Dear Colleague


Summary

1. From 6 April 2010, a new Medical Certificate (MED3) will be introduced in Scotland, England and Wales. Med 3 certificates are required for Social Security and Statutory Pay purposes for patients who are either incapable of work or who may be fit for work with support from their employer. The duty to provide a MED3 rests with the doctor who, at the time, has clinical responsibility for the patient.

2. The new certificate will enable practising GPs and doctors working in hospitals to give individual patients, and through them their employers, better information about the effect their health condition is having on their fitness for work. The previous Circular for GPs etc regarding the new MED3 can be viewed at: http://www.sehd.scot.nhs.uk/pca/PCA2010(M)01.pdf.

3. Information in this Circular applies to all registered and licensed to practise doctors, including those practising in NHS hospitals and the private sector.

Information

4. A copy of the explanatory letter from the Department of Work and Pensions (DWP), the Guide for hospital doctors and a sample copy of the new certificate MED3 are attached for information.

Ordering the new certificate

5. Information and guidance about the ordering of the new certificate, running down existing stocks etc is contained in the attached letter to Chief Executives. Guidance packs will be issued to Hospital Supply Managers by the DWP in due course.

Action

6. All addressees are requested to bring this Circular to the attention of all relevant staff in Secondary Care.

Yours sincerely

Frank Strang
Deputy Director, Primary Care Division

15 March 2010

Addresses

For Action

Chief Executives NHS Boards
Medical Directors
Hospital Supply Managers
The Care Commission
NHS National Services Scotland
Scottish General Practitioners Committee
Royal College of General Practitioners
Academy of Medical Royal Colleges
General Medical Council
Medical & Dental Defence Union
Medical Defence Union
Medical Protection Society

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To: Chief Executives, Health Boards
Supply Managers, NHS Secure Forms
Medical Directors, Health Boards

11 March 2010

Dear colleagues

From 6 April 2010 a new Statement of Fitness for Work (also known as the Form Med 3 or “fit note”) will be introduced across Scotland, England and Wales which will enable doctors to give their patients more helpful advice about returning to work.

Where appropriate a Medical Statement should be provided by the doctor who, at the time, has clinical responsibility for the patient. This is usually the GP. However, where a hospital doctor has clinical responsibility they should assume responsibility for the patient’s sickness certification needs. The failure to do this leads to patients unnecessarily visiting their GPs and explaining their health condition to a doctor who is less familiar with their recent medical history. This does not benefit the patient or the GP as, in many cases, it is the hospital doctor who is best placed to advise the patient on their fitness for work.

Through analysis of hospitals’ ordering histories, it is clear that many hospital doctors are not aware that they should be issuing Med 3s. The launch of the revised Medical Statement presents an ideal opportunity to address this and ensure that all hospital doctors have access to the revised form and understand its purpose. Therefore, we are asking you to ensure that all the relevant medical staff within your Health Board are made aware of the need to issue Med 3s and also the changes to the Med 3 that are coming into effect in April.

To aid this we have enclosed a brief guide which explains the new Statement and highlights the role of hospital doctors in the sickness certification process. The guide can also be found online at http://www.dwp.gov.uk/docs/fitnote-hospital-guide.pdf. It would be appreciated if you would draw this to the attention of your staff.
As previously communicated, prior to the launch date you will be receiving a supply of the revised Medical Statement (in pads of 50 forms) to distribute within your Health Board. **Please bear in mind the need to allocate some of these forms to the hospitals within your area when planning their distribution.** After this initial distribution the normal ordering process will resume.


In the meantime, if you have any questions please email the DWP policy team at dwphealthandwork.enq@dwp.gsi.gov.uk.

Kind regards

Dr Bill Gunnyeon  
DWP Chief Medical Adviser
STATEMENT OF FITNESS FOR WORK: A GUIDE FOR HOSPITAL DOCTORS

Hospital doctors and sickness certification

From 6 April 2010 doctors across Great Britain will be issuing their patients with a revised Form Med 3 (Statement of Fitness for Work or fit note) which will enable them to give their patients better advice about their fitness for work.

However, while patients are often issued with Med 10s, many hospital doctors are still unaware that they should also, if appropriate, issue Med 3s. Not issuing Med 3s denies patients the best care and leads to unnecessary duplication and extra work for GPs. In many cases it is the hospital doctor who is best placed to give advice on a patient’s fitness for work.

