



**SEQOHS**



# Certificate Guide for Employers

## Health Surveillance

## Contents

<b>Audiometry</b>	<b>2</b>
<b>Hand Arm Vibration Syndrome (HAVS)</b>	<b>3</b>
<b>Skin</b>	<b>4</b>
<b>Respiratory (Spirometry)</b>	<b>5</b>
<b>Vision</b>	<b>6</b>
<b>Safety Critical Medicals</b>	<b>7</b>
<b>Miscellaneous</b>	<b>9</b>
<b>Certificate Example</b>	<b>10</b>



# Audiometry

## Essential Audiometry Testing Preventing Hearing Loss and Ensuring Workplace Compliance

Category	What do they Mean	Advised Employer Actions
<b>Cat 1 – Acceptable hearing ability</b>	Acceptable hearing	<ul style="list-style-type: none"> <li>• No Further Action</li> <li>• Continue with health surveillance as per your risk assessment.</li> </ul>
<b>Cat 2- Mild hearing loss</b>	<ul style="list-style-type: none"> <li>• There may be an indication of noise induced hearing loss. Hearing protection should be used. Continue with routine health surveillance</li> <li>• Stable NIHL may be present</li> </ul>	<ul style="list-style-type: none"> <li>• No Further Action</li> <li>• Continue with health surveillance as per your risk assessment.</li> <li>• Clarity may recommend an earlier repeat audiometry, taking into account the extent of hearing loss.</li> </ul>
<b>Cat 3- Significant hearing loss or new/progressive Noise Induced Hearing Loss (NIHL)</b>	<ul style="list-style-type: none"> <li>• Hearing ability lower than expected for age and gender. We advise an appointment with GP. It may be that the individual has a build up of ear wax, an acute illness or a pre-existing medical condition.</li> <li>• Newly identified or progressive NIHL may be present</li> </ul>	<ul style="list-style-type: none"> <li>• Clarity recommends a re-test after 6 months.</li> <li>• Refer to GP for further investigation.</li> <li>• Ensure PPE is worn, continue with health surveillance as per your risk assessment.</li> <li>• Review risk assessments to ensure exposure to noise is kept to a minimum.</li> <li>• Risk assessment to ensure individual can hear warning sounds</li> </ul>
<b>Cat 4</b>	Rapid hearing loss – only present if there is significant loss compared to previous results.	<ul style="list-style-type: none"> <li>• Clarity recommends a re-test after 6 months.</li> <li>• Referred to GP for further investigation.</li> <li>• Ensure PPE is worn, continue with routine health surveillance as per your risk assessment.</li> <li>• Review risk assessments to ensure exposure to noise is kept to a minimum.</li> <li>• Risk assessment to ensure individual can hear warning sounds</li> </ul>
<b>Unilateral Loss</b>	A difference of more than 40dB between ears. A referral to the GP to investigate the cause is advised.	<ul style="list-style-type: none"> <li>• Clarity recommends a re-test after 6 months.</li> <li>• Refer to GP for further investigation.</li> <li>• Ensure PPE is worn, continue with health surveillance as per your risk assessment.</li> <li>• Review risk assessments to ensure exposure to noise is kept to a minimum.</li> </ul>
<b>No audio category (unable to hear all frequencies)</b>	Cannot hear all Frequencies.	Recommended OHP referral for advice on future management of health surveillance.
<b>Pre – existing condition–May affect hearing ability. Risk assessment required to ensure warning sounds can be heard</b>	The individual has been identified as having a health condition that may affect their hearing. This may be based on information given to us, or the audiogram results.	Ensure that the individual can operate safely, even with a possible reduction in hearing ability. This is likely to involve checking that the individual can hear warning sounds (such as fire alarms, reversing alarms and machine alarms) in an acceptable manner.

