

Fit Note Provision by Nurse Midwife Allied Health Professional (NMAHP) in NHS Lothian

Guidance for Services and Practitioners

Title – Fit note provision by NMAHP in NHS Lothia	an. Guidance for services and Practitioners		
ID –NHSLNMAHPFITNOTE	Author – NHS Lothian NMAHP fit note SLWG. Margot McCulloch, Phil Ackerman, Liz Young, Gerard McFeely		
Category	Document – Version 1		
Status- Final	Review Date April 2025		
Authoriser Alison MacDonald, Executive nurse Director, NHS Lothian Dr Heather Cameron, Director Allied Health Professions, NHS Lothian	Date Authorisation 27.04.23		
Date added to intranet Key Words – NMAHPs, fit notes, guidance	27.4.23		

1.0 Background
2.0 Purpose of this document and relevant regulatory and professional documentation
2.1 The DWP documents which provide guidance for healthcare professionals4
2.2 The DWP documents which provide guidance for patients, employers and line managers4
2.3 Guidance provided by the relevant professional bodies4
3.0 Scope and Definitions
4.0 Key Messages
5.0 Implementation, Roles and Responsibilities
5. 1 Executive Lead
5.2 Line managers
5.3 Practitioners7
6.0 Training, Preparation and Evidencing Competence7
7.0 Guidance on Issuing Fit Notes in Practice
7.1 Fit Note Completion
7.2 The 'Work' Consultation and Assessment10
7.3 'May be Fit to Work' Category10
7.4 Time Frames11
7.5 Exclusions
7.6 Confidentiality12
8.0 Useful Resources and Reading12
9.0 References
RCOT Professional standards and ethics
Appendix 1- Definitions14
Appendix 2 – Flag System
Appendix 3- Test of change – key learning points
Appendix 4 Resources for non-appropriate request for fit notes17
Appendix 5 Example template for competencies18
Appendix 6 Example of completed fit note

This document has been written and developed by an NMAHP SLWG within NHS Lothian and has been adapted with permission from Grant Syme, Lead Physiotherapist, NHS Fife.

1.0 Background

From 1 July 2022, legislative changes have enabled a wider range of healthcare professionals to certify fit notes. The healthcare professionals (HCP) who can now certify fit notes in addition to doctors are nurses, occupational therapists, pharmacists and physiotherapists.

Healthcare professionals' issue fit notes (Med 3 form) to people to provide evidence of the advice they have given about their fitness for work. They record details of the functional effects of their patient's condition so the patient and their employer can consider ways to help them return to work. The fit note should be seen as an aid to conversations about health and work, focusing on what people can do, not what they cannot do. It should facilitate returns to work, and help people stay at work where appropriate, by providing information to the employer about what support might enable that to happen.

The legislation "The Social Security (Medical Evidence) and Statutory Sick Pay (Medical Evidence) (Amendment) (No. 2) Regulations (2022)" sets out the sections of the fit note and sates, where the patient may be fit for work 'the doctor or eligible health care professional shall state the reasons for that advice and where this is considered appropriate, the arrangements which the patient might make, with their employer's agreement to return to work' <u>www.legislation.gov.uk/uksi/2022/630/contents/made</u>).The legislation is permissive, meaning that it does not mandate nurse, midwives and allied health professionals (NMAHPs) to certify fit notes. As with any clinical task, and in line with professional regulation, individual NMAHPs should consider their scope of practice and ensure they have the relevant skills, knowledge and experience before undertaking health and work conversations and making decisions around certifying fit notes.

Most fit notes are issued in primary care and therefore this legislative change will naturally have most impact on NMAHPs working in this setting. It will simplify the process of issuing and receiving a fit note for patients who have had a consultation with an appropriately trained NMAHP and reduce the burden on GPs.

However, it may also be appropriate to issue a fit note in different healthcare settings. Issuing fit notes in acute and secondary care sectors will ease pressure on primary care. NMAHP practitioners should discuss with individual clinical management teams to agree and determine if it is appropriate to issue fit notes within a particular setting and according to the specific context of the -individual patient. Use the guidance in this document to help you, paying particular attention to whether access to the medical record would be necessary in that specific situation.

