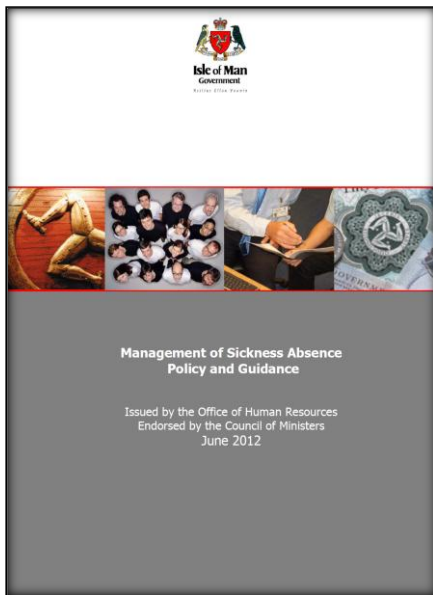
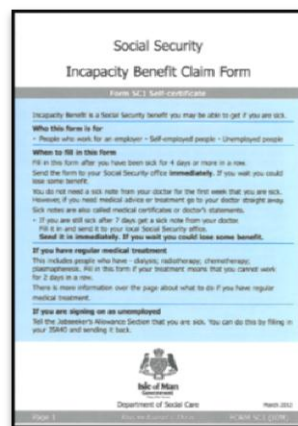


# MANAGEMENT OF SICKNESS ABSENCE – TOOLKIT

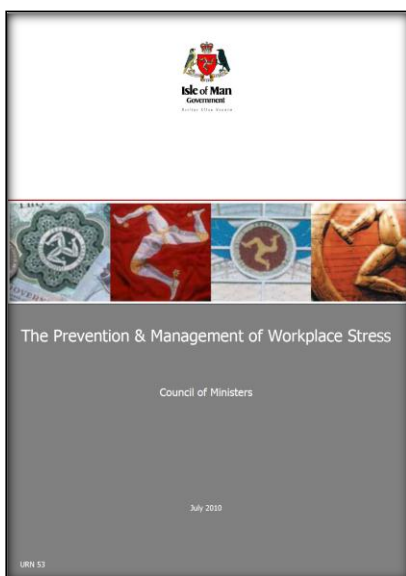
A SUMMARY OF KEY POINTS – THIS SHOULD BE USED AS A BRIEF TRAINING GUIDE FOR NEW MANAGERS AND DOES NOT IN ANY WAY REPLACE THE 'MANAGEMENT OF SICKNESS ABSENCE POLICY AND GUIDANCE' ISSUED IN 2012.



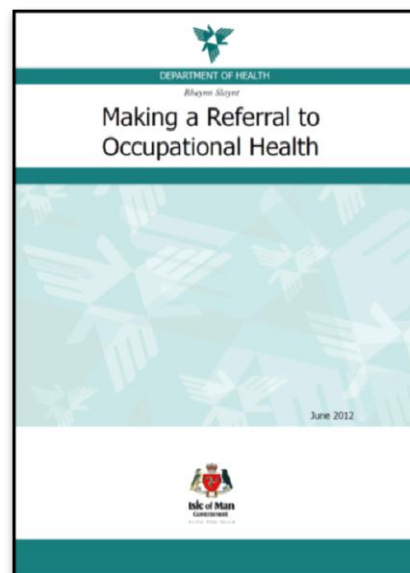
[Management of Sickness Absence Policy](#)



[SC1 Form 1](#)



[Prevention of Workplace Stress Policy](#)



[Occupational Health Referral](#)

**HOW TO PREPARE FOR A RETURN TO WORK DISCUSSION  
FOR MORE INFORMATION SEE: 'POLICY AND GUIDANCE' 4.4.3 - 4.4.4**

THE MAJORITY OF DISCUSSIONS WILL BE INFORMAL AND BRIEF. HOWEVER, THEY SHOULD STILL BE UNDERTAKEN AND IT IS WORTH MAKING A BRIEF NOTE OF THE GROUND COVERED ON THE RETURN TO WORK MEETING RECORD. (SEE POLICY AND GUIDANCE APPENDIX A1.3)