# Hand Arm Vibration Syndrome (HAVS)

Early Detection of Vibration-Related Health Risks to Keep Employees Safe and Compliant

Tier	What do they Mean	Advised Employer Actions
Tier 1	<ul style="list-style-type: none"> <li>Questionnaire based – Prior to commencement of using vibrating tools in role</li> </ul>	<p><b>Fit</b></p> <ul style="list-style-type: none"> <li>Continue with routine health surveillance as per your risk assessment.</li> <li>Ensure employee understands the signs and symptoms to report to their employer and refer back to OH should this happen.</li> </ul> <p><b>Requires Tier 3 assessment.</b></p> <ul style="list-style-type: none"> <li>Contact Clarity OH to book a Tier 3 assessment at the earliest opportunity.</li> </ul>
Tier 2	<ul style="list-style-type: none"> <li>Questionnaire based – At least annually. Clarity recall will be annual, however if your risk assessment determines greater frequency required, book in further clinics as required.</li> </ul>	<p><b>Fit</b></p> <ul style="list-style-type: none"> <li>Continue with routine health surveillance as per your risk assessment.</li> <li>Ensure employee understands the signs and symptoms to report to their employer and refer back to OH should this happen.</li> </ul> <p><b>Requires Tier 3 assessment.</b></p> <ul style="list-style-type: none"> <li>Contact Clarity OH to book a Tier 3 assessment at the earliest opportunity</li> </ul>
Tier 3	<ul style="list-style-type: none"> <li>Referred based on positive answers to Tier 1 and 2 questionnaires.</li> <li>Tier 3 can only be completed by an OHA (HAVS trained registered nurse).</li> <li>Please contact Clarity OH as soon as possible to arrange a HAVS Tier 3 assessment with an OHA, as per HSE ACOP L140.</li> <li>The OHA may advise on future health surveillance and exposure.</li> <li>The OHA will give the individual advice on management of their symptoms or condition as required.</li> <li>If symptoms are consistent with HAVS or vCTS, a Tier 4 assessment will be recommended as per HSE guidance.</li> <li>This is not diagnostic at this stage, and therefore is unlikely to constitute a RIDDOR reportable event.</li> </ul>	<ul style="list-style-type: none"> <li>If advised, Contact Clarity OH to book a Tier 3 assessment at the earliest opportunity.</li> <li>Review and implement advice given by OHA.</li> <li>Ensure employee understands the signs and symptoms to report to their employer and refer back to OH should this happen.</li> <li>Review vibration related risk assessments and exposure data.</li> </ul>
Tier 4	<ul style="list-style-type: none"> <li>On recommendation following a Tier 3 assessment.</li> <li>Please Contact Clarity OH as soon as possible to arrange a HAVS Tier 4 assessment with an OHP, as per HSE ACOP L140.</li> <li>Conducted by an Occupational Health Physician.</li> <li>This may result in a diagnosis of HAVS or vCTS, which is likely to be RIDDOR reportable.</li> <li>Future advice on exposure and health surveillance will be given.</li> </ul>	<ul style="list-style-type: none"> <li>Review and implement advice given by OHP, this may include RIDDOR reporting.</li> <li>If advised, Contact Clarity OH to book follow up Tier 3 or 4 assessment at the dates advised.</li> <li>Ensure employee understands the signs and symptoms to report to their employer and refer back to OH should this happen.</li> <li>Review vibration related risk assessments and exposure data.</li> </ul>

## Skin

### Essential Skin Surveillance Testing for Preventing Work-Related Conditions and Ensuring Coshh Compliance

Comment	What do they Mean	Advised Employer Actions
<b>Ensure use of appropriate PPE and skin care regime</b>	<ul style="list-style-type: none"> <li>A skin issue has been identified – The employee is advised that if symptoms persist or deteriorate, they should inform their employer immediately. They have been advised on simple measures that may assist in the management of their symptoms.</li> </ul>	<ul style="list-style-type: none"> <li>Should an employee report no improvement in symptoms, or a deterioration please contact Clarity to arrange an Occupational Health Advisor referral as soon as possible.</li> <li>Appropriate and/or alternative PPE should be provided with training to ensure correct use.</li> </ul>
<b>Recommend referral to Occupational Health Advisor</b>	<ul style="list-style-type: none"> <li>A condition has been identified that is likely to require bespoke advice to the employee and/or employer.</li> <li>Future advice on exposure and health surveillance will be given.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to book an OHA referral at the earliest opportunity.</li> <li>Review and implement advice given by the OHA.</li> </ul>
<b>Recommend referral to Occupational Health Physician</b>	<ul style="list-style-type: none"> <li>A condition has been identified that is likely to require bespoke advice to the employee and/or employer.</li> <li>Future advice on exposure and health surveillance will be given.</li> <li>This condition may require diagnosis and may be RIDDOR reportable.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to book an OHP referral at the earliest opportunity.</li> <li>Review and implement advice given by OHP.</li> </ul>

