



# GMB Southern Region in ASDA STORES

January 2016

## OCCUPATIONAL HEALTH CONSULTATION MEETING

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**Dear Colleagues,**

The GMB Southern Region has received telephone calls from members in relation to the conduct and process on the OH meetings in ASDA Stores. Below we provide information outlining ASDA policy and include the necessary Consultation Incident Report ("CIR") form for you to complete if you feel that the process is unfair and you haven't been treated fairly in line with ASDA policies and procedures.

### **Consultation Complaints Procedure**

ASDA colleagues may report that they feel aggrieved at the advice of the clinician or how the consultation has been conducted. Firstly they should speak to their People Service Manager and raise their concerns, if not resolved the next process would be to complete the Consultation Incident Report and send directly to the following:-

The Managing Director  
People Asset Management Ltd  
Palmyra Square Chambers  
13-15 Springfield Chambers  
Warrington WA1 1BB

A GP/Occupational Adviser can suggest ways of helping you get back to work. This might mean discussing:-

- a phased return to work
- flexible working
- amended duties
- workplace adaptations

Please note, however, that the current Government has produced legislation so that an employer can override a GP's decision. There are however, remedies to challenge this legislation if you are unhappy with the outcome. Should you have concerns attending the Occupational Health Assessment, please access support from your store Workplace Organiser for advice and representation.

Yours sincerely,

**Kevin Brandstatter**  
**Senior Organiser**



**PAM  
Academy**

*Everyday things that matter.....  
To be the best we can be.*



Where the incident is of a serious nature please have witness statements completed to support CIR.

<b>Appendix 1</b>		<b>CONSULTATION INCIDENT REPORT</b>	
Clinician's Name		Employer Name	
Date & Time		Employer Location	
Employee Full Name		Employee's Role	
Name of Person Completing CIR		Employee / Clinician*	

\*circle

**Brief Outline of the Nature of the Incident**

**Resolution**

Have any witness Statements been completed relating to this incident? Yes/No			
Please provide a copy of this CIR to	<b><u>Position</u></b>	<b><u>Name</u></b>	<b><u>Date</u></b>
	Client Contact		
	OH Manager		
	Employee File		
Report completed by			
	Sign	Print	Date