Exploring NICE guidance on long-term sickness and incapacity for work

A member of the NICE guideline development group highlights the important issues from the latest evidence-based guideline for readers of Nursing Times


Most importantly, the guidance stresses the need for clinicians to consider the effects of their patients’ health on their ability to work and support themselves and their families.

In the current economic climate, it is timely to suggest ways for health professionals to take a holistic view of managing their patients’ long-term conditions and preserving their work capacity whenever possible.

MULTIDISCIPLINARY APPROACH

The guidance recommends a multidisciplinary approach, and underlines the importance of communication between health professionals and employers, employment specialists and Jobcentre Plus.

The first three recommendations cover activities that relate to employees who experience long-term sickness or recurring long or short-term sickness absence. These aim to encourage a well-managed return to work that will be of mutual benefit to both the employee and their employer.

Recommendation 4 relates to activities for those who are unemployed and in receipt of incapacity benefits, such as employment and support allowance (ESA).

The guidance emphasises the importance of recording the occupation and main duties of all patients of working age who have long-term conditions, to facilitate appropriate assessment of their fitness to work, and advise on the need for workplace support or sickness absence.

This is particularly relevant to primary care nurses, as recording occupational data during routine assessment and monitoring of patients with long-term conditions and at new patient medicals would make decision-making on work-related issues, including sick notes, far easier.

OCCUPATIONAL HEALTH

The guidance on sickness absence suggests initial enquiries after employees have been off work for 2–6 weeks to determine the reason for the sickness, the prognosis, any barriers to returning to work – actual or perceived – and what help may be needed.

Occupational health nurses are ideally placed to carry out these actions, and to undertake further assessment of the patient and negotiate a return-to-work plan with their line manager.

The new Fit for Work service could provide opportunities for nurses who are interested in this emerging field

Occupational health nurses offer a confidential service that should be trusted as impartial by staff, yet they are able to communicate directly with managers, visit the workplace and obtain information from the patient’s GP and/or acute care.

Many small employers do not have access to occupational health services and, even among companies that commission or provide such services, there has not been a consistent approach to sickness absence management.

This guidance clarifies what should be provided at each stage of absence, which will help occupational health and primary care staff manage patients more effectively, and support commissioning of occupational health services.

INTERVENTIONS

The guidance outlines evidence-based interventions for long-term sickness absence. These distinguish between people needing advice and support and those who will need more intensive intervention.

Recommended interventions for different types of conditions include cognitive behavioural therapy, graded activity, physiotherapy, progressive goal attainment programmes and workplace modifications.

The guidance stresses the importance of assessment and case coordination, which can be provided by trained and skilled nurses. This is important because, without adequate and timely assessment, interventions can increase the time taken to return to work either by being provided too late or by taking longer than necessary.

In her review of the health of Britain’s working-age population, Working for a Healthier Tomorrow, Dame Carol Black recommends a Fit for Work service, which will shortly be piloted in different areas.

This new service will employ case workers, as recommended by NICE, in a variety of locally determined models. This could provide opportunities for nurses who are interested in this emerging field. Condition management programmes for claimants of incapacity benefits and ESA also continue to provide opportunities for nurses to work in the assessment and holistic management of long-term sickness and incapacity.

NICE guidance on long-term sickness and incapacity therefore provides clearly evidenced care pathways to help people with long-term conditions remain economically active and independent, and the nursing profession is at the heart of many of the proposed developments, particularly in primary care and workplace health.

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REFERENCE