

Manager's Briefing Document

How to Make a High-Quality Occupational Health Referral (General Referral)

Purpose of This Briefing

This document provides managers with clear guidance on how to prepare and submit an effective Occupational Health (OH) referral for general health, attendance, or wellbeing concerns. A strong referral enables OH to offer timely, accurate, work-focused advice that supports both the employee and the organisation.

1. When to Make a General OH Referral

A general referral is appropriate when:

- An employee's **health is affecting their work performance, behaviour, or attendance**
- Work may be **contributing to health concerns**
- You require **independent advice** about fitness for work or reasonable adjustments
- An employee is preparing for a **return to work after sickness absence**
- You need guidance on whether **further medical information or support** is required

General referrals are supportive tools, not disciplinary measures.

2. Ensure you Discuss the Referral with the Employee First

See the manager briefing on informed consent

3. Provide Clear, Factual Background Information

Your background section should focus on:

- Work-related functional impact (e.g., mobility, fatigue, concentration)
- Relevant patterns of absence or performance concern
- Information provided by the employee about their condition
- Workplace triggers or barriers identified

Avoid opinions, assumptions, and speculation about diagnosis.

4. Include Accurate Attendance Information (If Relevant)

Where absence is involved, include brief information such as:

- First day of current absence
 - Whether the employee is still off work
 - Previous absence patterns
 - Any return-to-work discussions already completed
 - Any ongoing concerns about sustained attendance
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5. Summarise Adjustments and Support Already Offered

OH, must understand what has already been attempted. Include:

- Adjusted duties or reduction of specific tasks
- Flexible hours or altered shifts
- Equipment or workstation changes
- Phased return arrangements
- Scheduled welfare meetings or check-ins
- Wellbeing or mental health support accessed

Clarify whether each action **helped**, **did not help**, or **partially helped**.

6. Referral form – prepopulated questions

The OH referral form (July 2025 latest version) provides several questions for you to choose from:

- Does the employee have an underlying health condition that may affect them at work?
- How will the health condition, treatment or medication affect them at work and how long is it likely to last?
- What temporary or permanent adjustments might help them maintain and sustain performance and attendance?
- If they are absent from work, when are they likely to return to work and are there any specific recommendations that need to be considered to facilitate a return to work?
- Should medical redeployment be considered?
- Is it likely that the employee is covered by the Equality Act 2010?
- Is it likely that the criteria for early retirement on the grounds of ill health are met?

When considering the additional questions, you want answering please avoid duplication of the above questions. The clinician must go through each question with the employee, so if more than 8 questions are asked in total the clinician will require additional time to be allocated to ensure they can answer them. If you exceed 8 a double appointment will be required and you will be charged accordingly.

7. Any additional questions - Ask Clear, Work-Focused Questions

The prepopulated questions should enable the clinician to provide you with relevant information to help you manage an absence or return to work.

However, there may be times when you want to ask additional questions. Below are integrated examples of **good and bad** questions to guide managers.

GOOD Questions to Ask OH

These enable clear, focused, actionable advice.

Health and Safety

- *Are there any health-related risks to the employee or others if they continue with their current duties?*

- *Is there anything the organisation needs to consider to ensure safe working practices?*

Phased Return & Recovery

- *Is a phased return to work appropriate? If so, what length and structure is advised?*
- *What is the likely timescale for recovery or improvement?*
- *Is the employee's condition likely to affect their attendance in the short or medium term?*

Attendance & Health Impact

- *Is the employee's condition likely to affect attendance in the coming months?*

Further Medical Input

- *Is further medical evidence needed to support the workplace in making decisions?*
- *Should we expect symptoms to fluctuate, and how should that be managed?*

BAD Questions to Avoid

These are inappropriate, invasive, or outside OH's remit.

Medical or Personal Detail Requests

- *What are the details of this person's illness?* - Employers do not have an automatic right to know an employee's detailed medical diagnosis, only how the condition affects their work.
- *What medication are they taking and what are the side effects?* While side effects that impact safety are relevant, asking for a list of specific medications is often seen as an unnecessary intrusion into personal health information.
- *What is the medical diagnosis, and will treatment be effective?* OH, provides functional advice (what the employee can/cannot do), not diagnostic detail. Plus, only the treating clinician (e.g. GP/ specialist) can advise on whether treatment will be effective.

Leading Questions or biased questions

- *We don't believe adjustments are needed—can you support this?* They attempt to steer OH toward a desired answer. OH, must give independent, unbiased advice based on evidence—not manager opinion. Leading questions reduce the quality and credibility of clinical advice.

Requests for Decisions Outside OH's Role

Please note OH must remain clinically independent and cannot make managerial or HR decisions. OH's role is to advise on health, function, safety, and adjustments—not employment sanctions.

Vague or Unhelpful Questions

- *Anything else you can tell us?* We are unable to address this question as its broad nature risks the disclosure of confidential medical data that is not directly relevant to the employee's fitness for work or specific adjustments







Speculative or Opinion-Seeking

- *Can you confirm the employee is doing everything their doctor said to get back to work?* This can be viewed as monitoring or questioning an employee's personal life and medical compliance rather than focusing on workplace adjustments

These questions risk damaging trust and will not produce useful advice.

Summary: What Makes a Question "Bad"?

A question is inappropriate when it:

-  Breaches medical confidentiality
-  Requests information beyond OH's scope
-  Attempts to influence or pressure OH
-  Judges or discredits the employee
-  Invades personal privacy
-  Lacks clarity or purpose

A good OH referral is **fair, neutral, factual, and focused on work and function**—not medical detail, motivation, or judgement



8. Attach Relevant Supporting Documentation

Include only what is relevant and agreed by the employee:

- Job description and person specification
- Fit notes (if shared by employee)

- Relevant risk assessments

Do not include sensitive medical information without explicit consent.

9. Use “Special Instructions” Appropriately

Provide only necessary details such as:

- Dates the employee cannot attend OH
- Access or communication needs
- Safety or welfare considerations
- Work patterns or environment that OH should be aware of

Avoid excessive narrative.

10. Employee Consent

Before submission, confirm the employee:

- Has reviewed the exact final referral
- Understands the purpose and process
- Gives informed consent for submission
- Understands they can choose whether to see the OH report before it is released

At the appointment, OH will **reconfirm** this.

Please also see briefing on ‘informed consent’ and the ‘employees guide’

11. Submit the Referral Correctly

Final steps:

- Ensure all questions are completed
- Attach relevant documents

- Send to the correct OH email address ew.admin@nottinghamcity.gov.uk
- Store a copy securely

12. What High-Quality Referrals Achieve

A strong referral is:

- **Concise**
- **Factual**
- **Transparent**
- **Employee-reviewed**
- **Work-focused**
- **Complete**

Such referrals lead to quicker decisions, clearer recommendations, and better support for employees.

Further support or information

If you require any advice on completing an OH referral, please speak with your HR Consultant by raising a ticket via EMSS support portal.

Further information on Health and Wellbeing can be found [here](#)

Including a range of tools and advice such as:

- Occupational Health referral forms
- Physiotherapy service
- Neurodiversity workplace needs assessments
- Timescales for referring to OH for specific conditions

Employee Wellbeing can be contacted by emailing ew.admin@nottinghamcity.gov.uk