2.0 Purpose of this document and relevant regulatory and professional documentation

This document is designed to signpost services and practitioners in NHS Lothian to the relevant legislation to support the issuing of fit notes (Med 3 form) by relevant NMAHPs. The document also sets out the required training and governance within NHS Lothian for relevant NMAHPs to issue and authorise fit notes.

This document should be used in conjunction with the documents published by The Department for Work and Pensions (DWP) 2022 and relevant professional regulatory bodies and codes of conduct

2.1 The DWP documents which provide guidance for healthcare professionals.

- Who can issue fit notes: guidance for healthcare professionals and their employers GOV.UK (www.gov.uk)
- Fit note: guidance for healthcare professionals GOV.UK (www.gov.uk)
- <u>Getting the most out of the fit note: guidance for healthcare professionals GOV.UK</u> (www.gov.uk)

2.2 The DWP documents which provide guidance for patients, employers and line managers

- Fit note: guidance for patients and employees GOV.UK (www.gov.uk)
- Fit note: guidance for employers and line managers GOV.UK (www.gov.uk)

2.3 Guidance provided by the relevant professional bodies

- Nurses- <u>Fit notes: nurses now among professionals able to issue | News | Royal</u> <u>College of Nursing (rcn.org.uk)</u>
- Nurses <u>Nurses among health and care professionals who can now certify fit notes The</u> <u>Nursing and Midwifery Council (nmc.org.uk)</u>
- Physiotherapy- <u>Fit note certification by physiotherapists</u> | <u>The Chartered Society of</u> <u>Physiotherapy (csp.org.uk)</u>
- Occupational therapy Occupational therapists now able to certify 'fit notes' RCOT

Please note: This document provides guidance and advice that supports the issuing of fit notes by NMAHPs in NHS Lothian. Every effort has been made to ensure that the information included is accurate for the current legislative state.

3.0 Scope and Definitions

The registered NMAHPs who can now certify fit notes are nurses, occupational therapists and physiotherapists and this document is designed to support the process for these professions.

The fit note (Med 3 form) is a legal document, which provides medical evidence for Statutory Sick Pay (SSP) purposes, as well as to support health related benefits. It may also be useful to support occupational sick pay (OSP). The underpinning legislation is The Social Security (Medical Evidence) and Statutory Sick Pay (Medical Evidence) (Amendment)(No.2) Regulations (2022)

www.legislation.gov.uk/uksi/2022/630/contents/made

It should be noted that the issuing of fit notes by NMAHPs is permissive only and there is no mandatory requirement for NMAHPs to issue fit notes. NHS Lothian recommends a phased implementation of the issuing of fit notes to people by NMAHPs and only once agreed by clinical management teams and for named conditions.

Only eligible registered healthcare professionals who have undertaken the appropriate training and preparation as described in this document should issue fit notes. Students or healthcare support workers working under delegation cannot certify fit notes.

Definitions of 'employed', 'self-employed' and 'unemployed' can be found in Appendix 1

4.0 Key Messages

- A fit note is the opinion of a patient's fitness to work. If in the view of the NMAHP the patient is fit for any type of work, then a fit note does not need to be issued, even if it is requested by the patient or other healthcare professional.
- Whilst all registered nurses, occupational therapists and physiotherapists are legally able to complete fit notes under the legislation, within NHS Lothian, the decision whether to implement this task within practice will be made by the relevant NMAHP clinical service leads after due consideration of the relevant national guidance including that set out within this document. Local leadership/service of fit note implementation must include governance and accountability.
- The individual NMAHP clinician within a service which embeds fit note provision within their practice, will be required to ensure that they have the relevant training, guidance, support and local governance described within this document, to ensure that this task is within their individual/personal scope of practice.
- Early conversations with people about their fitness to work should support the individual to consider their short, medium and longer term plan to return to work.

The issuing of fit notes may require adjustments to the NMAHP job plan and case management and should be factored into consideration when the NMAHP is taking on this role.

