

# **Fit Notes**

## **Hints and tips for consultation**

**VERSUS  
ARTHRITIS**

# Meet the speaker



**Dr Rob Hampton**

GP, Occupational Physician

# Objectives

1. Gain an understanding of fit notes and why they're important
2. Increased awareness of resources to help patients with musculoskeletal conditions talk to their employers about workplace modifications
3. A view of the future of fit notes, GPs with an interest on occupational health and 'Versus Arthritis' as a source for support for working age patients

# What's the problem?

- Worker off for 4 – 12 weeks: **10-40%** chance of being off work at one year
- Worker off 6 - 12 months: **90% chance** of never returning to any form of work in the foreseeable future
- **1 in 4 workers** has access to occupational health

# Controversy!

One in 5 GPs say their advice is ignored

5 August 2019 by Anviksha Patel

Revised Benefits letter still 'misleading' GPs about issuing fit notes

17 July 2019 By Anviksha Patel

Number of Fit notes issued by GPs rises almost 9% in 2 years

9 Feb 2018 by Elizabeth Mahose

GPs Vote that Sick notes are a 'waste of time'

21 March by Michelle Madsen

**VERSUS**  
**ARTHRITIS**

**VERSUS  
ARTHRITIS**

Pharmacy Stamp

Age

D.o.B

Title, Forename, Surname & Address

ADRIAN  
MASSEY

**SICK-  
NOTE  
BRITAIN**

Signature of Prescriber

Date

For dispenser  
No. of  
Prescs.  
on form

HOW SOCIAL PROBLEMS  
BECAME MEDICAL ISSUES

9781787381223

# Why does work matter?

- Economic benefits
- Social status
- Inclusion
- Social connection
- Physical activity
- Positive social norm
- Intellectual challenge
- Education & training

‘People must engage in purposeful activities, or they go crazy.’

Yuval Noah Harari  
author of Sapiens

‘Employment is Nature's physician and is essential to human happiness.’

Galen of Pergamon,  
Greek physician c.216 AD.

‘Work is life, you know. Without it, there's nothing but fear and insecurity.’

John Lennon, musician

*Elton Mayo, 1933, The Human Problems of an Industrialized Civilization, ISBN 978-0415-27988-8*

WHEN DID YOU START THINKING THAT THERE MIGHT BE SOMETHING WRONG WITH YOU?

WHEN YOU TOLD ME!



FRAN



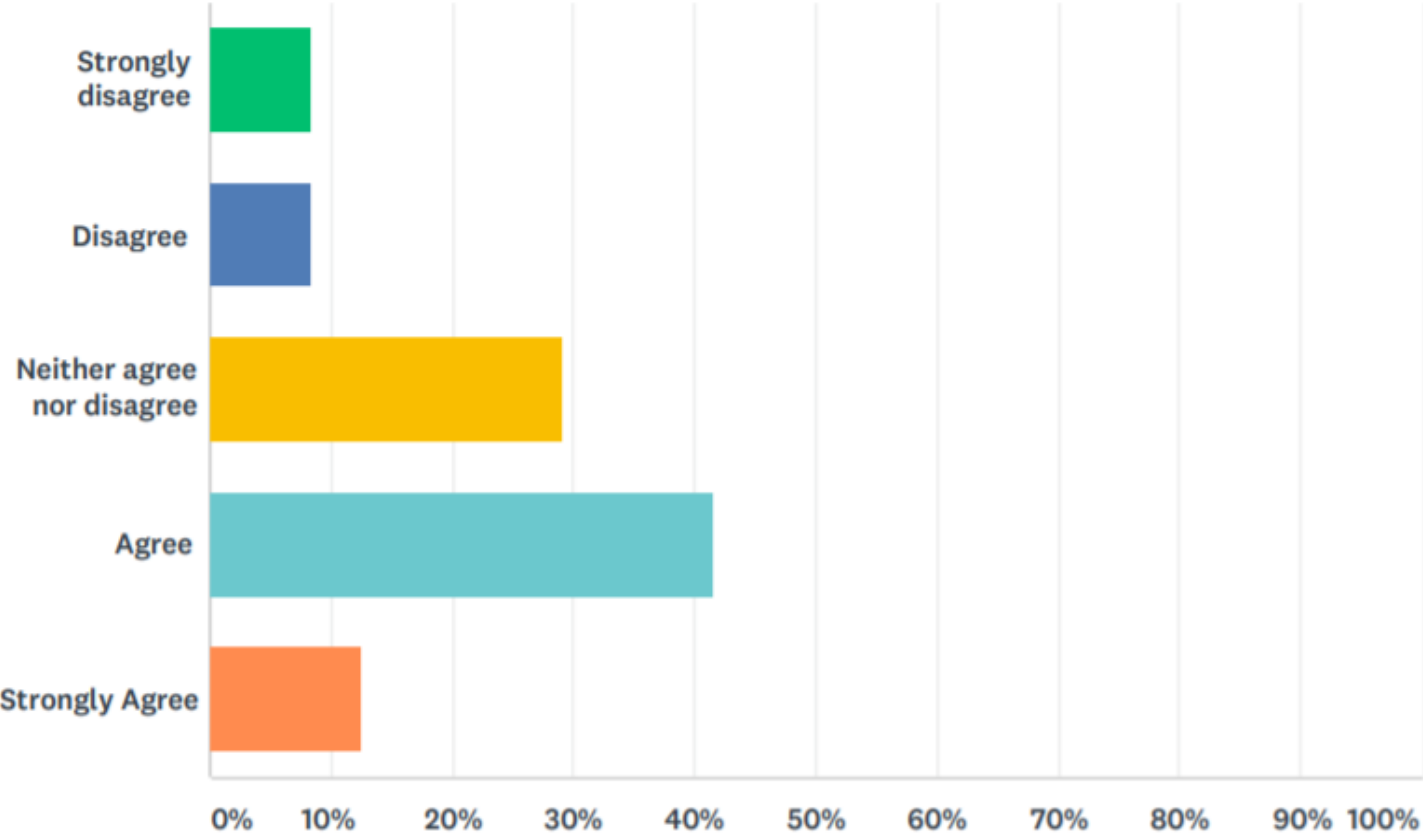
# **SOM GP interest Group: I feel comfortable signing Fit notes for people in employment?**

