Our Ref KB/hm

19th December 2023

Stella Wilcox

hr@foster-gamko.com



Cavell & Lind Ltd,
Occupational Health
Cavell House, 4 North Lynn Business Village,
Bergen Way, Kings Lynn PE30 2JG

Dear Stella

Re: Stephen Fawcett - D.o.B: 24.10.1967

## Introduction:

Thank you for asking me to see Mr Fawcett for an Occupational Health review appointment today at Cavell & Lind Limited. The terms of my report were listed in your referral letter.

Mr Fawcett has consented to receive a copy of this report before his employer by email.

## Medical Information:

Stephen mentioned suffering with an abdominal hernia causing worsening groin pain that is awaiting specialist surgical follow-up to consider an operation, which will likely to take at least several months with NHS waiting times and post operative recovery etc.

The hernia could worsen with heavy lifting / strenuous manual work, and he struggles with prolonged standing / walking, so he has been advised to only perform light duties at work while the hernia is treated, if possible and business circumstances permit.

Stephen said that he has been off work as a full-time manual production operative making doors since last months as his employer couldn't accommodate light duties in his current role.

## Questions:

## 1. Advice on this considering the role requirement and individual's current capability?

In my opinion Stephen is medically not fit to work in his current manual role for the foreseeable future (likely at least several months while waiting for the hernia to be treated) due to the heavy lifting involved. However, he could perform light duties avoiding lifting / repetitive bending and prolonged standing / walking, if possible and business circumstances permit but this will likely be difficult in his current role.

If the company can't accommodate light duties in his current role, then temporary redeployment to a more suitable sedentary office-based role could also be considered for several months while the hernia is treated. If possible and business circumstances permit, a workstation assessment (WSA) would be helpful to check his desk is comfortable etc.

Supportive meetings with work to discuss his progress and options should also be encouraged, if possible and business circumstances permit.

Stephen said that he enjoys work so, in my opinion, work should be therapeutic (helpful for his health) provided he doesn't overdo it with works ongoing support and understanding if the company can accommodate the light duties / temporary redeployment mentioned above.

2. Will the employee be able to make a return to full duties and responsibilities? If not, advise on any likely incapacity, and time frame to anticipated full recovery?

I haven't written to his GP for further information as in my opinion he told me all I need to know for now.

In my opinion the Equality Act 2010 does apply in this case with regards to the disability given its ongoing nature and impact on his life, but ultimately this is a legal decision.

In my opinion Stephen may have a higher-than-average sickness absence level for the short term due to the health problems, but this is less likely and should improve over the long term with ongoing treatment and works support / understanding if the company can accommodate the light duties / temporary redeployment mentioned above.

I haven't arranged to see him again routinely but will happily do so if needed. Please let me know if I can be of any further assistance.

Yours sincerely,

Dr Kingsley Betts MBBS BScPsych MRCGP DOccMed Occupational Health Physician GMC 6052103

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