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

Patient's name	Mr Wright				
I assessed your case on:	21/02/2024				
and, because of the following condition(s):	has covid				
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 y	our employer's agreement,	you may bene	fit from:		
a phased return to	work_	amended d	uties_		
altered-hours-		workplace c	idaptations		
1 Add 100 10 10 10	people face to face who may	594R 59 8365			
This will be the case for	8 days				
or from	21/02/2024	to	28/02/2024		
I will/will not need to ass (Please delete as applicabl	sess your fitness for work ag	gain at the en	d of this perio	od.	
Issuer's name	Dr Claire Sleight				
Issuer's profession	Doctor				
Date of statement	21/02/2024				
Issuer's address	Harcourt Medical Centre Crane Bridge Road Salisbury SP2 7TD Tel:01722 333214				

Unique ID: Med 3 04/22

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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 <u>www.gov.uk</u> 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 – Plea	se use BLOCK CAPITALS		
Surname	Mr Wright		
Other names	Gabriel Magnus		
Address	Flat 9 Elm Court, Elm Grove Road		
	Salisbury	Postcode SP1 1JN	
Date of birth	27/03/2000	Mobile 07502 986034	
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 <u>www.gov.uk/browse/benefits</u> or phone 0800 328 5644 (8am to 6pm Monday to Friday). Textphone users call 0800 328 1344.