<b>Checklist of what you need to think about</b>	<b>Tick</b>
<ul style="list-style-type: none"> <li>• The member of staff's attendance record: have everything to hand.</li> <li>• Confirm all relevant documentation completed and medical certificate and SC1 received.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• What type of questions you will ask. Open questions that give the member of staff the chance to talk freely are best. For example "<i>How do you feel about being back at work?</i>" may be better than "<i>Are you happy to be back at work?</i>" <b>(See sample questions over)</b></li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• How the employee feels. Pick up clues by actively listening to what they say, making connections between the various points they make and seeking clarification.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Be positive about the member of staff's value to the organisation.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Your body language – show interest with appropriate nods, smiles and reassurance.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Be familiar with the IOM Government Stress Policy <a href="http://www.gov.im/lib/docs/hr/HR_Policies/urn53prevmanstress1.pdf">http://www.gov.im/lib/docs/hr/HR_Policies/urn53prevmanstress1.pdf</a></li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Think about how you would respond to a request for flexible work, or any other adjustments. (See Policy and Guidance 4.4.6)</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Be prepared to discuss the member of staff's absence in detail.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• If the member of staff is returning from a period of long term sickness plan a "getting back to work" programme. (See Policy and Guidance 4.4.6)</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Update the member of staff about any changes since they have been away – like progress on any jobs they were working on, changes to the team etc.</li> </ul>	<input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Finally, what are the options for the future? Discuss all the options and focus on positive outcomes. Where appropriate the member of staff may agree to be referred to Occupational Health. (See Policy and Guidance 5) In some instances you might have to take disciplinary action in you are unhappy with the explanations for the absences or poor timekeeping. Have an open mind, agree a shared action plan where possible but don't make any hasty decisions at the meeting. (See Policy and Guidance Appendix C) You may wish to contact your HR Adviser for further information.</li> </ul>	<input type="checkbox"/>

**F A C T S - An Aide Memoire for Return to Work Meetings**

**F** acts about absence – previous records, patterns

**A** sk about absence

**C** heck OK to return to work

**T** ake action – to prevent happening again

**S** um up

**End on a positive note**

## **General**

- How are you now?
- When did you first become unwell?
- What was the health problem/what were/are the symptoms?
- Have you sought medical advice?
- What did the doctor advise?
- Are you fully fit to return – if not what parts of the job do you feel may be a problem?

## **Recurring Health Problems**

- What health problems are you experiencing?
- How often?
- What happens when you have these health problems?
- How does it affect the way you work?
- What impact do they have on what you can do?
- What support can we offer?
- How will that help?
- What has your doctor/consultant suggested?

## **Underlying reasons that may be contributing to the absences**

- What do you think might be contributing to these absences?
- What impact is that having on your attendance?
- What support is available to you?
- How can we support you?
- Is there anything you can do to avoid further absence?
- How are you feeling about this situation?
- Are there any reasons for your patterns of absence?
- What would you like to happen?

## **Has medical advice been followed?**

- What advice has your doctor/consultant given you?
- What has worked?
- How well has it worked?
- What was difficult to follow?
- What made it difficult to follow?
- How can we support you in following the advice?

## **The potential effects of your absence**

- What is the impact of your absence on the department?
- Who covers your work when you are absent?
- What is the impact on your colleagues?
- What is the impact on the service?