- NMAHPs are likely to issue fit notes to people in a variety of clinical settings and may include primary care, mental health, occupational health, emergency departments, orthopaedics and surgical, womens health, cancer/heamatology services although this may expand over time .
- NMAHPs should take a health improvement approach towards the certification of fit notes.
- The NMAHP should advise the GP practice or named care providor that a fit note has been issued and follow agreed local processes to document and communicate this. Within Primary Care settings communication will be by formal letter, an email to the practices clinical mailbox or if said individual has direct access to the patient record then it can be entered at source.
- An escalation route must be agreed within indivdual services or practices for example, in complex cases or when an NMAHP is not available to issue a fit note

5.0 Implementation, Roles and Responsibilities

5.1 Executive Lead

The Executive Director of Nursing, Midwifery and Allied Health Professionals has strategic leadership and is accountable for the organisational governance of this procedure.

5.2 Line managers

The operational line manager is responsible for ensuring that relevant staff within their line management are made aware of and are responsible and accountable for the implementation of this procedure and for agreeing the scope of issuing FIT notes within their team. Line managers must ensure that time is built into job planning for training/ education on FIT notes.

An agreed period of supervision and support should be arranged with the NMAHP to ensure that the HCA is competent in the issuing of FIT notes. The length of supervision required to evidence competence should be individually agreed with the practitioner. The clinical professional lead should keep all NMAHP training records relevant to the issuing of fit notes.

5.3 Practitioners

It is the responsibility of all staff within NHS Lothian who issue FIT notes, to provide high quality, person-centred and dignified care and maintain any organisational and regulatory requirements. The individual NMAHP registrant is responsible and accountable for following these guidelines and any locally agreed directives. This includes agreement and permission from the relevant clinical professional leads. NMAHPs have a professional and legal responsibility to keep accurate, comprehensive records in accordance with applicable NHS Lothian policies, protocols and guidelines and as per regulatory bodies including if a FIT note is issued.

The individual NMAHP is responsible for ensuring that they have successfully completed the necessary training and obligations for providing FIT notes, as outlined in this procedure, including working within their professional and personal scope of practice. The NMAHP should provide evidence to their employer and document as part of their CPD/TURAS appraisal.

6.0 Training, Preparation and Evidencing Competence

NMAHPs must have completed and successfully passed the nationally recognised Health Education England training and certification <u>https://portal.e-lfh.org.uk/</u> (Fit Note Module and component parts) before issuing any fit notes. This training should take between 3-4 hours, can be undertaken over a period of time and can be revisited and used as an ongoing resource.

Additionally, the healthcare professional should have an agreed period of local structured mentorship and support for the HCP to proceed to autonomous practice in fit note certification. This may be variable depending on the development of capability and confidence, alongside clinical experience of conversations with the person in the care of the professional about health and work, including shared decision making. A minimum of 10 case-based discussions with an identified mentor(s) are recommended during the initial implementation prior to autonomous practice. See appendix 5 for example competency. Template. Evidence of completion training and of cased based discussions should be kept on TURAS.

On completion of fit note training NMAHPs should continue their professional development through any local and national training and updates relevant to fit note issue

Results from pilot/ test of change work within NHS Lothian in 2022, have clearly identified variance in individual clinician confidence to undertake fit note certification following the training outlined above (see appendix 3). The individual clinician may feel that additional training and /or mentorship is required to develop confidence in their personal scope prior

to implementation of fit note certification. In such an event this should be discussed and negotiated within service.

7.0 Guidance on Issuing Fit Notes in Practice

NMAHPs should only provide fit notes for patients that are directly under their duty of care and for the condition for which is within the scope of practice of the clinician. A fit note should only be issued for Statutory Sick Pay or Social Security Purposes based on a clinical diagnosis. For example, a patient with anxiety due to bereavement may prompt a fit note for anxiety, but not for bereavement caring responsibilities or other life events, which on their own a fit note should not be issued. A further example- a musculoskeletal physiotherapist managing a patient with low back pain, but not trained in the identification of depression can certify the fit note on the basis of back pain, but cannot certify a fit note on a diagnosis of depression.

The assessment about whether a patient is not fit for work or may be fit for work (and any other advice in the fit note) is classed as advice, and it is for employers to determine whether to accept it.

7.1 Fit Note Completion

Fit notes can be handwritten, computer generated and/or printed out. It must include the issuer's name and profession and the address of the medical practice or hospital.

