or
- workplace adaptations.

1.3 What will the new Fit Note look like?

On the new form doctors will be able to advise one of two options:

1.3.1 Not fit for work

This means that the doctor's assessment of their patient is that they have a health condition that prevents them from working for the stated period of time. This is just like on the old 'sick note' where the doctor advises to "refrain from work".

1.3.1 May be fit for work taking account of the following advice

This means the doctor's assessment of the patient is that their condition does not necessarily stop them from returning to work. For example, they could return to work but may not be able to complete all of their normal duties, or they could benefit from amended working hours. The new form contains helpful tick boxes for doctors to use to suggest common ways to help a return to work. Examples of adjustments are provided

at Appendix 1. The fit note also has more space for a doctor to provide information on how their patient's condition will affect what they can do.

1.4 Is the FC's Sick Absence Policy going to be amended?

The FC's policy and guidance on sick absence management is currently being reviewed. A refreshed policy & procedure incorporating guidance on the new fit note system will be rolled out later this year following consultation with the FC Trade Unions.

2. Guidance for Employees

2.1 What does the new Fit Note mean to me?

2.1.1 Not fit for work

If you visit your doctor due to illness or injury and they feel that you are not fit to work then they will advise this on the fit note just like with the sick note. For sick pay purposes, the FC will only require this medical certificate after the 7th calendar day of sickness absence. You should continue to send this medical certificate to your line manager in line with the FC's existing sick absence reporting requirements.

2.1.2 May be fit for work

If you visit your doctor and they feel that you may be fit for work with some support then they will discuss this with you and confirm their advice on the fit note, including how long any temporary adjustments should last. You should then take the fit note to your line manager to discuss the doctor's advice. Your line manager will consider the doctor's advice and how it affects your job and the workplace. Your manager will then discuss the options available to help you continue working. If you both agree that a return to work is possible then the necessary adjustments will be made, and will then be monitored and reviewed by you and your line manager as appropriate. Reasonable adjustments will be made as quickly as possible, but if they cannot be made immediately, the time that you are absent from work will be recorded as sick leave.

If, however, having considered your doctor's advice, your line manager considers that it is not possible to make the adjustments, they will explain the reasons for this to you and use the fit note as if the doctor had advised 'not fit for work' for the period stated. The period will then be recorded as sick leave. You won't need to return to your doctor for a new certificate to confirm this.

In considering whether the FC can offer the suggested support to facilitate your return to work, your line manager may seek further advice from our Occupational Health Advisor. An occupational health referral will be required if you have difficulty in performing your duties after adjustments have been made.

2.2 Is there anything I should do before I go to see my doctor?

If you're going to see your doctor you may want to consider taking along a list of the current key work areas for your post (from your forward job plan) as this may assist the doctor in understanding how any health condition may affect what you do at work. Whilst we all know what we do at work, sometimes we can be anxious about seeing the doctor and may not remember all the elements of our job off the top of our head during a consultation. Therefore, it may be useful for you to have a list of the requirements of your job with you when you see the doctor who will then be in a better position to give an opinion on your fitness for work.

2.3 What if I want to return to work before the end of a 'not fit for work' statement?

Sometimes you might be able to return to work before the end of a period where a doctor has advised that you are not fit for work. This may be because you have recovered faster than the doctor expected, or the doctor did not know of ways in which the FC could help you return to work earlier. If your line manager agrees that it is appropriate for you to return to work then you don't need to wait until the end of the 'not fit for work' statement period to do so, nor do you need to revisit your doctor to be 'signed back' to work. You must assess the risk, i.e. give careful consideration of what, in your place of work, could cause harm to people, so that you can ensure you have taken enough precautions or should do more to prevent harm. More information on conducting risk assessments can be found within Operational Guidance Booklet 24 (risk assessment). Further advice on conducting risk assessments can be provided by a Safety, Health & Environment Officer (see contact details at 3.7).

2.4 What if I feel I'm not ready to return to work but the doctor thinks I may be fit for some work?

If your doctor thinks that you may be fit for some work alongside suitable support from the FC but you disagree with this, you should raise your concerns with your doctor during your consultation. If your doctor believes that you may be fit for work and the FC is able to make the necessary adjustments then you will be expected to return to work. You will be able to discuss any issues and concerns you may have with your line manager prior to your return and during the monitoring and review period agreed.

Advice may be obtained from our Occupational Health Advisor to ensure a successful return to work takes place.

