



Wandsworth Clinical Commissioning Group

SICKNESS ABSENCE POLICY

V2.0

SICKNESS ABSENCE POLICY

THIS POLICY WILL BE APPROVED BY Wandsworth CCG, AND WILL HAVE EFFECT AS OF 8TH October 2014

Target Audience	Governing Body members, committee members and all staff working for, or on behalf of, the CCG
Brief Description (max 50 words)	This policy is intended to provide a framework within which the absence from work, whether due to an underlying medical condition or not, is dealt with consistently and fairly. The policy will ensure that appropriate support is available to employees and managers in dealing with sickness absence.
Action Required	<p>Following approval at the CCG Governing Body, The Chief Officer will ensure that the requirements of this policy will be raised at all team meetings, and confirm the requirements with the chairs of each committee, and with CCG executives.</p> <p>Chairs of committees will identify the programme of review with the Accountable Executive for each policy within their committee remit.</p> <p>Accountable Executives will identify policy owners for each policy within their remit.</p> <p>The Corporate Business Manager will establish and maintain a corporate register of all policies and their status, and will ensure that these are appropriately reflected on the website.</p>

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Equality Analysis	<p>Equality Analysis</p> <p>This document has been assessed for equality impact on the protected groups, as set out in the Equality Act 2010. This document demonstrates Wandsworth CCG's commitment to create a positive culture of respect for all individuals, including staff, patients, their families and carers as well as community partners.</p> <p>The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to use the Human Rights Act 1998 and to promote positive practice and value the diversity of all individuals and communities.</p>
Contact details for further information	

This policy progresses the following Authorisation Domains and Equality Delivery System (tick all relevant boxes).

Clear and Credible Plan	<input type="checkbox"/>	Commissioning processes	<input type="checkbox"/>
Collaborative Arrangements	<input type="checkbox"/>	Leadership Capacity and Capability	<input type="checkbox"/>
Clinical Focus and Added Value	<input type="checkbox"/>	Equality Delivery System	<input type="checkbox"/>
Engagement with Patients/Communities	<input type="checkbox"/>	NHS Constitution Ref:	<input type="checkbox"/>

Associated Policy Documents

Reference	Title
	CCG Constitution V*.*

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Glossary

Term	Definition
Accountable Executive	CCG Executive accountable for development, implementation and review of the policy
Policy Owner	Post holder responsible for the development, implementation and review of the policy
Document definitions	These are provided in Section 1

Contents

1. INTRODUCTION.....	7
2. GENERAL POINTS.....	7
2.1 The Disability Discrimination Act	7
2.2 The Right to Be Accompanied	7
2.3 The Role of Occupational Health	8
2.4 Return to Work Interview	9
2.5 Risk Assessments	10
2.6 Reasonable Work Adjustments and Gradual Return to Work	10
3. REPORTING ABSENCE	10
4. SHORT TERM ABSENCE	14
5. LONG TERM ABSENCE	16
6. APPEALS	18
7. REVIEW.....	18
APPENDIX ONE: REFERRAL TO OCCUPATIONAL HEALTH FOR MEDICAL ASSESSMENT	19
APPENDIX TWO: EMPLOYEE SELF- CERTIFICATION FORM.....	21
APPENDIX THREE: RETURN TO WORK FROM SICKNESS MEETING	22

1. Introduction

- 1.1 Wandsworth CCG recognises that the majority of employees will have some sickness absence during their working lives and believes that all employees should be supported to be at work through the active management of sickness absence. The CCG will manage the attendance of employees actively, fairly and consistently, seeking to balance the needs of individuals with the efficient running of services. In doing so, the CCG will take into account relevant legislation such as the Equality Act 2010.
- 1.2 The policy sets out the procedure for dealing with both long term and short term or frequent/recurring periods of absence with Wandsworth CCG.
- 1.3 Managers will distinguish between reported sickness and unauthorised absence where no acceptable explanation is given. Unauthorised absence will be managed through the Disciplinary Policy.
- 1.4 This procedure is intended to complement Wandsworth CCG's Performance Management Appraisal System, Capability Policy and Disciplinary Policy as part of the CCG's performance management strategy.
- 1.5 Whilst the information in this document sets out the procedure which managers should follow it is recommended that advice should be sought from Human Resources when dealing with the management of either short term or long term sickness absence.

