



# Guide to Occupational Health (OH) Services

Network Rail

January 2025

Version No. 1

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# 1. Occupational Health Services

The aim of Network Rail's Occupational Health (OH) service user guide is to ensure Network Rail managers are clear about what they can expect from the Occupational Health (OH) service.

It also provides guidance on how line managers can communicate with the service to ensure the service delivers the best support to Network Rail colleagues and managers.

Occupational health is important for looking after the physical and mental health of Network Rail colleagues.

It's about preventing health issues as well as adapting your workplace to support people's needs, health, safety, and wellbeing.

But how do you do an occupational health referral? How to you contact Occupational Health with a query? And why is occupational health important? This OH Service user guide will help you look after your people at work, whether you manage one employee or a large team.

This user guide will help you to find out more about **who we are and how to contact us**. Network Rail's occupational health service helps to equip managers with the information and tools they need to manage the health and wellbeing of employees and provide training on how to get the best out of Occupational Health.

This document is designed as a reference guide to support the understanding of the available services and support available. It describes the current arrangements available to assist with the management of employees' health risks at all stages from pre-employment to retirement.

Please ensure you regularly visit the [Occupational Health Service Website](https://occupationalhealth.networkrail.co.uk/) (<https://occupationalhealth.networkrail.co.uk/>) to ensure you have the most up to date version of this User Guide (found in Resources).

The main elements of the Occupational Health Service are listed below. Most are available via [OrchidLive](#).

Please note-Health, safety, and Wellbeing (HSW) Medicals (Competence Specific Medicals) and Health Surveillance Telephonic (HST) screening assessments are run as a programme supported by NRSS and the Regional/Route and Function Occupational Health and Wellbeing Managers. Therefore, there is no requirement for managers to refer on Orchid live for these assessment types.

OH Services	Description
Helpline – 0800 3160066	<ul style="list-style-type: none"> <li>The helpline is open 08.30 until 16.30 Monday to Friday to offer advice and guidance on any aspect of the service</li> </ul>
Pre-employment Health Screening	<ul style="list-style-type: none"> <li>Non-safety critical posts</li> <li>Safety critical posts</li> </ul>

<b>Management Referrals</b>	<ul style="list-style-type: none"> <li>• Performance Attendance management</li> <li>• Case Management</li> <li>• Case Review</li> <li>• Case Conference</li> <li>• Ill health retirement assessments</li> </ul>
<b>Health Safety and Wellbeing Medicals For track workers and those in safety critical posts</b>	<ul style="list-style-type: none"> <li>• Trackside</li> <li>• Signaller</li> </ul>
<b>Health Assessment</b>	<ul style="list-style-type: none"> <li>• HGV/PCV Driver Medicals</li> <li>• Air Observer</li> <li>• Forklift Truck (FLT)/Buggy Driver</li> <li>• NDT Vision Testing</li> <li>• Night Worker Questionnaires</li> <li>• Working at Heights Assessment</li> <li>• Electromagnetic fields at Work Assessment</li> </ul>
<b>Health Surveillance</b>	<ul style="list-style-type: none"> <li>• Hand Arm Vibration Syndrome (HAVS)</li> <li>• Noise at Work Audiometry</li> <li>• Respiratory</li> <li>• Respiratory Crystalline Silica (RCS)</li> <li>• Skin</li> </ul>

## 2. Standard Types of Referrals

### 2.1 Pre-Employment Referrals

When you are employing new employees, it is important to make sure that they are safe and medically fit for their role. It ensures they feel supported and cared for and supports Network Rail's responsibility as an employer, protecting the business and helping prevent problems down the line.

Safety Critical (SC) worker and Non-Safety Critical pre-employment referrals are managed by NRSS and the OH Service.

There is therefore no requirement for a manager to refer for a pre-employment medical.

Following the pre-employment OH assessment an OH report will be issued to the Network Rail onboarding team to share with the manager for the specific role.

The OH report will include fitness advice for the specific role and if any adjustments require to be considered, with clinically justified advice.

## 2.2 Performance and Attendance Management - (Management Referral)

Performance and Attendance Management referrals are applicable to those managers who require advice regarding the management of an employee's sickness absence, attendance, or concerns about general health in relation to their role.