# Respiratory (Spirometry)

Essential Respiratory Health Surveillance for Detecting Risks and Ensuring Workplace Compliance

Comment	What do they Mean	Advised Employer Actions
<b>Reduced recall (shown by date of recall)</b>	<ul style="list-style-type: none"> <li>Reduced recall due to clinical presentation that doesn't currently require further investigation, however, is advised that closer monitoring would be of benefit. This is likely to be due spirometry results mildly below the expected result, without any symptoms.</li> </ul>	<ul style="list-style-type: none"> <li>Arrange follow up health surveillance for the date against spiro assessment on the certificate.</li> <li>Ensure employee is advised to report any new or increased respiratory symptoms at the earliest opportunity. Should this occur, please contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> </ul>
<b>Recommend referral to Occupational Health Advisor</b>	<ul style="list-style-type: none"> <li>Refer to OHA – if decrease in lung function, or declaration of symptoms that require further advice.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> <li>Review and implement advice given by OHA.</li> </ul>
<b>Recommend referral to Occupational Health Physician</b>	<ul style="list-style-type: none"> <li>Refer OHP – any results or reported symptoms where there is a work-related concern (e.g., occupational asthma).</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to arrange an OHP referral at the earliest opportunity.</li> <li>Review and implement advice given by OHP.</li> </ul>
<b>Fitness based on paper screen only</b>	<ul style="list-style-type: none"> <li>The spirometry test has either not been conducted, or the employee was not able to perform the test to a standard that was of clinical value.</li> <li>This may be due to a contra-indication, which is a medical reason why someone should not conduct spirometry. An example of this is recent eye surgery.</li> <li>This may also be due to the individual being unable to conduct a satisfactory test. Our staff are trained to give clear instructions and guidance throughout the test, however even with this in place, some people may be unable to provide a useable test.</li> </ul>	<ul style="list-style-type: none"> <li>Follow the recommendations on the certificate – this is often that the individual is fit, however requires a repeat test in the near future. Clarity will advise of the recommended date against spiro assessment on the certificate.</li> </ul>

## Vision

Ensuring Employees Maintain the Visual Standards Needed for Safe, Effective Work

Comment	What do they Mean	Advised Employer Actions
<b>Must wear prescription glasses/lenses for Job role</b>	<ul style="list-style-type: none"> <li>During the medical assessment it has been noted that the employee requires prescription glasses/lenses to reach the agreed safety critical standard. To reduce the risk of accidents and/or injuries, this employee should ensure that they wear their glasses/lenses whenever conducting safety critical duties, including driving.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure that the employee is aware that they should wear prescription glasses for all safety critical tasks.</li> <li>Review PPE to ensure it can be worn with glasses.</li> </ul>
<b>Restrict from Safety Critical Work</b>	<ul style="list-style-type: none"> <li>The employee has not been able to meet the agreed standard (DVLA Group 2) for Clarity to pass fit for Safety Critical duties. The employee will have been given a referral form to take to their opticians.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure the employee is not conducting safety critical tasks.</li> <li>Ask the employee to return the optician referral form to <a href="mailto:clincialsupport@clarityocchealth.co.uk">clincialsupport@clarityocchealth.co.uk</a></li> <li>Once Clarity have received evidence of an individual meeting the standards (often through new prescription glasses) a new fitness certificate will be issued.</li> </ul>
<b>Refer to Opticians – unsuitable for roles that require full colour perception</b>	<ul style="list-style-type: none"> <li>The individual has been unable to demonstrate full colour perception and has been referred to their optician for further assessment. This does not constitute a diagnosis.</li> </ul>	<ul style="list-style-type: none"> <li>Review the individuals job role and ensure that full colour perception is not required.</li> <li>Where it is, please contact Clarity OH to arrange an OHA referral at the earliest opportunity. Clarity recommends the employee avoids all tasks where colour perception is required until the assessment. Where possible, an opticians report should be uploaded with the referral form.</li> </ul>
<b>Refer to Opticians-not suitable for roles that require near vision for quality purposes</b>	<ul style="list-style-type: none"> <li>The individual has been unable to meet the required near vision acuity to undertake quality inspection work. Referral to their opticians for further assessment.</li> </ul>	<ul style="list-style-type: none"> <li>Review the individuals job role and ensure they do not require near vision for quality inspection purposes.</li> <li>Ask the employee to return the optician referral form to <a href="mailto:clincialsupport@clarityocchealth.co.uk">clincialsupport@clarityocchealth.co.uk</a></li> <li>Once Clarity receive evidence of an individual meeting the standards (often through new prescription glasses) a new fitness certificate will be issued.</li> </ul>

