



HR Broadcast – Fit for Work Scheme

You may have heard something about the government's "Fit for Work" scheme that is due to complete its national rollout by the end of this year.

On the face of it, the scheme is simple enough. The process means that both GPs and employers can refer employees to the service, which will then conduct a telephone assessment of the patient. Following that, a plan will be produced outlining steps the employer could take to assist the employee's return to work. This, on the face of it, is all very positive and will help all concerned in getting the sick or injured employee back to work as quickly as possible.

In theory, it will be small and medium employers (SMEs) who could potentially benefit most from this scheme as larger employers with more available resources are more likely to have their own occupational health schemes and are less likely to need it.

However, are there any downsides for the SME?

I think there are a few:-

1. A GP can refer an employee to "Fit for Work" immediately, but an employer has to wait for four weeks of employee absence before doing so. SMEs may find that carrying an individual's absence during this four week period can be difficult.

2. Using the Fit for Work scheme is voluntary for both employer and employee. I am struggling to see how the scheme is suitable for the smaller business in cases of persistent absenteeism. The initial telephone interview is the first step, but I am not sure how an employer can physically make an employee actually pick up the phone, or even ensure that the employee sticks to a return to work plan once one has been implemented.
3. The scheme provides no legal protection for employers that use it to begin capability proceedings against employees that fail to comply with its recommendations.
4. The initial assessments are carried out by way of a telephone interview, which also raises concerns for SMEs. I recently was asked to give advice on a case where a manual employee had a difficult and painful injury to a knee. I find it difficult to see how a telephone caseworker will be able to investigate the issue with the knee, give a view on the extent of the injury and then give advice on possible suitable reasonable adjustments.

I am concerned as to whether a 'one size fits all' approach will really assist the SME where it is more difficult to for them to make reasonable adjustments than it is for the larger employers.



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This could have repercussions where employees claim they are disabled for the purposes of the Equality Act 2010; they are likely to look to a return to work plan as evidence for an employment tribunal of reasonable adjustments that an employer should have made.

Also, a telephone assessment is unlikely to consider the greater impact on SMEs of part-time working or a phased return to work, which could ultimately lead to greater liability for small businesses.

I am aware that I may be appearing somewhat negative as this government initiative is a positive step designed to cut down on absenteeism. Whilst every bit of help is gratefully received, I don't think this is the total answer and there will still be occasions when we need to refer cases to private Occupational Health Therapists to get the exact detail required.