

LOCAL GOVERNMENT PENSION SCHEME 2008
3rd Tier III Health Retirement Review Certificate for a suspended 3rd Tier Pensioner
Review Taking Place Within 3 Years of Date of Original Date of Leaving

MEDICAL CERTIFICATE PROVIDED BY AN INDEPENDENT, APPROVED, DULY QUALIFIED REGISTERED MEDICAL PRACTITIONER IN ACCORDANCE WITH REGULATIONS 20 AND 31 OF THE LOCAL GOVERNMENT PENSION SCHEME (BENEFITS, MEMBERSHIP AND CONTRIBUTIONS) REGULATIONS 2007 (as amended) IN RESPECT OF A 3RD TIER PENSIONER WHOSE PENSION IS CURRENTLY SUSPENDED AND THE REVIEW IS TAKING PLACE WITHIN 3 YEARS OF THE ORIGINAL DATE OF LEAVING

PART A: To be completed by the employer

Surname of employee: _____ Title _____

Forenames: _____ Date of Birth: _____

Former Employer: _____ NINo: _____

Home Address: _____

Nature of Former Employment: (Job description attached) _____

Former Position (post Title): _____ Date Former Employment Ceased: _____

The former employer named above was, at the date of cessation of their former position, certified as being, on the balance of probabilities, permanently incapable (*see note 1*) of discharging efficiently the duties of his/her former employment with his/her former employer because of their ill health or infirmity of mind or body, and that, although having a reduced likelihood of being capable of undertaking any gainful employment (*see note 2*), whether in local government or elsewhere, before age 65, it was nevertheless felt likely that he/she would be capable of undertaking any gainful employment (*see note 2*) within 3 years of the date of cessation of employment. He/she was awarded a short-term, reviewable, 3rd tier pension. The pension was subsequently suspended on the grounds that he/she had undertaken, or had become capable of undertaking, any gainful employment (*see note 2*) within 3 years of the date of cessation. The person has now requested a further review (within 3 years of the date of cessation of employment) claiming that their position has changed and they are no longer capable of undertaking (*see note 6*) any gainful employment (*see note 2*) within 3 years of the date of cessation.

PART B: To be completed by the approved (*see note 3*) registered medical practitioner (please tick appropriate boxes)

Please tick either box 1 or box 2

(1) I hereby certify that, in my opinion, having considered the ill health or infirmity that originally led to the termination of the employment of the person named in Part A, that person

IS STILL 1 IS NO LONGER, DUE TO THAT CONDITION 2 capable of undertaking (*see note 6*)

any gainful employment (*see note 2*) within three years of the date of leaving shown in Part A.

Where box 1 has been ticked, please tick either box 3 or 4:

(2) I certify that, in my opinion, the former employee named in Part A:

WAS 3 WAS NOT 4 at the date of application for early payment of benefits shown in Part A, and on

the balance of probabilities, permanently incapable (*see note 1*), because of ill health or infirmity of mind or body, of discharging efficiently the duties of his/her former employment.

Where Box 3 has been ticked, please tick Box 5 or Box 6.

I certify that, in my opinion, the **current** ill health or infirmity of the person named in Part A

IS 5 IS NOT 6 likely to prevent him/her from undertaking (*see note 6*) any gainful employment (*see note*

2), whether in local government or elsewhere, within 3 years of the date of application shown in Part A or, if earlier, before age 65.

If Box 5 has been ticked and the person named in Part A is under age 55 at the date of application shown in Part A, please tick Box 7 or Box 8

I certify that, in my opinion, the person named in Part A

WAS **7** **WAS NOT** **8** at the date of application for early payment of benefits shown in Part A,

permanently incapable by reason of disability caused by physical or mental infirmity of engaging in any regular full-time employment (NOTE: The answer is used to determine whether the pension should be immediately increased under Pensions Increase legislation).

PART C: GENERAL STATEMENT

I DO / DO NOT (*delete as appropriate*) attach a copy of my full report/assessment and I CERTIFY THAT:

- a) I hold a diploma in occupational health medicine (D Occ Med) or an equivalent qualification issued by a competent authority in an EEA State, which has the meaning given by the General and Specialist Medical Practice (Education, Training and Qualification) Order 2003, or I am an Associate, a Member, or a Fellow of the Faculty of Occupational Medicine (AFOM, MFOM or FFOM) or an equivalent institution in an EEA State

AND

- b) I have given due regard to any guidance issued by the Secretary of State when completing this certificate.

Signed: _____ Date _____
(Signature of independent registered medical practitioner) (see note 8)

Name: _____ Qualification(s) _____
(Printed name of independent registered medical practitioner) (see note 8)

Approved OH Practitioner's official stamp to be applied here

PLEASE SEE ATTACHED IMPORTANT NOTES ON PAGE 3

IMPORTANT NOTES

- (1) 'Permanently incapable' means that the former employee was, more likely than not, incapable until, at the earliest, their 65th birthday.
- (2) 'Gainful employment' means paid employment (whether in local government or elsewhere) for not less than 30 hours in each week for a period of not less than 12 months. It does not have to be employment that is commensurate in terms of pay and conditions with that of the person's former employment.
- (3) The independent registered medical practitioner signing the certificate must have been approved for this purpose by the Pension Fund administering authority.
- (4) If Box 2 is ticked, the former employer can determine to award an enhanced (2nd tier) ill health pension, payable from the date of their determination. In deciding whether the person meets the criterion for Box 2, the independent registered medical practitioner must assess whether, in his/her opinion, the person is no longer capable of undertaking (see note 6) any gainful employment (see note 2) within 3 years of the date of leaving shown in Part A of the form **purely as a result of the condition that had originally led to the termination of their employment.**

If the person is:

Still not capable of undertaking (see note 6) any gainful employment (see note 2) within 3 years of the date of leaving shown in Part A, or

No longer capable of undertaking (see note 6) any gainful employment (see note 2) within 3 years of the date of leaving shown in Part A of the form **but this is due to a condition beyond that which had originally led to the termination of their employment**

then Box 1 should be ticked.

If box 1 is ticked, the suspended 3rd tier pension will **not** be brought back into payment.

However, if Box 1 is ticked, the independent registered medical practitioner should then consider the questions at Box 3 and Box 4. This is because, as Box 1 has been ticked, the suspended pension can be treated as if it were a deferred pension and be brought into payment at an **unenanced** rate if the scheme member is permanently incapable (see note 1), because of ill health or infirmity of mind or body, of discharging efficiently the duties of his/her former employment and is not capable of undertaking (see note 6) any gainful employment (see note 2) within 3 years of the date of application shown in Part A or, if earlier, before age 65 **but the reason they are no longer capable is due to a condition beyond that which had originally led to the termination of their employment, (i.e. it is not purely due to the condition that had originally led to the termination of their employment),** in which case the independent registered medical practitioner would tick Boxes 3 and 5.

If Box 6 is ticked, the suspended pension will not be brought back into payment (neither as a 3rd tier pension nor as a deferred pension into payment).

- (5) It is highly unlikely that Box 3 would not be ticked given that a person with a suspended 3rd tier ill health pension will already have been assessed, prior to their employment being terminated, as being permanently incapable, because of ill health or infirmity of mind or body, of discharging efficiently the duties of his/her former employment.
- (6) The independent registered medical practitioner is providing an opinion on the person's capability of undertaking any gainful employment based solely on the effect the medical condition has on the ability to undertake gainful employment.
- (7) The independent registered medical practitioner signing the certificate does not have to be a different independent medical practitioner to the one who originally certified the scheme member's permanent incapacity at the date of leaving i.e. the same practitioner can sign this certificate too.