## Safety Critical Medicals

Ensuring Workers Are Fit to Perform High-Risk Roles Safely and Reliably

Comment	What do they Mean	Advised Employer Actions
<b>Fit for Role</b>	<ul style="list-style-type: none"> <li>The employee has met the agreed the standard for safety critical tasks and has not declared any issue that is likely to impact their ability to conduct safety critical tasks safely.</li> </ul>	<ul style="list-style-type: none"> <li>Arrange follow up health surveillance at date on certificate.</li> <li>Advise employee to declare any concerns or significant changes in their health to their employer. Should this occur, please contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> </ul>
<b>Fitness deferred – Restrict from Safety Critical Work</b>	<ul style="list-style-type: none"> <li>The employee has not met the standards agreed for safety critical tasks. This may have been detected during the assessment (e.g. Blood Pressure), or may be due to a condition declared by the employee.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure that the employee is not conducting safety critical tasks.</li> <li>Complete further recommendations, which may include OHA or OHP referral.</li> <li>If the employee has been referred to their GP for Blood Pressure or Optician for visual acuity, the employee should be advised to follow the guidance on the referral letter. Upon receipt of confirmation of the issue being investigated and resolved, Clarity will automatically release an updated certificate.</li> <li>In some circumstances, where an employee can not meet the standards agreed, Clarity will recommend an OHA or OHP referral.</li> </ul>
<b>Recommend referral to Occupational Health Advisor</b>	<ul style="list-style-type: none"> <li>Further information is required from the employee before fitness can be determined. This requires an OHA to make conduct the assessment and make a judgement on fitness.</li> <li>If an employee has a condition or symptoms that require bespoke advice to their employer, this will also require an OHA referral.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> <li>Review and implement advice given by OHA.</li> </ul>
<b>Recommend referral to Occupational Health Physician</b>	<ul style="list-style-type: none"> <li>Further information is required for a complex condition, or multiple conditions. Due to the nature of these conditions, an OHP is advised. Clarity triage clinical cases and can often remove unnecessary assessments for an individual that is likely to require OHP intervention. This is more time and cost effective.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Clarity OH to arrange an OHP referral at the earliest opportunity.</li> <li>Review and implement advice given by OHP.</li> </ul>

## Safety Critical Medicals

Ensuring Workers Are Fit to Perform High-Risk Roles Safely and Reliably

Comment	What do they Mean	Advised Employer Actions
<p><b>Please see previous occupational health report for recommendations/restrictions</b></p>	<ul style="list-style-type: none"> <li>The employee has a condition that has previously been assessed by an OHA or an OHP. Advice, recommendations and/or restrictions have already been given and are still relevant to this individual. There is currently no requirement to arrange another OHA or OHP review (unless review has been advised in the report).</li> </ul>	<ul style="list-style-type: none"> <li>Arrange follow up health surveillance at date on certificate.</li> <li>Review previous OH report and ensure that recommendations are implemented where appropriate.</li> <li>Advise employee to declare any concerns or significant changes in their health to their employer. Should this occur, please contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> </ul>
<p><b>Fit with Recommendations – Ensure that Musculo-Skeletal task assessment is carried out and ensure that employee manual handling is up to date.</b></p>	<ul style="list-style-type: none"> <li>The employee has declared a musculoskeletal (MSK) condition that is either historic and no longer causing any issues or is well controlled. They may be at higher risk of future MSK issues, it is therefore advised that they have had manual handling training and that are observed in their job role to ensure that their tasks are carried out in a safe manner, and in accordance with their manual handling training.</li> </ul>	<ul style="list-style-type: none"> <li>Review manual handling training dates and ensure this is in date for the employee.</li> <li>Observe the employee in the workplace to ensure that they are conducting their tasks in accordance with your own manual handling policies.</li> <li>Encourage the use of lifting aids where appropriate.</li> <li>Ensure employee is advised to report any new or increased respiratory symptoms at the earliest opportunity. Should this occur, please contact Clarity OH to arrange an OHA referral at the earliest opportunity.</li> </ul>