3. Guidance for Managers

3.1 What should I do if the doctor has indicated 'may be fit for work'?

The new fit note has been designed to give employers the information needed to begin a discussion with an employee on whether they can return to work despite their illness or injury. You should consider the doctor's comments and discuss them with the individual. If a return to work is possible you should agree any temporary changes to their job or hours and what support you will provide and for how long. You should make every effort to accommodate a return to work as soon as possible and appendix 2 provides a simple flow diagram illustrating the process you should follow. A few helpful case studies have been provided at Appendix 3 to demonstrate how the new fit note system is expected to work.

If making the adjustment is difficult, you can speak to an HR representative for support (see 3.7) and if necessary further professional advice can be obtained from our Occupational Health Advisor.

3.2 Is the advice on the fit note binding?

No. The fit note provides greater flexibility and better information to manage sickness absence. It's your choice after discussing the fit note with your employee, how to act on the doctor's advice. When considering the doctor's advice, you should always consider if the advice is consistent with the FC's safety guidelines that the doctor may not be aware of. You must assess the risk, i.e. give careful consideration of what, in your place of work, could cause harm to people, so that you can ensure you have taken enough precautions or should do more to prevent harm. More information on conducting risk assessments can be found within Operational Guidance Booklet 24 (risk assessment). Further advice on conducting risk assessments can be provided by a Safety, Health & Environment Officer (see contact details at 3.7).

If the doctor has advised that your employee 'may be fit for work', and you cannot make the adaptations or adjustments to help a return to work, you should explain the reasons for this to the individual and then use the fit note as if the doctor had advised 'not fit for work'. The individual does not need to go back to their doctor for a new Statement to confirm this. But remember - the FC is committed to making reasonable adjustments for all our employees. We have a legal responsibility to do this for anyone that has a condition covered by the Disability Discrimination Act.

3.3 How long do any amended duties or workplace adaptations have to last for?

On the fit note the doctor will state the period of time their advice is for. When agreeing a return to work plan you should always be clear on the length of time any amended duties or support is for. In most cases this will be about temporary measures. If the employee cannot then return to their normal duties, you will need to discuss further, consider alternative temporary/permanent measures and an Occupational Health referral will be required for further professional advice.

3.4 Can I request a Medical Statement advising that the individual is 'fit for work'?

Unlike the sick note, the fit note does not include the option for a doctor to advise someone that they are fully fit for work. You do not need to be fully fit to return to work and it is a myth that an employee needs to be 'signed back' to work by a doctor. If you are in doubt that an employee is fit enough to be at work then you should raise your concerns with the employee direct. If, during your risk assessment, you feel that the employee is not fit enough to be at work then you can send them home. If you feel that the employee is fit enough to be at work but not fit enough to undertake all their normal duties then you should consider making temporary reasonable adjustments even if this has not been recommended on the fit note. You will know the employee, their job, and the work place much better than the doctor. If you are unsure what adjustments to make you can speak to your HR contact (see contact details at 3.7) and if necessary further professional advice can be taken from our Occupational Health Advisor.

3.5 What should I do if I don't understand the advice on the Fit Note?

If you do not understand or are unsure on how to act on the advice on the fit note your first option is always to discuss the advice with your employee. They may be able to provide more information on the context of the advice. If you are still unsure you should speak to your HR representative (see contact details at 3.7) and it may be easier for us to obtain further professional advice from our Occupational Health Advisor rather than clarify the original advice with the doctor.

3.6 What do I need to do if the doctor has recommended an occupational health referral?

A doctor will recommend an occupational health assessment where they feel their patient's condition is complex and/or work may be a contributory factor. If an occupational health referral has been recommended then you can arrange this via our Occupational Health Liaison Officer (see 3.7).

3.7 Where can I get more help on sick absence management?

HR Operations Managers are available within the countries to provide help and support in the management of sick absence (contact details below). For other areas of the business, your HR Case Manager will provide support.