- Strongly agree
- Agree
- Disagree
- Strongly disagree

# SOM GP interest Group -June 2019

Q2 I feel comfortable dealing with fit note requests for people in employment.

Answered: 24 Skipped: 0

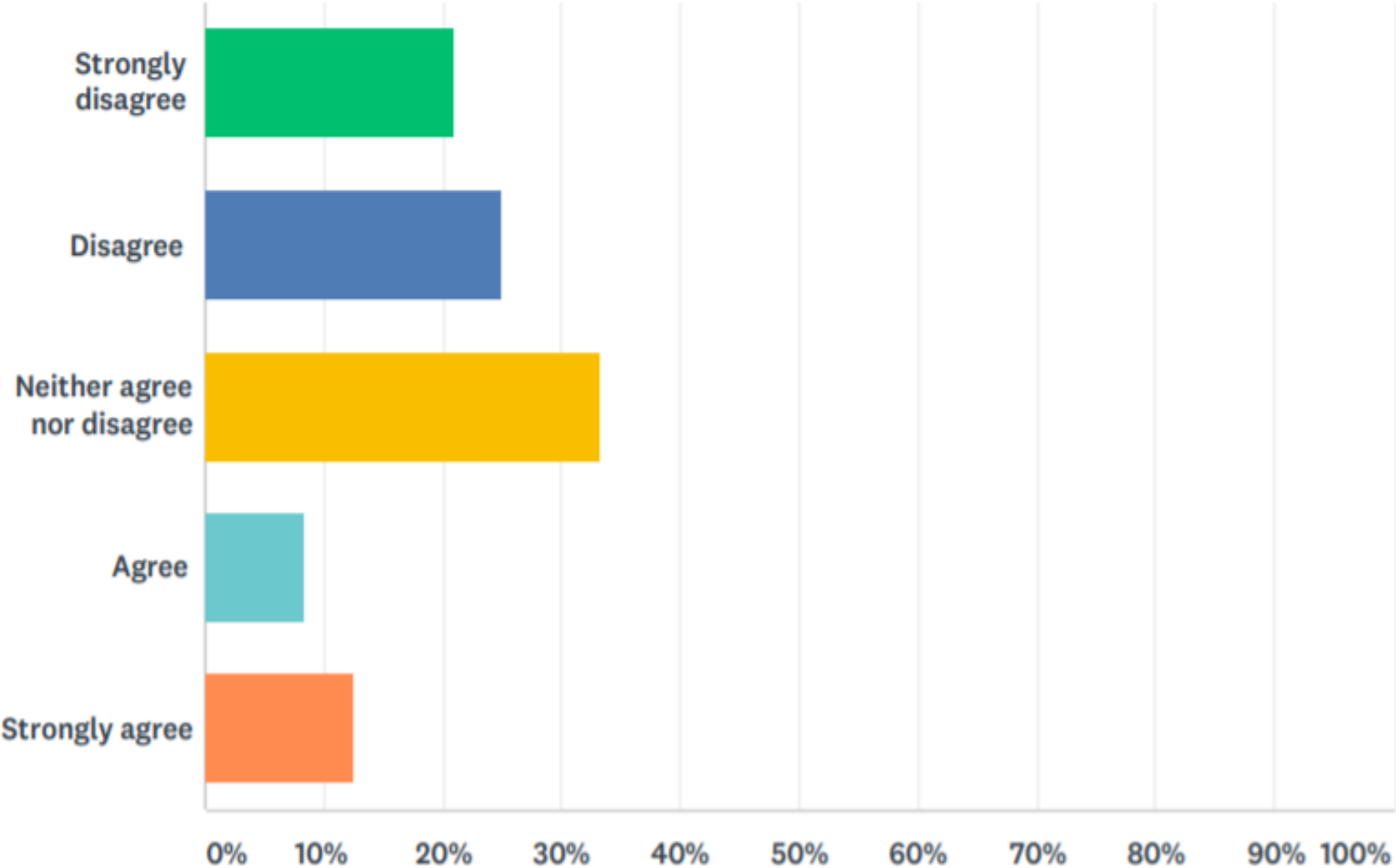


**I feel comfortable dealing with fit note request for people in the welfare system (generally)?**

- Strongly agree
- Agree
- Disagree
- Strongly disagree

# Q3 I feel comfortable dealing with fit note requests for people in the welfare system (generally)

Answered: 24 Skipped: 0

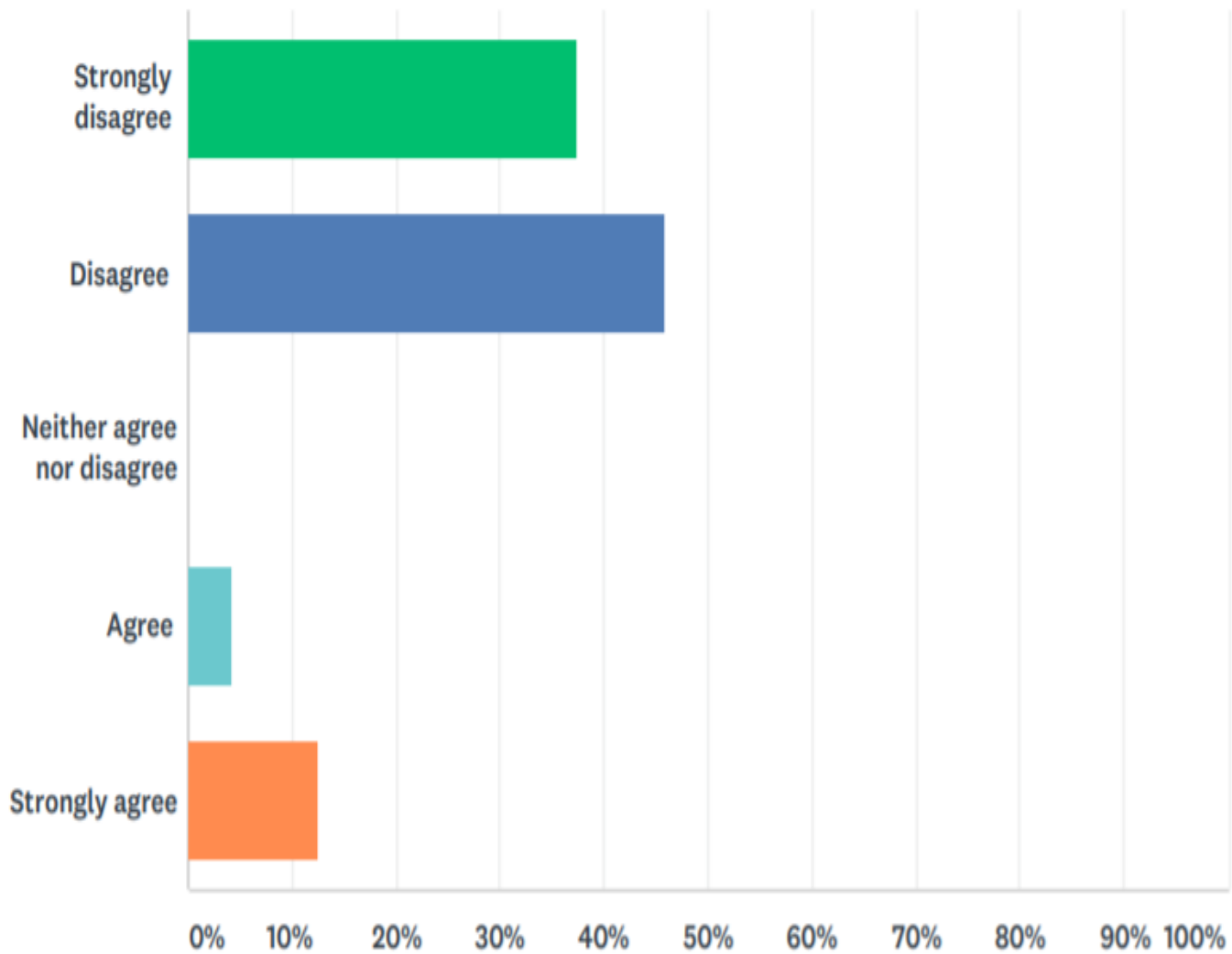


# I feel comfortable signing fit notes for people appealing/contesting benefit decisions (after ESA 65B)

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

# Q5 I feel comfortable dealing with fit note requests for people contesting a decision/appealing welfare benefit decisions (after ESA 65B)

Answered: 24 Skipped: 0



# GPs views on health and work

**PULSE**

At the heart of  
general practice  
since 1960



OPINION

Doc Martin could soon



NEWS ↓

VIEWS ↓

CLINICAL ↓