The following items must be detailed on the fit note

The date the patient was assessed by the HCP. This could be a face-to-face or telephone consultation, or consideration of a written report from another healthcare professional.

- The condition(s) affecting the patient's fitness for work.
- The HCP assessment as to whether the patient is either:
- not fit for work the patient is not fit for work of any kind

- may be fit for work (see section 7.3) The patient may be fit for work, taking account of the HCP advice in the fit note – this does not necessarily mean doing their normal role
- Advice about how the NMAHP can support the patient to return to work.

The period that the fit note covers. This will either be from the date of the assessment, or between start and end dates. The dates are inclusive, (for example, a fit note dated from 2 April to 10 April will no longer apply from 11 April onwards). This section may cover an earlier period if the patient's HCP judges that their condition affected their fitness for work before the assessment date.

The dates of the fit note can be for any period that the patient's HCP considers appropriate (up to 3 months) AFTER the initial 7 calendar days of absence which should be self – certified. It is recommended that patients with complex needs/ longer term absence for work would be best managed by the most senior clinician, typically a GP or other Consultant.

The box regarding the need for reassessment tells the employer whether the patient's health condition is expected to affect them after their current fit note expires.

- The name of the issuer.
- The profession of the issuer.
- The date the fit note was issued this may not always be the same as the date of the assessment.
- The HCP needs to sign the fit note using ink. If they are using the computergenerated fit note, the statement date and address of the practice will be completed automatically by the IT software. If not, they need to ensure that these sections are filled in. The NMAHP must strike out 'doctors' and replace with their own profession.
 - a. From April 2022 GP IT systems are being updated with a new fit note template. This change will mean the fit note captures the name of the doctor issuing the form in place of it being signed in ink. Fit notes can still be printed and the issuer's name completed by hand if necessary. While the update is taking place the existing fit note template (MED 3 01/17) must still be used and as long as it is signed in ink is legally valid.
 - b. Once the GP IT system has been updated, the name and profession of the person issuing the fit note is autogenerated
- The date the fit note was issued this may not always be the same as the date of the assessment.

• Any fit notes issued in the hospital setting require the application of the 'hospital stamp' to authenticate the fit note.

7.2 The 'Work' Consultation and Assessment

The legislation requires the HCP to undertake an assessment to complete a fit note. An assessment is defined as a consultation between the patient and NMAHP or consideration of a written report by another health professional. The fit note provides advice about the functional effects of a patients' condition on their fitness for work, but it does not require the NMAHP to have specialist knowledge of workplaces or occupational health or to suggest changes to a patient's workplace or job. The NMAHP should review the patient within the context of the biopsychosocial model, including formulation of risk e.g. use of the flag system or model formulation that focuses on the collateral information of your patient and how they got to this point. (See appendix 2 and the e-lfh module for further detail https://portal.e-lfh.org.uk/) including use of the flag system. (See appendix 2)

The HCP should also consider the person, their job, work environment and risk before issuing a fit note. Consideration should be given to whether a person may be able to work with reasonable adjustments. The HCP issuing the Fit Note is required to understand the purpose of the Equality Act and disability as well as a general understanding of employment law to refer a client for assistance when appropriate.

Disability: Equality Act 2010 - Guidance on matters to be taken into account in determining questions relating to the definition of disability (HTML) - GOV.UK (www.gov.uk)

7.3 'May be Fit to Work' Category

Improving communication between employers and health care professionals leads to faster return to work. Increased use of the 'may be fit to work' section of the fit note will help those with medical problems to stay in work, which will increase inclusivity in the workplace. Evidence suggests that both employers and patients value the use of this section of the fit note and that it helps patients feel empowered to return to work. Consideration should be given to:

- Place of work
- Hours of work
- Access to breaks
- Time off for medical appointments
- Type of work

- Flexible working
- Workplace modifications
- Reasonable adjustments
- Further specialist advice
- Phased Return
- Start/Stop time

7.4 Time Frames

Fit notes are not issued for the first 7 calendar days of absence, as patients should comply with employers' guidance regarding self-certification.

In the first six months of the patient's condition, a fit note can cover a maximum of 3 months. If a condition has lasted longer than 6 months a fit note can be provided for a period up to an infinite period.

