

What Makes a Good Referral.....

This guide has been produced to give line managers advice on what is required when making a referral to Occupational Health. To ensure that you get the information you require to progress a case, please follow the steps below –

1.Reason for Referral

It is important that the reason for referral is clearly explained so that the practitioner can understand why the colleague has been referred. These steps should be followed with all referrals:

2.Background history

The more background you can provide the better response you should receive from Occupational Health. Remember to let Occupational Health know of any information that you have which you believe May be relevant, for example:

- Is the colleague's attendance pattern causing concern?
- Is the colleague able to carry out their job?
- Is there a rehabilitation plan in place that has not been progressed as expected?
- Does the colleague have any previous history of their current condition?
- Are there any personal issues?
- Does the colleagues' condition impact on their social/domestic activities that you are aware of?
- Is the colleague expected to return to work at any point in the future?
- State why you are referring this colleague at this time
- Say what advice/information you're hoping to obtain from referring the colleague
- Provide the colleagues absence details
- State whether the colleague is currently absent from work
- State the diagnosis on their medical/self-certificate
- Identify the first day of their absence, and
- State whether you have a confirmed return to work date or an indication from the colleague's GP as to how long they may be absent.
- Is it support/counselling you want for them, be specific and ensure you have asked them as this will be processed straight through for therapy.

From the regular contact that you have maintained as part of the absence strategy you should be able to provide a lot of information to Occupational Health before the individual is assessed. Things to consider include:

- Are there any perceived barriers to returning to work? For example, immobility, physical limitations, surgery, conflicts at work or with management?
- Is the colleague due to see their GP or a specialist in the future? 🛛
- Are you aware of any external support the colleague may be receiving, for example physiotherapy or counselling?

3. Adjustments or modifications

In some cases you may have brought a colleague back to work on adjusted duties but still require Occupational Health advice. So you should cover the following with any referral that you make:

- Has there been a local agreement on adjusting the colleagues work practice?
- If so was it successful? If not, what difficulties was the colleague experiencing?

4. Duties

It is also important that Occupational Health knows about the role the colleague is performing so that this can be taken into account if rehabilitation is required. You should either include a copy of the job description or include the following details:

- the role the colleague is contracted to do;
- whether the colleague works full time or part time;
- whether the colleague works shifts;
- whether this role involves overtime;
- the type of work the colleague does for example, clerical or administrative, security, sorting letters/packets, DSE user etc
- whether you want to discuss the colleague's role with a practitioner before the appointment; 2 whether the colleague's role involves repetitive tasks;
- whether the colleague's role involves driving;
- whether the colleague's role involves walking or machinery.

5. Specific questions

Make sure that any question you want addressed is added to the referral form. To do this you should outline any other issues that you would like addressed, specific to this colleague and the current referral.

Occupational Health will provide advice on the following when requested

- any adjustments/modifications to the work role or work environment that you should consider and if the Equality Act 2010 is likely to apply; and
- A timescale for return to work (where possible) with a rehabilitation plan if appropriate.

They will also comment on future expectations with regard to the particular health condition.

Remember, the more information you provide, the better the quality of the reports that will be produced to enable you to manage your sickness absence.