YOUR PRACTICE ↓

HOT TOPICS ↓

TRAINEE

HOME → FINANCE AND PRACTICE LIFE NEWS

## GPs vote that sick notes are 'a waste of time'

21 March 2017 | By Michelle Madsen

# Time to take away from GPs

- Patient trust (2008/9 and 2013 survey)
- Access to OH/VR limited
- Most notes short term



**Work =  
'meaningful  
activity'**



# Health and Work

## Health of the working age\* population

### General

**1 in 3** of the working age population in England report having at least one **long-term health condition** **over 11m people**

**1 in 7** of the working age population in England report having **more than one long-term condition**

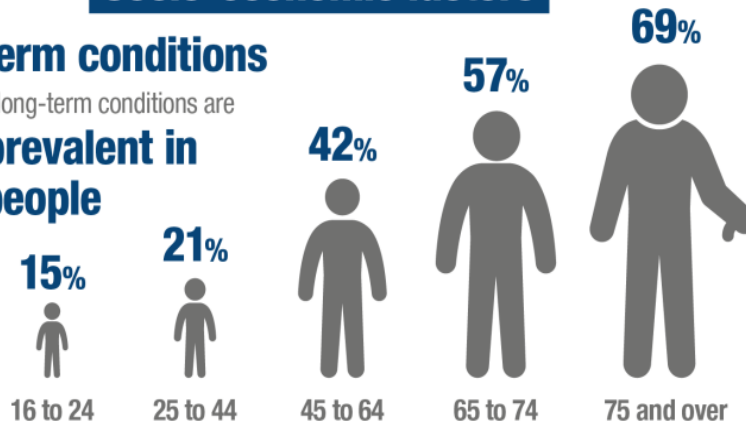
**Over half** of people with a long term condition say their health is a

**BARRIER**

to the type or amount of work they can do, **rising to over 80%** when someone has three or more conditions

### Socio-economic factors

**Long-term conditions** and limiting long-term conditions are **more prevalent in older people**



Long-term conditions are associated with social class and type of occupation

