

National Minor Illness Centre

Statement of Fitness for Work

“Fit notes” replace “sick notes”
from 6th April 2010

<http://www.dwp.gov.uk/docs/fitnote-gp-guide.pdf>

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A major change

- The sickness certification system was introduced with the National Health Service in 1948
- In 1994 the rules were altered, such that patients were able to provide their own self-certificate for periods of up to seven calendar days (previously three)
- Apart from this, the system has remained unchanged for the last 60 years

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Work is Good for You

- A review of the evidence for an association between unemployment and poor health outcomes concluded that there was a strong link (Waddell and Burton, 2006. <http://www.workingforhealth.gov.uk/documents/is-work-good-for-you.pdf>)
- These were mainly observational studies which could not prove causation
- This review, coupled with the huge costs of sickness absence, prompted a Government review in 2008

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Working for a Healthier Tomorrow

- Dame Carol Black's report (Black, 2008. <http://www.workingforhealth.gov.uk/documents/working-for-a-healthier-tomorrow-tagged.pdf>) recommended a change in the attitude to sickness certification, switching the focus to what work people could do instead of what they could not, and aimed to improve communication between employers and GPs
- She recommended replacing sick notes with “fit notes”

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Fit Notes

- From 6th April 2010 the old-style Med 3 and Med 5 forms will be scrapped and replaced by a new-style Med 3 form
- The form was initially intended to be “electronic”, i.e. computer-generated, but there is no mention of this in the current documentation, presumably because it would be so easy to forge

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New Med 3s

- Med 3s are only needed after seven calendar days of illness. For periods less than this the patient can self-certify, as before
- They must currently be signed by a doctor
- There has been discussion about whether nurses will be allowed to sign these forms in the future: <http://www.healthcarepublic.com/news/983597/Nurses-given-power-sign-fit-notes>

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**Statement of Fitness for Work
For social security or Statutory Sick Pay**

Patient's name: M: Mrs, Miss, Ms

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
- altered hours
- amended duties
- workplace adaptations

Comments, including functional effects of your condition(s):

SAMPLE

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- ### New Med 3s
- Do not require a face-to-face assessment
 - May be completed after a telephone consultation
 - May be based on a written (or computer-entered) report by another doctor or registered healthcare professional (such as a Minor Illness Nurse), whose name is not requested
 - May be used to state that the patient is unfit for any work, as before

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- ### New Med 3s: a second option
- Alternatively, the patient may be certified 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
 - Altered hours
 - Amended duties
 - Workplace adaptations
 - Other (in "comments" box), e.g. time off to attend appointments

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- ### What about the unemployed?
- It is currently unclear how the "may be fit for work" box should be completed for patients who do not have an employer

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This will be the case for / 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

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- ### New Med 3s – a review option
- There is also an option to cross through, which states whether the patient needs to be reassessed at the end of the statement period
 - Re-assessment is unnecessary for most minor illnesses

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New Med 3s – time period

- As with the old Med 3s, there is a choice of “open” statements (*this will be the case for...*) and “closed” statements (*from... to...*)
- Closed statements should be used if the period is less than fourteen days and the patient does not need to be reassessed. This will be the case in most minor illness consultations
- Closed statements can be backdated

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Summary of changes

- No more Med 5s
- No need for the doctor to see the patient after a nurse consultation
- Telephone assessment is acceptable
- Use closed dates “from..to..” in most cases
- Remember to specify whether the patient needs to be reviewed
- Consider whether workplace changes might enable the patient to return to work earlier

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This presentation is provided as a service to health professionals by the

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www.minorillness.co.uk

It is based on the most up-to-date and authoritative information, but the National Minor Illness Centre can accept no responsibility for the consequences of its use.