## SICKNESS DOCUMENTATION (SEE POLICY AND GUIDANCE APPENDIX A)

- i. For periods of sickness of 1-7 calendar days:
  - Notification of Sickness Absence Form (Appendix A1 Section A1.1)
  - Details of all contact during ongoing sickness absence (Section A1.2)
  - Return to Work Meeting Record (Section A1.3)
  - Sickness Declaration Form (Appendix A2)
- ii. For periods of sickness of 8 or more calendar days:
  - All of the above AND
  - Doctor's medical certificate
- iii. Employees who are absent through sickness and go onto half or nil pay should complete a claim to Incapacity Benefit Claim form available from the Social Security Division or their GP's surgery.
- iv. For absences due to an accident/ injury at work:
  - Follow departmental accident notification procedures eg complete accident form and Health and Safety at Work Inspectorate's Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) reporting forms, if appropriate

## ABSENCE TRIGGERS (SEE POLICY AND GUIDANCE 4.6)

A more formal review by the manager/supervisor may be 'triggered' by any of the following: a pattern of sickness absence which causes concern, frequent short term absences or long term absence. Please note that these triggers offer guidance and that managers/supervisors should exercise discretion in this regard.

Long term absence is defined as an equivalent period of 20 or more working days continuous sickness absence in any period of 12 months.

Short term absences are measured using the Bradford Score. The higher the Bradford Score, the greater the number of short term sickness absences. A Bradford Score of **128** or above within the previous 12 month period will act as a trigger for the manager to undertake a more formal review. **Note:** The Bradford Score does not replace the continuous management review of sickness absence and is not the only measure to trigger concerns about sickness absence. **See online Bradford Score Calculator.**

The **Bradford Score** is calculated using the formula:

$$S \times S \times D = B$$

Where S = number of spells of absence taken by an individual in 52 weeks  
D = number of days of absence taken by that individual in 52 weeks  
B = the Bradford Score

For example:

$$10 \text{ one-day absences: } 10 \times 10 \times 10 = 1,000$$

$$1 \text{ ten-day absence: } 1 \times 1 \times 10 = 10$$

$$4 \text{ two-day absences: } 4 \times 4 \times 8 = 128$$

$$2 \text{ four-day absences: } 2 \times 2 \times 8 = 32$$

$$1 \text{ one-day absence, 2 two-day absences, 1 three-day absence} = 128$$
$$4 \times 4 \times 8 = 128$$

## APPENDIX A - FLOW CHART TO SUMMARISE REPORTING SICKNESS ABSENCE

- Member of staff to contact manager/supervisor as soon as possible, in accordance with notification procedures (normally within 1 hour of start time)
- Provide reason for sickness absence and estimated date of return
- Manager/supervisor to complete [Notification of Sickness Absence Form](#) (4)

Return to work after sickness absence of between 1-3 days

NO

YES

- Day 4 (4.2)**
- Member of staff to notify manager/supervisor of continuing sickness and
  - Manager/supervisor to record details of contact

- Return to Work (4.2)**
- Member of staff to submit [Sickness Declaration Form](#) to manager/supervisor
  - Member of staff and manager to complete [Return to Work Meeting Record](#)
  - Manager/supervisor to monitor attendance and review Bradford score (4.6.2) – If necessary proceed to [Appendix B](#)

Return to work after sickness absence of 4-7 days

YES

NO

- Day 8 (4.2)**
- Member of staff to notify manager/supervisor of continuing sickness and
  - Submit copy of doctor's medical certificate to Absence Administration Manager/supervisor record details regarding ongoing sickness absence

- Continuing Sickness**
- A Bradford Score of 128 or more points over the previous 12 months OR
  - Sickness exceeds 20 working days in one episode OR
  - Another trigger (4.6)

