

Neurodiversity Champions

# Occupational Health

What to Expect and How to Navigate It

University of Warwick • Neurodiversity Champions Initiative

## About this document

This guide is a companion to our Sickness & Absence document. It explains what Occupational Health is, how the referral process works, and what your rights are at each stage.

An OH referral can feel daunting, particularly if you don't know what to expect. This guide aims to change that — because knowing the process in advance makes it much easier to navigate.

## Part 1: What is Occupational Health?

### Purpose and role

Occupational Health is an independent service, external to the University, who focus on the relationship between your health and your work. Their primary purpose is to assess how your neurodivergence or health condition affects your ability to do your job comfortably, and to advise management on how the workplace can be adjusted to support you. They are there to look at your environment, your tasks, and your sensory needs objectively.

### What OH is NOT

**OH does not work for you, and they do not work for management.** They are an independent advisory service.

- **They are not there to catch you out or build a case against you.**
- **They are not there to tell you that you are fine when you are not.**
- **They are not your manager's spy.** The appointment is clinically confidential except for agreed reporting. They will not report back on your casual conversations or personal details. They only share a structured, professional report regarding your fitness for work and required support

- **They are not decision makers.** Their recommendations are not binding on the University — but management is expected to consider them seriously and explain their reasoning if they are not followed
- **They are not a substitute for your own GP or treating clinician**

Understanding this helps you approach the appointment more confidently. You are not under investigation — you are being assessed for support.

## Reasonable adjustments

One of the main outcomes of an OH referral is a set of recommendations, which often include **reasonable adjustments** — changes to your role, environment, or working arrangements that enable you to do your job effectively. These are recommendations that employers are legally required to consider under the Equality Act to ensure disabled and neurodivergent staff are not at a disadvantage compared to their neurotypical peers.

For an overview of what reasonable adjustments look like in practice and what has already been agreed at the University, please see the adjustments page maintained by Social Inclusion: <https://warwick.ac.uk/services/socialinclusion/projects/adjustments/>

On that link, under **Examples -> Disability**, you will find real examples of adjustments people have already had put in place at Warwick. Note this is not an exhaustive list, and adjustments always need to be reasonable for your specific role.

For neurodivergent staff, adjustments usually fall into 3 categories

- **Sensory Adjustments:** Providing noise-cancelling headphones, allowing you to work in a quiet zone, adjusting harsh fluorescent lighting, or permitting a flexible dress code for sensory sensitivities
- **Procedural Adjustments:** Allowing software tools, providing written instructions rather than just verbal briefs, or breaking down large projects into structured, predictable milestones
- **Temporal Adjustments:** Flexible working hours to accommodate executive dysfunction, fatigue, or medical appointments, or allowing more frequent, short screen breaks

## Part 2: The Referral Process Step by Step

The OH referral process follows a specific sequence. Knowing each stage in advance means you will not be caught off guard, and you will know where your rights apply.

Step	What happens
<b>The Referral Decision</b>	Your manager or HR decides a referral is appropriate, or you ask your manager or HR to arrange one on your behalf.
<b>Drafting the Form</b>	Management or HR draft the referral form, setting out the background and the specific questions they want OH to address. <b>You must be shown this form and give your consent before it is sent.</b>
<b>Your Review of the Referral</b>	You review the referral form. You have the right to flag any factual inaccuracies or inappropriate questions before you consent to the form being submitted.
<b>Submission &amp; Booking</b>	Once you have consented, the referral is sent to the OH provider and an appointment is arranged.
<b>Attending the Appointment</b>	You attend the OH appointment. This may be in person, by phone, or by Teams. At the end of the appointment, you will be asked if you wish to see the report before it is sent to management. <b>Always agree to viewing it beforehand.</b> Requesting to review the report first will not reflect negatively on you. If you decline, the report will go directly to your manager without you having seen it first, skipping your opportunity to check it for errors, and ultimately waiving your right to consent to the final report (skip to the Sharing & Action Plan step)
<b>Drafting the OH Report</b>	The OH clinician produces a written report with their findings and recommendations. <b>You will be sent a copy to review before it goes to your manager.</b>
<b>Your Review of the Report</b>	You review the report. If it contains factual errors or does not accurately reflect what you discussed in the appointment, you can request amendments from the clinician.
<b>The Consent Decision</b>	You decide whether to consent to the final report being shared with the University. You have the right to withhold consent, though doing so may limit the support available to you.
<b>Sharing &amp; Action Plan</b>	If you consent, the report is securely sent to your manager and HR. They are expected to review the recommendations and act on them.

**You remain in control of your information at both ends of the process.**

## Your consent to the referral form

This is one of the most important protections in the process and one that many people do not know about.

### Before the referral is sent, you must:

- Be shown the referral form in full
- Have the opportunity to review it and discuss its contents with your manager or HR
- Give your explicit consent for it to be sent to OH

**Why this matters:** The referral form shapes what OH will focus on in the appointment. If the form contains inaccurate information, or questions that go beyond what is relevant to your work, you have the right to raise this before it is sent. Do not feel pressured to consent to a form you are not happy with — ask for it to be amended first.

**OH cannot make any changes to the referral section of the form.** It is important you ensure everything in the referral is accurate. Do not assume it will be, double-check all details, including dates, are accurate before it is sent.

## What to expect at the appointment

Appointments are booked for one hour but will finish earlier if everything has been covered – so don't worry if it wraps up sooner than expected.