<u>HR Operations Manager:</u>	<u>Location:</u>	<u>Contact telephone no:</u>
Liz Cookson	FC Wales (Aberystwyth)	0300 068 0082
Heather Melville	FC Scotland (Inverness)	01463 252629
Jennifer Macfarlane	FC Scotland (Edinburgh)	0131 314 6120
Linda Thomas	FC England (Bristol)	0117 372 1043
Ian Lamb	FC England (Cambridge)	01223 314 546
Norman Trollope	FC England (York)	01904 696 300

<u>HR Case Manager:</u>	<u>Remit:</u>	<u>Contact telephone no:</u>
Janette Hill	FC England, Silvan House, and Business Units	0131 314 6241
Martin Finlayson	FC Scotland, FC Wales, and Forest Research	0131 314 6518

<u>Occupational Health Liaison:</u>	<u>Remit:</u>	<u>Contact telephone no:</u>
Susan McLeod	FC GB	0131 314 6149
Diane Carmichael	FC GB	0131 314 6314

Advice on how to carry out risk assessments can be provided by the Health & Safety team:

<u>Safety, Health & Environment:</u>	<u>Remit:</u>	<u>Contact telephone no:</u>
Emily Ramsay (Head of Service)	GB	0131 314 6435
Gordon Adam	Wales	01606 884945
Jim Burns	Scotland	01387 860393
Graham Munford	England	01785 777024
Neil Gresswell	England	01751 472771
Colin McEvoy	Forest Research	0131 445 6937

Appendix 1

Examples of Adjustments

During the year, HR intend to produce guidance for managers in relation to considering reasonable adjustments. Meantime, listed below are a few examples of adjustments that could be used under the tick box categories that will feature on the new fit note document. The best solution will be found by both an employee and their manager working together to establish what can be done realistically and agreeing to keep that under review.

1. Phased Return to Work

A doctor will recommend this where they believe that their patient may benefit from a gradual increase in the intensity of their work duties or their working hours.

For example an employee following an operation could return to work on reduced hours, gradually increasing to their normal hours over an agreed period of time; or an employee with a back or shoulder problem, whose job involves lifting, gradually increases the quantity or intensity of their work. This could help them return to work earlier whilst rebuilding their capacity for manual work.

2. Altered Hours

A doctor will recommend this where they believe that their patient will benefit from a change to the hours that they work, in order for them to return to work. This does not necessarily mean working fewer hours.

For example, providing the option to start (and/or leave) later could support someone who is unable to drive and struggles with rush hour public transport to continue working.

3. Amended Duties

A doctor will recommend this where they believe their patient may be able to return to work if their duties are amended to take into account their condition.

For example, removing heavy lifting from the job of someone who has a back injury could help them return to work whilst recovering from their injury; or reducing or

removing a more pressured part of a job role (such as dealing with complaints), could help someone off work with stress return to work.

