

# HUMAN RESOURCES

## OCCUPATIONAL HEALTH PHYSIOTHERAPY POLICY

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Author	██████████
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South Yorkshire  
Fire & Rescue  
WORKING FOR A SAFER  
SOUTH YORKSHIRE

# OCCUPATIONAL HEALTH PHYSIOTHERAPY POLICY

## INTRODUCTION

1. The Health and Safety Executive describes musculoskeletal disorders as the most common occupational illness in the UK, affecting 1.1 million people a year.
2. Musculoskeletal injury, treatment and rehabilitation programmes are now known to reduce the incidence of chronic back pain. Evidence suggests that the longer a person is off work with back pain, the lower the chance of their returning to work. Early intervention also applies to ankles, knees, hips, elbows, shoulder etc.
3. The Manual Handling Regulations 1992 emphasises the need for assessment, training, reasonable adjustment and alternative duties for the rehabilitation of employees who are affected by musculoskeletal disorders.
4. In 2001 the Health and Safety Commission launched its 10 year Occupational Health Strategy called 'Securing Health Together'. The strategy represented a joint commitment by Government Bodies concerned with occupational health. The aims of the strategy were to reduce ill health in workers and the public caused, or made worse, by work. Help people who have been ill, whether caused by work or not, to return to work; and improve work opportunities for people currently not in employment due to ill health or disability; and improve the work environment to help people maintain or improve their health.
5. The strategy identified the following targets:
  - 20% reduction in the incidence of work-related ill health;
  - 20% reduction in ill health to members of the public caused by work activity;
  - 30% reduction in the number of work days lost due to work-related ill health;
  - Everyone currently in employment but off work due to ill health or disability is, where necessary and appropriate, made aware of opportunities for rehabilitation back into work as early as possible.

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6. The Chief Fire Officers' Association (CFOA), Occupational Health Network Group produced a report in December 2010, identifying and preventing the major causes of long term sickness: a good practice guide. The guidance included response methods in supporting employees back to health and/or early return to work, one of which was funded treatment or physiotherapy.
  
7. As a member of the Dignity at Work Partnership<sup>1</sup>, SYFR is committed to promoting a positive working environment where the dignity and respect, to which all employees are entitled, is not undermined. No employee should be treated less favourably on the grounds of race, gender or gender reassignment, disability, sexual orientation, religion or spiritual belief, colour, nationality, national or ethnic origin, marital/parental status, family ties, trade union or political belief, hours worked, or any other reason, either directly or indirectly.
  
8. This policy applies to all employees of South Yorkshire Fire & Rescue and should be read and used in conjunction with the associated documents listed below:
  - Health and Safety Manual Part A - Section 5 Manual handling
  - Health and Safety Manual Part A - Section 11 Fitness Training
  - Occupational Health Unit Advice Booklet – Working With Display Screen Equipment
  - Absence Management Policy
  - Modified Duties Policy

<sup>1</sup>The Dignity at Work Partnership is a partnership between the Government, Unite (the UK's largest union) and major public and private sector organisations. For further information on the Partnership, see [www.dignityatwork.org](http://www.dignityatwork.org)

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### **SCOPE**

9. South Yorkshire Fire & Rescue will where possible fund for the provision of physiotherapy. However, employees are not guaranteed referral for treatment the decision will be made by the Occupational Health Practitioners. Where referral is not deemed appropriate the employee will be provided with advice on other measures that could benefit recovery or rehabilitation.
  
10. If the demand for treatment is such that funds are not available, the service will be suspended for review until additional funding becomes available.
  
11. The policy aims to deliver the following outcomes:
  - Provision of early and rapid access to assessment, treatment and rehabilitation for employees sustaining acute musculoskeletal injuries
  
  - To assist employees who have become ill, whether caused by work or not, to remain or to return to work and full performance
  
  - To reduce sickness absence levels and associated costs, reducing injuries and ill health in all employees
  
  - Retain employees in their substantive posts
  
  - Prevent re-occurrence of similar injuries
  
  - Promote good practice

### **CRITERIA FOR PHYSIOTHERAPY REFERRAL**

12. Physiotherapy is provided with the aim of returning the employee back to operational fitness or to the duties of their substantive role. It is not provided for employees who are able to perform their current duties but who may not be able

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to perform out of work activities i.e. jogging, cycling etc.

13. Referrals are unable to be made for employees who are currently under treatment with other forms of physical therapy e.g. chiropractic, osteopathy or who are currently receiving physiotherapy elsewhere.

14. Selection for referral will be based on the following criteria:

- The employee has a condition that is likely to benefit from a short course of physiotherapy (*see below*)
- The condition is causing or likely to cause sickness absence, or is significantly interfering with work
- The employee is willing and able to attend the premises of South Yorkshire Fire & Rescue Service physiotherapy providers if required for face to face/ hands on therapy
- The employee is unable to obtain physiotherapy treatment via their own GP or private insurance within 3 weeks

15. Conditions that are likely to benefit from a short course of physiotherapy are:

- Acute joint or limb injuries e.g. sprained knee, sprained ankle, torn cartilage, torn ligament and muscle strains, shoulder injuries
- Acute back strains; slipped, prolapsed or bulging discs, sciatica
- Exacerbations of chronic arthritis
- Neck injuries e.g. whiplash
- Tendonitis

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16. Initial referral will be to the Physiotherapy Advice Line (P.A.L.). The triage service allows employees to access early advice on the most appropriate way to manage their musculoskeletal disorders, directly from a Senior Chartered Physiotherapist.
17. Where it is identified that face to face/ hands on treatment is required funding when available will be provided for up to 6 sessions of physiotherapy, some employees may not require the full 6 sessions.
18. In some cases following consultation with the physiotherapy provider and the Occupational Health Practitioners; and where progress in recovery is seen to being made funding for extra sessions will be provided.

**If you require any further guidance on this document, please contact  
[REDACTED] – Occupational Health Nurse Advisor**