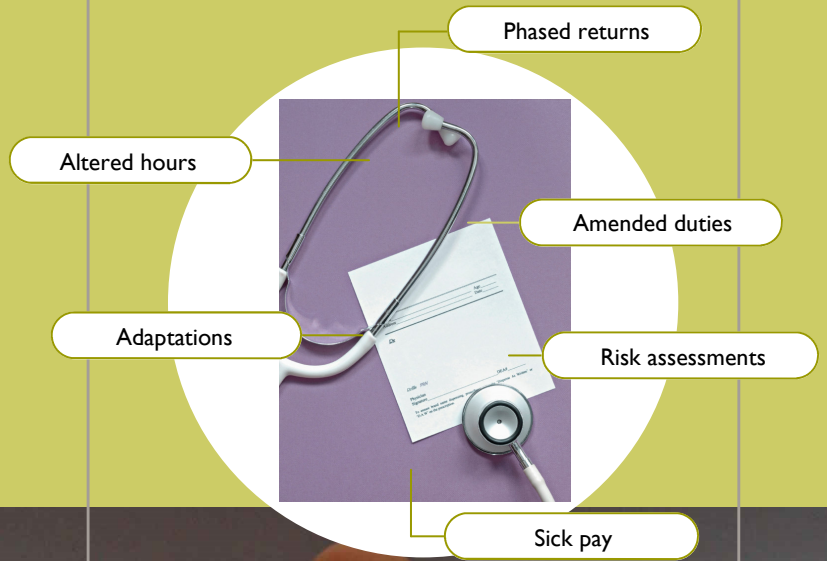




The new Fit Note



From 6th April there will be a number of changes to the sick note, or medical statement, that employees get from their GP to certify sickness absence.

Previously a sick note simply stated whether a doctor believed that a person should or should not be in work. The new medical statement will either indicate that

• **a person is not fit for work, or**

• **that they might be fit for work under certain circumstances**

The doctor will also be able to suggest changes that would assist a return to work. There is no requirement for the GP to write anything apart from that the person is not fit for work and how long the person is 'signed off' for, and in most cases the patient and employer will see no change in the information that the medical statement gives.

There will be no change to the basic purpose of the medical statement and it will still be used by employees as confirmation of illness if claiming sick pay.

The changes

The new medical statement will still be evidence that an employee cannot work due to injury or illness, and normally will not be required until after the 7th calendar day of sickness.

The present arrangements for Statutory Sick Pay (SSP) and any occupational sick pay scheme that you may have will not be changed.

The changes will be:

The form will now have two options. That the patient is 'not fit for work' or that the patient 'may be fit for work taking account of the following advice.'

There will be four types of alterations listed which the GP can tick. These are:

- **A phased return to work**
- **Altered hours**
- **Amended duties**
- **Workplace adaptations**

There will be space for the doctor to provide more information on the condition and how it may affect what they do.

In most cases there will be nothing to recommend and, as at present, the worker will go back to work once the GP feels they are ready to. There will not however be an option for the GP to say that a person is 'fit for work'. The doctor will simply not issue a new medical certificate.

The doctor should only recommend a return to work if the person is not fully recovered after discussing it with the patient and making sure they are fully aware of what is being suggested.

The alterations

The doctor is likely to propose a **phased return to work** where someone is suffering from an illness that has left them

fatigued, or has been away for a long period of time and is not confident about returning full-time. It may also be used if a person has an injury where the doctor believes that their strength has to be built up gradually. Often a phased return to work may be proposed along with other changes such as amended duties.

Altered hours is slightly different. Here the doctor will recommend that the pattern of working hours is changed. This may be recommended if the GP feels that the person may not be able to travel in rush hour public transport, or if shift working should be avoided.

The GP should recommend **amended duties** where they believe that an employee cannot fully do their former work but may be able to do their job if some duties are avoided or changed. This could include not doing any kind of lifting if recovering from a back injury, or avoiding any work with the public if a person is recovering from workplace stress.

Workplace adaptations may be recommended if the GP believes that some physical adaptations are needed to help the person return to work. An example of this could be moving someone's desk to the ground floor of a building if they have trouble with stairs.

In each of these cases the GP should base the recommendations on what the patient has told them about their workplace and should discuss the proposals and the implications fully with the patient.

Returning to work

The medical statement will then be given to the patient, as at present. The patient should then send it to the employer. It is good practice for the employer to then discuss the proposals with the employee and agree what changes will be made. If they disagree then the employer should

not force the employee to come back until they feel comfortable with the changes proposed.

If your doctor is recommending any of the above, we recommend you contact UNISON before your return to work interview.

The employer does not have to accept the advice on the medical statement, but if they do not do so then the statement should be treated as though the doctor has advised 'not fit for work'. Many employers will try to say that the employee is ready to come back and is no longer 'signed off'. This is not the case and the government advice on this is clear.

The employer also must do a **revised risk assessment** if they make any adaptations or changes to an employee's duties to ensure that these do not introduce new risks.

In addition, if the employee is disabled and covered by the Disability Discrimination Act then the new 'fit note' procedures do not alter the duty on the employer to make adequate adjustments regardless of what a GP recommends

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:
 you are not fit for work.
 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):

Sample

This will be the case for

or from to

I will/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