**Advice that will be received from Occupational Health Service can include the following:**

- Fitness to return to work
- Prognosis for further improvement or deterioration in health
- Recommendations for therapeutic intervention or lifestyle alteration
- The existence of a medical condition in repeated short-term absence cases
- Prognosis and timescale for recovery
- Reasonable adjustments
- Anticipated date of return to work
- Whether the relevant UK Disability legislation is likely to apply

Up to 3 additional specific questions can be asked by the referring manager.

Early intervention performance and attendance management referrals completed by highly experienced Occupational Health Clinicians will help to facilitate the much faster return to work of employees off sick or experiencing issues in the workplace.

Following completion of a performance and attendance management referral if the employee provides same time informed consent for the OH report to be released to the named referring manager/s, the OH report will be released on the Orchid line manager dashboard to view within 1 working day (24 hours) of assessment.

Where the employee's consent choice is prior sight, to view the OH report in advance of the named referring manager/s, the report will be encrypted and emailed to the employee's Network Rail email address or sent by post if employee is not accessing Network Rail emails. For prior sight reports, the employee has 5 working days to respond to the OH Service if they have factual inaccuracies; if no response is received, the OH report will be released after 5.

**How to request a Performance and Attendance Management referral on [Orchidlive](#)**

To refer for Performance and Attendance Management referral, on [Orchidlive](#) the referring manager/HR selects:

- Refer an employee
- Enter name of employee
- Selects 'Management Referral'
- Selects 'Performance and Attendance Management' for reason for referral

- Completes all referral fields, ensure employee contact details up to date and correct
- Obtains verbal informed consent from employee to refer
- Submits referral

## 2.3 Case Conference Referrals

### Pre-Referral Case Conference

Pre-case Conference Meeting can be requested by named referring managers or named HR colleagues. A TEAMS call or telephonic call will be scheduled between the OH clinician and referring manager/s. The purpose of the case conference is to discuss elements of the case and review the reasons for OH referral. Understand the direction for the referral and to advise if further 'context' may be beneficial for the case referral. Informed consent must be obtained from the employee by the referring manager prior to a case conference referral and the line manager must inform the employee who will be in attendance. (Line manager, OH Clinician and named HR (if attending)). Case conference notes any agreed action must be recorded by the referring manager or referring HR if in attendance.

If an action from the pre- referral case conference is to refer for a performance and attendance management referral, the referring manager must obtain informed consent from the employee.

### Post Referral Case Conference

Following a Performance and Attendance Management OH report being received, if the named referring manager/s or named HR referrer would like the opportunity to discuss the advice provided within the OH report then they can refer on [Orchidlive](#) for a case conference.

Case conference notes any agreed action must be recorded by the referring manager or referring HR if in attendance.

How to request a case conference referral on [Orchidlive](#).

To request a case conference referral on [Orchidlive](#), manager selects.

- Refer an employee
- Enter employee name
- Select 'Management referral'
- Select 'Case Conference' as referral type
- In additional notes record 'Pre referral case conference' or 'Post referral case conference'
- Obtains verbal informed consent from employee to refer
- Submits referral

## 2.4 Health Safety and Wellbeing (HSW) Assessments

Line Managers will only need to raise a HSW assessment if a colleague moves into a new role or there is a health issue identified. All other colleagues will fall into the rolling programme.

Trackside and Safety critical workers require assessment of their fitness to work which exceeds the assessment standard applied to non-safety critical workers. The maximum validity of medical

certificates issued and frequency of assessments are determined by the age of the individual at the date of the assessment.

Health, Safety and Wellbeing (HSW) compliance medical assessments that includes a compliance medical completed in accordance with Network Rail Competency Specific medical fitness standards NR/L2/OHS/00124, drug and alcohol screening completed in accordance with Drugs, alcohol and substance misuse in the workplace standard NR/L2/OHS/00120 [ Issue: 7 ], health surveillance for Network Rail individuals and an optional wellbeing assessment for individuals performing safety critical roles. Network Rail standards are accessible at: [Network Rail Standards and Controls](#)

- Level 1 HSW medicals are booked for all safety critical workers working on the rail infrastructure.
- Level 5 HSW medicals are booked for Signaller roles.

### **How HSW Medicals are arranged**

NRSS provide HSW medical referral information, on Manager's behalf to the OH Service to ensure HSW medicals are completed in advance of expiry date.

OH practitioners complete HSW medicals and completes HSW outcome report that is issued to the employee's manager on the Orchid line manager dashboard.