The length of time that the adaptations should last, can be specified with a start and end date or as a specified time period, for example '2 weeks'

Patients requiring fit note(s) over a longer duration should be reviewed by the best placed person within the multidisciplinary team. This will often be their GP or other Consultant.

Important: The patient can go back to work at any time (including before the end of the fit note) without going back to see their healthcare professional even if their healthcare professional has indicated that they need to assess them again. This will not breach their Employers Liability Compulsory Insurance, providing a suitable risk assessment has taken place, if required.

7.5 Exclusions

Patients should not be issued a fit note for the following purposes (examples only and not an exhaustive list):

- 1. To support a housing application
- 2. To be excused from a court appearance
- 3. To be given more time to complete a university or college assignment
- 4. As proof of illness to claim on an insurance policy
- 5. To allow a person to care for a relative or attend a family event abroad

6. To allow a payment for compassionate leave after bereavement.

Links for signposting to agencies and support relating to exclusions can be found in appendix 4.

The fit note does not affect the use of an NMAHPs Health and Work Report, although it can only be used for statutory sick pay purposes provided the employer agrees. For statuary sick pay purposes, the fit note should be the tool of choice.

7.6 Confidentiality

It is important to treat all patient information as confidential and ensuring patients' dignity and privacy. This is particularly relevant due to the wide number of settings in which health and work conversations may happen and means that such a conversation should not take place unless a private place for discussion is available.

8.0 Useful Resources and Reading

AHP Health & Work Report module online <u>Allied Health Professional (AHP) Health and Work</u> <u>Report (nottingham.ac.uk)</u>

Allied Health Professions Federation (2022) Allied Health Professions (AHP) Health and Work Report Available online at: <u>www.ahpf.org.uk/AHP_Health_and_Work_Report.htm</u>

Government UK (2010) Equality Act 2010 Available online at: <u>www.legislation.gov.uk/ukpga/2010/15/contents</u>

GOV.UK guidance for health professionals <u>Getting the most out of the fit note: guidance for</u> <u>healthcare professionals - GOV.UK (www.gov.uk)</u>

Health Education England (2022) E-Learning for Healthcare (elfh) Fit Note Training Module Available online at: <u>https://portal.e-lfh.org.uk/Component/Details/745775</u>

Macmillan Cancer Support (2022) Work and Cancer Available online at: <u>www.macmillan.org.uk/cancer-information-and-support/impacts-of-cancer/work-and-cancer</u>

NHS Health Education England Work and Health online <u>Work and Health - elearning for</u> <u>healthcare (e-lfh.org.uk)</u>

Royal College of Occupational Therapists Occupational therapists now able to certify fit notes <u>Occupational therapists now able to certify 'fit notes' - RCOT</u>

Royal College of Surgeons England (2022) Recovering from Surgery Available online at: www.rcseng.ac.uk/patient-care/recovering-from-surgery/

9.0 References

Chartered Society of Physiotherapy (2019) Code of Members' Professional Values and Behaviour. Available online at: <u>www.csp.org.uk/publications/code-members-professional-values-and-behaviour</u>

Government UK (2022) Fit Note Available online at: www.gov.uk/government/collections/fit-note

Health and Care Professions Council (HCPC) (2016) Standards for Conduct, Performance and Ethics. Available online at: www.hcpc-uk.org/globalassets/resources/standards/standards-of-conduct-performance-and-ethics.pdf

Health and Care Professions Council (HCPC) (2013) Standards of Proficiency for Allied Health Professionals. Available online at: <u>www.hcpc-</u> <u>uk.org/globalassets/resources/standards/standards-of-proficiency---Allied Health</u> <u>Professionals.pdf</u>

Kendall N, Burton K, Main C, Watson P (2011) Tackling Musculoskeletal Problems: A Guide for Clinic and Workplace Identifying Obstacles Using the Psychosocial Flags Framework TSO (The Stationery Office)

RCOT Professional standards and ethics Occupational Therapy Standards & Code Of Ethics - RCOT

The Social Security (Medical Evidence) and Statutory Sick Pay (Medical Evidence) (Amendment) (No. 2) Regulations 2022 Available online at: www.legislation.gov.uk/uksi/2022/630/contents/made

Appendix 1- Definitions

- An Employed Person -
 - A person who is employed (including agency worker) can use the fit note as proof of their sickness to receive Statutory Sick Pay (SSP) from their employer for up to 28 weeks. To be eligible for SSP, the individual must:
 - Earn a minimum weekly average amount
 - Be ill for at least 4 consecutive days
 - Be classed as employed
 - Employers may also provide additional sick pay usually called occupational sick pay, and the fit note can be used to provide evidence for this. The vast majority of fit notes issued are used as evidence for SSP, or occupational sick pay purposes.

