

SCHEDULE

Regulation 3

“SCHEDULE 1B

Regulation 2(1)(c)

PART I

Rules

1. In these rules, unless the context otherwise requires—

“claimant” means the person in respect of whom a statement is given in accordance with these rules;

“doctor” means a registered medical practitioner not being the claimant;

“all work test statement” means a statement given by a doctor in accordance with these rules.

2. Where the Secretary of State has requested that the claimant provide an all work test statement, that statement shall be provided in the form prescribed in Part II of this Schedule notwithstanding that the claimant has already provided a statement in accordance with Schedule 1 or 1A.

3. The all work test statement shall be completed in accordance with rules 3, 4, 5, 10 and 11 of Part I to Schedule 1.

4. Subject to rule 5 below, the diagnosis of—

(a) the disorder in respect of which the doctor is advising the claimant to refrain from work or, as the case may be, which has caused the claimant’s absence from work; and

(b) any other condition which could affect the claimant’s capacity for work,

shall be specified as precisely as the doctor’s knowledge of the claimant’s condition at the time of the examination permits.

5. Where, in the doctor’s opinion, a disclosure to the claimant of the precise disorder would be prejudicial to his well being, the diagnosis may be specified less precisely.

6. The notes set out in Part III of this Schedule shall accompany the form of doctor’s statement provided by the Secretary of State.

PART II

FORM OF DOCTOR'S STATEMENT

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

THIS STATEMENT SHOULD NOT BE USED FOR PEOPLE CLAIMING STATUTORY SICK PAY FROM THEIR EMPLOYER.

Doctor's Statement

In confidence to
Mr./Mrs./Miss/ Ms

Note for Doctor—We are making an assessment of your patient's eligibility for Incapacity Benefit and other state benefits under the terms of the all work test. Please complete the following boxes.

Main diagnosis (be as precise as possible)

Other diagnoses

Doctor's remarks

(Including comments on the disabling effects of the condition, treatment and progress—accuracy and detail will avoid requests for completion of a medical report).

Note for Doctor—While the all work test is being carried out, we need evidence that your patient should refrain from his usual occupation. Please provide the following information (which will not be part of the all work assessment).

I am issuing the following statement based upon the current guidance to certifying medical practitioners. I examined you today/yesterday and advised you that:

(a) You need not refrain from your usual occupation

(b) You should refrain from your usual occupation

for (insert period)

OR until

Doctor's

Date of

signature

signing

Form Med 4

PART III

The Notes

The following notes shall accompany the form of doctor's statement provided by the Secretary of State:

1. After the words on the doctor's statement "you should refrain from your usual occupation"—
 - (i) if the patient is being given a date when he can return to work, the date entered should not be more than 2 weeks after the date on which the statement is issued;
 - (ii) if recovery of capacity for work in the foreseeable future is not expected, "further notice" may be entered.
2. The "remarks" box should be used to provide additional information; including further details of diagnosed conditions, the disabling effect of such conditions, and notes on the patient's treatment and progress. Accuracy and detail will avoid requests for completion of a medical report.
3. The "remarks" box should also be used to state whether or not the patient is able to travel a reasonable distance to a medical examination as a result of his condition. If no entry is made, it will be assumed that the patient can travel.
4. This form of doctor's statement should not be used where the patient is claiming statutory sick pay from their employer. Form Med 3 should be used for that purpose."