

Background briefing on GPs, sicknotes and incapacity benefit

The following background note has been prepared to clarify the current situation regarding the role of GPs in issuing sickness certificates.

GPs do not make decisions on Incapacity Benefits (IBs).

Statutory sickness benefit is payable from day three of an illness and is available for 26 weeks.

From day three to day seven of an illness the patient should fill in a self certification form (SC1) provided by the employer.

On day seven the GP or the doctor looking after the patient, becomes responsible for certification of the illness in relation to sickness benefit.

GPs are responsible for issuing sickness certificates from day seven of a patient's illness to the end of week 26. A specific time must be stated (eg the certificate cannot say "until further notice").

After week 26, patients move to the Incapacity Benefit system if they qualify. Unlike the sick note scheme which states you are not well enough to do your own job, the IB scheme talks about whether the patient is capable of doing ANY job.

If a patient is still off sick after about week 20 the patient is told by the Department of Work and Pensions (DWP) to get a "Med 4". They go back to the GP for this form which gives fuller details of the patient's condition than the original Med 3 sickness certificate. Based on the information in Med 4, the DWP may be able to decide that a patient is incapable of work and would therefore qualify for Incapacity Benefit. An example might be someone with a fractured femur, with no union of the bone, and scheduled to go into hospital for surgery to insert a pin and plate.

However, if further details of the illness are required by the DWP, the patient is contacted requesting completion of a form IB113. If an IB113 is required, the DWP writes to the GP and the NHS GP has to complete a form IB113 (contractual obligation).

On the basis of IB113 information, the DWP decides if the patient gets called up for a Personal Capacity Assessment (the All work Test). This assessment is not done by the patient's GP.

If a Personal Capacity Assessment is required it will be conducted by an examining medical practitioner (employed by Atos Origin the company holding the DWP contract for this work). Atos acts as the agent for the DWP.

The examining doctor does not decide if the patient gets the Incapacity Benefit. That decision is made by a lay adjudication officer.

When the Personal Capacity Assessment has been done and a decision made by the lay adjudicator, a letter will go to the patient's GP to say whether the patient has been accepted for Incapacity Benefit or not. If the decision is that the patient is capable of work (ie any work) the GP must not issue any more sick notes unless the patient's condition changes.

If the patient gets the IB they do not go back to the GP for any more sick notes. The GP does of course continue to provide medical care.

NB The Disability Living Allowance is another quite separate benefit but again the patient's GP does not make the decision as to who gets it, and neither does the doctor employed by Atos Origin who carries out the medical examination of the patient. The decisions are made by lay adjudicators.

In short GPs are required to provide facts (not opinions) and do not take decisions on who gets benefits.

Ends

For further information please contact:

Linda Millington
direct telephone: 020 7383 6473
direct fax: 020 7383 6403
email: pressoffice@bma.org.uk

Public Affairs Division
British Medical Association
BMA House
Tavistock Square
London
WC1H 9JP

After 6:00 pm and weekends:

+44 (0)790 167 0068
+44 (0) 208 651 5130
+44 (0) 208 374 4128
+44 (0) 1525 379792
+44 (0) 7747 394 450
+44 (0) 7810 523 722
+44 (0)115 845 1860

<http://www.bma.org.uk/presscentre>