People in the **poorest communities** have a **60 per cent higher** prevalence of **long-term conditions** than those in the **richest**.

£££

£

**+60%**



Employees from **unskilled occupations (52%)**

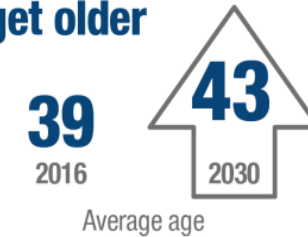
experience long-term conditions more than groups from



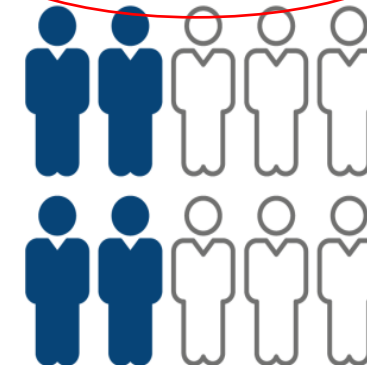
**professional occupations (33%)**

### Future

In the coming years the **workforce is projected to get older**



By 2030 **40%** of the working age population will have a **long term condition**





Public Health  
England

# Health and Work

## Spotlight on musculoskeletal conditions (MSK)

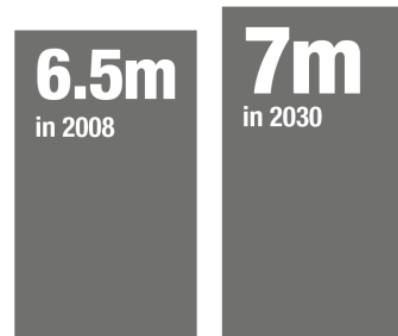


# 1 in 8

of the working age population reported having an MSK



The **prevalence of MSK** in the workforce is **likely to increase**



**Employment rate** for people who report MSK as their main health condition is

# 59.7%

In 2013, **more days** of sickness absence were attributed to back, neck and muscle pain than any other cause.