• A Self-Employed Person

 A person who works for themselves as an employee of their own company (for example a company director) may be eligible to receive SSP, but those who are self-employed as sole traders are not. If a person is unable to work, they may still need a fit note to apply for benefits, such as Employment and Support allowance (ESA) or Universal Credit (UC).

• An Unemployed Person

 An unemployed person cannot receive SSP, but they may need a fit note to support their claim for benefits including Universal Credit (UC) and Employment and Support Allowance (ESA). This is because a person's fitness for work can affect what benefits they may receive and what job seeking conditions and obligations they might have. It is still appropriate to use they 'may be fit for work' option. This may help the job centre to try and find work that the person can safely do, whilst avoiding work, for which they are not medically fit

Appendix 2 – Flag System

- Orange Flags:
 - describe symptoms such as pre-existing mental health conditions e.g., depression, anxiety or personality disorders
- Yellow Flags:
 - health beliefs such as expectation of a poor outcome and delayed return to work
 - emotional responses such as worry and fear which do not meet the criteria for diagnosis of a mental health condition
 - pain related behaviour such as belief that passive treatments will improve the pain and activity should be avoided
- Blue Flags:
 - belief that work will cause further injury
 - o a belief that colleagues or management are unsupportive
- Black Flags:
 - o obstacles in or outside work
 - jobs with little flexibility e.g., heavy manual labour with no opportunity for reduced hour and/or modified duties
 - an ongoing insurance claim or litigation
 - o family members who encourage a prolonged time off work

Appendix 3- Test of change – key learning points

A test of change/ pilot period October – December 2022 was undertaken involving 3 MSK GP Advanced Practice Physiotherapists (GP APP) across 4 GP practices. To date (20.12.22) 19 fit notes have been certified by the GP APPs involved in the test of change. All fit notes issues were for people with MSK conditions within the scope of the GP APP

Key feedback & learning

- Electronic systems and processes are now in place for pilot areas
- Staff feel that the training provided within the e-lfh module, and the online guidance provided on the DWP website and Charted Society of Physiotherapy website together with 10 supervised cases they feel are "sufficient to meet their training needs".
- The e-lfh course provides "good logistical and practical advice in completing the form". It covers the legal and legislative knowledge required.
- Staff have selected MSK cases with expected timescales for healing and natural history resolution.
- They have stayed tightly within the MSK condition remit and not considered cases with more co-existing mental health conditions.
- 32% of the fit notes were issued as may be fit to work with suggested modifications to work. The currently reported use of may be fit to work is 6% (Black et al 2022). This suggests GP APP staff are using the fit note to support staff to stay in work.
- There is a broader concern with the current training as it assumes that the clinician is skilled in difficult conversations around SDH, (complex domestic concerns implicated in staying off work) DWP payments and statutory sick leave and implications of zero hours contracts and self-employed people, health beliefs and health literacy in the context of shared decision making.
- The Association of chartered physiotherapists in occupational health and ergonomics (ACPOHE) have specialist competency in managing long-term absence, improving performance and reducing sickness absence. As a professional network, they offer specialist training in the fit note from 1-hour webinars to full study days. <u>Association of Chartered Physiotherapists in Occupational Health and Ergonomics | Association of Chartered Physiotherapists in Occupational Health and Ergonomics (csp.org.uk)
 </u>
- While such training may be desirable for NHSL and staff as part of their CPD it is not clear that this additional training is essential because the fit notes issued to date have simple MSK presentations and an expected natural history of resolution.

Appendix 4 Resources for non-appropriate request for fit notes

<u>ACAS</u> Telephone: 0300 1231100

Benefit advice

Benefit guides

<u>HSE guide to managing sick leave and return to work</u>: gives advice to employers and managers about supporting people while on sickness absence and helping them to return to work.