1.6 Scope

This policy applies to all staff employed by the CCG. This policy sets out how Wandsworth CCG will manage short and long term sickness absence.

2. General Points

2.1 The Disability Discrimination Act

If an employee is disabled or becomes disabled, the CCG is legally required under the Equality Act 2010 to make reasonable adjustments to enable the employee to continue working – for example, providing an ergonomic chair or a power-assisted piece of equipment. You must make sure the individual is not disadvantaged because of their disability. If their absence is related to disability, keep records separate from other sickness absence.

2.2 The Right to Be Accompanied

Employees will be entitled to be accompanied by a work colleague or Trade Union representative, not acting in a legal capacity, during any hearings, formal meetings or appeals relating to the procedure. The colleague or Trade union representative will be allowed to confer with the employee during the meeting and to address the meeting on

his/her behalf. The colleague or trade union representative however, does not have the right to answer questions on behalf of the employee. It is the employee's responsibility to arrange this representation.

The trade union representative need not be an employee of the CCG, but if he/she is not a fellow worker or an employee of his/her union, the CCG may insist on him/her being certified by the union as being experienced or trained in accompanying employees at formal hearings.

The choice of companion is a matter for the employee, but Wandsworth CCG reserves the right to refuse to accept a companion whose presence would undermine the sickness absence management process, or where it deems the choice of companion to be unreasonable e.g. someone from a remote geographical location, when there is someone suitable and willing available at the same location. Please note that individual work colleagues are not obliged to agree to accompany employees. Companions will be given appropriate paid time off to allow them to accompany colleagues at a formal hearing.

Employees must take all reasonable steps to attend all sickness absence meetings. Failure to do so without good reason may be treated as misconduct. If the employee or his or her representative is unable to attend they should immediately inform their line manager who will seek to agree an alternative time within 5 working days following the date of the original meeting. The CCG will give the employee 5 working days written notice of the date, time and place of a sickness absence meeting.

2.3 **The Role of Occupational Health**

Sometimes it may be necessary for an employee to undergo an Occupational Health assessment. The aim of the Occupational Health assessment is to establish if there is any underlying health problem affecting the employee's attendance and/or performance at work. Where possible, the line manager should complete the Occupational Health referral form collaboratively with the employee. It is useful to have the Occupational Health report prior to any formal sickness absence review meeting.

There are two Occupational Health referral methods:

Self-Referral

An employee can seek the advice of the Occupational Health Department without approaching their line manager. This is called self-referral and can be made by the employee telephoning the Occupational Health Department to make an appointment. Any discussions between the employee and the Occupational Health Department will be confidential and will not be reported to the manager without the employee's consent or knowledge.

Management Referral

A manager can refer an employee to the Occupational Health provider at any time via the Management Referral Form (see Appendix 1). This is considered to be a reasonable management request and the employee is obliged to attend. If an employee refuses to attend the manager may consider instigating the disciplinary procedure and any decision regarding the employee's employment will be based on the information available to the manager and the organisation at the time.

The manager must advise the employee and discuss with them the reasons for the referral and the advice being sought prior to making the referral. Managers must also provide the employee with a copy of the referral form sent to Occupational Health.

The Occupational Health provider will provide the manager with written guidance following the appointment on the employee's health and medical issues which may have some impact on the employee's ability to carry out their job. This should cover the nature of the illness, the likely length of absence, frequency of absence, suggested short term modifications to the post or long term redeployment if appropriate and the likely effect of the medical condition on the employee's capability to do the job.

The advice of the Occupational Health department must always be sought as soon as long term sickness is identified. Sometimes the Occupational Health specialist will need additional medical history from the individual's GP or specialist consultant. Written consent will be required from the employee for Occupational Health to obtain this information. If there is an external medical report and an Occupational Health report the Occupational Health report will take precedence.

2.4 Return to Work Interview

If an employee has been absent on sick leave, after every period of absence the line manager will arrange for them to have a return-to-work interview (see Appendix 3). A return-to-work interview enables the line manager to confirm the details of the employee's absence. It also gives the employee the opportunity to raise any concerns or questions they may have, and to bring to attention any relevant matters. If it becomes apparent that the absence is due to non-medical reasons the line manager needs to show sensitivity in discussing the cause of the absence.

Where a doctor has provided a certificate stating that the employee "may be fit for work" their line manager will usually hold a return-to-work interview to discuss any additional measures that may be needed to facilitate their return to work, taking account of their doctor's advice.