In 2013,

# 30.6m

days of sickness absence could be attributed to **MSK**

# 23%

of all working days lost

# 33%

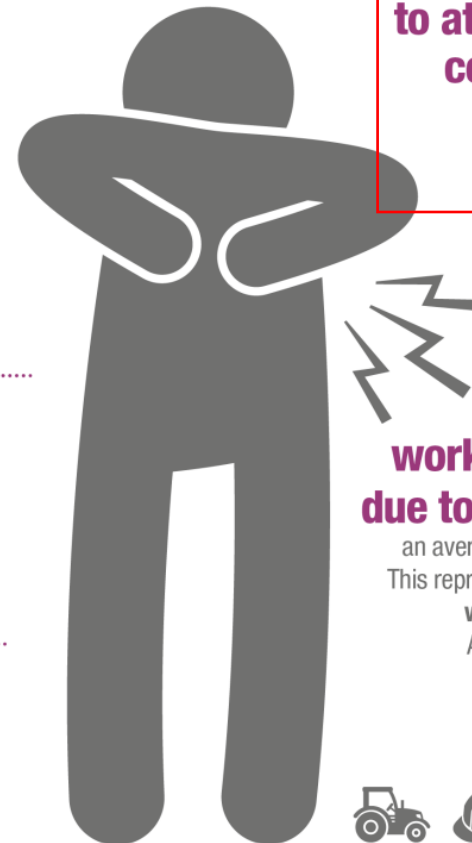
of English **long-term sickness absence** is attributed to **MSK**

In 2015,

# 13%

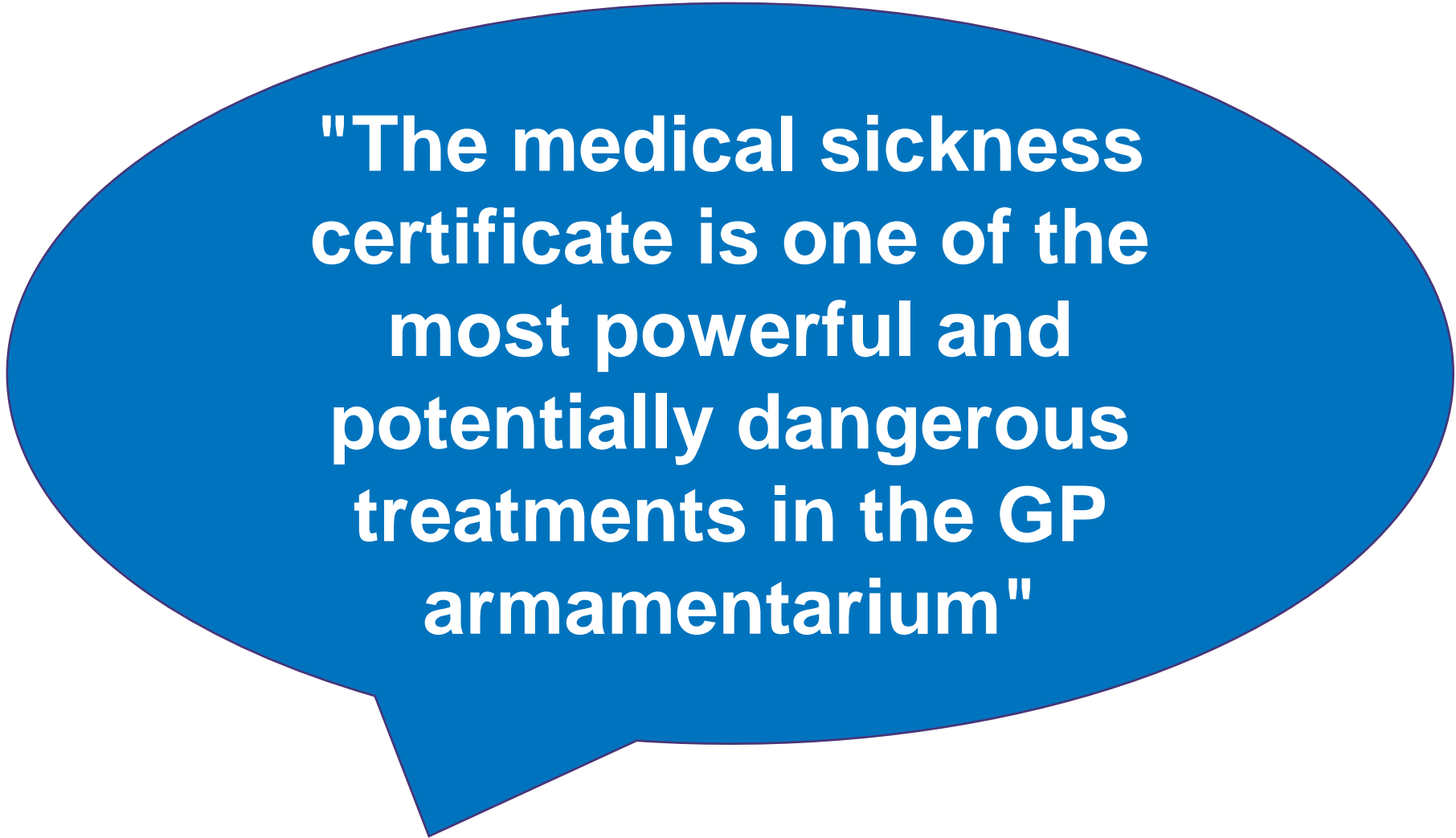
of **Employment and Support Allowance (ESA)** recipients reported MSK as their **main condition**