**At the start:** The clinician will begin by reading through the referral form with you. This is to make sure you are fully aware of what management has asked, and that there is nothing in it that comes as a surprise. This is also why reviewing the referral form before it is submitted is so important – by this point, there should be no new information in it.

**The conversation:** The clinician will then talk with you about what they have been asked to cover, how your condition affects your day to day, and the specific barriers you experience at work.

OH works much better when you come prepared. If you have a specific adjustment in mind, ask for it directly – you do not have to wait to be offered something. Think in advance about what would genuinely make a difference to how you work.

### Things you can ask for as reasonable adjustments for the appointment itself

- The appointment can be conducted by video or phone rather than in person. This is declared on the OH referral form, so ensure your preferred method is selected before it is sent to OH.
- You are entitled to bring a support person with you. However, bear in mind that medical history will be discussed, so you should be comfortable disclosing that information in front of them. A useful way to think about it is: *would you want this person with you at a GP appointment?* Your support person cannot speak on

your behalf, but they may be invited to contribute their perspective, ask questions, or help with work-related questions if you are having difficulty – though not questions about your health.

- If it would help the clinician understand your situation better, or if written communication works better for you, you can also submit information about yourself directly to OH ahead of the appointment, independently of HR and management.

## Part 3: The OH Report

---

### What a good report looks like

A good OH report should be specific, accurate, and actionable. It should reflect what you actually said in the appointment and make concrete recommendations that management can act on.

A good report will...	A poor report may...
Accurately reflect what you said in the appointment	Contain inaccuracies or omissions that change the picture
Make specific, named recommendations about adjustments	Use vague language like 'consider adjustments' without specifying what
Explain how your condition affects your ability to work	Focus only on diagnosis without linking it to functional impact
Be written in plain language you can understand	Be so clinical or jargon-heavy that it is hard to interpret
Acknowledge limitations in what OH can assess	Overstate certainty about prognosis or capability

At the end of the report there is a section that asks whether the Equality Act is likely to apply. This is the clinician's professional opinion. For neurodivergent staff, this should be recorded as 'Likely'. If you disagree with the conclusion, you can raise this when you review the report.

### Your right to review and challenge the report

You will receive a copy of the report before it is sent to management (assuming you choose this option). This is a meaningful opportunity to protect yourself.

## What you can do before the report is sent

- Read it carefully and check it accurately reflects what you said
- If anything is wrong or missing, contact OH and request an amendment
- You can withhold consent for the report to be sent to management — though be aware this may limit what support the University can put in place

If something does not feel right during the appointment itself – for example, if the clinician says something that seems inaccurate, inappropriate, or upsetting – you do not have to simply accept it. You have the right to raise a complaint with OH directly. In serious cases, a further appointment with a different clinician may be arranged. You should not feel that a difficult or unsatisfactory appointment means the process is closed to you.

## Part 4: After the Report — What Should Happen Next

### What management is expected to do

Once the report is shared with management, they are expected to consider the recommendations and act on them. This is not optional — ignoring OH recommendations without good reason is difficult to justify under the Equality Act, particularly where the recommendations relate to disability.

You should expect a follow-up conversation or meeting to discuss the recommendations and agree what adjustments will be put in place, and by when.

You must ensure that any recommended adjustments not acted upon are followed up with a written reason by your manager. Adjustments are required to be reasonable, but not implementing them must have a sound basis. Management preference, for example, is not a valid reason and will not stand up under the Equality Act.

### If the recommendations are ignored

#### If management does not act on OH recommendations

- Ask in writing for an explanation of why the recommendations are not being implemented
- Put your own understanding of what was recommended in writing and ask for confirmation
- If reasonable adjustments have been recommended and not implemented, this may constitute a failure to comply with the Equality Act
- Raise it with a Neurodiversity Champion, your Trade Union if you are a member, HR, or ACAS
- Keep a record of everything — what was recommended, when, and what response you received

## Part 5: If the Process Goes Wrong

---

### What should not happen

The OH process has specific protections built in. If any of the following happen, the process has not been followed correctly:

- You are not shown the referral form before it is sent
- You are not asked for your consent before the referral is made
- The referral form contains information that was not discussed with you beforehand
- You are not given a copy of the report before it goes to management (unless you waive this right)
- The report is sent to management without your consent (unless you waive this right)
- The report contains significant inaccuracies that are not corrected when you raise them

If your referral is sent to OH without your consent, the system moves quickly and the appointment might be booked before you can stop it. If this happens, it is worth contacting OH directly and letting them know you had not received a copy of the referral. They can then discuss with you if the appointment can go ahead, or if it is better for the appointment to be stopped to allow for corrections. They will cancel the appointment and explain to your manager and HR why it was cancelled, as well as reminding them of the process.

### What to do if the process is not followed

If any of the above has happened, or you believe you have been disadvantaged as a result:

- **Document it.** Note exactly what happened, when, and who was involved.
- **Raise it in writing.** An email to HR creates a record and requires a response.
- **Contact a Neurodiversity Champion.** We are colleagues, not management, and can help you identify what went wrong and what your options are.
- **Contact your Trade Union if you are a member, ACAS, or Citizens Advice** for independent advice.
- **Consider a formal grievance** if the failure has caused you demonstrable harm or disadvantage.

**Neurodiversity Champions — University of Warwick**

**Email: [ndchampions@warwick.ac.uk](mailto:ndchampions@warwick.ac.uk)**

This document reflects our interpretation of University policy and the Equality Act 2010.

It is not legal advice. For individual situations, contact your Trade Union, ACAS, Citizens Advice or an employment law advisor.