Carers

NHS Social care and support guide Carers Trust

Careers Advice

National Careers Service

Debt issues

Debt and money guide from Citizen's Advice National Debt line

Occupational Health Advice Service

Free professional occupational health support for individual patient cases or about occupational health in general. England <u>NHS Health at Work Network</u> Scotland <u>Healthy Working Lives</u> Telephone: 0800 019 22 11

Vocational Rehabilitation in NHS Lothian

Lothian Work Support Services <u>Lothian Work Support Services – NHS Lothian | Our Services</u> Free and confidential pan Lothian vocational rehabilitation service available for self referral of individual patient cases, e.g. complex cases requiring case management and work focused therapies, as well as general vocational rehabilitation enquiries from NNAHP staff. Telephone 0131 537 9579

Relationships

<u>Relate</u>

Appendix 5 Example template for competencies



Case Based Discussion Template

Date of Case Based Discussion:

Practitioners Name: HCPC/NMC No:

Peer's Name: GMC No:

Focus of Discussion: Background of case, Particular challenges. Ensure personal information is anonymous

Peer Feedback:

Areas of good practice, Suggestions for Development. Be specific

Practitioners Reflection:

Areas reinforced, What would you do differently, Any development needs identified? Next steps.

Appendix 6 Example completed fit note

Statement of Fitness for Work For social security or Statutory Sick Pay				
Patient's name	Mr, Mrs, Miss, Ms- FRED FL	INTSTONE		
I assessed your case on:	11 / 04 / 2023			
and, because of the following condition(s):	sciatica			
I advise you that:	X you are not fit for work.	aking account	tof	
If available, and with ye	our employer's agreement, y	you may bene	fit from:	
a phased return to v	work	amended di	uties	
altered hours		workplace a	daptations_	
Comments, including fu	nctional effects of your con	dition(s):		
Acute back and leg pain manual duties at work fo				
This will be the case for	28 days			
or from	1 1	to	1	1
I will/will not need to ass (Please delete as applicabl	sess your fitness for work ag	ain at the end	l of this peri	od.
Issuer's name	Ms Transmonth Matica X			
Issuer's profession	Physiotherapist			
Date of statement	11 / 04 / 2023			
Issuer's address				
Unique ID: Med 3 04/22	8	259A4A4-883	8-497C-8994	-86DE2F8151C5

What your advice means

'You are not fit for work'

You dre not in ror work. Your health condition means that you may not be able to work for the period shown. You can go back to work as soon as you feel able to and, with your employer's agreement, this may be before your fit note runs out.

'You may be fit for work'

You could go back to work with the support of your employer. Sometimes your employer cannot give you the support you need and if this happens your employer will treat this form as though you are '**not fit for work**'. You do not eard happed hapted parts need to get another of these forms.

For more information please visit <u>www.gov.uk</u> and type '**fit note guidance for patients and employees**' into the search field. Fit note guidance for employers is also available.

Data from ${\bf page 1}$ of this form may be collected to learn about national patterns of sickness absence. Individuals will not be identified. Find out more at www.gov.uk/dwp/fit-note-data

Fill in the Your details section. You can ask someone to do this for you if you cannot fill in your details yourself.

Your details – Please use	BLOCK CAPITALS			
Surname	Mr, Mrs, Miss, Ms FLINTSTONE			
Other names	FRED			
Address	*80x88x98x9x48x5ixxx			
	Edinburgh			
	Postcode 20000882000			
Date of birth	12 / 12 / 1938 Mobile			
NI number				
What you need to do now				

- If you are employed: Please show this form to your employer. You could get Statutory If you are enjoyed, hence allow this form to you enjoyed, how could get statutory Sick Pay (SSP) which is paid by your employer. If your employer cannot pay you SSP they will give you form SSP1 to claim benefits.
 If you are self-employed: You could claim benefits.
 If you are laready claiming benefits: Please send this form to the office dealing with the provide the second statutory of the second statutory of
- your claim.
- If you need to make a claim to benefits: Visit <u>www.gov.uk/browse/benefits</u> or phone 0800 328 5644 (8am to 6pm Monday to Friday). Textphone users call 0800 328 1344.