



M K Occupational Health Ltd

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CAPABILITY FOR WORK

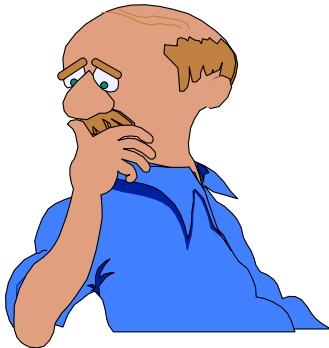
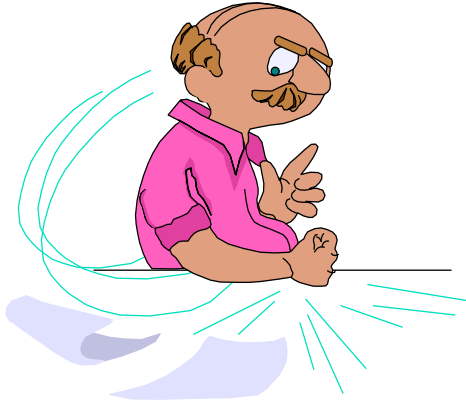


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Capability for Work



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**Statement of Fitness for Work
For social security or Statutory Sick Pay**

Patient's name

I assessed your case on:

and, because of the following condition(s):

I advise you that: 3 you are not fit for work.
 4 you may be fit for work taking account of the following advice:

If available, and with your employer's agreement, you may benefit from:

a phased return to work amended duties
 altered hours workplace adaptations

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

This will be the case for
or from to

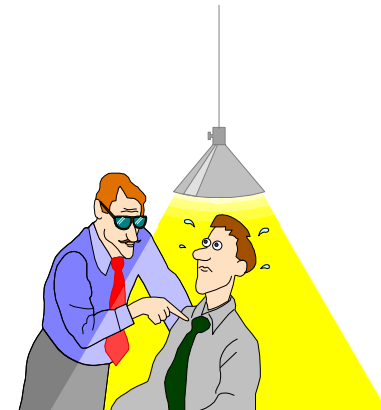
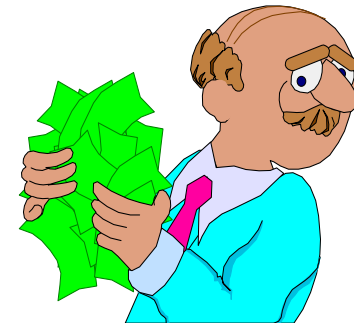
9 I will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Doctor's signature

Date of statement

Doctor's address

Med 3 04/10





MDDUS - Notice Board - February 2010

We would advise and encourage GP's to bear in mind patient confidentiality and consent when completing the new forms and to have an open discussion with their patients so that agreement can be reached as to what to put on the form .The legislation allows that the medical condition may be specified less precisely where, in the doctor's opinion, disclosure of the precise condition would be prejudicial to the patient's well being, or the patient's position with their employer.

We would also advise that GPs exercise a degree of caution and do not give opinions out-with their clinical competency. GP's are not experts in occupational health medicine and we would caution against giving anything other than the most general recommendations for alteration to work place conditions.

<http://www.mddus.com/mddus/news-and-media/notice-board/february-2010/risk-alert---fit-notes.aspx>





Decisions on fitness for work depend on:

- A good understanding of the job
- An understanding of the workplace
- A knowledge of the medical condition
 - it's impact on the patient
 - their responses to treatment
 - their current level of disability/incapacity
 - the natural history and prognosis for the condition
- Other psycho-social factors
- Facilitators and inhibitors to a return to work





A good understanding of the job

- A visit to the workplace or have a series of photos
- A description of the job by patient (potential bias!)
- The provision of a job description by the employer
- (is this that useful?)
- Try to establish the various components of the job
– (this can be helpful in offering advice on adjustments)
- On-line resources to determine what the job role entails
- Speak to the manager or employer to get a feel for the job?





An understanding of the workplace

- What work activities occur at this place of work?
- How does your patient work with others?
- Team work – others to help with certain aspects of job?
- Work alone?
- On site or travel around?
- Is there scope for adjustments in the job?
- Could the patient do something else or be redeployed?
- Can the working practice be changed or adapted?
 - Lifting aids
 - Visual enhancements





The medical condition

- What functional problems does your patient have?
- What are the time scales for recovery?
 - e.g. recovery times from surgery
- Try to relate these to the job details you have
- Look for an evidence base (e.g. *Fitness to Work*, *DWP website*)
- What could the patient do now, in a few days or weeks, or never be able to do?
- What motivators to a return to work could you try?
- What is delaying recovery and can you do anything about this?
 - waiting lists
 - Non-compliance with treatment or advice
 - Psycho-social issues