At the return to work interview the line manager will advise if the employee is at risk of triggering the formal sickness absence triggers. Once the Sickness Absence Triggers are met, the formal sickness absence process will be followed. The line manager will

document the detail of this meeting in a file note, and provide the employee with a copy of the note.

2.5 Risk Assessments

After a period of sickness it may be beneficial for the manager to carry out a general risk assessment for the employee who is returning to work. This will help determine if there are any limitations on the employee's ability to resume their full duties. The Occupational Health provider will be responsible for advising on whether a more specific risk assessment is required.

2.6 Reasonable Work Adjustments and Gradual Return to Work

A temporary alteration of duties and/or change of hours/days worked may be considered on a short term basis and in conjunction with Occupational Health after a risk assessment has been made. Where this is undertaken the details should be noted and a timetable and review period should be agreed with the employee. The employee's salary will not be reduced for reduced hours if the gradual return to work has been recommended by Occupational Health.

2.7 Action, including dismissal, may be taken against an employee in accordance with the Disciplinary Policy in the following instances:

- an employee knowingly gives any false information, or makes false statements about their sickness.
- an employee undertakes work (whether paid or unpaid) for another employer or in their own business or enterprise during periods when they are either self or medically certified as sick unless the above evidence is provided that it is of therapeutic benefit.
- it is found that during a period of absence an employee is acting in a manner inconsistent with the reason for the absence or not aiding their return to work.

If there is an allegation of fraud or corruption advice must be sought from the Local counter Fraud Specialist. The employee concerned must not be informed of the allegation prior to such advice and only if the Local Counter Fraud Specialist confirms. Any employee who unreasonably fails to comply with the CCG's Sickness Absence Policy may have their occupational sick pay withheld. Any decision to withhold sick pay must be made in conjunction with Human Resources. Advice may also be sought from the CCG's Occupational Health provider.

3. Reporting Absence

3.1 All employees must personally inform their line manager on the first day of absence as soon as it is reasonably practicable or within one hour of their normal starting time. This contact should be made by telephone. . . In exceptional circumstances an employee may be too ill to contact their manager themselves. In these instances the employee

must make arrangements for someone else to contact their manager on their behalf - usually next of kin.

3.2 Employees must talk directly to their line manager. Alternative methods of communications such as text messages, e-mail or leaving messages with anybody else are not considered appropriate, unless there are exceptional circumstances. If the line manager is unavailable, then the employee should contact an alternative nominated manager.

3.3 When reporting absence employees must give the following information:

- The reason for the absence (if known);
- The expected length of absence (if known);
- Whether a visit will be made to their GP, and if so, the date of the appointment.

Where possible the manager should be advised of any outstanding work that may require urgent attention during the period of absence.

3.4 In cases of continued absence, employees and line managers should agree appropriate levels and methods of communication. As a minimum the employee must contact their line manager again on the third day of absence to provide them with up to date information. Should the absence continue then the employee and the manager must decide upon the frequency of further/continued contact and the form that this will take. It is not sufficient to provide medical certificates as a means of maintaining contact.

3.5 It should be noted that failure to maintain contact as per the agreement with the line manager, may result in the payment of occupational sick pay being delayed or withheld. Any decision to take disciplinary action or to withhold or delay payment of occupational sick pay must be made in conjunction with Human Resources.

3.6 For absences lasting seven calendar days or less, on the first day back at work, employees will be required to sign off the Sickness Self-Certificate with their line manager (see Appendix 2). This should include the reason for absence. The Certificate will be countersigned by a manager and subsequently will be kept in a confidential file.

3.7 If an absence exceeds seven calendar days a doctor's FIT note must be submitted to the line manager, no later than the tenth day of absence, covering the absence from the eighth day. The medical certificate is normally retained by the line manager and the absence recorded on the appropriate staff absence record form.

3.8 If an absence continues beyond the period covered by the initial medical certificate, further medical certificates must be submitted to give continuous cover for the period of absence. Failure to submit consecutive medical certificates in a timely manner may be considered in breach of the Sickness Absence Management policy and may invoke the Disciplinary Procedure.