## Miscellaneous

Supporting Workforce Health and Compliance Across a Wide Range of Occupational Needs

Comment	What do they Mean	Advised Employer Actions
<b>Clinical Review</b>	<ul style="list-style-type: none"> <li>A health condition has been declared or an outcome from an assessment noted, that requires a clinical review with a Senior OHA in order to determine a fitness outcome.</li> </ul>	<ul style="list-style-type: none"> <li>Fitness outcome will be provided with a new certificate issued within 48 hours.</li> </ul>
<b>Fitness Deferred</b>	<ul style="list-style-type: none"> <li>Further information is required before fitness can be declared on the employee. This is often the case when a follow up referral for a medical condition is required.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure that the supporting recommendations are actioned as soon as possible.</li> <li>Contact Clarity OH to arrange an OHA or OHP referral at the earliest opportunity if advised to do so on the certificate.</li> </ul>

\* Safety Critical Work is defined as any task, identified by risk assessment, that could result in harm to the individual worker and to other employees should the individual worker experience incapacity. This is relevant to those employed in safety-critical tasks such as construction, working at height, FLT and mobile plant operators, driving, Mechanical Handling Equipment Operators, Roadside (high speed), Tunnelling worker, working in confined spaces, Steeplejack etc.

A safety critical medical is conducted to ensure that safety critical workers (SCW) are not suffering from any medical conditions or undergoing any medical treatment which could lead to a sudden loss of consciousness or incapacity, impairment of awareness, concentration, balance or significant limitation of mobility, such that it may impact upon their own or others safety in the workplace.

If the employee is found to be suffering from any of the above and they are responsible for any safety critical tasks in their job role then they will need to be temporarily restricted until we receive further information back from the GP/Optician/OHA.

### Relevant Links

For any general enquiries or to raise any concerns - [customerservices@clarityocchealth.co.uk](mailto:customerservices@clarityocchealth.co.uk)

For queries regarding results and certificates - [clinicalsupport@clarityocchealth.co.uk](mailto:clinicalsupport@clarityocchealth.co.uk)

For booking enquiries - [appointments@clarityocchealth.co.uk](mailto:appointments@clarityocchealth.co.uk)

For any further information please visit our website – [clarityoh.co.uk](http://clarityoh.co.uk)

For information regarding our privacy policy please visit the following link: <https://www.clarityoh.co.uk/data-management/>

For any data protection queries please contact our DPO on [dpo@clarityocchealth.co.uk](mailto:dpo@clarityocchealth.co.uk)

## Certificate Example



### Fitness Certificate

Following a HealthAssessment on behalf of: **TEST CLIENT**

At: Client Name > Client Location (XXX XXX) - 555

Name: **Mr Test Testy** (DOB 01/01/1900)

Job Role: **Operator**

Assessment Date: **07/11/2025**

#### Assessment Details

Statements related to any of the Assessment Details covered by this certificate will remain valid for a period of **12 months** following the Assessment Date, or for the recommended review period where different and **shown in red** after the outcome. If an Activity is not reviewed by end of the recommended review period any statements related to that activity are no longer valid.

**Safety Critical Assessment: Fitness deferred 3 Years**

Recommend referral to Occupational Health Advisor - Telephone consultation

**Audiometry: Fit for role 12 Month Recall**

HSE Hearing Category Interpretation: **Cat 1**

**Vision: Fit for role**

**Spirometry: Fit for role**

**Skin Assessment: Fit for role**

**Night Worker Questionnaire: Fit for role**

**\* Clinical Review -** when the assessment outcome is shown as Clinical review that activity will be reviewed by a senior OHA, to establish the fitness of the employee and any required next actions. Following the Clinical Review an updated certificate will be issued.



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