

## **NHS Pension Schemes (Scotland)**

#### APPLICATION FOR RETIREMENT BENEFITS FOR AN ACTIVE MEMBER

To be completed by the Occupational Health (OH) Doctor/Senior OH Nurse Where this is not possible, a GP or Specialist can complete this form

Further guidance on completing this form is available at www.sppa.gov.uk.

This is an ill health retirement application for a person, who, on ceasing to be an NHS scheme member, may be entitled to receive an annual pension provided that the applicant fulfils the criteria for payment of benefits.

Ill health retirement is to be considered in relation to the applicant's own job only and any regular employment of like duration<sup>1</sup>. In reaching a decision on infirmity under these regulations, the functional requirements of the applicant's occupation should be assessed against the functional limitations imposed by the applicant's ill health.

Permanency is where the infirmity affecting the applicant's present occupation exists and will continue to exist until normal pension age (NPA). The infirmity will not improve with time or treatment to allow the member to return to their present occupation before NPA.

**Lower tier condition and benefits** - members with at least 2 years membership who are permanently incapable of efficiently discharging the duties of their current employment because of physical or mental infirmity will receive the early payment of the pension they have earned up to the date of retirement.

**Upper tier condition and benefits** - members with at least 2 years membership who are permanently incapable of engaging in regular employment of like duration<sup>1</sup> will receive upper tier benefits. These benefits are based on accrued service plus a service enhancement of up to 2/3rds (1995 and 2008 sections) or 50% (2015 scheme) of the membership they would have completed if they had worked until NPA. NPA for each scheme is as follows:

- age 60 if the member is assessed under the amended 1995 Regulations
- age 65 if assessed under the 2008 Regulations
- State Pension Age under the 2015 Regulations

 $<sup>^{1}</sup>$  "regular employment of like duration" means, where prior to retiring from pensionable employment the member was employed—

<sup>(</sup>a) on a whole-time basis, regular employment on a whole-time basis;

<sup>(</sup>b) on a part-time basis, regular employment on a part-time basis,

regard being had to the number of hours, half-days and sessions the member worked in that pensionable employment.



## **GUIDANCE AS TO INTERPRETATION AND APPLICATION OF REGULATIONS**

- (1) Infirmity the applicant's **own** infirmity should be considered.
- (2) Level of permanency is to be considered as on the balance of probabilities.
- (3) Permanently until applicant's NPA, usually age 60, 65 or their state pension age.
- (4) Efficiently discharging duties fulfilling competently the core requirements of their contracted occupation for the contracted number of hours.
- (5) The intention is for both access to and the level of benefits from each of the tiers to reflect that different levels of benefits should be dependent on the severity of the member's condition and the impact of that on their ability to work again.

CONSE	NT FORM (TO BE COMPLETED BY THE APPLICANT)
	f the following medical report to the Scottish Public Pensions Agency appointed medical adviser.
Name of applicant	
Signature of applicant	
Date	



## **FORM AW8/MED**

# Application for III Health retirement benefits from an active NHS Scotland pension scheme member

MEDICAL REPORT FORM (to be completed by Occupational Health Doctor/Senior Occupational Health Nurse)

Applicant's name							
SB number							
Date of birth	/ / /						
Home address							
	Post code						
considered permanently incapecause of physical or mentapecided by the Scottish Pubwith advice provided from the	d that for such an application to such apable of efficiently discharging the call infirmity. The question of whether this blic Pensions Agency acting on behalf eir own appointed medical advisers.	duties is con of the	of his dition e Scot	s/her is sat tish M	emp isfied Iinist	oloym d will	nent I be



(b) I	Provide details of the reported reason(s) for current incapacity
(c)	Please provide details of the past course of any medical conditions currently reported as
	Please provide details of the past course of any medical conditions currently reported as ng rise to incapacity.
L (d) findi	Please provide details of reported symptoms, objective clinical findings, investigation ings, reported functional impairment and objectively confirmed functional impairment.



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<sup>&</sup>lt;sup>1</sup> NPA – the normal pension age at which a member may take their full pension on age grounds without actuarial reduction. Dependent on which scheme the member belongs to, this could be age 60, 65 or state pension age



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they feel able to do so. How does this member's diagnosed medical condition(s) impact on their capacity to carry out their NHS duties? What recommendations have you made to the employer? Are there any work place issues and how have they been addressed?

(g) This question relates to functional abilities and must be completed by the occupational health doctor/senior occupational health nurse. GPs and clinical specialists may comment if



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(h) Please summarise information you consider to be relevant to this member's long term incapacity for:
1) the duties of their NHS employment, and
2) any regular employment of like duration.
Please provide your rationale

<sup>&</sup>lt;sup>1</sup> NPA – the normal pension age at which a member may take their full pension on age grounds without actuarial reduction. Dependent on which scheme the member belongs to, this could be age 60, 65 or state pension age

Terminal Illness Does this member have a medical conditient expectancy to less than one year?  *If 'Yes' and information is available from the second the second to the second the second to the second the second to the second the se	ion whic Yes*	h is con	sidered to	reduce their	lif
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Is the member aware of the diagnosis?	Yes		No		
Is the member aware of the prognosis?	Yes		No		
ease attach copies of any consultant medic	cal spec	cialist rep	orts or ca	ase notes whi	ch
ive in relation to the member's present ocessing this application.					
ease list the additional papers enclosed here	e:				



## **Examining Doctor's Details**

Full name	
Job title	
Email address	
Address	
	Post code
Telephone number	
Signature	
Date	/ / /

Please send the completed form with any additional medical reports received in connection with this application to SPPA in a sealed envelope along with the corresponding application form AW8. The complete application should be sent to:

SPPA, 7 Tweedside Park, Tweedbank, Galashiels, TD1 3TE.