

General Practitioners' attitudes towards patients' health and work, 2010–12

By Dr Mark Hann and Professor Bonnie Sibbald

Background to the 2012 survey

Evidence shows that being in work is generally good for health and can promote recovery, and that worklessness often leads to poorer health. In 2010, the fit note was introduced to replace the traditional sick note – thereby switching focus to what patients can do to remain in or return to work. As part of the sixth National General Practitioner Worklife Survey, conducted by the Centre for Primary Care (CPC; formerly NPCRDC, at the University of Manchester) in the autumn of 2010, 19 questions on GPs' attitudes to work and health were included in order to establish a 'baseline' against which to compare their future opinions of the fit note.

Aims of the 2012 survey

The primary aims were to reassess GPs' attitudes to the implementation of 'Improving health and work: changing lives' and to compare GPs' current attitudes with those established in the 'baseline' survey in 2010. A secondary aim was to compare GPs' current attitudes by whether they report having had training in health and work in the past year.

Methods

As in 2010, 19 questions relating to GPs' attitudes towards patients' health and work were asked in 2012. These questions were included in the seventh National General Practitioner Worklife Survey conducted by the CPC. The survey was administered by post to a randomly selected sample of 4,179 GPs from England, Wales and Scotland between September 2012 and November 2012.

The questions covered GPs' views on:

- the relationship between work and health;
- their role in, and the importance of, facilitating return to work;
- managing return to work and confidence in handling patient issues;
- perceived knowledge held around sickness certification and benefits;
- perceived impact the fit note had had on their practice;
- perceived availability of local services to support patients to return to work; and
- whether they had training in health and work in the past 12 months.

Survey sample

Of the 4,179 GPs surveyed, 1,665 GPs completed the survey (a response rate of 40 per cent). The respondent sample was broadly representative of the wider population of GPs in terms of doctors' gender and contract status, but the very youngest (aged under 35 years) and very oldest (aged 60 years or over) doctors were under-represented, whilst those aged 50-59 years were over-represented. Weights were derived to adjust for response biases.

Key findings

In 2012:

- GPs almost universally believed that work was beneficial for health.
- GPs generally agreed that it was important for them to be actively involved in helping patients return to work.

- GPs generally felt pressured to issue sickness certificates for reasons that were not strictly medical.
- GPs were generally increasingly positive about the impact that the fit note had on their consultations and patients' outcomes.
- GPs generally believed that local 'return to work' support and advisory services could be improved.

The relationship between work and health

In 2012, as in 2010, the overwhelming majority of GPs thought that work was beneficial for health and that worklessness was detrimental to people's health.

Role in, and importance of, facilitating return to work

In 2012, as in 2010, the overwhelming majority of GPs thought that helping patients to stay in or return to work was an important part of a GP's role and an indicator of success in the clinical management of people of working age.

Managing return to work and confidence in handling issues

In 2012, as in 2010, the vast majority of GPs felt that a patient did not have to be fully recovered from their condition before they were able to recommend return to work: however, the vast majority felt obliged to issue sickness certificates for reasons that were not strictly medical. The majority of GPs in 2012 felt confident dealing with patients' 'return to work' issues: compared with 2010, GPs were marginally more likely to agree that they felt confident in dealing with these issues.

Perceived knowledge held

In 2012, self-reported current knowledge of sickness certification was good, but current knowledge of the benefits system was poor. However, compared with 2010, GPs were more knowledgeable of the benefits system.

Perceived impact of the fit note on practice

In 2012:

- The majority of GPs reported positive impacts of the fit note on the quality of consultations and outcomes for patients: this was less frequently reported by Scottish GPs than English or Welsh.
- GPs were roughly evenly split on whether fit notes had lengthened consultation times or not: the majority reported that it had made no change to their practice.

In 2012, compared with 2010, GPs were more likely to agree that the fit note had:

- improved the quality of their discussions with patients;
- improved the advice they gave to patients;
- increased the frequency with which they recommended return to work; and
- helped their patients make a phased return to work.

In 2012, compared with 2010, GPs were more likely to disagree that the fit note had made no change to their practice. There was no indication that GPs perceived use of the fit note had led to an increase in consultation length between 2010 and 2012.

Perceived availability of local services

In 2012, as in 2010, only a minority of GPs perceived that good services were available locally to which they could refer patients for support or advice about return to work: Scottish GPs reported better levels of service provision than GPs in England or Wales (in both 2010 and 2012).

Training in health and work

In 2012, as in 2010, a very small minority of GPs had received training in work and health within the past 12 months; Welsh GPs were more likely to have received training in health and work than English GPs in 2012.