For cases that require drug screening laboratory analysis the HSW outcome report is issued on receipt of the drug and alcohol results

For HSW medicals, the OH practitioner will update Sentinel. NRSS will also upload this information into Oracle

## **2.5 Health Surveillance Telephone (HST) Screening appointments**

For employees with potential exposure to respiratory, noise, skin, hand and arm vibration or respiratory crystalline silica (RCS).

An annual HST programme is in place delivered by the OH Service.

NRSS manage the annual 13 period programme with the OH Service.

Employees attend a health surveillance telephone (HST) screening appointment, and a HST outcome report is provided on the [Orchidlive](#) line manager dashboard to confirm fitness.

Following a HST assessment, where onward health surveillance is deemed clinically required the OH Service will refer on for the relevant health surveillance and following completion of health surveillance a fitness outcome certificate will be issued (with the employee's verbal consent) to the employee's manager. HST assessments are completed annually.



## Health Surveillance Assessment Types.

Health Surveillance assessments currently take place if deemed clinically required following an HST or HSW assessment.

## 2.6 Hand Arm Vibration Syndrome (HAVS) Assessment

### **HAVS Tier 1 - Initial or baseline assessment & HAVS Tier 2 - Annual (screening) questionnaire**

Applicable for new employees or those changing jobs roles that will be exposed to HAVS for the first time or annual screening for employees already identified as being exposed to HAVS.

### **HAVS Tier 3 – Assessment by qualified practitioner**

This is a face-to-face clinical assessment carried out by a suitably trained Occupational Health Advisor that is arranged if any potential HAVs symptoms identified at a Tier 1 or Tier 2 HAVs assessment,

### **HAVS Tier 4 – Formal diagnosis**

The employee will be automatically escalated to HAVS Tier 4 where clinically indicated during a HAVS Tier 3 assessment. The employee will be contacted by telephone and invited to attend the earliest appointment at the most convenient clinic.

The assessment with an Occupational Physician will take 60 minutes and the doctor will do a physical test.

Dependent on the level 3 results they may repeat the contents of the tests. If a formal diagnosis is made by the Occupational Physician, the Occupational Health Service has a responsibility to inform Network Rail and Network Rail are responsible for reporting cases in accordance with RIDDOR 2013.

## 2.7 Audiometry (Noise) Surveillance

To comply with Control of Noise at Work Regulations 2005 and Network Rail Company Standards, an assessment of an employee's hearing is required for all those regularly exposed to noise levels above the upper exposure action value and for individuals at greater risk if exposed between the lower and upper exposure action values.

It is recommended that the following tests are completed:

- Initial baseline test on commencement of role; followed by an annual check for the next two years then
- Three yearly checks are required thereafter, unless cause for concern is raised earlier.
- Those employees exposed to frequent/very loud noise should also have more frequent audiograms.
- based on a risk assessment.

Audiometry surveillance will be progressed via the HST managed programme arranged between NRSS and the OH Service.

## 2.8 Respiratory Surveillance

Lung function assessments should be conducted to protect employees' health by the early detection of adverse effects caused by exposure to hazardous substances. It is not a substitute for preventing or adequately controlling exposure, but it ensures that any adverse effect is detected at the earliest stage, and it can also help in evaluating the effectiveness of the control measures detailed in the COSHH assessment.

## 2.9 Respirable Crystalline Silica (RCS) Health Surveillance

Exposure occurs in those staff working with the ballast used along the railway network. Guidance from the Health and Safety Executive (HSE) states that employees should be subject to annual surveillance incorporating review of a health questionnaire and lung function testing. Employees who have been exposed to RCS for 15 years should also have a chest x-ray (anterior/posterior chest x-ray). They should then have further x-rayed every 3 years as part of the surveillance programme.

RCS health surveillance will be progressed via the HST managed programme arranged between NRSS and the OH Service.

When an employee declares, they are exposed to RCS, the manager will be contacted to confirm exposure before the employee is referred on for RCS HS appointment and CXR if due.

## 2.10 Fitness for Task Referral Types

### 2.10.1 Air Observer Medical

This is a periodic health assessment applicable for those employees who operate the company helicopter, which will assess the employee's fitness to fulfil their role.

How to request an Air Observer referral on [Orchidlive](#).