In 2010, **ESA claimants** with MSK were **more likely than those with other conditions, to attribute their health conditions to work – 36%** related it to work



An estimated **9.5m** working days were lost due to **work related MSK**, an average of **17 days lost** for each case. This represents **40% of all days lost due to work related ill-health in 2014/15**. Agriculture; construction; health and social care; and transportation and storage industries all show elevated rates of MSK.





**"The medical sickness certificate is one of the most powerful and potentially dangerous treatments in the GP armamentarium"**

Professor Waddell, of the Centre for Psychosocial and Disability Research at the University of Cardiff, at a BMA conference on work, health and wellbeing

# Use the fit note as a clinical tool?

- Belongs to the patient
- Message reinforcement
- Avoids GP as 'Judge and jury'
- Decision to be made by employer/Jobcentre
- Stimulate dialogue away from surgery
- Nudge
- Flexible timeframe
- Tie into longitudinal care
- Hypothesis testing
- Reflective commentary

**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

Med 3 04/10

# Resources

# DWP Guidance – March 2013

[www.dwp.gov.uk/fitnote](http://www.dwp.gov.uk/fitnote)

## Getting the most out of the fit note GP guidance

Based on research evidence and feedback from doctors, patients and employers, this guide is designed to help you make best use of the fit note to support your patients.

It gives you information on completing each section of the fit note (including the reassessment box, comments section and return to work tick boxes), and uses case studies to illustrate different situations.

It updates previous guidance, reflects new developments such as computer-generated fit notes and has an expanded further support section. You can also use it for Continuing Professional Development and revalidation purposes.

It has been developed in consultation with practising doctors and professional bodies including:

- Acas
- British Medical Association
- Confederation of British Industry
- Royal College of General Practitioners
- EEF - the manufacturers' organisation
- Chartered Institute of Personnel and Development



Department  
for Work &  
Pensions

# Practical advice for GPs



## **Talking Work**

**A guide for Doctors discussing work and work modifications with patients.**

[www.councilforworkandhealth.org.uk/work-modifications](http://www.councilforworkandhealth.org.uk/work-modifications)



## Examples of commonly used fit note phrases

The following examples have been based on suggestions made by Dr Rob Hampton, a GP with a specialist interest in work and health.