YES

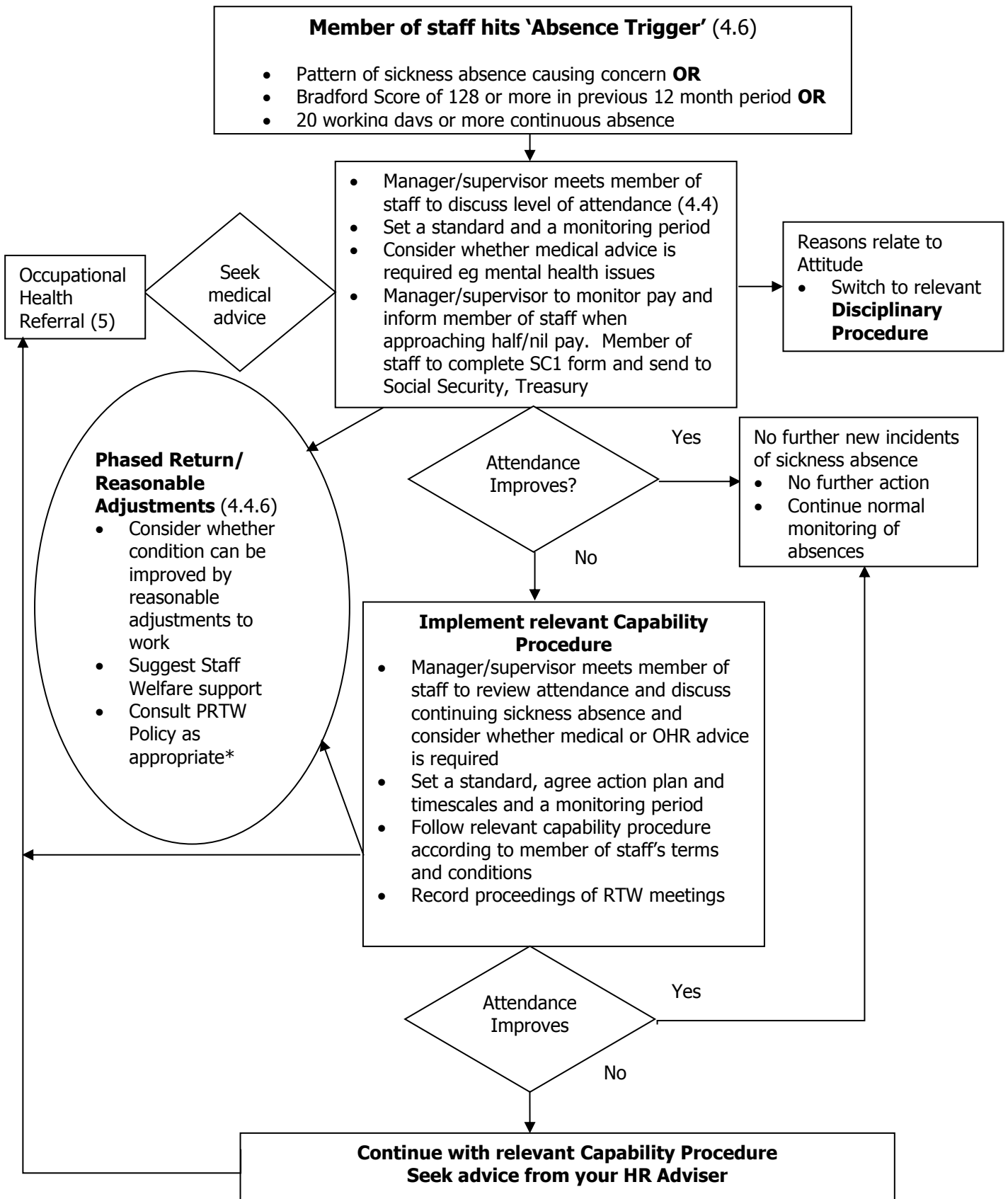
NO

See Flow Chart at [Appendix B](#)

- Return to Work (8 days or more)**
- Member of staff to submit Sickness Declaration Form to manager/supervisor
  - Member of staff and manager/supervisor to complete [Return to Work Meeting Record](#)
  - Manager/supervisor to put return to work plan into operation
  - Manager/supervisor to monitor attendance and review Bradford Score (4.6.2)
  - If necessary proceed as per flow chart at [Appendix B](#)

As soon as a member of staff goes onto half sick pay, they must submit a completed Incapacity Benefit Claim Form (SC1) direct to Social Security, Treasury.

## APPENDIX B - FLOW CHART TO SUMMARISE MANAGING SICKNESS ABSENCE



\* [PSC Phased Return to Work Policy and Procedure](#) / DHSC Phased Return to Work Policy

**Note: If mental health is an issue please refer to the ['Stress Resources and Interventions – Employees and Managers' flowchart](#)**