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'Air Observer'
- Complete referral form
- Gain inform consent from employee to refer
- Submit referral

### 2.10.2 Working at Heights

A place is defined 'at height' if a person could be injured falling from it, even if it is at or below ground level. Such activities require to be identified by means of job risk assessments but may involve activities such as climbing ladders or scaffolding or working with overhead power lines.

It is anticipated that all employees engaged in such activities would be educated in safe working practices and be equipped with appropriate PPE such as safety harnesses, hard hats, etc., to comply with the HSE Work at Height Regulations 2005. Any underlying health condition, which places the

individual at risk of sudden loss of consciousness or an inability to maintain balance, could result in a risk of serious injury.

How to request Working at Heights referral:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'Working at Heights'
- Gain informed consent from employee to refer
- Submit referral

### 2.10.3 Night Worker Assessments

**The Working Time Regulations 1998 - Regulation 7** provides a framework on the requirement for and provision of health assessments for night workers:

- Before being assigned to night work
- At regular intervals while undertaking night work

The definition of a Night Worker is any employee who works at least three hours of his/her regular working time during nighttime (i.e. between 11 pm and 6 am – if there is no agreement stating otherwise)

An employer should ensure that any night worker has the opportunity of a free health assessment, normally on an annual basis where a decision will be made by Occupational Health as to whether:

- The applicant/employee is fit to undertake night work
- OR**
- Additional information is required

How to request Night Worker referral:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'Night Worker'
- Complete referral form
- Gain informed consent from employee to refer
- Submit referral

### 2.10.4 Vision Testing for NDT (non-destructive testing) Personnel Ultrasonic Testing

NDT qualified operatives require evidence of training, professional knowledge, skill, and experience as well as physical fitness to enable NDT personnel to properly perform NDT tasks. The

Occupational Health requirement within the qualification process is to ensure the client meets the required vision standard to carry out the role.

How to request NDT vision referral:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'NDT vision'
- Complete referral form
- Gain informed consent from employee to refer
- Submit referral

## 2.10.5 Forklift Truck (FLT) Medical - Mechanical Handling Equipment

Employees operating a FLT are expected to meet the 'Group 1' driving standards. Assessment of fitness to drive a FLT must be undertaken when an employee is recruited, at 5 yearly intervals for employees over the age of 40 and annually for employees aged 65 years or over. Following the assessment, the Occupational Health Nurse Advisor will complete an Outcome Summary Report (OSR) for the referring manager indicating fitness for employment and detailing any issues identified.

## 2.10.6 Buggy Driver (Station Vehicle Driver) Medical

Network Rail employs Station Vehicle Drivers (Buggy Drivers) who transfer goods and members of the public around the station in a small buggy vehicle. These are employees who drive other people or goods about as part of their job. There is therefore a requirement to medically assess these employees, existing or recruits, against the recommended and legal standards. The health assessment requires the employee to meet the DVLA 'Group 1' Medical standards. Group 1 licences are issued until age 70, unless restricted to a shorter duration for medical reasons, and are renewed every 3 years thereafter. Medical assessment is advised at employment, at age 45 and at 5 yearly intervals until age 65.

How to request forklift truck or buggy referrals:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'FLT and buggy driver'
- Complete referral form
- Stating type of vehicle employee is operating
- Gain informed consent from employee to refer
- Submit referral

## 2.10.7 Large Goods Vehicles/HGV – Group 2 Drivers

The purpose of an HGV Assessment is to ascertain an employee's fitness to drive the vehicles which fall into the DVLA Group 2 category. Group 2 qualifying vehicles include large lorries (category C) and buses (category D). The medical standards for Group 2 drivers are much higher than those for Group 1 because of the size and weight of the vehicle. This is also reflected in the higher risk caused by the length of time the driver may spend at the wheel during his/her occupation.

All drivers who obtained entitlement to Group 1, category B (motor car) before 1 January 1997 have additional entitlement to category C1 and D1. C1 is a medium size lorry of weight between 3.5 and 7.5 tonne. D1 is a minibus of between 9 and 16 seats, not for hire or reward.

Holders of C1 and D1 entitlement retain the entitlement until their licence expires or it is medically revoked. On subsequent renewal the higher medical standards applicable to Group 2 will apply.

Group 2 licences, Lorries (category C) or buses (category D) are normally issued at age 21 years and are valid till age 45 years. Group 2 licences are renewable thereafter every five years to age 65 years unless restricted to a shorter period for medical reasons.

