

Guidance notes for the registered medical practitioner completing form AW33E Part C

Background

This form should be completed by a registered medical practitioner. This should generally be the employer's occupational health doctor. Where this is not possible, the form can be completed by the member's GP or specialist. The doctor completing the form must act in accordance with the requirements of Good Medical Practice, particularly paragraph 71. This states that you must be honest and trustworthy when writing reports, and when completing or signing forms, reports, and other documents. You must make sure that any documents you write, or sign are not false or misleading.

- a) You must take reasonable steps to check the information is correct.
- b) You must not deliberately leave out relevant information.

Where possible this form should be typewritten. An electronic version of this form can be found on our website, in the employer forms section of the employer hub.

The NHS Pension Scheme has two tiers of ill health retirement benefits. A member is eligible for tier 1 benefits if they have a physical or mental infirmity which gives rise to permanent incapacity for the efficient discharge of the duties of their NHS employment. A member is eligible for tier 2 benefits if they meet the tier 1 condition and, in addition, their infirmity gives rise to permanent incapacity for regular employment of like duration to their NHS employment. Permanent means until normal pension age, and will usually be either 60, 65 or State Pension age, depending on which NHS Pension Scheme the member belongs to.

Objective information about the member's medical circumstances is required in order to assist us, NHS Pensions, and the Scheme medical adviser to reach a decision on eligibility for ill health retirement benefits. The application is considered on the basis of whether the member is likely to meet the scheme criteria at a particular point in time. **It is not necessarily based on the member's current circumstances.**

If the scheme member is still employed, then the outcome of the application does depend upon whether the member currently meets the pension scheme criteria. However, if the member is no longer employed in their NHS employment, the

outcome of the application depends upon whether the member met the pension scheme criteria **at the time they left NHS employment**. Please note that this is the date the member's employment ceased, not the date that their sickness absence began. The answers provided in Part C of the application form must clearly demonstrate that they represent the member's medical circumstances at the appropriate point in time.

What information is the scheme medical adviser looking for?

There needs to be reasonable, objective medical evidence that the member:

- Has a recognised medical condition.
- That this condition renders the member incapable of undertaking their normal role and, in order to meet the tier 2 condition also prevents the member from engaging in regular employment of like duration to their NHS employment.
- That the member's incapacity is likely to be permanent.

Papers to be enclosed with the application

If this form is being completed by the employer's occupational health doctor, we will generally expect the form to be accompanied by medical report(s) from the scheme member's own doctor. Such report(s) should generally be from the scheme member's treating specialist(s). This may avoid delay if we consider such reports necessary to our consideration of the application.

The form should also be accompanied by those parts of the occupational health records that are relevant to the consideration of ill health retirement. This may include clinical records of consultations, reports obtained from the member's own doctors or OH reports to management. A full copy of the OH records is not required.

Notes on specific questions

a) Please list all currently diagnosed medical conditions giving date of onset for each

We are seeking to understand the member's active medical problems, particularly those that are contributing to their incapacity for work. It is unnecessary to document medical conditions that have resolved unless those conditions are relevant to the member's current circumstances, or their circumstances at the time they left employment, whichever is appropriate.

b) Provide details of the reported reason(s) for incapacity

We need to understand which of the member's active medical problems are contributing to their incapacity for work. Where more than one condition is contributing to the member's incapacity, please indicate which condition is the predominant reason.

c) Please provide details of the past course of any medical conditions that are currently reported as giving rise to incapacity

For each medical condition contributing to the member's incapacity, we need to understand the course that the condition has followed. Where the member has already left NHS employment, it is important to differentiate the member's circumstances at the time they left employment from any changes that have taken place since they stopped work.

d) Please provide details of reported symptoms, objective clinical findings, investigation findings, reported functional limitations and objectively confirmed functional impairment

We need to understand the impact of the member's medical condition(s) on their functional capabilities and their capacity for work either now, or if appropriate, at the time of leaving NHS employment.

e) Please describe all relevant (to currently incapacitating conditions) therapeutic interventions to date giving details of the nature of treatments, dates, durations, compliance, response and any adverse effects

We are seeking to establish whether the member's medical condition has been refractory to treatment and whether there are further medical interventions that might be of benefit. It is therefore helpful to provide as much detail about the treatment the member has received as possible.

f) What is the likely future course of this member's health and function, with normal therapeutic intervention, over the period until normal pension age?

For each active medical problem contributing to the member's current incapacity, please outline the proposed plan of management.

Please comment on the likely benefits of treatment and when those benefits are likely to be realised.

g1) How does this member's diagnosed medical condition(s) impact on their capacity to carry out their NHS duties?

Please outline the obstacles to the member continuing in employment.

Demonstration of how the member's functional impairment compromises their ability to do their job is central to the consideration of the application.

g2) What recommendations have you made to the employer?

Please outline whether you have identified any reasonable adjustments that are likely to overcome the obstacles to the member continuing in employment.

g3) Are there any workplace issues and how have they been addressed?

If adjustments have been made, but have been unsuccessful in overcoming those obstacles, please provide details.

g4) With normal therapeutic intervention please comment on the likelihood of improvement in functional abilities before normal pension age.

Information as to whether treatment is likely to result in significant functional improvement is particularly important. It would be helpful if you outline the reason for your opinion.

g5) Please summarise information you consider to be relevant to this member's long-term incapacity for the duties of their NHS employment

Please give details as to the member's current fitness for their normal job or, if appropriate, their fitness for their normal job at the time of leaving employment. Is this likely to change? Why do you think this?

g6) Please summarise information you consider to be relevant to this member's long-term incapacity for any regular employment

Please give details as to the member's fitness for regular employment of like duration to their NHS employment. "Regular employment" encompasses the general field of employment, not just employment within the NHS.

h) Terminal illness

If the member's life expectancy is less than one year, then please ensure that this form is either accompanied by a report from the scheme member's own doctor confirming that this is likely to be the case, or an explicit statement that you have received this information from the member's doctor. It is important that this section is completed in full and is accompanied by supporting evidence in order to avoid any unnecessary delay.

Details of doctor completing the form

Please provide your highest qualification in occupational medicine and your GMC number.