

***Example III Health Retirement Certificate for a Current Employee –
England and Wales – for determinations made after 30 September 2008.***

Medical certificate to be provided by an independent, approved, duly qualified registered medical practitioner in accordance with regulation 20 of the Local Government Pension Scheme (Benefits, Membership and Contributions) Regulations 2007 (as amended) in respect of a current employee.

Part A: To be completed by the employer

Surname of employee:

Forenames:

Mr / Mrs / Miss / Ms*

Date of birth:

NI Number:

Home address:

Employer:

Place of work:

Nature of employment (job description attached):

Have the employee's contractual hours been reduced as a result of their ill health or infirmity or mind or body? Yes / No * (If 'Yes', please attach a statement providing background details e.g. factors that led to the reduction in hours, date(s) reduction(s) in hours occurred. This is to assist the registered medical practitioner when answering questions B8/B9).

(*delete as appropriate)

Part B: To be completed by the approved (1) registered medical practitioner. Please tick appropriate boxes.

Please tick either B1 or B2

I certify that, in my opinion, the employee named in Part A

B1: IS

B2: IS NOT

on the balance of probabilities, permanently incapable (2) of discharging efficiently the duties of his / her employment with his / her employer because of ill health or infirmity of mind or body.

If B1 has been ticked, please tick B3 or B4

I certify that, in my opinion, as a result of that ill health or infirmity the employee named in Part A

B3: DOES

B4: DOES NOT

have a reduced likelihood of being capable of obtaining (3) other gainful employment (4), whether in local government or elsewhere, before age 65.

If B3 has been ticked I further certify that, in my opinion:

B5: As a result of their ill health or infirmity, there is no reasonable prospect of the employee named in Part A being capable of obtaining (3) gainful employment (4) before age 65.

OR

B6: Although, as a result of their ill health or infirmity, the employee named in Part A cannot obtain (3) gainful employment (4) within the next three years he / she is likely to be capable of gainful employment (4) at some time thereafter and before age 65.

OR

B7: Having considered their ill health or infirmity, the employee named in Part A is likely to be capable of obtaining (3) gainful employment (4) within the next three years.

If B3 has been ticked and the contractual hours of the person named in Part A have been reduced by the employer (as indicated in Part A) please tick B8 or B9

I certify that, in my opinion, the employee named in Part A

B8: **IS** B9: **IS NOT**

in part-time service wholly or partly as a result of the condition that has caused him / her to be permanently incapable of discharging efficiently the duties of his / her employment (5).

General statement

I do / do not* attach a copy of my full report / assessment and I certify that:

I have not previously advised, or given an opinion on, or otherwise been involved in this case

AND

I am not acting, and have not at any time acted, as the representative of the employee named in Part A, the employer or any other party in relation to this case

AND

I hold a diploma in occupational health medicine (D Occ Med) or an equivalent qualification issued by a competent authority in an EEA State, which has the meaning given by the General and Specialist Medical Practice (Education, Training and Qualification) Order 2003, or I am an Associate, a Member or a Fellow of the Faculty of Occupational Medicine or of an equivalent institution in an EEA State

AND

I have given due regard to the guidance issued by the Secretary of State when completing this certificate.

..... Date:

Signature of independent registered medical practitioner

.....
Printed name of independent registered medical practitioner

(* delete as appropriate)

Important notes:

- (1) The independent registered medical practitioner signing the certificate must have been approved for this purpose by the Pension Fund administering authority.
- (2) 'Permanently incapable' means that the person will, more likely than not, be incapable until, at the earliest, their 65th birthday.
- (3) The independent registered medical practitioner is providing an opinion on the person's capability of obtaining gainful employment based solely on the effect the medical condition has on the ability to undertake gainful employment.
- (4) 'Gainful employment' means paid employment (whether in local government or elsewhere) for not less than 30 hours in each week for a period of not less than 12 months. It does not have to be employment that is commensurate in terms of pay and conditions with that of the person's current employment.
- (5) If the reason that the contractual hours have been reduced is wholly or partly as a result of the condition that has caused him / her to be permanently incapable of discharging efficiently the duties of his / her employment, then the Pension Fund administering authority will ignore the reduction in hours when calculating the pension benefits due to the scheme member.

