

MEDICAL REVIEW QUESTIONNAIRE

Notes on completion

This form could be used by a fire and rescue authority wishing to review an ill-health and/or injury award payable to a former regular or retained or volunteer firefighter. It can also be used for the review of a deferred pension paid early on grounds of ill-health. The form should be sent out to the former firefighter, allowing time for completion before the medical review. It should be accompanied by a copy of the fire and rescue authority's consent form for access to medical records. A covering letter setting out the Firefighters' Pension Scheme terms of review, fire and rescue authority policy and a reference to any earlier documents issued by the authority which refer to the possibility of occasional review would also be helpful.

The form should be completed as follows.

Page 1: Personal details

This section should be completed by the fire and rescue authority. There is space for the former firefighter to correct or add to any of the information given.

Page 1: Award to be reviewed

This section should be completed by the fire and rescue authority before issuing to the former firefighter. (No distinction is made here between the lower tier and higher tier ill-health awards – this is not relevant for this form.)

Page 1: How to complete and return the form

The instructions given in italics refer to an "Access to Medical Records Consent Form". This should be whatever form the fire and rescue authority issue for this purpose and the text in italics should be adjusted by the authority if they give it some other name.

In this section the fire and rescue authority should insert details of the return address, give a contact name, and the date by which the form should be returned.

Page 2: Details of employment/qualifications/experience since ceasing employment as a firefighter

This section should be completed by the former firefighter. The information provided would be used to assess the non-medical aspects of degree of disablement.

Page 3: Social Security benefits

This section should be completed by the former firefighter. The information provided should be checked by the fire and rescue authority to ensure the correct deductions are made from the injury award.

MEDICAL REVIEW QUESTIONNAIRE
Notes on completion (continued)

Page 4: Additional information

The former firefighter can use this space to add any information not provided elsewhere on the form because there was insufficient room.

Page 4: Certification

This should be completed by the former firefighter.