



eMed 3 Fit Notes in Secondary Care

Requirements Specification

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Data Alliance Partnership Board

The Data Alliance Partnership Board (DAPB), which holds delegated authority from the Secretary of State for Health and Social Care, has approved a new information standard for publication under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Standards Assurance Service (DSAS) and endorsed by the Data Alliance Partnership Sub Board (DAPSB).

This information standard comprises the following documents:

- Requirements Specification
- Implementation Guidance
- Technical Specification

An Information Standards Notice (DAPB4011 Amd 34/2021) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled copies of these documents can be found on the [NHS Digital website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

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Glossary of Terms

Term / Abbreviation	What it stands for
HCP	Health Care Professional
DWP	Department for Work and Pensions
eMED3	Electronic statement of fitness for work (Med 3 form or 'fit note')
CDS	Commissioning Data Sets
DAPB	Data Alliance Partnership Board
SCCI	Standardisation Committee for Care Information
RBAC	Role Based Access Control
EPR	Electronic Patient Record

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1. Overview

1.1 Purpose of Document

The purpose of this document is to define an Information Standard to allow a Statement of Fitness for Work (the MED 3 form, also referred to as 'fit note') to be issued electronically (eMED3) in secondary care.

The eMED3 template is included in [section 4](#). Full details of the data items which populate it are included in the supporting Technical Specification.

1.2 Background and context

The [Statement of Fitness for Work](#) was introduced in April 2010 across England, Wales and Scotland. In 2012 Department for Work and Pensions (DWP) enabled GPs to produce computer-generated fit notes. Healthcare professionals issue fit notes to people to provide evidence of the advice they have given about their fitness for work. They record details of the effects of their patient's condition so the patient and their employer can consider ways to help them return to work where relevant.

The standard seeks to remove the current inefficient, manually signed paper pad-dependent process, saving clinical time, and leading to an improved patient experience. Replacing the clerical process will result in electronic fit notes that can, by default, be sent digitally to patients, or if required printed and handed to the patient. All associated data is recorded on the patient record allowing the fit note to be easily duplicated if necessary.

From April 2022, DWP amended regulations to improve the process for completing and receiving a fit note by removing the obstacles to digital completion and issuing of fit notes by removing the requirement for fit notes to be completed and signed in ink. A further change in legislation from July 2022 means that fit notes can be certified and issued by nurses, occupational therapists, pharmacists and physiotherapists in addition to doctors. While the legislation enables all those registered as one of these professions to technically certify and issue a fit note, additional [guidance](#) and [training](#) was issued alongside the legislation to clarify that healthcare professionals must be operating within their scope of practice and in relevant settings in order to issue fit notes.

This will also provide the ability to analyse and publish data derived from the issuing of fit notes in hospitals, adding to the existing data analysis undertaken on those issued in primary care. Data flow will be facilitated from version 6.3 of the Commissioning Data Sets (CDS), due to commence submission from April 2022. In line with [national strategy](#) this proposal utilises [SNOMED CT](#) for recording various data elements relating to return to work advice and the reason for issuing the fit note. If this is not available, ICD-10 may be submitted to represent the diagnosis prior to the transition to local utilisation of SNOMED CT.

Development and implementation of this standard to start in November 2022.

1.3 Supporting documents

This document should be read in conjunction with the following:

Ref	Title	Location
1	Requirements Specification (this document)	https://digital.nhs.uk/isce/publication/dapb4011
2	Information Standard Notice	https://digital.nhs.uk/isce/publication/dapb4011
3	Technical Specification	https://digital.nhs.uk/isce/publication/dapb4011
4	Implementation Guidance	https://digital.nhs.uk/isce/publication/dapb4011
5	eMED3 Fields, Data Definitions and Usage	https://digital.nhs.uk/isce/publication/dapb4011
6	DWP fit note guidance	https://www.gov.uk/government/collections/fit-note
7	FutureNHS site	https://future.nhs.uk/DWPDigitalFitNoteSecondaryCare