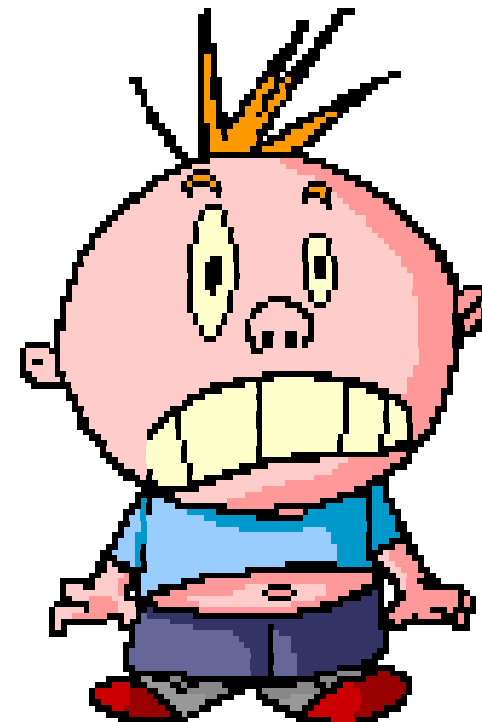
Psycho-Social Issues

- Unhappy at work
 - Does not like the job
 - Issues with somebody at work – bullying
 - Performance/capability issues causing stress
 - Wants early retirement and using “ill health” as escape mechanism
- Personal issues
 - Sick children or an ill family relative
 - Family stressors – marital problems, truanting child
- “Injury at Work” – making a claim for compensation
- Travel/transport difficulties
- Malingering





NOW IT
IS
YOUR
TURN





Case Example: Pre-employment (1)

- 28 years old male.
- Declares on pre-employment health questionnaire - suffers from bipolar affective disorder.
- Diagnosed age 21 and on regular medication.
- Hospitalised three times in first three years of diagnosis.
- GP/Specialist report confirms:
 - (a) Good compliance with treatment
 - (b) No psychotic episodes for four years – (mania)
 - (c) Good insight into illness
 - (d) When psychotic some disturbing sexual behaviour exhibited.





Case Example: Pre-employment (2)

- **PROPOSED EMPLOYMENT**
- A Refuse Collection Operative (Dustman)
- A Manager of Home Care in a Social Services Department
- A newly qualified teacher – successfully completed a three year course at college





Working with a broken leg in a BKWP (1)

- 34 year old woman
- Fall whilst skiing eight days before
- Potts fracture tibia and fibula
- Internal fixation and below knee walking cylinder with crutches
- Fracture clinic happy yesterday
- Otherwise fit and healthy





Working with a broken leg in a BKWP (2)

- Works in University admin office (husband also works at University)
- Is a primary school teacher
- Is a primary school dinner lady
- Is an LGV driver for the local John Lewis Distribution Warehouse
- Is a firefighter





Fitness to attend a disciplinary hearing

- Individual off with work associated stress
- Triggered by being placed on a disciplinary following a complaint from a colleague
- Feels total injustice about whole process
- Angry and feels he/she is the victim
- Gets anxious and panics when thinks about issues at work but OK doing other things = situational stress/adjustment
- So far has refused to go back to work or speak to or co-operate with disciplinary process
- In consequence nothing is moving forward
- **HR write and ask if fit to attend a meeting**





Criteria for determining fitness to attend a meeting

- 1) Can the individual tell the difference between right and wrong?
 - 2) Does the individual understand the allegations against them?
 - 3) Is the individual able to follow and understand the proceedings?
 - 4) Could they instruct an adviser to assist at the proceedings?
- Based on RCPsych guidelines on fitness to plea in Court
Sometimes known as the Staley Principles





Please consider this employee for IHR (1)

- Female aged 52 with severe arthritis of right hip
- Fracture aged 20 in accident
- Surgeon wants to postpone surgery for as long as possible:
 - Because of her age
 - Because she is obese (BMI 38)
- Otherwise reasonably well. Has treated hypertension.
- Assume that pension scheme requires permanent inability to do the job to age 65 (normal retirement age)
- Also assume has been off work for six months
- Is Ill Health Retirement an option?

