

### Employer Guidance for Occupational Health Management Referrals

The purpose of a management referral to occupational health is to provide the referring manager and/ or human resources with specialist health professional advice. This advice can be used to assist the employee work to the best of their ability, make robust and defensible decisions.

#### Reasons for Referral

There may be many reasons for wishing to request Occupational Health advice in relation to an employee, such as:

- Long term sickness absence – usually defined as continuous absence of 4 weeks or more.
  - Adjustment advice which would help the employee work to the best of their ability.
  - A safe confidential place for the employee to discuss work and health concerns and receive advice.
  - Recurring short term absences – based on episodes and their frequency.
  - The employee is finding it difficult to work, and not able to deliver work performance as expected.
  - Investigation of work-related illness/ injury – assessment of whether a health problem is likely to be work-related or not.
  - Substance use concerns – assessment of suspected or admitted to substance misuse affecting work.
  - Assess an employee for fitness to attend a disciplinary or other formal meeting.
- Anna Harrington [anna@whib.co.uk](mailto:anna@whib.co.uk). 07816212836. Registration Number – 12320438.  
Springfield Barn. NN11 3TA

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Consent & confidentiality to an occupational health assessment

It is the employer responsibility to obtain the express consent from the employee to release personal and sensitive data to the occupational health provider and to the occupational health management referral process. This should be informed by your GDPR privacy notice. [Here](#) is guidance from the Information Commissioners Office.

This consent must be given in circumstances in which the individual is:

- Competent to give consent
- Not under duress, inducement or coercion
- Able to understand the consequences of disclosure or non-disclosure
- Suitably informed of:
  - Why is the information required and the purpose for which it will be used?
  - What is the scope of the information required?
  - Who will it be shared with?
  - When it will be shared?
  - How it will be securely shared

. Consent can be withdrawn by the employee at any stage of the process.

The clinician will read out the content within the referral form to the employee.

If it becomes clear to the clinician that the employee is not aware of the content of the referral, the clinician may decide to terminate the assessment. This will incur full charge.

Use of AI type transcription, note taking or recording systems will not be allowed unless with prior agreement. This is due to risk of confidentiality breaches. If these

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types of systems are used please ensure the employee knows how to disconnect or stop it. A full charge will apply if this is not adhered to.

The referring person should provide the employee with the Employee Guide to Occupational Health assessments.

### Completing a Management Referral Form

A management referral form must be completed before an employee can be booked for assessment. It is essential that key information is provide. However, do not send additional information unless the clinician asks for it.

#### Key information:-

- Health reason for referral
- Management reason for the referral
- Job hazards and risks
- Details of sickness absences
- Brief (bullet points) details of performance issues
- Stage of sickness absence management process

The following questions are listed within the referral form to be selected by you. These will be used as the foundation and structure of the occupational health assessment and answered within the OH report. An additional 5 more questions can be added without incurring extra costs.

1. What are the health reasons that are impacting performance/ attendance?

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2. Are the health issues affecting performance/ attendance likely to improve or deteriorate in the next 12 months?
  
3. Are there any adjustments that you can suggest the business and employee consider to enable performance and/ or attendance improvements?
  
4. Is the employee fit to attend disciplinary or other formal meeting and please advise on adjustments to assist with attendance?
  
5. Does the employee have impairments to day to day living activities that have been or likely to be long-term (> 12 months) to be considered without treatment?

Please note that telephone/ video assessments will require the employee to be in a suitable location for a private and confidential call for approximately 60 minutes. An assessment cannot go ahead whilst an employee is driving. If the clinician feels the environment is not suitable will decide to abort the assessment which will result in a full charge being applied the employer.

Please can you remind your employee that they have close to hand, details of medication, NHS app relevant to their country (England, Wales, Scotland, Northern Ireland) other treatments and copies of any medical reports.

The OH assessment entails the clinician asking carefully crafted and relevant questions to obtain health, medical details, treatments, lifestyle, symptoms, abilities, limitations, attitudes to health and work. These details are used with the clinician

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knowledge, experience and research evidence to form an opinion with regards to the questions that the referring person has asked.

At the end of the assessment phase of the consultation, the clinician will outline the report content to the employee and ask for consent to send it to the referring person. If consent is not given the clinician will enquire why and try to resolve any concerns. If the person is still not able to consent, the clinician will explain that the business will be informed of this and may make decisions without the health professional opinion which could be detrimental. This is balanced with the legal standard of consent not being obtained under duress, coercion or inducement. The assessment would still incur a full charge.

The individual may request a copy of the report before it is sent to the referring person. This can often assist to obtain consent. The employee is given 48 working hours to view the report and contact us if there is a need to make corrections to factual errors only. After this time the report will be automatically sent to the referring person.

#### Report to the Referring people and Confidentiality

Confidentiality and informed consent are a cornerstone to the assessment and report process. The referring contact will be provided with sufficient information to answer the questions in the referral form, whilst protecting the employee right of privacy.

Our standard is to release the report in 5-6 working days following the date of the occupational health assessment.

On receipt of the report if you wish to seek clarification then please do make further contact with occupational health. The advice provided will be within the remit of the consent linked to the questions being asked in the referral form only.

## Additional Medical Information

If our clinician feels a GP or specialist report will add value to the case, he/ she will discuss with the employee the reasons for the report and ensure informed consent is received. Occupational health will discuss with the referrer the reasons for such a report and obtain permission to request.

The clinician will provide you with an interpretive report once the GP/ Specialist has been received.

GPs and Specialists will charge for these reports, which will be passed on the employer.

## Did Not Attend/ Cancellations

Please be aware should an employee fail to attend an appointment or cancellation is not received within 24 hours of an appointment this will result in a full charge.

If the employee is late by 10 minutes or more, it is at the clinician's discretion as to the assessment going ahead or not. It is an option of the employer to authorise a new booking.

Does the individual have any communication barriers for instance deaf or English as a 2nd language?

If English is a second language for the employee, the referrer must consider if professional interpreter is required. A non-professional interpreter is not acceptable.

[This organisation](#) can provide professional interpreters. A full charge will apply if the clinician is not able to carry out the assessment due to the lack of a professional interpreter.