2. Summary

Standard	
Standard Number	DAPB4011
Standard Title	eMED3 Fit Notes in Secondary Care
Description	<p>The Statement of Fitness for Work (fit note) was introduced in April 2010 across England, Wales and Scotland¹. In 2012 Department for Work and Pensions (DWP) enabled GPs to produce computer-generated fit notes (eMED3). Healthcare professionals issue fit notes to people to provide evidence of the advice they have given about their fitness for work. They record details of the effects of their patient's condition so the patient and their employer can consider ways to help them return to work where relevant.</p> <p>The duty to provide a fit note rests with the Healthcare Professional who at the time has clinical responsibility. The need for a fit note following delivery of a secondary care service should be issued by the secondary care provider (NHS Standard Contract 22/23, section 11.12) not by referring the patient back to primary care. Currently this is done via paper pads of fit notes ordered directly from DWP.</p> <p>From April 2022, DWP amended regulations to improve the process for completing and receiving a fit note by removing the obstacles to digital issuing of fit notes by removing the requirement for fit notes to be completed and signed in ink. A further change in legislation from July 2022 means that fit notes can be certified and issued by nurses, occupational therapists, pharmacists and physiotherapists in addition to doctors. While the legislation enables all those registered as one of these professions to technically certify and issue a fit note, additional guidance and training was issued</p>

	<p>alongside the legislation to clarify that healthcare professionals must be operating within their scope of practice and in relevant settings in order to issue fit notes.</p> <p>Fit notes are only required if a period of sickness absence lasts longer than 7 days. The first 7 days is known as the self-certification period. If the period of sickness absence is expected to last 8 days or more a fit note may be issued if the patient's condition impacts on their ability to work. During the first six months (26 weeks) of a condition a fit note may only be issued for a maximum of 13 weeks with a very small number of exceptions.</p> <p>After six months it can be issued for any clinically appropriate period, up to, and including indefinite.</p> <p>This Information Standard requires in scope NHS funded secondary healthcare providers to enable functionality within IT systems allowing the completion and issue of eMED3 fit notes. This requires auto population of a defined digital template, supplemented by clinical input to ensure correct content. The fit note must then be issued, by default, digitally to the patient, or if requested printed and issued to the patient. Access to the functionality to complete a fit note must be limited to the professions in scope, as set out in the legislation. Other users, such as other professions and administrative staff, must be able to view and issue duplicates of completed fit notes without having the ability to amend or complete the template. All associated data must be stored electronically. eMED3 fit notes can be issued:</p> <ol style="list-style-type: none"> 1. immediately following completion 2. as a duplicate of a fit note already issued, utilising data already recorded and stored electronically clearly marked DUPLICATE. <p>A requirement also exists for in scope providers to submit data for central analysis utilising the Commissioning Data Sets (CDS) version 6.3 submissions (DAPB0092)</p>
Scope	<p>This Information Standard is mandatory (MUST implement the requirements described in this document) for secondary care NHS funded healthcare providers in England.</p> <p>Issuing of a fit note is required in situations as described by Department for Work and Pension (DWP) guidance Fit note - GOV.UK (www.gov.uk).</p> <p>Data extraction to support national analysis of secondary care provider use of fit notes will be facilitated by the Commissioning Data Sets (CDS), from version 6.3. This will be merged for publication with the existing extraction of fit note data from GP practices in England Fit Notes Issued by GP Practices - NHS Digital.</p>

	<p>DWP will work with NHS Digital on the next version of the Mental Health Services, and Maternity Services datasets standard to include the appropriate fit note data collection.</p> <p>The transfer of information relating to the issuing of a fit note between secondary care and primary care using the Transfer of Care standard is not in scope at present. However, if local solutions exist that facilitate this exchange, then they can be used.</p>
Release	
Release Number	Amd 34/2021
Release Title	Initial release
Description	<p>This initial release establishes the eMED3 template electronically to allow its completion and issuing to the patient in secondary care. Fit notes are completed by the issuing Registered Medical Practitioner, Nurse, Pharmacist, Physiotherapist, or Occupational therapists.</p> <p>Data submission for central analysis is facilitated by the CDS, from version 6.3.</p>
Implementation Date	<p><u>System Conformance</u></p> <p>Development and implementation of this standard should start in November 2022.</p> <p><u>Health and Care Organisations</u></p> <p>From November 2023, providers of NHS-funded secondary care activity, as defined in this Information Standard, MUST be fully conformant.</p>
Full Conformance Date	30 November 2023, which caters for establishing processes to issue eMED3, SNOMED CT conformance and alignment with CDS version 6.3 submission timetable.