From age 65 years, Group 2 licences are renewable annually without upper age limit. All Group 2 licence applications must be accompanied by a completed medical application form D4. This must be completed by a qualified medical practitioner.

How to request Group 2 Driver Medical:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'Group 2 Driver'
- Complete referral form
- Gain informed consent from employee to refer
- Submit referral

## 2.10.8 Electromagnetic Fields at Work

Electromagnetic fields (EMF) are produced whenever a piece of electrical or electronic equipment (i.e. mobile phone, electric hand-held tools, welding (arc & spot) equipment, etc) is used. EMFs are present in virtually all workplaces and if they are of high enough intensity, action may need to be taken to ensure workers are protected from any adverse effects.

Exposure to high levels of EMFs can give rise to sensory and health effects that may be irritating or unpleasant. The effects that occur depend on the frequency range and intensity of the EMFs to which a worker is exposed. Examples of sensory effects can include Nausea, vertigo, metallic taste in the mouth, flickering sensations in peripheral vision. Examples of health effects can include tingling, muscle contraction, heart arrhythmia.

The CEMFAW Regulations 2016 require the employer to:

- Assess the levels of EMFs to which employees may be exposed.
- Ensure that exposure is below a set of Exposure Limit Values.
- When appropriate assess the risks of employee's exposure and eliminate or minimise those risks.
- When appropriate, devise and implement an action plan to ensure compliance with the exposure limits.
- Provide information and training on the risks (if any) posed to employees by EMFs in the workplace and details of any action you are taking to remove or control them.
- Act if employees are exposed to EMFs in excess of the ELVs.
- Provide health surveillance as appropriate.

How to request an EMF referral:

- Select 'Refer an employee'
- Enter name of employee
- Select 'Fitness for Task' referral type
- Select 'Electromagnetics Fields'
- Complete referral form
- Gain informed consent from employee to refer
- Submit referral

## 3. Specialist Services

Special Services	Description
Medication Enquiry Service	<ul style="list-style-type: none"> <li>• Online</li> <li>• Telephone</li> </ul>
Drug and Alcohol Testing	<ul style="list-style-type: none"> <li>• Random</li> <li>• For Cause</li> <li>• Post Incident</li> </ul>

### 3.1 Medication Enquiry Service

Access to the Medication Enquiry Service is made via the Chemist-on-Call service. Chemist-on-Call is a medication checking service designed to ensure employees who carry out safety critical duties on or around the Network Rail infrastructure are not suffering from adverse side effects of medication whilst at work. Connection to the Medication Enquiry Service is available 24/7 for managers of employees working in safety critical roles through the following access channels:

- Online at <https://app.chemist-on-call.com/chemist>
- Chemist-on-Call number of **08456 773001**
- Via the Occupational Health Service Helpline **0800 316 0066 option 2**

Once connected to the Medication Enquiry Service, the company name 'Network Rail' and PIN code will need to be provided.

Please see below the PIN numbers for each route businesses and business functions:

<b>Eastern –</b>	6060
<b>Southern –</b>	6061
<b>Northwest &amp; Central -</b>	6062
<b>Scotland -</b>	6063
<b>Wales and Western -</b>	6064
<b>Central Business Functions</b>	6065
<b>Route Services -</b>	6066

As part of the medication enquiry check, the caller will be asked to provide the following:

- Employee's personal details (name, phone, email)
- Employee's job role details (safety critical Y/N, Sentinel Card Holder Y/N, works alone Y/N)
- Employee's Line Manager details (name, phone, email)
- Details of the person placing the medication check
- Full name of the new medication and all current medications
- The dosage of the medication (if known – otherwise please state 'Not known')

The information provided is retained in a secure and confidential environment and is not available to anyone other than the Medication Enquiry Service team and Occupational Health Service. Once the relevant information has been provided and the medication check has been submitted to the pharmacist, the outcome will be sent to the enquiring supervisor or Line Manager's email addresses within one hour. Depending on the medication, the pharmacist may also call the individual to discuss the medication and potential side effects.

Where it is considered appropriate the service may recommend a referral to an Occupational Health clinician. If this is the case, the manager will be advised to make a Performance and Attendance management referral, via [OrchidLive](#).

[Chemist On Call Poster](#)

## 3.2 For Cause and Post Incident Drug and Alcohol testing

For Cause & Post incident Drug and Alcohol Testing can be requested by calling the Occupational Health Service helpline on **0800 316 0066**. The caller will need to select the 'For cause drug and alcohol testing' option 6 via the IVR menu available 24 hours a day, 7 days a week.

