# Checklist for managing a possible ill-health pension case

This checklist should start to be used as soon as it looks as though you will dismiss the individual for reason of ill-health, including if someone has asked to be considered for their ill-health pension.

**Warning**: At no point should you encourage the individual to resign voluntarily or seek a MAT. If they suggest this the implications of doing so must be explained i.e. this will automatically exclude them from their pension.

**If they insist on going voluntarily you MUST document this and ideally have something in writing from them that they do so in the knowledge that this will definitely exclude them from an ill-health pension at point of leaving.** Wording and a form to include in a letter is available in the [Ill-Health Toolkit](https://pensions.westnorthants.gov.uk/lgps/my-responsibility/my-responsibilities-ill-health-retirement/ill-health-active-members/) for this purpose.

|  |  |
| --- | --- |
| **Employee name:** |  |

|  |  |
| --- | --- |
| Check they are in the LGPS and will meet the two year qualifying period. Ask us if in any doubt. |  |
| Consult your policy and identify when you will check with the individual if they are interested in an ill-health pension referral and when to start the referral process. |  |
| If your occupational health provider (OHP) is saying they do not qualify for ill-health pension, ask the employee if they want a referral to the Independent Doctor anyway. Suggested wording is available in the IH toolkit - Letters – Active document. |  |
| If a referral is to be made ask your OHP to start preparing the case for the Independent Doctor (you decide how much of this your OHP does). |  |
| Use the ESTIMATE2 form to ask Pensions for an ill-health estimate. |  |
| Organise a visit with the individual if at all possible. This is best done after you have the estimate. Purpose is to:   * Give them the ill health estimate. * Give them The “Understanding Your Referral to the Independent Doctor” Leaflet. * Give them the IHRC - Consent to Release Medical Records to an Independent Doctor form and explain it – wording for an accompanying letter is available in the Ill-health Toolkit - Letters – Active document. * Explain how ill-health dismissal and ill-health pension relate to each other. * Identify any issues there are which may effect the ill-health pension decision. * Be clear on your organisation’s policy on keeping people employed who are undergoing treatment. |  |
| Start to keep a record of any information provided that would help with the tier decision later on in the process. |  |

|  |  |
| --- | --- |
| Prepare the following documents – Ill-health Pension Process: Guidance Note 2  gives further help: |  |
| * The IHRE1 – use the flow chart to choose which option in Part C. |  |
| * A purchase order (or include a purchase order number on the IHRE1) |  |
| * A job description for EACH JOB involved – if this is an opt-out case make sure you get the job description of the job they opted out from which MAY NOT be their current job. |  |
| * A generic job specific person hazard/ risk assessment for EACH JOB involved. |  |
| * Information about required skills or attributes of the job which may be affected by MEDICAL considerations for EACH JOB involved. |  |
| * Details of any reduction in hours that has occurred in order to manage ill-health for EACH JOB involved. |  |
| * Get your Occupational Health provider to prepare a pack of all of the notes and reports collected by them regarding the case, together with any reports to you, ready for sending to the Independent Doctor and agree how this will be included with the information you are preparing. (Medical confidentiality may mean you can’t be given the information). |  |
| * Further relevant details of the case. |  |
| * The relevant IHCERTA1 or IHCERTD certificate/s. One is required for EACH JOB involved. See the IHRE1 and the flowchart for guidance on which certificate is needed. Make sure you complete part A and put the individual’s name on each page.   **Note:** you should not be using one of the IHCERTDX forms without having discussed it with us first. |  |
| * Make sure the employee returns the correctly completed IHRC form. In particular, they have: * Ticked only ONE of the boxes in each of parts C, D and E. * Provided both their GP and Consultants name and contact details. * Signed and dated the document.   This should bear a recent signature and date when the case is referred to the Independent Doctor. Your IRMP Provider will be able to confirm the period between signature and referral within which the consent will be deemed valid; this is often a period of 4 weeks. |  |
| Have you got all of the above documents? |  |

Once all of the above is prepared:

|  |  |
| --- | --- |
| Prepare a single referral package for the Independent Doctor containing ALL of the above documents including the signed IHRC and any further details if provided by the employee (attached to the IHRC). |  |
| Send the package to the Independent Doctor (you may need to do this via your OHP so the medical information is attached) |  |
| Check with Independent Doctor that the case has been received. |  |
| Deal with any issues raised by the Independent Doctor. |  |
| Inform the employee when the Independent Doctor will do the first case assessment. |  |
| Check for First Case Assessment information. |  |
| Inform the employee of the results of the first case assessment. |  |
| Arrange for employee appointment if this is requested (it is rarely needed) |  |

**There may now be a delay as the Independent Doctor seeks out further information from the GP and specialists.**

|  |  |
| --- | --- |
| The Independent Doctor should keep you informed of expected timescale. If they miss notified timescales by more than a few days chase the case. |  |

**Once the signed IHCERTA1 or IHCERTD1/2/3/4 is received.**

|  |  |
| --- | --- |
| Make sure you have also received the Independent Doctor’s report explaining why the form has been completed in the way it has. Ask Independent Doctor for this if you have not received it. |  |
| If the Independent Doctor does not think the individual meets the permanently incapable criteria identify if the primary reason - is treatment/investigation not yet exhausted. If this is the case, consult us as this might necessitate a slightly different approach to normal. |  |
| Inform the individual of the outcome of the referral. Suggested wording is available in the IH toolkit. |  |
| Discuss with employee any implication of the above e.g. impact of terminal illness, treatment not yet exhausted, tier 3 review etc. Then *complete the ill-health procedure*: |  |
| If the person is permanently incapable of doing their job and is not immediately capable of undertaking any gainful employment, complete your gathering of information necessary to assist the tier decision making process. |  |
| Prepare a report, with recommendations and justifications for the person who makes your ill-health pension decisions. The decision making flowchart will help with this process. Use the report that will have accompanied the IHCERTA1 / IHCERTD1/2/3/4 to help with this.  If you are recommending a different tier from the Doctors opinion consult us. |  |
| Get a decision made about what the pension award should be. Consult us if uncertain. |  |
| Get person authorised to make ill-health decision to complete Employers Ill-health declaration on the IHCERTA1 / IHCERTD1/2/3/4 and take a copy. |  |
| Prepare entitlement award letter and get it signed by above person. Suggested letter wording is available in the IH toolkit. |  |
| Issue dismissal letter. With this letter you should include the entitlement award letter and RETIRE1/2/3 where appropriate). |  |
| Complete the LEAVECERT (or get whoever does them to complete them). |  |
| Send the LEAVECERT and copies of the IHCERTA1 / IHCERTD1/2/3/4 and entitlement award letter to us. NB: Pensions need the IHCERTA1 no matter whether ill-health pension is payable or not. |  |

If this is a Tier 3 Award ONLY

|  |  |
| --- | --- |
| Diary the case for a tier 3 review 18 months after leaving. It is suggested this is diarised for 16 months after leaving so the process kicks off and is completed at 18 months. |  |

**April 2021**