Conclusions

Many of the findings of the 2012 survey reiterate those of the baseline survey conducted in 2010. Generally, GPs see themselves as having an important role in promoting the health benefits of work and fit notes increasingly help them to fulfil this role. However, there is still work to do to support GPs to make best use of the fit note's full potential,

as well as increasing their awareness of, and their patients' access to, local advice and support about return to work. Some of these issues may be addressed by the independent assessment service proposed in the recent government response to the sickness absence review.

Table 1 Level of GPs' agreement with each attitude statement in 2010 and 2012

		<i>Row percentages</i>				
Attitude statement	Year	Completely disagree (%)	Somewhat disagree (%)	Somewhat agree (%)	Completely agree (%)	Don't know (%)
Q1. Work is generally beneficial for people's health	2010	0.2	0.9	26.7	72.2	
	2012	0.1	1.6	31.7	66.7	
Q2. Worklessness is generally detrimental to people's health	2010	2.3	2.4	25.7	69.6	
	2012	2.6	4.4	27.6	65.5	
Q3. Helping patients to stay in or return to work is an important part of a GP's role	2010	1.6	9.8	57.4	31.2	
	2012	2.3	7.5	54.8	35.4	
Q4. Staying in or returning to work is an important indicator of success in the clinical management of people of working age	2010	4.5	18.9	57.1	19.5	
	2012	5.1	18.8	57.0	19.1	
Q5. GPs have a responsibility to society to facilitate return to work	2010	8.9	25.4	52.1	13.5	
	2012	7.8	24.4	51.9	15.8	
Q6. A patient has to have recovered fully from their condition before I recommend return to work	2010	20.8	60.1	16.0	3.1	
	2012	21.9	57.5	18.0	2.7	
Q7. I feel obliged to give sickness certificates for reasons that are not strictly medical	2010	4.8	18.1	55.4	21.8	
	2012	4.5	18.1	56.2	21.2	
Q8. I feel confident in dealing with patient issues around return to work	2010	5.4	35.4	49.2	10.0	
	2012	5.5	32.1	51.2	11.2	
Q9. My knowledge of guidelines on sickness certification is up-to-date	2010	1.9	17.6	57.3	23.3	
	2012	2.0	16.9	59.2	21.9	
Q10. My knowledge of the benefits system is up-to-date	2010	27.6	49.5	21.0	2.0	
	2012	23.1	49.3	25.0	2.6	
Q11. The fit note has Improved the quality of my discussions with patients about return to work	2010	14.3	25.0	54.1	6.7	
	2012	13.5	20.2	57.8	8.5	
Q12. The fit note has improved the advice I give to patients about their fitness for work	2010	14.0	32.7	48.4	4.9	
	2012	12.0	23.5	56.7	7.9	
Q13. The fit note has increased the frequency with which I recommend return to work as an aid to patient recovery	2010	14.2	37.7	42.6	5.6	
	2012	11.1	28.5	50.8	9.7	

Continued

Table 1 Continued

		<i>Row percentages</i>				
Attitude statement	Year	Completely disagree (%)	Somewhat disagree (%)	Somewhat agree (%)	Completely agree (%)	Don't know (%)
Q14. The fit note has helped my patients make a phased return to work (e.g. amended duties, altered hours, workplace adaptations)	2010	8.9	20.9	60.2	10.1	
	2012	5.1	9.7	64.0	21.1	
Q15. The fit note has increased the length of my consultations	2010	7.7	43.2	36.2	12.9	
	2012	7.8	40.7	38.8	12.8	
Q16. The fit note has made no change to my practice	2010	20.5	41.6	26.0	11.9	
	2012	27.9	43.0	22.4	6.6	
Q17. There are good services locally to which I can refer patients for advice about return to work	2010	34.0	29.4	16.7	3.2	16.7
	2012	37.0	31.0	15.6	3.0	13.5
Q18. There are good services locally to which I can refer patients who need support in returning to work	2010	32.3	31.6	16.9	2.1	17.1
	2012	37.2	31.9	14.3	2.8	13.8
Q19. Have you received training in health and work within the past 12 months?	2010	Yes 11.3 ; No 88.7				
	2012	Yes 10.4 ; No 89.6				

Notes:

- Data represent the weighted percentage of GPs in Great Britain in each response category.
- Rows within each year may not total 100 per cent due to rounding errors.
- Figures in **bold typeface** indicate the 'desired response' – the response that would indicate that GPs' knowledge, attitudes and behaviour towards health and work suggested that they were 'engaging' with the Government's recommendations.
- Range of N: 2010 = 1,351 to 1,364; 2012 = 1,638 to 1,646 (except for Q19, where N = 1,611).

© Crown copyright 2013.

You may re-use this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/or> write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

The full report of these research findings is published by the Department for Work and Pensions (ISBN 978 1 909532 32 8. Research Report 835. March 2013).

You can download the full report free from: <http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

Other report summaries in the research series are also available from the website above.

If you would like to know more about DWP research, please email:
Socialresearch@dwp.gsi.gov.uk