### 3.3 Activating a Call-Out

Once the caller has reached the “for cause” service on the above number (option 6), the following information will be requested:

- Your company name and drugs and alcohol PIN (1925).
- Level of service required [i.e. post incident, whistle blower or for cause (high priority)].
- Your name and contact information - they may need to contact you within the two hours following activation, therefore a direct mobile number is preferred.
- Cost centre number.
- Area and route.
- Address and directions to the location.
- This reporting point must be a safe and clearly identifiable venue (e.g. Gatehouse, Reception) The collecting officer must be escorted from this point onwards. We are not able to attend uncontrolled environments (e.g. donors’ homes).
- Site contact name and number. The collecting officer will ask for this person upon arrival. This person will need to be available for the entire duration that our collecting officer is on site.
- The category of incident (i.e. for cause or post incident).
- The number of people to be tested and whether they are Network Rail employees or contractors.

Once the information has been confirmed and the call is activated, a collection officer will attend the location within two hours.

- Breath alcohol results will be available immediately on site. NB During COVID 19 testing for the presence of alcohol is done via the urine sample and not via a breath sample.
- Urine samples will be collected by a same-day courier and taken directly to our laboratory.
- Confirmed result will be uploaded directly on to Sentinel and the Line Manager is informed.

### 3.4 Employee Assistance Programme (EAP)

The EAP service is provided by PAM Assist and is a free of charge, confidential service for information and advice, or counselling, for all Network Rail employees which is available 24 hours a day, 365 days a year. Alternatively, they can be contacted directly via the free phone number **08081 964 505**.

Support for managers is also available to enable them to talk to a qualified EAP Counsellor who will provide them with immediate recommendations to follow to help address any psychological/mental health issues of an employee and provide guidance on the employee’s fitness to remain in work, and if safety critical working should be ceased until symptoms improve/resolve.

Following the immediate issue being controlled, it may then be appropriate for the Manager to make a referral to Occupational Health using the Occupational Health portal.

[PAM Assist Employee Assistance Programme](#)



### 3.5 Physiotherapy

If an employee is currently off sick or suffering with a musculoskeletal disorder at work, please refer to physiotherapy services as a matter of priority. All injuries sustained either in or out of work will be assessed by Vita's in-house specialists and advice will be provided accordingly.

To access the physiotherapy service, employees can either refer themselves or their line manager can do a referral with the employee's consent.

Referrals can be made by calling **0800 316 0066** or emailing a [referral form](#) to [network@vhg.co.uk](mailto:network@vhg.co.uk)

[Physiotherapy](#)

### 3.6 Sharps Line

A 24-hour dedicated Sharps Helpline is available via the Occupational Health (option 4) to provide immediate and specialist advice following suspected and actual Needlestick Helpline **0800 316 0066** Injuries (NSI) and Body fluid exposure (BFE) incidents for Network Rail staff at all levels and third-party employees working on Network rail premises.

For all incidents where Occupational Health assess that the Network Rail employee requires to undergo follow up BBV (Blood-Borne Virus) testing, then this can be provided, and the case can be progressed for this via our specialist services, any such face-to-face assessments will be scheduled in the appropriately timed Network Rail clinic by the Occupational Health operations team.

## 4. Orchid and other support information

### 4.1 Referrals via Orchid Live

It's important to keep Oracle information up to date as information is used to populate fields within the Orchid Occupational Health system.

<https://networkrail.orchidlive.com/orchid/dashboard/employee/home> - [Orchid](#)



The Occupational Health Portal User Guide can be found [here](#) and on the Occupational Health Service [website](#).

## 4.2 Help and Guidance Documents

Guidance on how to make a good referral along with examples referrals are available on the Occupational Health Service [website](#) under Our Services, Management Referrals. (<https://occupationalhealth.networkrail.co.uk/our-services/our-services/management-referrals/> )

## 4.3 Cancellation of Appointments

Employees cannot cancel appointments direct with the Occupational Health Service. Should an employee wish to discuss cancelling an appointment, they must contact their line manager who will, if required, contact the Occupational Health Service to reschedule or withdraw the referral.

The exception to this is pre-employment assessments, where the prospective employee can cancel and rearrange the appointment.

