

## Occupational Health and Wellbeing Referral Service

The Occupational Health and Wellbeing Department is committed to providing advice and support to all employees working within Milton Keynes University NHS Foundation Trust regarding Health, Safety and Wellbeing within their workplace.

### Staffing

Rebecca Bason-	Acting Head of Occupational Health and Wellbeing
Dr Margaret Owolabi-	Consultant Occupational Physician
Therese Cawley-	Specialist OH Practitioner
Claire Hobbs-	Operational & Staff Flu Lead
Lovelyn George-	OH Clinic Nurse
Michael Betts-	Manual Handling Advisor
Christine Peasnell-	Medical Secretary
Kim Lindsay	Receptionist/ Administrator
Dhanashri Vijapurkar-	Receptionist/ Administrator
Laura Leigh-Lancaster-	Receptionist/ Administrator
Lee Downes	Ability Network Chair

### Opening hours

Monday- Friday	09:00-17:00
Telephone number	01908 995255 or ext 85255
Email address	<a href="mailto:staff.hwb@mkuh.nhs.uk">staff.hwb@mkuh.nhs.uk</a>

### What we do

Occupational Health and Wellbeing advises employer and employees about ways to help safeguard your health at work, whilst still enabling you to perform your role or to help you return to work after an illness.

We also perform other roles e.g., health surveillance and a brief description of these can be found later on.

### Why a Manager might refer you

There can be a number of reasons why you might be referred, but usually it would be to ask us to provide an opinion about your fitness for work.

A referral might be initiated for one, or more of the following reasons:

- You have been absent from work due to illness for a period of time.
- You have had recurrent, short spells of absence.

- You are at work, but there are concerns about your health, or behaviour at work and its possible impact on your work performance.
- You have had an accident or been involved in an incident that has resulted in sickness absence, or ill health.
- You have applied for ill health retirement.
- A request to start health surveillance.

### The Management Referral Process

Your manager or the person making the referral should have discussed the reason for the referral with you and explained what they plan to do afterwards. They will have completed a referral form that outlines the reason for referral and the questions they would like us to address. The referral form might be e-mailed to us, faxed, or sent by post.

Once we receive the referral letter, we will contact you by post (or by phone if there is insufficient time for a letter to reach you) to offer you an appointment.

Occasionally we may offer you a telephone consultation as an alternative to attendance in person, but this will depend on a number of factors including the complexity of the referral.

If we have a contact telephone number (on the referral form) we will try and ring you prior to your appointment to remind you about it.

### Things to check prior to your Appointment

Please bring a list of any medication you are prescribed. If you do have any hospital clinical letters etc. relevant to any ongoing health problem and you feel able to share them with us they would be most helpful (we can copy them, with your permission, for your health record).

All clinics have set appointment times and if you are over ten minutes late, we cannot guarantee that you will be able to be seen. Please do allow sufficient time for your journey as the roads approaching the hospital can get congested. A map can be found on the last page.

If you believe that you will be late for an appointment, please phone us on 01908 995 255 so that we can advise you whether or not you should continue your journey. Parking at the hospital can be difficult at times and we suggest you leave at least 15 minutes to find a parking space. A car-parking fee is required if you do not already hold a parking permit. The nearest car park is the multi-storey.

### Companions/Union Representatives

You can be accompanied by a friend, relative, or a Union Representative should you wish, but you would need to be comfortable to discuss health matters in front of them and occasionally, depending upon circumstance, the doctors or nurses may wish to speak to you in private.

Regrettably, we would not usually be able to allow for more than one companion at your consultation (apart from children).

## Accessibility

Please contact us on 01908 995 255 to discuss your requirements e.g., car-parking/entry to the building etc. There is a ramp leading to the front door of the out-patients department, together with a lift to get you to the next level, and there is a toilet wheelchair access. However, if for example, you are an unaccompanied wheelchair user or have other mobility problems, please let us know in advance so that we can offer you assistance.

## Check-in at Reception

Reception is on Level 3, and once either out of the lift, or at the top of the stairs, turn left and then left again at the first corridor and our reception is immediately on the left-hand-side. Check-in with our Receptionist who will then ask you to take a seat until the Doctor or Nurse calls you. If there is a problem, please inform reception.

## Waiting Times

We endeavour to see everybody on time, but occasionally clinics may over-run e.g., a complex consultation, or a previous patient/client was late. If you have waited for ten minutes past your scheduled appointment time please inform our reception staff, if we know that a clinic is running late, you will be informed on arrival.

## The Consultation

This is completely confidential, and you may see a nurse or doctor. After introductions they will check your understanding of the referral process and explain their role. Whilst they will be primarily interested in any ongoing health problems and their impact on work (or vice-versa) you will normally be asked other background questions such as your past medical history and social circumstances. This will enable them to gain an overall view of your health and wellbeing and any other factors that might influence your medical fitness for work.