3. Requirements and conformance criteria

This section describes the requirements that support this Information Standard. The key words **MUST**, **SHOULD** and **MAY** are used as defined in [RFC2119](#) namely:

- **MUST** - This word, or the terms "REQUIRED" or "SHALL", means that the definition is an absolute requirement of the specification.
- **SHOULD** - This word, or the adjective "RECOMMENDED", means that there may exist valid reasons in particular circumstances to ignore a particular item, but the full implications must be understood and carefully weighed before choosing a different course.
- **MAY** - This word, or the adjective "OPTIONAL", means that an item is truly optional.

Details of how the requirements can be monitored and measured are described in the associated conformance criteria.

The supporting technical specification **must** be read in conjunction with this document, it describes the technical requirements to implement this standard.

3.1 NHS Funded Secondary Care Healthcare Providers

Reference	Requirement
REQ4011-01	NHS funded secondary care healthcare providers MUST read the Information Standard Requirements Specification (this document) in conjunction with the Implementation Guidance to understand how the Standard is applicable to them.
REQ4011-02	NHS funded secondary care healthcare MUST review their IT system(s) against this Information Standard (all published documents) to identify and make any changes required to their IT systems and business processes to ensure compliance with the Information Standard.
REQ4011-03	NHS funded secondary care healthcare providers MUST review current practices to identify how this standard will be supported by existing functions and clinical practice.
REQ4011-04	When required NHS funded secondary care healthcare providers MUST complete and issue eMED3 fit notes to the patient following completion of defined template (see section 4). By default, the fit note should be issued electronically to the patient, using an available system such as email. If requested a fit note should be issued on paper.
REQ4011-05	When required NHS funded secondary care healthcare providers MUST issue duplicate eMED3 fit notes to the patient.
REQ4011-06	As defined by current regulations eMED3 MUST only be issued by registered medical practitioners, nurses, pharmacists, physiotherapists or occupational therapists.
REQ4011-07	Details of all issued fit notes MUST be submitted for central analysis utilising CDS, from version 6.3. DAPB0092 .

3.2 NHS Applicable IT Systems

Reference	Requirement
REQ4011-08	Where the local NHS IT system uses Spine Role Based Access Control (RBAC), the activity codes MUST be used to allow access to eMED3. The Technical Specification describes access control in more detail.
REQ4011-09	The eMED3 transaction MUST be able to be cancelled at any time during the completion of the eMED3 template.
REQ4011-10	The eMED3 template (see section 4) MUST be pre-populated with data from the local Electronic Patient Record (EPR) in compliance with defined requirements. The Technical Specification describes completion of the template in full detail.
REQ4011-11	The eMED3 template MUST be able to be fully completed, including amendment of pre-populated data.

Reference	Requirement
REQ4011-12	The completed eMED3 template MUST be previewed to the user to allow confirmation of accuracy before issuing to the patient.
REQ4011-13	All mandatory items MUST be completed before the fit note can be issued.
REQ4011-14	Completed fit note data MUST be saved to the patient record. Robust auditable details must be retained on the system that will identify the issuer if required.
REQ4011-15	By default, the newly completed fit note MUST be sent electronically to the patient using an available mechanism (such as email). If requested by the patient the fit note may be printed on plain paper. The format of the fit notes is defined by the technical specification.
REQ4011-16	If requested by the patient duplicate fit notes MUST be able to be issued by those with required access rights, overlaid with 'DUPLICATE'. The Technical Specification describes this requirement in more detail.
REQ4011-17	If a fit note has been completed, but not yet saved to the patient record, the option MUST exist to amend included data. Technical specification describes this requirement in more detail.
REQ4011-18	The ability MUST exist for each Registered medical practitioner, Nurse, Pharmacist, Physiotherapist, or Occupational therapist to view all eMED3 forms issued to an individual patient within that provider.
REQ4011-19	A unique, non-identifying, linking identifier MUST be created to allow linkage of fit notes issued to the same patient for the same period of sickness. Technical specification describes requirement in more detail.
REQ4011-20	Details of all issued fit notes MUST be included within the CDS, from version 6.3. The DAPB0092 specification defines this requirement.
REQ4011-21	The issue of a fit note must be recorded on the patient record and linked to the patient's NHS number. This will allow the fit note to be shared through various systems using the NHS number as the identifier.

3.3 Conformance Criteria

This section describes the tests that can be measured to indicate that this information standard is being used correctly by NHS funded healthcare providers and their local IT system suppliers.