3.9 For reporting purposes, reports will show long-term absence as at least 28 calendar days.

3.10 **Statement of Fitness to Work (FIT Note)**

The statement of fitness to work, known as the 'fit note' was introduced in April

2010. It allows a doctor/GP to advise whether an employee is either not fit to work or may be fit to work. If the doctor/GP suggests that they 'May be fit to work' there are now a number of options open which may help to get the employee back to work including a phased return to work, amended duties, altered hours or workplace adaptations.

Any such recommendations should be discussed and agreed with the individual and line manager prior to commencement of work at a return to work interview.

3.11 **Accrual of Annual Leave During Sickness**

Employees on sick leave continue to accrue annual leave. If an employee is unable to take annual leave in the relevant leave year due to sickness absence the employee should be permitted to carry the annual leave over to the next leave year. Employees are allowed to carry over up to four weeks' annual leave (the entitlement under the European Working Time Directive). The additional 1.6 weeks' annual leave under regulation 13A of the Working Time Directive does not carry over. In effect this means that a full time employee can only carry over 20 days and not 28 days into the next annual leave year.

However, if an individual is able to take their outstanding annual leave on their return to work before the holiday year expires, they should do so. If they choose not to this holiday will be lost and cannot be carried over. If, however, there is insufficient time left in the leave year to enable them to take their accrued annual leave they should be allowed to carry this leave forward to the new leave year.

An employee is required to acquire the approval of all holiday dates in accordance with the normal Wandsworth CCG policy

Where annual leave is taken in place of sick leave, this will continue to be counted towards the record of sickness absence for the purposes of managing the overall sickness absence.

If the employment is terminated before an employee returns from sick leave, he/she will receive a payment in lieu of any accrued but untaken holiday entitlement for the holiday year in which the employment is terminated.

3.12 Sickness During Annual Leave

If an employee falls sick during a period of annual leave either in this country or overseas and the period of incapacity seriously interrupts the period of leave, then they may count the annual leave as sick leave provided they;

- Notify their line manager either in writing or by telephone at the earliest, in line with organisation/departmental procedures and no later than the fourth continuous day of illness; and
- Provide a statement by a qualified medical practitioner; the statement should cover the period of the illness and the nature of the illness.

For information, a serious interruption of annual leave would be deemed as four or more days of continuous illness.

3.13 Sickness Prior to Taking Annual Leave

If an employee is absent on sick leave and has pre-booked annual leave then they must notify their manager as soon as possible of the nature of the leave, otherwise it will be assumed that the annual leave is being taken. If the employee intended to spend time at their normal place of residency then the leave may be credited back upon receipt of appropriate medical statements/Doctors notes.

3.14 If an employee is physically unable to return to work after a holiday they must submit a medical certificate which covers them from the day on which they were expected to return to work. Should the employee take the leave as sickness, then entitlements to sick pay both occupational and statutory will be in line with the normal eligibility rules.

3.15 Where an employee requests annual leave at short notice or on the actual day of the absence stating that the reason for the absence is because they are feeling unwell then the organisation will consider on a case by case basis whether to sanction annual leave or whether the absence will be regarded as sick leave. Annual leave will normally only be granted at short notice in emergency or urgent situations.

3.16 Dentists, Doctors, Opticians and Other Health Appointments

Whenever possible, appointments to visit the dentist, doctor, optician or other health professional should be outside of normal working hours. Where this is not possible, disruption must be kept to a minimum by arranging the appointment at a time which will result in least impact on the service and agreed in advance with the line manager. Recognising there is less flexibility for hospital appointments, employees will be released with pay if these fall at a time when the individual would have normally been working. For any other appointment in working time, staff may be required to make up time or take annual leave by agreement in advance with the line manager.

4. Short Term Absence

If an employee's attendance, due to short term or intermittent absence, becomes a matter of concern, for example: persistent short term absences or a pattern such as Monday/Friday absences or before/after Bank Holidays, his/her manager will discuss it with them informally with a view to resolving issues and improving attendance. Generally this will occur under the following triggers although an informal discussion may take place before the triggers below are met.

4.1 Sickness Absence Triggers

- When there has been 4 episodes of absence in a rolling 12 month period or
- When there is an unusual pattern to the sickness episodes, or
- When there is an accrued cumulative total of 8 working days, of self certified sickness absence (pro rata for part time staff) in a rolling 12 month period

4.2 Formal Absence Meetings

Once the above triggers have been reached a meeting will be conducted by the line manager with their employee to discuss the absence. The first discussion should be on an informal basis. If there is no improvement a formal meeting should be held (Stage 1 below). Prior to formal action being taken advice must be sought from Human Resources. It is useful to have the Occupational Health report prior to any formal sickness absence review meeting.

