Medical Review Certificate for a Current 3rd Tier Pensioner

Form 8

Where the cessation of employment occurred after 31 March 2014, and where the Review is taking place 18 months after cessation of employment and before NPA.

SECTION 1 - Pensioner's Details (to be completed by the Former Employer)									
Name of Pensioner:		Title:							
Home Address:									
		Post Code:							
N.I. Number:		Date of Birth:							
Employer at date became a ti									
Post title at date became a t									
Date of Termination:									
*Please attach Job Description and any other applicable details to distinguish Nature of Employment at date of becoming a 3 Tier ill health Pensioner.									
			.						

The person named above was, at the date of cessation of their former position, certified as being permanently incapable of discharging efficiently the duties of his / her employment with his / her employer because of ill health or infirmity of mind or body, and that, although not immediately capable at that time of undertaking other gainful employment, it was nevertheless likely that he / she would be capable of undertaking gainful employment within 3 years of the date of cessation of employment (or by his / her normal pension age, if earlier). He / she was awarded a short-term, reviewable, 3rd tier pension. It is now necessary to review, in accordance with regulation 37 of the Local Government Pension Scheme Regulations 2013, whether, and if so when, the above named person will be likely to be capable of undertaking gainful employment.

SECTION 2 - Medical Practitioner's Certification							
Α	I certify that, in my opinion, having considered their ill health or infirmity, the above named person:	✓					
1	IS STILL LIKELY to be capable of undertaking gainful employment within three years of the date of leaving shown in Section 1 (or by their Normal Pension Age, if earlier).						
2	IS UNLIKELY to be capable of undertaking gainful employment within three years of the date of leaving shown in Section 1, but is likely to be able to undertake gainful employment at some point thereafter and is permanently incapable of discharging efficiently the duties of the employment they were undertaking at the date of leaving shown in Section 1 and which gave rise to the tier 3 ill health pension.						
	If A1 has been ticked, please complete R1 or R2 below and then proceed to Section 2						

If A2 has been completed, please proceed to Section 3.

SECTION 2 continued - Medical Practitioner's Certification

Б								
В	I certify that, in	ny opinion, this pensioner:					V	
1	IS CURRENTLY ca	apable of undertaking gainful employment.	pable of undertaking gainful employment.					
2	IS NOT CURRENTLY capable of undertaking gainful employment, but is likely to be able to do so by the date indicated below:							
2	(Please enter a Section 1).	se enter a date any day up to the day preceding the third anniversary of the date of leaving shown in on 1).						
			ENTE	R DATE:				
SEC	TION 3 - Me	dical Practitioner's Comments						
SECT	ΓΙΟΝ 4 - Medi	ical Practitioner's Declaration				STAMP		
100	/ DO NOT /places	delete es successible) ette de e escription	£			(If applicable)		
	essment and certif	delete as appropriate) attach a copy of my fy that:	iuii report					
	_	e General Medical Council AND I hold a Dipl						
	•	edicine (D Occ Med) or an equivalent qualif an EEA State (with 'competent authority' h		-	by Sec	tion 55(1) of the Medic	cal	
		ssociate, a Member or a Fellow of the Facul nave given due regard to the guidance issued					tion	
	icate*.			o. o.a., o. o.a				
		the guidance document, and the supplement of the			nt, are	available from the rel	evant	
Sign	ature:							
Prin	t Name:			Date:				

This is a medical certificate provided by an independent, approved, duly qualified registered medical practitioner in respect of a 3rd tier pensioner whose <u>pension is currently in payment</u> in accordance with regulation 37 of the Local Government Pension Scheme Regulations 2013.