



**Introduction**

Health problems, of whatever nature, may affect work performance. If a manager has any concerns about the effects of work on an employee’s health, or the effects of a health problem on an employee’s performance or attendance at work, referral to the Occupational Health (OH) should be considered. Further advice can be sought from human resources (HR).  
As a result of referral, Occupational Health can provide advice to managers and may be able to assist employees with health problems that are affecting work.

**Manager’s Responsibilities**

- Ensure that the employee is made aware of reasons for referral to OH
- Provide OH with relevant documentation
- Consult with HR regarding occupational health reports and recommendations
- Monitoring employee’s health before and after referral to OH
- Consider recommendations made by Occupational Health and HR

**Process**

Management referrals to Occupational Health must be made with the full knowledge of the employee concerned, encouraging open exchanges of information. An information leaflet outlining the role of Occupational Health may be given to the employee to help with this.

It is important that the occupational health adviser is made aware of all relevant facts about a case to ensure that objective advice is given, based on a full understanding of the issues of concern to the referring manager. The occupational health referral form (see Management Referral form) is designed to help managers provide sufficient information and specify the type of advice they are seeking when making a referral. The referral form must be completed in consultation with the appropriate HR department, and forwarded to the OH for further action.

**Notes for Section F on referral form**

When completing the form it is important to only tick the boxes that are most relevant to the referral – ticking all the question boxes makes the process less meaningful. As a general rule:

- Q 1 should be ticked in cases of for recurrent short-term absence
- Q 2 is linked to health issues impacting on work performance
- Q 3 is asked when employee off sick or on restricted duties
- Q 4 is there a likelihood that the Equality Act applies and long-term adjustments required
- Q 5 is linked to Q4
- Q 6 is asked when restricted work is in place and performance is not satisfactory
- Q 7 usually asked when there is long term sickness or repeated short term sickness
- Q 8 asked to help improve attendance or expedite recovery from illness



Q 9 is relevant to short term sickness absence patterns  
**Other questions** – ask any health question which will help in management of the case.

**Refusal to attend** Occasionally an employee may refuse to give consent for the health professional to write to the GP or Specialist. In these cases the employee should be referred directly to the Occupational Health Doctor for a consultation. Failure to co-operate in the process of referral could result in employment decisions being made without having all the medical facts to consider, or the employee having to be dealt with under the disciplinary policy.

**What happens next** On receipt of a referral form, the OHW will determine the most appropriate referral route. This may include one or more of the following:

- Referral to an occupational health nurse adviser (OHA) – preferred pathway
- Referral to an occupational health medical adviser (OP)
- Telephone consultation with the employee
- Application to the employee’s own doctor or specialist for a medical report.

If an employee cannot attend the OH because of poor health, the manager must speak to HR about obtaining the consent for the OH to obtain a medical report from the employee’s GP or hospital doctor. Any such request should be made in line with the requirements of the Access to Medical Reports Act 1988, using the summary of rights and consent form. The signed consent form should be sent to the OH along with the completed referral form. Each signed consent form will be valid for 3 months from date of signature if related to the same health issue.

Employees who refuse to co-operate with the management referral process and/or giving consent to write to a GP or Specialist will have decisions made without the benefit of health advice and could also be subject to disciplinary measures.

**Reports** Advice given to the manager will not normally contain confidential medical detail, but is concerned with matters of employment and fitness and may include:

- The identification of a health problem that may impact on an individual’s work.
- The potential effects of the problem on current and future performance or attendance.
- Adjustments to the work place or tasks that would assist in maintaining health and reducing the adverse effects of the health problem on attendance and performance.
- Whether the advised adjustments are temporary or permanent.
- Timescales for expected improvement.



- Opinion on the implications of the Equality Act 2010
- The need for further investigation or medical report from treating doctor
- The potential for an individual to maintain a good attendance record, and if appropriate, suitability for ill health retirement
- Proposals for case management or rehabilitation programme where appropriate

As a general rule, Managers will be given a package of care which could include advice about working conditions, short term restrictions or modifications to the workplace. It is the Managers responsibility to consider if the business can accommodate these recommendations with advice from HR and Occupational Health.

Managers will oversee the employee’s work with the suitable package in place. This could include:

- Regular review meetings during a rehabilitation programme or return to work plan
- Monitoring work performance for quality of output
- Extending or shortening the plan as progress and return to health is achieved
- Referring the individual back to Occupational Health if the employee is experiencing unforeseen difficulties

As a general rule OH will not monitor the individual on a regular basis following the report to Management, however, this may be necessary in exceptional circumstances. For all cases, the designated health professional will have a discussion with management before the individual is discharged from Occupational Health’s care.

OH Service Standards	Service	Working Days
	Contact with employee following referral to OHW	2
	Appointment with Occupational Health Adviser	5
	Setting up an appointment with OH Doctor	10
	Critical abnormal feedback to local Management	1
	Verbal report following management referral	2
	Written report following management referral	5