Stage 1: First formal sickness absence meeting

Stage 1 will be applied where the sickness absence triggers as set out in 4.1 have been met. Sickness absence is not a disciplinary matter, although in managing sickness absence, employees may progress through a series of formal stages. These stages are to support the individual to achieve an acceptable level of attendance and to inform them of the potential consequences of further periods of sickness absence so that the process is open and transparent.

The Stage 1 meeting is a supportive process to discuss the reasons for absence and to support an employee to be able to attend work.

The purpose of a first formal sickness absence meeting is to:

- Discuss the reasons for absence
- Determine how long the absence is likely to last and any support that can be identified to facilitate a return to work
- Determine the likelihood of further absences
- Discuss the Occupational Health report if there is an underlying medical condition
- Consider support to improve the employee's health and/or attendance.

- Agree a way forward which can include alternative duties, action that will be taken and a time-scale for review and/or a further meeting under the sickness absence procedure.

Details of the meeting and any agreed outcomes will be confirmed in writing to the employee and a copy will be held on their personal file.

Managers must continually monitor absence and, if there is a further period of sickness absence which triggers the sickness absence policy, progress will be made to Stage 2.

Stage 2: Further sickness absence meeting

If further periods of absence trigger the policy as set out above, a Stage 2 review will be conducted.

The purpose of further meeting(s) may include:

- Discussing the reasons for and impact of the employee's ongoing absence(s)
- Determining how long the absence is likely to last and any support that can be identified to facilitate a return to work
- Where an employee has been absent on a number of occasions, discussing the likelihood of further absences
- Considering medical advice and whether further advice is required
- Considering any adjustments that can reasonably be made to the employee's job to facilitate a return to work
- Considering possible redeployment opportunities and whether any adjustments can reasonably be made to assist in redeploying the employee
- Where an employee is able to return from long-term sick leave, whether to their job or a redeployed job, agreeing a return to work programme
- Agreeing a way forward, the action that will be taken and a time-scale for review, and/or whether further meeting(s) is required. This may, depending on steps already taken, include advising the employee that dismissal on the grounds of ill health may be an approaching option

Details of the meeting and any agreed outcomes will be confirmed in writing to the employee and a copy will be held on their personal file. One outcome of the review meeting may be advised that a failure to improve their attendance may result in progression to Stage 3.

Managers will continue to monitor the employee's absence and if they trigger the policy again, they will be required to attend a Stage 3 meeting.

Stage 3: Final sickness absence meeting

Where sickness absence continues an employee will be invited to a meeting under the third stage of the sickness absence procedure.

The purposes of the meeting will be:

- To review the meetings that have taken place and matters discussed with them
- To consider any further matters the employee may wish to raise
- To consider whether there is a reasonable likelihood of the employee achieving the desired level of attendance in a reasonable time
- To explore whether there are any alternatives to termination of the employee's employment on the grounds of ill health

5. Long Term Absence

Long term sickness absence due to serious illness or injury should be handled sensitively and fairly to ensure employees are supported as far as possible to return to work. Long-term absence is classed as at least 28 calendar days.

Employees must continue to provide medical certificates while on long term sickness and keep their managers informed of their progress. In all cases of long term absence, Occupational Health advice must be sought. In cases of long-term absence line managers must arrange to conduct regular review meetings to discuss possible courses of action should the absence continue. On occasion the line manager may determine in liaison with the employee an alternative means of communication rather than requiring the employee to attend a meeting eg telephone conversation or email exchange. The content of these exchanges must be recorded on file.

These may include rehabilitation and return to work requirements, redeployment, ill-health retirement as appropriate. The meetings should be recorded and notes sent to the employee concerned. Employees may be accompanied by a Trade Union Representative or a workplace colleague. The line manager may also be accompanied. The frequency of such meetings will depend upon the circumstances of the individual case.

These meetings should be held at mutually convenient locations, with due regard made to the employee's circumstances. If an employee is too ill to travel, the line manager may arrange to conduct a home visit at a mutually convenient time, if the employee agrees. However it should be noted that, as part of the return to work process, it may be more relevant to hold the meetings at a business location, or a suitable alternative venue.

