Figure - Suggested requirements for extended role sickness certification implementation and their underlying professional legitimacy claims

### Condition-specific legitimacy
- Culture change for general public, patients, healthcare professionals, employers
- Accessible health record information
- Ability to seek advice from GPs
- Adequate resources e.g. staff, clinic time
- Feedback about performance to nurses and physiotherapists on individual and national levels
- Recognition of extended role through financial reward and status acknowledgement
- Education and training
  - Nurses and AHPs: sickness certification
  - GPs: role of non-medical colleagues and improving GP knowledge of sickness certification
- Employers: acknowledge nurse and AHP role
- Patients and the general public acknowledge nurse and AHP role
- Recognition of extended role through formal qualification

### A holistic approach

### Organisational efficiency

### Control and responsibility

### General Requirements

### Who should certify?
- Nurses and AHPs with knowledge and experience of working with patients who are unable to work due to ill-health, therefore senior nurses and physiotherapists
- New nursing and AHP graduates with fresh knowledge of current certification system and work-related health issues

### Circumstances of certification
- Specific conditions within the usual remit of the nurse or physiotherapist
- Conditions for which guidelines exist
- Time limited duration of certification, for example two week maximum duration
- New or follow-up certificates:
  a) New sickness certificates in self-referral systems
     - GPs more wary of this approach
     - Physiotherapists with experience of self-referral systems welcome this possibility
     - Nurses positive if experienced or use guidelines
  b) Follow-up certification
     - Preferable system for all respondent groups
     - Graded introduction: straight-forward conditions first, more complex conditions if role extension successful