



## new office

OUR STUNNING NEW MAIN OFFICE

## fit notes

THE PRACTICALITIES

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[WWW.ROODLANE.CO.UK](http://WWW.ROODLANE.CO.UK)

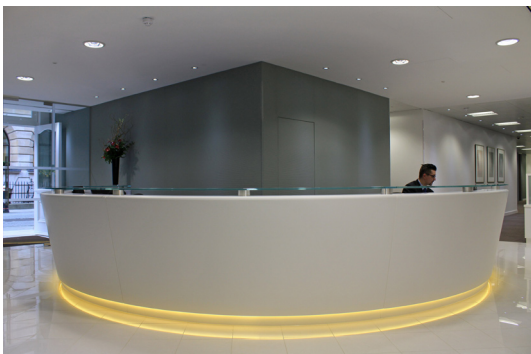
### our stunning new main office

All our clients will have had the news about our move to New Broad Street, but we wanted to share some photos with you and invite any of our clients who would like a tour to make contact.

I have to admit we have even surprised ourselves with the success and standard of the refurbishment. This space is the finest in the City, possibly in London, and with a tireless eye to detail Dr Harry Trakoshis and our Operations Manager, Paul Bowes, have created a fantastic environment for our patients.

We started with a clear vision of a beautiful and welcoming backdrop for the very best healthcare and the whole design has been focused on the patient experience from the moment of walking through the door to the moment of leaving. Feedback from our patients has been complete delight.

So with considerable pride here are the photos.



### a little dark chocolate every day is good for you!

It is always good to see research about the benefits of chocolate. better.

A recent large study from the German Institute of Human Nutrition has found that those who ate the most chocolate, around 7.5 g per day (a little less than two squares), had a 39% lower risk of heart attack and stroke than those who didn't eat chocolate.

The reduced risk is explained by a drop in blood pressure. The lead author says "The risk reduction is stronger for stroke than for MI [heart attack], which is logical because it appears that chocolate and cocoa have a pronounced effect on BP, and BP is a higher risk factor for stroke than for MI."

Of course there are notes of caution. Chocolate contains calories and sugar, and obesity is already an epidemic with serious health consequences. The trick is to choose a small amount of dark chocolate because it is the cocoa content that produces the benefit. The higher the cocoa content the

The research was carried out before the health benefits of chocolate and cocoa were recognized, so no note was made at the time of whether it was milk, dark, or white chocolate in the study. But 1568 participants were later asked to recall their chocolate intake over a 24-hour period, 57% ate milk chocolate, 24% dark chocolate, and 2% white chocolate. This might suggest results would have been better if all participants had eaten dark chocolate.

The study looked at four groups divided by the amount of chocolate they ate and found those in the top group eating around 7.5 g of chocolate a day, had blood pressure that was about 1 mm Hg (systolic) and 0.9 mm Hg (diastolic) lower than those in the bottom group. A small difference but a significant impact on the risk of illness and what a nice way to achieve it!



## sick notes to fit notes.....the practicalities

In our February newsletter we discussed the introduction of the new fit note (February Legal Update). From April 6th the standard sick note - FMed3 - is being replaced by a new form which allows GPs to state whether a person is fit to do limited or modified duties - the "Fit Note". It is not only GPs who will complete sick notes / fit notes, so will hospital doctors and casualty officers. In the early stages of the fit note, we anticipate that many doctors will continue to use the new fit note as if it were a sick note and simply "sign off" as they will not have received training in their completion or purpose.

As GPs and hospital doctors receive training on the new fit note, they will be less likely to simply "sign off" and more likely to indicate whether a phased return, modified hours and duties or workplace adjustments might retain an employee in work.

There is obvious benefit in moving away from the current "black and white" approach to "fit" or "unfit." Making a success of the many "grey areas" that fit notes will bring about will depend crucially upon good communication between employers, employees and certifying doctors. Where employers work with Occupational Health services, fit notes could encourage early return to work. The hazard for employers is where GPs hand down advice based purely on an employee's account and without knowledge of a role. Such advice may not be independent or well informed but tribunals are likely to take a dim view of employers who discount it.

We are happy both to provide advice and to structure services for our clients.

Where the fit note simply replaces a sick certificate and states that the person is not fit for work they should be dealt with exactly as they are at present.

The problem will be interpreting advice where an individual is deemed fit to return but with "modifications" because, as our previous newsletter pointed out, most

GPs are not trained to provide specific advice. They don't typically have adequate knowledge of the workplace to give realistic and practical recommendations and so advice may either be generic or perhaps impractical in a number of cases.

So our solution....

Where cases are complex, the advice from Roodlane remains that a full occupational health opinion should be sought.

The difficulty for HR will be for the more minor, high volume cases where advice remains vague. Physician led occupational health assessments for these would be costly and inefficient.

For clients who have an OHA or nurse as part of their service, such queries should be directed to them and this is a good opportunity for these practitioners to add value to existing contracts.

For the majority of our clients who do not have these we are offering subscription to a telephone based 'Advice on Fit Note' service where they can receive advice from medical personnel.

The DWP Fit Note microsite has good information on the change from sick notes to fit notes, including downloadable PDF leaflets for employers and GPs.

If you would like further advice on the implications of fit notes then you can discuss this with one of Roodlane's Occupational Health team. To arrange this, please contact our client relationship team for further information:

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