## 4.4 Confirmation of Appointments

The line manager will receive an email confirmation of a scheduled appointment with an employee. It is the responsibility of the line manager to discuss the appointment to ensure the employee can and will attend.

## 4.5 Occupational Health Report

An Occupational Health Report for Performance and Attendance Management referral will provide:

- Advice on what is currently wrong from a health perspective.
- The likely long-term outcome for the condition.
- The likely return to work date or return to full duties.
- Advice on the type of work / tasks the employee can do. If work duties are affected, advice on whether this damage is likely to be short term, long term or permanent.
- A specific plan to support return to work activities, advice on adjustments, if appropriate, with clear timescales.
- Advice on disability in accordance with the Equality Act 2010.
- Answers to any specific questions (maximum of three)

If you have any queries regarding the report, please contact [OHFeedback@networkrail.co.uk](mailto:OHFeedback@networkrail.co.uk).

## 4.6 Obtaining Informed Consent

Written consent is not required to refer an employee to occupational health however the referring manager must inform the employee that they are being referred to Occupational Health, the reason for the referral, and what to expect from the process including details of the advice being sought and how it may be used.

To confirm to the Occupational Health Service that the manager has met their obligation to inform the employee about the referral, the consent declaration should be checked at the end of the referral on **Orchid Live**.

The Occupational Health Service seeks the employee's verbal informed consent to participate in a telephone consultation and to attend a face-to-face consultation. Should an employee wish to view their Occupational Health report prior to it being sent to their Line Manager, explicit consent is now required from that individual before it can be released to their Line Manager. An employee is given 5 working days to review and request any changes to a report.

Where written informed consent is required to approach the employees' GP or specialist, the Occupational Health Service will obtain this. Written informed consent is obtained at the time of consultation for Pre-placement and periodic Competence Specific Medicals.

## 4.7 The Employee's Right to Refuse to Give Consent

An employee has the right to withhold consent at any point in the Occupational Health process. However, a Line Manager may then have to decide on the employee's future fitness for work without the benefit of Occupational Health advice.

Withdrawing consent in the context of competence specific medicals may impact on an employee's ability to go trackside, as their current medical might expire should any delays be encountered.

## 4.8 Appointment Timings

The table below sets out approximate timings for common appointment types.

Service	OHT (mins)	OHNA (mins)	OHP (mins)
ONLINE - Pre-Employment (Non safety Critical) - Follow Up Appointments	n/a	*30	n/a
Health Safety Wellbeing Pre-placement Trackside Level 1 & Signaller Level 5	90 (level 1) 75 (level 5)		
Health Safety Wellbeing Medical - Trackside (Level 1) (every 3 years)	90		
Health Safety Wellbeing Medical - Signaller (level 5) (every 3 years)	75		
<b>Health Surveillance</b>			
Health Surveillance Telephone (1 yearly) Tier 1 and Tier 2 HAVs	30		
Audiometry	30		
Respiratory	20		
RCS (lung function & Questionnaire)	20		
Combined Respiratory & RCS (lung function & Questionnaire)	30		
Hand Arm Vibration - Tier 3		60	
Hand Arm Vibration - Tier 4			60
Skin		20	
<b>Performance and Attendance Management</b>			
Performance and Attendance Management Referral		60	60
Performance and Attendance Management Referral - Follow up		45	45
Ill Health Retirement - Part 1, Part 2			*180
Case Conference		60	60

Service	OHT (mins)	OHNA (mins)	OHP (mins)
<b>Train Driver Medicals</b>			
Train Driver Medical - Pre Placement	75		60
Train Driver Periodic	75		60
Driver Medical (FLT/Buggy)	30		
Night worker Questionnaire Review		*20	
Drug and Alcohol	30		
Working at Heights	30		
Confined Spaces	45		
Air Observer	45		
Group 2 (DVLA) Driver Medical			60
Electro Magnetic Field - Individuals who have pacemakers		30	
NDT Vision	45		
FME Clinical Scrutiny			30

## 5. Third Party Services

Specialist Services are additional services that may be recommended as a result of a case referral. There may be an additional charge for a specialist service.