<ul style="list-style-type: none"><li>• Please consider avoiding loaded rotation and lifting but all walking or desk-based duties are appropriate</li></ul>	
<ul style="list-style-type: none"><li>• Avoid lifting duties from below waist level</li></ul>	
<ul style="list-style-type: none"><li>• Avoid duties involving loaded rotation from the trunk</li></ul>	
<ul style="list-style-type: none"><li>• Advise to avoid manual handling duties above shoulder height</li></ul>	
<ul style="list-style-type: none"><li>• Desk based or walking duties are safe and appropriate</li></ul>	
<ul style="list-style-type: none"><li>• Upper limbs have full function</li></ul>	
<ul style="list-style-type: none"><li>• Would mediation be feasible?</li></ul>	
<ul style="list-style-type: none"><li>• Suggest workplace meeting for return to work plan</li></ul>	
<ul style="list-style-type: none"><li>• Consider applying for Access to Work scheme <a href="https://www.gov.uk/access-to-work">https://www.gov.uk/access-to-work</a></li></ul>	
<ul style="list-style-type: none"><li>• Consider discussion around return to work plan specifically targeted at people with psychological symptoms and their employers. resources available at <a href="https://returntoworkmh.co.uk/">https://returntoworkmh.co.uk/</a></li></ul>	
<ul style="list-style-type: none"><li>• Consider discussion around return to work plan specifically targeted at people with cancer and their employers. resources at <a href="http://www.macmillan.org.uk/work">www.macmillan.org.uk/work</a></li></ul>	
<ul style="list-style-type: none"><li>• Is a workplace mentor available to support the person back to work?</li></ul>	
<ul style="list-style-type: none"><li>• Can working hours be adjusted?</li></ul>	
<ul style="list-style-type: none"><li>• Please consider addressing the reported workplace relationship issue</li></ul>	
<ul style="list-style-type: none"><li>• Can he/she avoid Customer facing duties?</li></ul>	
<ul style="list-style-type: none"><li>• Consider Prioritising one deadline at a time for the return to work plan?</li></ul>	
<ul style="list-style-type: none"><li>• Consider re-location for short term as part of return to work plan?</li></ul>	