If you do not understand any of the questions posed or the reason for asking them, please ask for clarification. Occasionally, a limited physical examination might need to be performed or simple tests undertaken. A female chaperone will be in attendance when a medical examination of a female client (involving partial undressing e.g., listening to your heart) might be performed by a male member of staff.

At the end of the consultation the nurse or doctor will discuss what adjustments/support (if appropriate) they think might be of benefit to you and will summarise their answers to any questions posed in the referral letter.

## How we Process our Report

The person who made the referral will expect a report from us following our consultation with you. This report will focus on information that management might need to consider including potential adjustments etc. but no medical information e.g., your actual diagnosis, will be included without your consent. You will be asked to provide written consent for our report to be sent and should you wish, you will be given an opportunity to read it first (the time allowed is limited so that we can still send our report promptly). The doctor or nurse will explain this process in more detail.

However, we have found that most people are happy with a verbal summary at the end of the consultation and would wish to avoid delays. Occasionally, if the need is urgent, we might be asked to provide a summary of our consultation by telephone or e-mail, i.e., it cannot wait for a report to arrive in the post. This summary will not contain any more information than would be available in the actual typewritten report.

You do have the right to withdraw your consent at any time during the process. If you ask us not to send our report, we will inform whoever referred you that you have declined for a report to be made available.

Our report will be posted or sent via email to whoever initiated the referral. Once the report leaves our department, we have no further control over who might have sight of it e.g., your manager may share it with Human Resources.

### Obtaining further Medical Information

Occasionally the nurse or doctor may wish to obtain further medical information from your GP and/or Specialist. This will assist them in answering the questions posed in the referral letter and they will explain what information they seek from your doctor(s), or others. You will be asked to complete a consent form that outlines your rights under the 'Access to Medical Reports Act 1988' and we will give you a copy of this for your own records.

You can indicate that you would like sight of your doctor's report before it is sent to us and have 21 days to arrange this with your doctor before they send it on to us. Your doctor may send you a copy but is not obliged to do so. Any medical reports we receive will be scanned into your records.

No-one, outside of the department will have access to your doctor's report without your consent, but we will use relevant (non-medical) information from it, to assist us to provide relevant advice to your manager.

### Counselling

Vivup are the Trust's Employee Assistance Provider (EAP) and are on hand to offer support and advice on a range of issues for all Staff. All discussions are completely confidential and available whenever you need to access them.

Help and support with pressures at work or home,  
Employee Assistance Programme (EAP) available  
any time, **24/7, 365** days a year

**03303 800658**

(Calls charged at local rates)

Or to find the full range of services available,  
visit **vivup.co.uk**



## Functions

### Health Questionnaires

These are sent into the department from new starters within the trust however we also screen questionnaires from employees starting at private companies and universities. Once a health statement is received in the department our turnaround time to clear them fit to work is 48 hours.

Some new staff members require certain blood tests prior to being cleared fit and some can also require a pre-employment appointment with either the Physician or Practitioner to assess their fitness to work. Once cleared fit, many individuals are recalled for an immunisation update to ensure they have the appropriate immunisations and or blood tests. Certificates are sent out confirming clearance to their manager or HR.

### Management Referrals

Staff are usually sent for a management referral if they have had a period of short- or long-term sickness however staff can be referred if no sickness has occurred but are experiencing difficulties or issues either at work or at home. From the date the referral is received to the appointment time is usually within 10 days and each referral is triaged by a practitioner to assess the suitability of an appointment with the Physician or Practitioner.

Following the appointment, a report is then sent to the referring individual as well as the staff member outlining the issues and advice going forward.

### Bodily Fluid Exposures

Any member of staff internally or externally who experiences either a bite, splash, needle stick or any other exposure to bodily fluids is assessed within the department for exposure to Hepatitis B, C and HIV. An initial appointment is attended which assesses whether the exposure is a low or high risk and whether treatment and follow up is needed.

All staff exposed are offered follow up blood testing at either 6 weeks, 3 or 6 months following the exposure.

### Health Surveillance

In line with the HSE legislation certain groups of employees must undertake Health Surveillance if their job could potentially harm their health.

Currently in the trust we perform health surveillance on some employees working with harmful chemicals in pathology, pharmacy staff who handle Cyto-toxic drugs and theatre staff who are required to wear latex gloves. We also provide a monthly health surveillance package to an outside private company who can be exposed to harmful chemicals and noise.

### Flu Campaign

Each year in line with the Department of Health requirements we offer all employees the option of having a flu vaccine. The flu vaccine can protect health care workers who work with poorly and vulnerable patients and can prevent the spread of a potentially fatal illness through the hospital.

The campaign runs from October- February and requires a lot of planning and resourcing. The DOH states that as many health care workers should be vaccinated and set a target of 75% for each trust to reach.