Reference	Criteria
CNF4011-01	eMED3 template is only accessible to– registered medical practitioners, nurses, pharmacists, physiotherapists, or occupational therapists. Requirements: 1, 2, 3, 6 and 8

Reference	Criteria
CNF4011-02	<p>eMED3 is prepopulated from local patient record and able to be fully amended by registered medical practitioners, nurses, pharmacists, physiotherapists, or occupational therapists to allow accurate description of patient circumstance.</p> <p>Requirements: 4, 8, 9, 10, 11 and 12</p>
CNF4011-03	<p>eMED3 once fully completed able to be issued by default electronically to the patient or if requested able to be printed and handed to the patient.</p> <p>Requirements: 12, 13, 14, 15, 16 and 17</p>
CNF4011-04	<p>Duplicate eMED3 able to be issued.</p> <p>Requirements: 4, 5, 8, 9, 10, 12, 15, 16 and 18</p>
CNF4011-05	<p>Issued fit notes are stored in patient record as constituent data items, allowing a duplicate to be issued as needed.</p> <p>Requirements: 12, 14 and 18</p>
CNF4011-06	<p>Issued fit notes for the same patient for the same period of sickness can be linked.</p> <p>Requirement: 19</p>
CNF4011-07	<p>Details of all issued fit notes to be included in CDS submission from CDS version 6.3, as described in DAPB0092.</p> <p>Requirements: 7 and 20</p>

Full technical details are described in the supporting eMED3 Technical Specification.

4. eMED3 template 2022

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name

I assessed your case on:

and, because of the following condition(s):

I advise you that:

you are not fit for work.

you may be fit for work taking account of the following advice:

If available, and with your employer's agreement, you may benefit from:

- a phased return to work amended duties
- altered hours workplace adaptations

Comments, including functional effects of your condition(s):

This will be the case for or from to

I will/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Issuer's name

Issuer's profession

Date of statement

Issuer's address

Unique ID: Med 3 04/22

What your advice means

'You are not fit for work'

Your health condition means that you may not be able to work for the period shown. You can go back to work as soon as you feel able to and, with your employer's agreement, this may be before your fit note runs out.

'You may be fit for work'

You could go back to work with the support of your employer. Sometimes your employer cannot give you the support you need and if this happens your employer will treat this form as though you are 'not fit for work'. You do not need to get another of these forms.

For more information please visit www.gov.uk and type 'fit note guidance for patients and employees' into the search field. Fit note guidance for employers is also available.

Data from **page 1** of this form may be collected to learn about national patterns of sickness absence. Individuals will not be identified. Find out more at www.gov.uk/dwp/fit-note-data

Fill in the **Your details** section. You can ask someone to do this for you if you cannot fill in your details yourself.

Your details – Please use BLOCK CAPITALS

Surname

Other names

Address

Postcode

Date of birth Mobile

NI number

What you need to do now

- **If you are employed:** Please show this form to your employer. You could get Statutory Sick Pay (SSP) which is paid by your employer. If your employer cannot pay you SSP they will give you form **SSP1** to claim benefits.
- **If you are self-employed:** You could claim benefits.
- **If you are already claiming benefits:** Please send this form to the office dealing with your claim.
- **If you need to make a claim to benefits:** Visit www.gov.uk/browse/benefits or phone **0800 328 5644** (8am to 6pm Monday to Friday). Textphone users call **0800 328 1344**.

5. Data Collection

NHS Digital will collect and publish aggregated, anonymised data on patients who have been issued with a fit note using the Commissioning Data Set (CDS), from version 6.3 (DAPB0092). The collection primarily utilises SNOMED CT for recording return to work advice and the reason for issuing the fit note. An option does exist to supply reason for issuing the fit note using ICD-10 whilst SNOMED CT compliance is achieved.

Data will be collected, on behalf of the Department for Work and Pensions (DWP) to:

- undertake research analysis to inform policy relating to employment and sickness absence
- help identify geographic level differences in return to work so that national and local providers can respond to provide appropriate services.

6. Issues and Maintenance

To support the implementation of this information standard supporting documentation, including the implementation guidance and technical specification are available. Any persistent issues should be fed back to the standard's developers. Feedback will be used by the developers for future development and to improve implementation of the standard. Send feedback to fitnote.team@dwp.gov.uk (please include 'eMED3' in subject line).