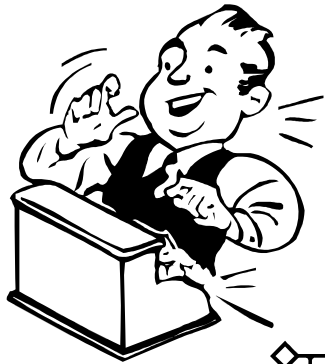
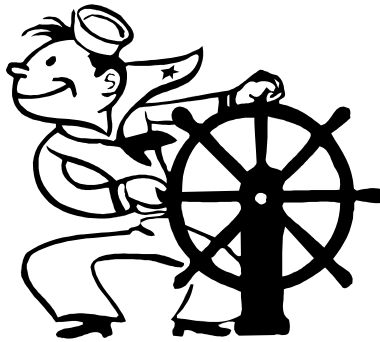




Please consider this employee for IHR (2)

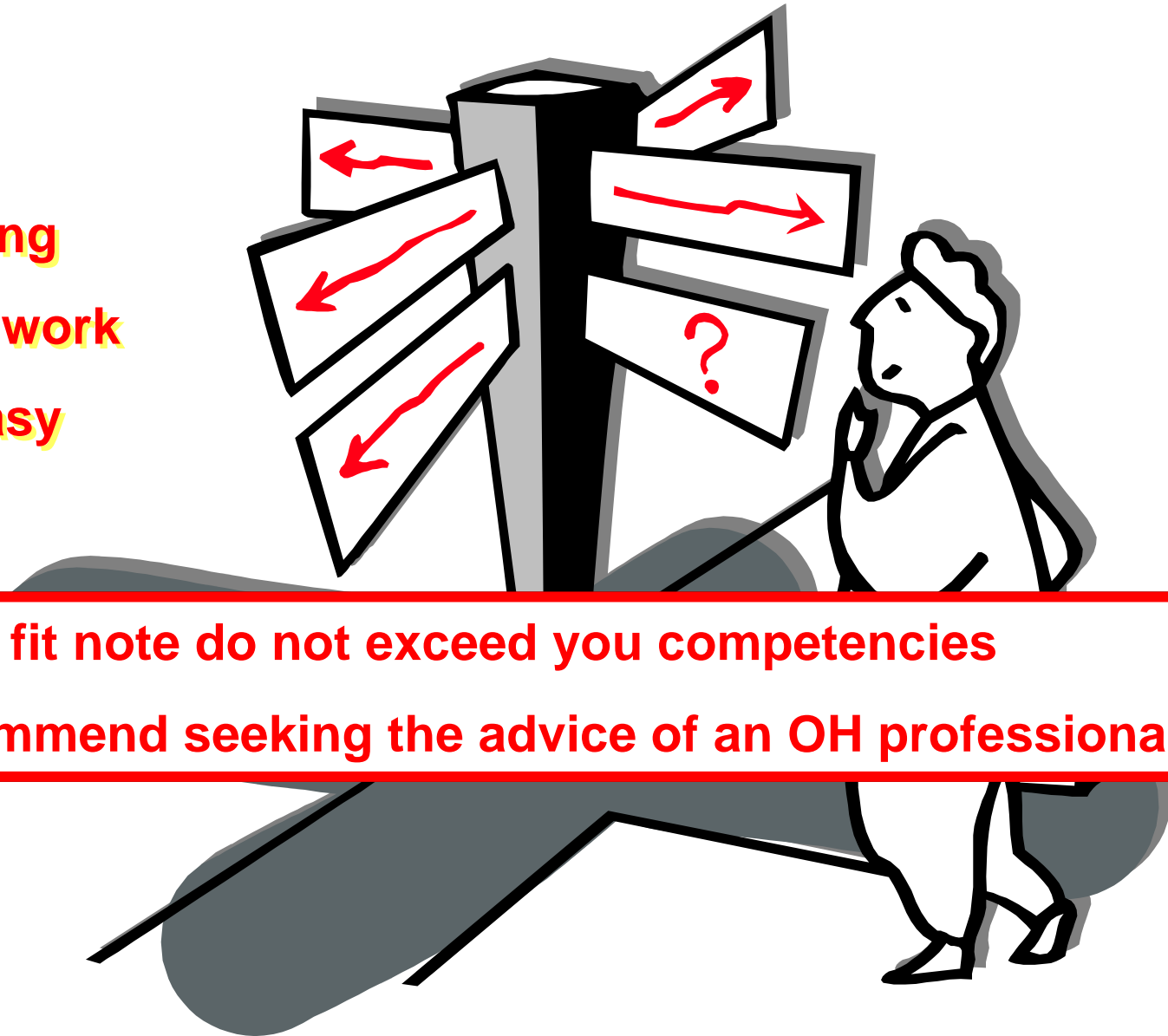
- Works as a nurse in a general hospital
- Is a warehouse operative for Amazon
- Is a circus trapeze artist
- Works in a solicitor's office as a secretary







**Assessing
fitness for work
is not easy**



**On the fit note do not exceed your competencies
If unsure recommend seeking the advice of an OH professional**





THANK YOU

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ALAMA

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