

## ■ Quick Guide...

# Occupational Health Referrals: why, when, how?

## Why it matters...

Referrals to Occupational Health (OH) should be made where health affects work or work affects health.

There are several benefits of an OH referral including:

- A reduction in stress and anxiety
- Contribution to good health and wellbeing both for the individual and for others in the working environment
- Performance at the level that the individual is capable of
- Contribution to stronger University performance
- Restored confidence and a renewed sense of self worth

## When to refer an employee...

- Frequent short term absences
- Concerns about their health at work (e.g. change in performances, behaviour or attendance)
- Concerns about the effect of work on health
- Mental health/stress issues if absent for more than 2 weeks
- Longer term absences (more than 4 weeks)
- Functional assessment to establish fitness to perform specific tasks and duties in their current role.
- If a GP has outlined the needs of an employee, there is no need for an OH referral unless support or advice is needed to best meet these requests.
- Repeated referrals can be made for employees if there is future support needed by OH. Each referral is treated individually, but relevant information from previous referrals can be used.

## How it works...



- Manager and employee to discuss the reason for a referral.
- Request for OH assessment by completing an OH Management Referral Form from the webpages
- OH to advise employee, manager and HR representative of date and time of appointment via the Cohort system.
- A confidential consultation either face to face or via telephone regarding the contents of the referral, including an assessment of health issues and the impact this has on their work, will take place.
- A report is sent to the employee as well as HR/Line Manager, with the content agreed by the employee at the consultation. The employee has the right to view the report before it is sent to their manager.
- The report contains professional recommendations, which may include an opinion about fitness to work and advice about adjustments to enable to employee to stay at work or return to work.
- You are advised to meet with the employee to discuss the contents of the report and the implementation of any recommendations.

## When not to refer an employee...

An OH referral is not a disciplinary process and should not be made to explore the legitimacy of absences. It should also not be done in order to solely “comply with the University’s policy and procedure on managing absences”.

Furthermore, it is important to note that OH is not a treatment service. OH does not duplicate services provided by GPs or other specialities, and OH are unable to influence NHS waiting lists.

## What you might need to consider prior to the completion of a referral

- Denial: they may not want to admit they are struggling or having problems. This is where it is important to stick to the evidence and invite them to discuss the concerns further. You may wish to gain further support from HR with this.
- Anger / upset: discussing health issues can generate a lot of emotion – it is important to recognise that this is not unusual whilst also responding calmly and focusing on addressing the issues and creating solutions.
- Balancing adjustments to the role requirements: while it is reasonable to be open and to consider changes and adjustments, it is also important to be clear on the requirements for their role. You should discuss the recommendations in a meeting with the employee after the OH report is released to determine if you can accommodate these. You may wish to discuss these with your HR link.
- Where there has been a difficult meeting, you should follow up important points in writing afterwards – this is important as there may have been some misunderstanding in discussion. Always offer to meet again when they have had a chance to reflect.

## Some further suggestions to consider when completing any additional questions:

- Is there an underlying health problem that affects attendance, performance and/or fitness to work?
- Is the individual medically fit for the post? If not, when are they likely to be medically fit for the post?
- When is the employee likely to return to work?
- Is the employee likely to provide a regular and effective service?
- What reasonable adjustments are required to be considered to keep the employee at work/ assist the employee back to work?
- When discussing the OH report with an individual, it is important to focus on returning to work.
- If an individual has a disability or illness that will impair their performance at work, focus on the objectives and responsibilities of their role outlined in the job description in order to discuss reasonable adjustments that can be made whilst also adhering to the individual’s job requirements.
- After discussing reasonable adjustments with an individual, always take time to consider whether the changes proposed are reasonable.
- If no medical problem is presented by the individual or by the OH report, in the first instance discuss this informally and set clear targets and expectations. If necessary, refer to the [Sickness Absence Management policy](#) or the [Capability Procedure](#).