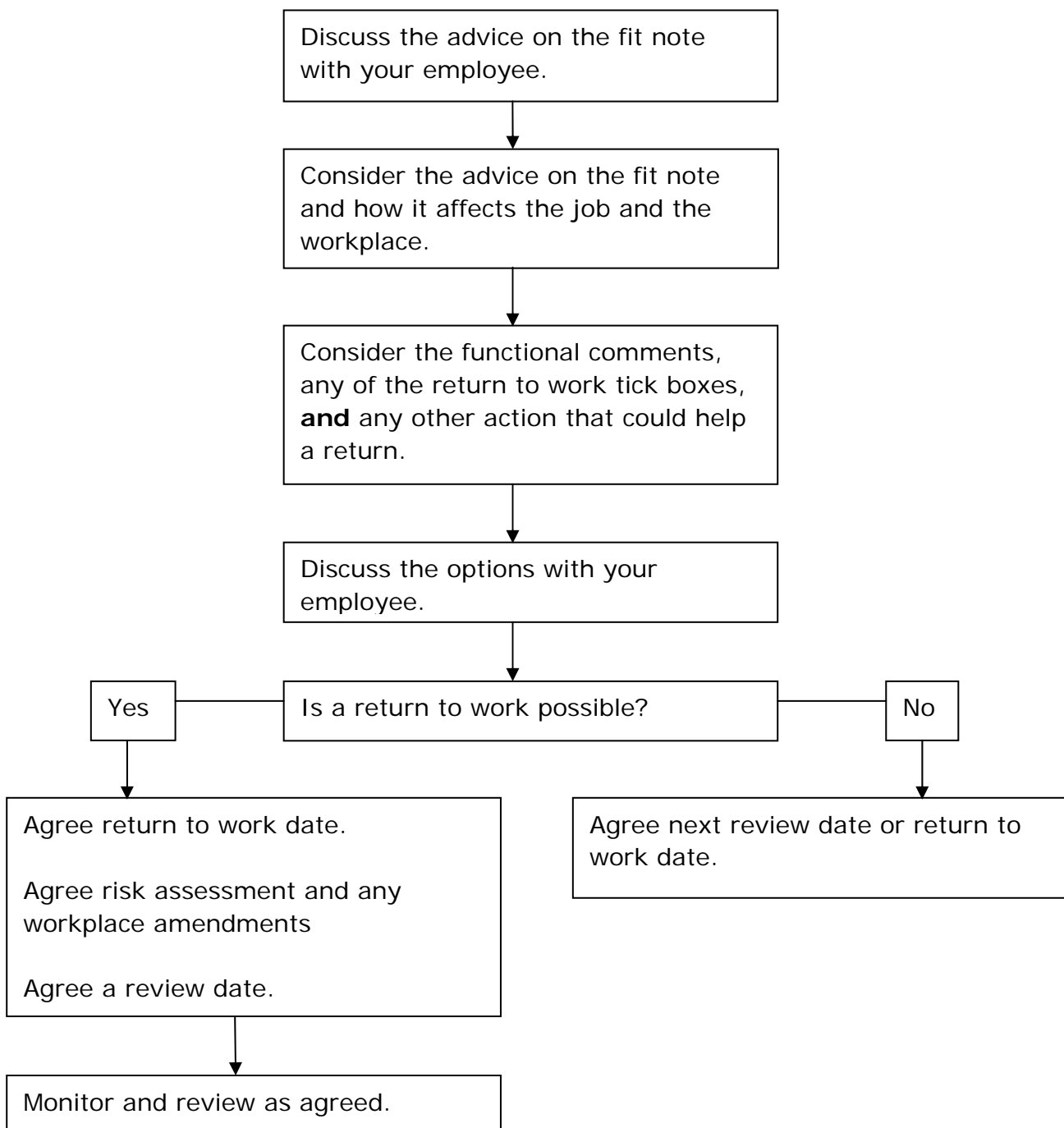
4. Workplace Adaptations

A doctor will recommend this where they believe their patient may be able to return to work if their workplace is adapted to take into account their condition.

For example, adapted seating for someone with a back problem; or arranging for a parking space near the entrance to the workplace, could help someone who has reduced mobility post surgery return to work. A ground floor work station may help an individual who has problems going up and down stairs, however, be careful not to isolate someone, if for example the rest of their colleagues remain upstairs.

Appendix 2

May Be Fit For Work: Manager's Flowchart



Appendix 3

May Be Fit For Work: Case Studies

The employee is an Administrative Officer in a Forest District office. They have been off work for 6 weeks with back pain and this is their third episode in the past 12 months. They go to their GP for a new medical certificate and during the consultation they discuss their condition and the circumstances relating to returning to work. The GP advises that they 'may be fit for work taking account of the following advice':

"Comments, including functional effects of your condition(s):

- referred for physiotherapy, may need time off to attend;
- need to avoid static postures by taking more frequent breaks and be able to sit/stand when needs to;
- review workstation; and
- consider a referral for occupational health advice.

Ticked 'a phased return to work', 'amended duties' and 'workplace adaptations'.

This will be the case for 8 weeks.

I will need to assess your fitness for work at the end of this period."

The employee takes the fit note to their Office Manager and they discuss the doctor's advice and how their health condition affects their ability to do their usual job. They agree a phased return to work with more frequent breaks during the working pattern. The employee returns to work immediately and after 4 weeks is back to normal hours. They are permitted to attend a physiotherapist appointment during working time and their manager has also organised for a work station assessment and an occupational health referral (via HR in Silvan House) to identify any action that may help prevent future episodes.

The employee works as a Wildlife Ranger where an element of their job requires lifting. They hurt their right shoulder through sport a week ago and have been off work since. They go to see their GP and is given a fit note advising that they 'may be fit for work taking account of the following advice':

"Comments, including functional effects of your condition(s):
– avoid lifting or working above shoulder height.

Ticked 'amended duties'.

This will be the case for 6 weeks.

I will need to assess your fitness for work at the end of this period.

The employee takes the fit note to their line manager and they discuss which parts of the job are affected by the injury. Their normal duties can involve the activities that the GP advised to avoid on the Statement. The manager investigates if there are any other suitable duties that they could do whilst they recover and is able to find different duties that will allow them to come back to work without putting pressure on their shoulder. This includes sharing duties differently amongst the team to allow the employee with the injured shoulder a more meaningful temporary work load than might otherwise have been achieved. The employee returns to their GP at the end of the fit note statement period and they agree that the shoulder injury has recovered sufficiently to return to normal duties.