This brief guidance sets out when hospital doctors should use the new Statement of Fitness for Work and explains the key changes to the Statement itself.

The role of hospital doctors in issuing the Statement of Fitness for Work

Hospital doctors may need to provide all certification for social security and Statutory Sick Pay purposes for patients who are either incapable of work or who may be fit for work with support from their employer. The duty to provide a Med 3 rests with the doctor who at the time has clinical responsibility for the patient.

Hospital out-patients

For an out-patient this will generally be the hospital doctor, except where the GP retains responsibility, for example where the patient has been referred to a hospital for an opinion or advice on their health condition. In cases where the patient’s GP has not taken over responsibility for the incapacitating condition the treating clinician should issue any subsequent Statements for an appropriate forward period.

Hospital in-patients

Form Med 10 should continue to be issued to cover any period that a patient is in hospital. On discharge from hospital the doctor who has clinical responsibility for the patient should provide them, if appropriate, with a Med 3 to cover a forward period. This is to avoid unnecessary referrals to GPs solely for the purpose of sickness certification.

Examples where hospital doctors should consider issuing a Med 3:

- When a patient has received treatment in Accident & Emergency and the treating doctor believes that the patient will be unable to work for over 7 calendar days, it would be appropriate to issue a Med 3 for a period consistent with the anticipated incapacity.
- When a patient is receiving treatment at a fracture clinic and so does not need to see their GP for any clinical reason.
• When discharging a patient from hospital, as well as issuing a Form Med 10 to cover the in-patient period, doctors should consider if the health condition will affect the patient’s fitness for work for a forward period.
• Patients who have mental health conditions and are under regular review could also have their sickness certification integrated into this review in cases where the hospital doctor maintains clinical responsibility.

**Statement of Fitness for Work: the basics**

**What is changing?**

On 6 April 2010, the current Forms Med 3 and Med 5 will be replaced with a single revised Statement of Fitness for Work (revised Form Med 3). The new form was developed in partnership with practising doctors and members of professional bodies including the British Medical Association and the Royal College of General Practitioners. The key changes are:

- including telephone consultations as an acceptable form of assessment;
- removing the option to say a patient is fit for work;
- introducing a new option: ‘May be fit for work taking account of the following advice’;
- increasing space for comments on the functional effects of your patient’s condition with tick boxes to indicate simple things such as altered hours or amended duties that could help their return to work;
- changing the rules for issuing the Statement so that, during the first 6 months of sickness, the new Statement can be issued for no longer than 3 months; and
- simplifying the current system by combining the Forms Med 3 and Med 5 into one form.

**What stays the same?**

- The Statement can only be completed by a doctor.
- You can still advise your patients that they are not fit for work.
- The Statement remains advice from you to your patient.
- Your patient can still use the Statement as evidence of fitness for work for sick pay and benefit purposes.
- The advice on the Statement is not binding on employers.

**Not fit for work or may be fit for work?**

The new Statement of Fitness for Work allows you to advise one of two options:

**Not fit for work:**

Where your assessment of your patient is that they should refrain from work for a stated period of time.
May be fit for work taking account of the following advice:

Where your assessment is that your patient’s health condition does not necessarily mean they cannot return to work; however, they may not be able to complete all of their normal duties or hours, or they may need some support to help them undertake their normal duties.

If it is not possible for the employer to provide the support for your patient to return to work, your patient and their employer can use the Statement as if you had advised ‘not fit for work’. Your patient does not need to return to you for a new Statement to confirm this.

Why change? Improving your patients’ health through work

Evidence shows that work has therapeutic value and is generally good for physical and mental health.¹ The longer a patient is off work, the lower their chances of getting back to work. There is strong evidence that long periods out of work are associated with poor mental and physical health, increased use of health services and poverty. In most cases an individual does not need to be 100% fit to return to work. Evidence also suggests that people with common health conditions could be helped to return to work, as part of their recovery, following a few basic principles of healthcare and workplace management.²

Further information

Further guidance on the new Statement of Fitness for Work can be found at www.dwp.gov.uk/fitnote

Ordering more forms

Hospitals or Trusts can order replacement stock of the revised Med 3 forms direct from iON, the distributor. Further details on this process can be found at http://www.dwp.gov.uk/publications/catalogue-of-information/how-to-order-products/

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

Patient’s name: Mr, 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 □ 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