The following table details the available Specialist Services that may be recommended by a practitioner. are available via **Orchid Live “Specialist services”**;

Specialist Service	Description
<b>Cardiologist</b>	Consultation with a specialist who will assess current medical condition and advise on treatment options
<b>Chest X-Ray</b>	Diagnostic test, mainly accessed as part of the Respiratory Crystalline Silica (RCS) program
<b>Occupational Therapy Assessment</b>	Occupational Therapy Functional Capability Assessments: objective evaluation of an individual’s functional capacity to meet the intrinsic functions and associated demands of their own job, which is carried out at the workplace.
<b>Neurodiversity Assessment</b>	Specialist Assessment to understand potential adjustment recommendations to support an individual with neuro differences at work
<b>MRI Scan</b>	Diagnostic Test-Type of scan particularly useful in diagnosis of conditions of the bone and soft tissue
<b>Neurology Assessment</b>	Specialist Consultation who will assess and diagnose current medical condition and advise on treatment options
<b>Psychiatrist Assessments</b>	Specialist Consultation to provide Specialist support when deemed clinically appropriate
<b>Psychologist Assessment</b>	Specialist Consultation to provide specialist support when deemed clinically appropriate.
<b>Specialist Services – other services not listed</b>	Other Specialist Services may be recommended where clinically appropriate and in accordance with evidence-based guidelines.

## 6. Service Level Agreement (SLAs)

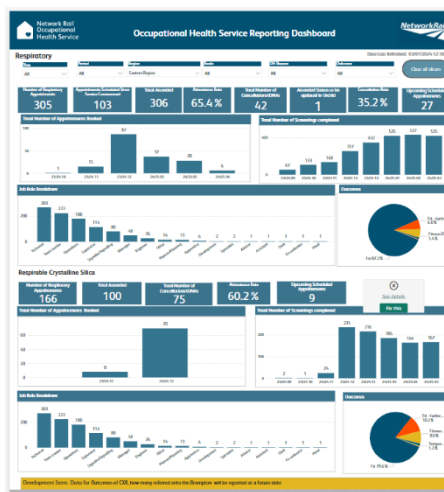
The Occupational Health Service delivers to the following SLAs:

Service Line	Average Clearance Time (Working Days)
<b>Triage of OH referrals</b>	1 working day (24 hours)
<b>Pre-employment on-line with auto generated outcome</b>	1 working day (24 hours)
<b>Pre-employment telephone appt-OHA</b>	5 working days
<b>Pre-employment face-to-face appt - OHA</b>	10 working days
<b>Pre-employment telephone appt - OP</b>	7 working days
<b>Pre-employment face-to-face appt - OP</b>	15 working days
<b>Attendance management telephone appt - OHA</b>	5 working days
<b>Attendance management face-to-face appt - OHA</b>	10 working days
<b>Attendance management telephone appt - OP</b>	7 working days
<b>Attendance management face-to-face appt - OP</b>	15 working days
<b>D&amp;A Results following Competence Specific Medical</b>	D&A results provided within 1 working day (negative) or 7 working days (non - negative) from receipt at lab.
<b>Help Desk – calls answered within 20 seconds</b>	Support services to be available Monday to Friday 8am to 6pm, excluding bank holidays

## 7. Data

Occupational Health Service data can be found on the power Bi dashboard which can be found [here](#).

Please do not contact the data analyst directly for ad hoc reports; for any data requests please use the following request form [MI Data/ Report Request Briefing form \(office.com\)](#)



## 8. Compliments and Complaints

### Compliments

Compliments are valuable, welcome and are important to help develop our service regardless of whether they are received verbally or in writing. Employees and/or managers are encouraged to email any compliments to [OHfeedback@networkrail.co.uk](mailto:OHfeedback@networkrail.co.uk).

Network Rail will record all compliments on a SharePoint tracker to enable us to understand if our services and staff are meeting the needs of our end users and as way of providing positive feedback to staff.

### Complaints

Any Network Rail employee or referring manager who has used or has been affected by the in-house occupational health (OH) service, can make a complaint regarding the service they have received. We would encourage that prior to making a complaint an attempt is made to resolve this verbally by calling the Occupational Health Service on **0800 3160066**.

If a complaint is received, regarding the Occupational Health Service, by a route/function based colleague; for example, a Human resources Business Partner (HRBP), Occupational Health wellbeing Manager (OH&WB manager) all these complaints should be directed to the OH service for investigation and resolution by submitting the complaint to [OHfeedback@networkrail.co.uk](mailto:OHfeedback@networkrail.co.uk).

The full process for making a compliment or complaint can be found on the Occupational Health [website](#)