The purpose of these meetings is to allow all parties to consider a range of options that may be available. These options could include, but aren't limited to:

- Possibility, and likelihood of a return to work, and when
- Possibility of alternative employment

- In the case of a disability as defined by the Equality Act 2010, identifying and implementing 'reasonable adjustments
- Ill Health retirement
- Termination of contract on the grounds of medical capability – the organisation would only ever consider this after exhausting all other options

Termination of Contract

The termination of an employee's contract of employment must be considered as a last resort where:

- The employee's job cannot be kept open any longer
- Alternative employment has not been secured
- Ill-health retirement is not possible
- When the employee is not in agreement with taking retirement on the grounds of ill-health.

The employee must be seen by their manager and a member of Human Resources at a formal meeting with the employee's representative. The employee should be informed in writing of the likelihood of dismissal and their right to representation at the meeting. The manager must ensure that the employee fully understands the reasons for dismissal and that all relevant information provided by the employee and their representative has been fully considered.

The letter of dismissal must be sent with due contractual notice by the manager within 5 working days of the meeting. The letter must set out the full reasons for dismissal. The right of appeal must be given in accordance with the Disciplinary Policy. The employee is entitled to receive paid notice in accordance with their contract and their notice period is paid at full pay. Any outstanding annual leave accrued up until the last day of notice should also be paid and outlined in the letter.

The length of an employee's occupational sick pay is not a contractual entitlement and employees may be dismissed before occupational sick pay runs out. If the long term prognosis is poor it is not necessary to wait until the exhaustion of sick pay before terminating an employee's contract of employment or commencing the process to terminate the employment.

If an employee is unable to return to work from long-term sickness absence and where they are a member of the NHS Pension Scheme, the manager will discuss with them whether they are entitled to make an application for ill-health early retirement or any temporary/permanent injury allowance. The decision as to whether they are entitled to these benefits is taken by the NHS Pensions Agency

6. Appeals

Employees have a right of appeal in accordance with a decision to dismiss.

The right of appeal must be exercised by the employee within 10 working days of the receipt of the outcome letter, in writing to the Chief Officer, stating the grounds on which he or she is making the appeal.

The appeal will be handled in accordance with the Wandsworth CCG's Disciplinary Appeals Procedure available on the CCG's intranet.

7. Review

Unless there are changes to legislation this policy will be reviewed every two years.

Appendix One: Referral to Occupational Health for Medical Assessment

I would like the following employee to attend Occupational Health for a medical consultation

Name: Dept/Team:

Date of Birth:

Post held:

Home Tel No:

Mobile:

Home Address:

The following information may be helpful in dealing with this case (e.g. any adjustments or actions already made):

The questions that I would like answered are as follows: (e.g. When do you anticipate a return to work/full duties, is there an underlying medical condition are there any adjustments that need to be made to assist a return to work?)

(1) _____

(2) _____

(3) _____

Please continue on separate sheet if necessary

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of the document are not controlled.

Information about the Employee

Date commenced employment: _____

Details of all sickness absence over the last 2 years

Dates of sickness	Reason for absence

Full pay expires (date): _____

Half pay expires (date): _____

A copy of the employee's job description is attached.

I confirm that I have discussed with: (Name) _____ the reason for this referral and he/she fully understands the reasons and agrees to attend an Occupational Health appointment.

Signed:..... Name (Print)

Position: Department

Date:

Address where you require the report to be sent:

.....
.....

Appendix Two: Employee Self- Certification Form

Surname:

Forename(s)

Employee Number or NI number.....

Job Title..... Name of Manager

Work Base

Dates absent from work (inclusive):

Dates must include the first day and last day of sickness.

First day of absence:

Last day of absence:

Please give a brief description of your sickness:

.....
.....
.....

Have you consulted your GP? YES NO

Was your absence a result of an accident at work (Please tick):

Any other comments:

.....
.....
.....

Your signature:

Date: -----

Appendix Three: Return to Work from Sickness Meeting

Employees Name: _____

Position: _____

Department/ Area : _____

Date(s) of absence:

From: _____ To: _____

Total number of days absent: _____

Reason for absence:

Received: (Please tick) Self Certificate _____ Medical Certificate _____

Comments/Points discussed:

Follow up action agreed:

Referral to Occupational Health: Yes___ No ___(Please tick)

Interview Conducted by: _____

Position: _____

Date of Interview: _____