# E-Learning for Health & Work

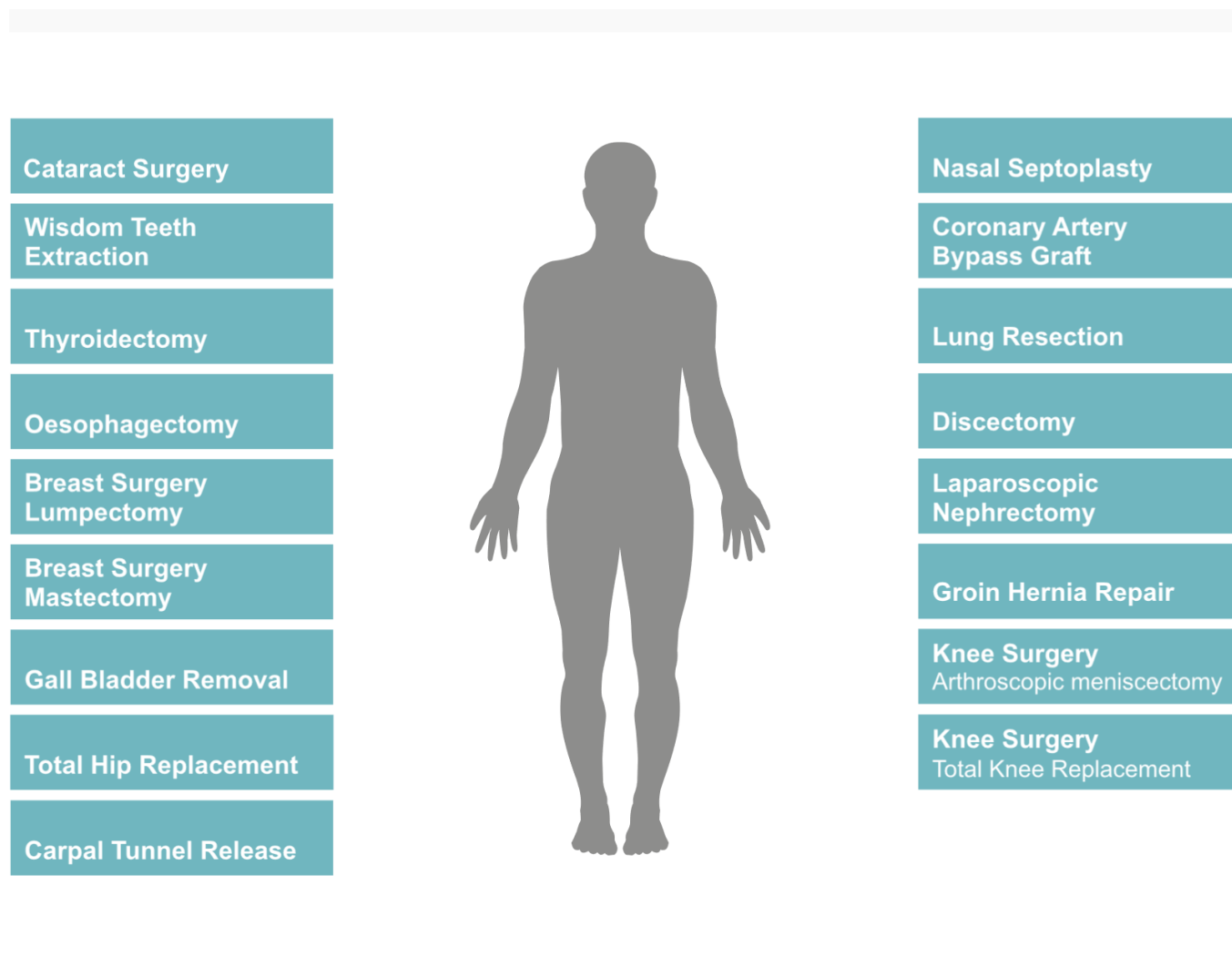


**NHS**  
*Health Education England*

**Work and Health e-learning programme**

<https://www.e-lfh.org.uk>

# Return to work after surgery



## Versus Arthritis

- Policy reports
- Patient helpline
- Patient information

<https://www.versusarthritis.org>

## Access to work

- Special equipment, adaptations or support worker services to help you do things like answer the phone or go to meetings

- <https://www.gov.uk/access-to-work7>



# Top tips...

# In employment

Stress related symptoms **not** work-related stress

Reports grievance in place **not** reported bullying

Would mediation be feasible?

Suggest workplace meeting for return to work plan

'Maybe fit' **vs** 'not fit'

Adjustments reported as not possible

Occupational health opinion would be helpful

Uncertain of adaptations possible

# In employment cont

## Specifics – ‘can do’

- Desk based duties possible
- Fit for any walking or seated duties
- Upper limbs have full function

## Specifics – ‘avoid’

- Avoid loaded rotation at the trunk
- Avoid manual work above shoulder height
- Avoid lifting from the floor

# Unemployed

- **Be neutral**
  - 'awaiting appeals process'
- **Stimulate dialogue at Job Centre Plus**
  - Are these fit notes really required?
  - Has a report from GP been requested?
  - Consider Access to Work scheme
- **Stick to your opinion**
  - Could the work & health programme offer rehabilitation?
- **Work within your competencies**
  - Patient summary given to patient



# Behaviour change

- Motivational interviewing
- Brief interventions
- Social prescribing

# AHPs Fit note

- AHP Federation
- More detailed
- Various examples of use
- E-AHP note
- 3 Joint Unit Challenge Fund projects

**Allied Health Professions  
Advisory Fitness for Work Report**

1 Patient's name:  
Date of birth:  
Task/role/job title:  
 you are not fit for work.  
 you may be fit for work taking account of the advice below

2 Case assessment completed

3 This form has been completed by a Physiotherapist/  
Occupational Therapist / Podiatrist / Other.....  
Practitioner's name:  
AHP registration number:  
Organisation/Service:  
Contact details (email / phone):

4 AHPN advisory Fitness for Work Report issued for period from [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] to [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
A follow up review is it's not required? Yes/No made for [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [View a sample](#)

5 With your employer's agreement you may benefit from these or more options:  
 a phased return to work  amended duties  
 altered hours  a workplace assessment

6 Patient-reported work relevant difficulty, recommendation and goals:

Difficulty	Recommendations / goals

7 Comments:

8 Additional information is provided on ... accompanying sheets

9 Signature:

All Parties have the guidance need on new rules of your professions body when filling out this form and each should use information to  
for employer, employee and doctor. Employer, employee and doctor, please use information located at <http://www.aahp.org.uk>

This report does not replace the Statement of Fitness for Work (fit note) for benefits purposes.

**Caahp**

# The Link – Outcomes – 60%MSKLink

- 150 referrals by July 2019
- 77 AHP notes issued
- 2 employers requested GP fit note
- Jobcentre Plus/DWP – GP fit notes

## PARTNERS



West End  
Family Health



RTW PLUS



# The future and fit notes

- Fit notes are here to stay
- Most notes short term & uncontroversial
- Musculoskeletal workplace modifications are straightforward – try them?
- Resources and advice will improve
- Other healthcare professions will be issuing them
- Smarter analytics of fit note data could work?
- GP fit notes should stop at Workplace Capability Assessment
- GPs with Extended Role? (*cf Regional Medical Officer*)

# Thank you...

## Questions?

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# Core skills Workshops

Remaining workshop dates for 2019:

Wednesday 23 October – Leeds

Tuesday 26 November – London

Tuesday 10 December – Glasgow

To book your place visit: [www.coreskillsinmsk.co.uk](http://www.coreskillsinmsk.co.uk)

For local workshops in your areas please contact

Versus Arthritis on stand **K92**

For *free* educational resources join the Versus Arthritis professional network:

Visit <https://www.versusarthritis.org/about-arthritis/healthcare-professionals/>

