# Self referral to Occupational Health

To be completed and submitted to Occupational Health with supporting documents as necessary.

**Self-Referral Procedure Explanatory Note to Service Users**

Self-referrals may be a useful way for staff to discuss any concerns about the impact of a health problem on their capacity to work or the effect of the workplace on their health. Such confidential appointments may help you to understand the options including support and procedures available and arrive at a decision regarding the best way forward if **you are uncertain about this.**

**H**owever, most referrals to Occupational Health come through a senior manager such as the Departmental Administrator, a Human Resources representative or line managers. This is the best route for accessing support for the majority of occupational health work-related issues because it involves the appropriate people within the University to deal with them.

Self-referral to the Occupational Health Service has limitations on how much assistance can be given for workplace matters, because your manager is not involved.

Following management referrals, the Occupational Health Advisor or Physician writes a report to the referrer with the individual's consent. Copies of reports are sent to individuals. Medical confidentiality is observed, as required by professional codes of conduct and your written consent is required for the report.

With a self-referral, unless there are exceptional circumstances, such as significant health & safety concerns, reports are usually not written and therefore the manager cannot be expected to have knowledge of a problem and cannot give appropriate support.

Self-referrals are not helpful if action by your manager or the University is expected. In order for them to know about health matters and work, the management referral process to OH should be used and you can discuss this with your Administrator or other senior manager responsible for personnel support. If it is a safety concern with health implications, you can also approach the Departmental Safety Officer.

Occupational Health does not diagnose or treat non-occupational conditions which should be referred to your General Practitioner.

Any self-referral to OH will be assessed initially by an Occupational Health Adviser and confidential advice given. If the Occupational Health Advisor thinks it would be helpful, referral on to the Occupational Physician can occur. Follow up Occupational Physician appointments are discretionary and not generally offered for self-referral cases.

## Section 1 – Your details

|  |  |
| --- | --- |
| **Title and full name** |  |
| **Date of birth** |  |
| **Address** |  |
| **Contact number** |  |
| **Email address** |  |
| **Job title / Grade** |  |
| **Department / section** |  |
| **Are there any adjustments required in order to enable the employee to attend the occupational health assessment?** |
|  |

Send appointment details to: (tick all that apply)

|  |  |
| --- | --- |
|  | Home address |
|  | Email |
|  | Work address |

## Section 2 - Manager’s details

|  |  |
| --- | --- |
| **Title and full name** |  |
| **Department / section** |  |
| **Contact number** |  |
| **Email address** |  |
| **Job title** |  |

Your manager will only be contacted under extraordinary circumstances eg if there is a significant health and safety concern, and only in consultation with you.

## Note on DSE / Computer assessment referral

If you require Display Screen Equipment (computer) assessment and advice please ensure you have completed the on-line training and self assessment available at <https://www.york.ac.uk/admin/hr/health-and-well-being/occupational-health/computer-workstation-assessment/>.

Further assessment and advice is available from Departmental DSE assessors. Further information available at: <https://www.york.ac.uk/admin/hsas/safetynet/DSE/dse.htm>.

If you should experience any problems relating to computer use and are unable to resolve them with the above, then advise your manager or DSE Assessor and they may refer you to Occupational Health via a Management referral form.

## Section 3 – Roles and responsibilities

|  |
| --- |
| **My job involves:** |
| Managerial responsibilities for people and / or systems |  |
| Regular VDU use |  |
| Lone working |  |
| Shift work / night work |  |
| Work outdoors |  |
| Work at heights |  |
| Work in confined spaces |  |
| Food handling, or work in areas where food is handled |  |
| Electrical hazards |  |
| Regular manual handling / lifting |  |
| Driving duties |  |
| Vibrating equipment |  |
| Respiratory sensitisers or laboratory allergens eg pollen, animals |  |
| Noise levels more than 80dba-8hrs twa |  |
| Human blood, tissue or fluids |  |
| Ionising radiation |  |
| Other biological hazards eg Schistosoma |  |
| Other chemical hazards eg cleaning agents |  |
| Any other hazard eg excessive dust, rotating machinery |  |

**Please provide any further, relevant, details of your role together with detail from any meetings / discussions that may assist the referral**

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|  |

## Section 4 - Reason for self referral

**Please provide further details regarding your referral include a description of the main issues.**

Questions you should look to answer include:

* Any current symptoms affecting you
* Have you consulted a GP or specialist health professional regarding these symptoms?
* Are these symptoms impacting on your work?
* Are you receiving, or have already sought, assistance from services at the University? eg Human Resources, CiC staff counselling, Disability Services etc
* Do you have an existing health condition or disability? If so please provide details and any current workplace adjustments offered / accepted

Other issues you should cover include

* Any health, attendance or performance issues at work, and any domestic issues which may be affecting these

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| --- |
|  |

## Section 5 - Work pattern

|  |  |
| --- | --- |
| How many hours do you work each week? |  |
| Do you work shifts? Provide details |  |

## Section 6 – Sickness absence

|  |  |  |
| --- | --- | --- |
| Are you currently at work? | Yes: | No: |
| If not, provide length of current absence: |  |

## Section 7 – Declaration

I confirm that the answers given are correct to the best of my knowledge and will be sent to Occupational Health

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

## What happens next?

Send the completed form, along with any supporting documents, to the Occupational Health Adviser:

* by email at occupational-health@york.ac.uk or
* by internal post to Occupational Health, Heslington Hall. Mark your envelope 'Private and confidential'

The Occupational Health team will arrange an appointment and notify you by email, phone, text or post.

For more information, go to <https://www.york.ac.uk/admin/hr/browse/health-and-well-being/occupational-health>

## Privacy Notice

Please refer to the privacy notice here: <https://www.york.ac.uk/admin/hr/health-and-well-being/occupational-health/OH-privacy-notice.pdf>