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Sickness absence management

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Summary

- Given the high costs to business of sickness absence, it is important for employers to put in place and implement sickness and rehabilitation policies. (See The importance of managing sickness absence)
- Employers should take measures to facilitate and promote employee health, thus reducing the likelihood of sickness absence. (See Workplace measures to prevent ill health and promote wellbeing)
- Involvement of occupational health professionals is a particularly effective tool in the management of long-term sickness absence and, as one of their functions is to examine sick employees, it is important to allow for this in employee contracts. (See Using occupational doctors and Referring employees for medical examination and report)
- Various steps can be taken to minimise the likelihood of employees experiencing workplace stress and taking time off sick as a result. (See Preventing and managing stress in the workplace)
- Employee assistance programmes can be used to promote health and wellbeing and provide help and support to individuals with personal or workplace problems. (See Employee assistance programmes)
- Employers should ensure that they have in place a clearly worded sickness absence policy, including rules on notification, required evidence, payment of sick pay and return-to-work interviews. (See Sickness absence policies, Rules on notifying sickness absence, Recording absence, Self-certification and doctors' certificates, Fit notes, Paying sick pay and Return-to-work interviews)
- It is important to maintain contact with employees who are on long-term sickness absence and, when they are ready to return to work, to devise a structured return-to-work plan and allow for adequate adjustments and support. (See Communication with employees who are absent due to long-term ill health, Rehabilitation after a period of sickness absence and Adjustments and support for a returning employee)
- It is good practice for employers to implement a drugs/alcohol policy with the principal aim of providing support to any employee who has an alcohol or drugs dependency. (See Support for employees with an alcohol or drugs dependency)

Overview

This section of the XpertHR good practice manual discusses the management of both long- and short-term sickness absence, including measures to promote employees' health and reduce absence, sickness absence policies, paying sick pay and rehabilitation after long-term sickness.

Absence and attendance > Attendance management deals with absence for reasons other than genuine sickness, attendance procedures, attendance review meetings, possible causes of frequent non-attendance, and ways of encouraging and promoting attendance.

The importance of managing sickness absence

Employee absence is a significant cost to the majority of businesses in the UK. In addition to the direct costs of employee absence (paying sick pay and paying someone else to perform the absent employee's work), high levels of absence can demotivate those employees who have to take on the absent employee's work, cause all-round disruption to productivity and adversely affect an employer's continuity of service to its clients.

Given the potential high costs to business of sickness absence, it is important for employers to devise and implement policies on managing sickness absence and the rehabilitation of employees who are or have been absent from work due to sickness or injury. Managing these matters effectively is likely to result in:

- a reduction in the potential duration of some employees' sickness absence;
- an increase in the likelihood of sick employees returning to work;
- a reduction in the likelihood of repeated spells of absence after employees have returned to work; and
- a decrease in the costs to the business of absence.

Absence rates and costs in the UK

Survey analysis > Absence rates and costs: 2013 XpertHR survey The latest XpertHR research on sickness absence reveals employers' absence levels and costs for 2012, and provides benchmarking data on sector and industry absence rates. It also examines what actions employers have taken to reduce sickness absence.

Workplace measures to prevent ill health and promote wellbeing

Diligent employers can do much to prevent ill-health absence and promote employee wellbeing. Far-sighted employers will concentrate not only on managing

sickness absence, but also on reducing the likelihood of sickness by adopting positive measures to facilitate and promote employees' health. The Health and Safety Executive slogan "good health is good business" is a principle that employers should adopt and put into practice wherever possible.

There are many initiatives open to an employer to promote employee health, and thus reduce the likelihood of sickness absence. These include:

- contacting local health organisations for advice and ideas on promoting and improving employee health;
- regularly publishing information about health and wellbeing for employees, and ensuring that the writers of the material make the topic attractive and interesting;
- encouraging employees who smoke to give up the habit, by offering support such as nicotine patches, counselling or even incentives for those who succeed in stopping smoking;
- providing healthy eating options at reduced prices in the staff canteen, and offering free fruit to staff;
- introducing weight-loss competitions or incentives, and liaising with caterers to ensure that they offer and promote low-calorie and/or low-fat meals for those who wish to watch their weight;
- organising group lunchtime walks or keep-fit sessions, and negotiating group membership with a local fitness centre or swimming pool;
- running in-house seminars on nutrition, exercise, stress and general wellness, and occasional theme days such as a "stress awareness day" or "healthy heart day";
- offering free health and lifestyle assessments on matters such as nutrition, exercise, blood pressure and cholesterol levels by qualified professionals;
- bringing in qualified professionals to conduct massage and other relaxing health treatments during lunch breaks on a free or discounted basis; and
- providing free written advice for employees who travel overseas on vaccinations and the avoidance of health risks while travelling.

It will also be beneficial for employers to devise and implement support programmes for employees who have developed an alcohol or drugs dependency (see Support for employees with an alcohol or drugs dependency), adopt specific measures to prevent and reduce stress (see Preventing and managing stress in the workplace) and provide a confidential counselling helpline for all employees (see Employee assistance programmes).

Adopting at least some of the above measures should result in a number of key benefits for employers. Levels of sickness absence are likely to be reduced, leading in turn to a reduction in costs. At the same time, employees will increase their fitness levels and have more energy to perform their work effectively. They are also likely to feel valued, which in turn encourages loyalty.

Positive health measures will assist the employer to fulfil its duty of care towards employees, while health promotion policies should help in attracting new recruits.

Promoting wellbeing in practice

Case studies > Grimsby Institute's health and wellbeing agenda cuts sickness absence Grimsby Institute of Further and Higher Education has introduced a raft of sickness absence management and wellbeing programmes to improve its employees' health and attendance. These changes have more than halved absences in just five years.

Using occupational doctors

The involvement of occupational health professionals is one of the most effective tools that an employer can use in the management of long-term sickness absence.

The key objective of an occupational health service is to protect and promote employees' health, taking into account the working environment and all its challenges. Occupational health specialists have the dual role of supporting the employer by assessing the effect of employees' health and fitness on their ability to perform their jobs, and supporting employees by examining the effect of their work and the working environment on their health and wellbeing.

Larger employers have the option of employing their own doctors and/or nurses. The alternative is to contract with a firm of occupational health practitioners for the provision of defined services.

The provision of health screening is the most common type of service that occupational health practitioners provide to employers. They can:

- conduct pre-employment medical checks to confirm whether or not a chosen job applicant is fit to perform the job into which the employer proposes to recruit him or her;
- provide routine health screening for existing employees;
- assess the likelihood of recovery and return to work of employees who are off sick; and
- check that employees who have had a period of sickness absence are fit to return to work and what, if any, adjustments would be helpful to them.

In addition to these health-screening services, an in-house occupational doctor or nurse can be allocated responsibility for:

- health education among the workforce;
- stress management policies and practices, including conducting stress audits;
- workplace design and ergonomics;
- conducting audits of working conditions and the working environment; and

• education and policy support in areas such as substance abuse, smoking, HIV and stress.

Referring employees for medical examination and report

One of the key functions of an occupational doctor is to interview and/or examine employees who are, or have been, absent from work due to sickness or injury, and subsequently provide advice to the employer on their fitness to work.

To ensure that this service works effectively, the employer should include a clause in every new employee's contract requiring the employee to agree, on request, to be examined by an occupational doctor and to consent to the doctor providing a confidential report to the employer. To give the clause some "clout", the employer's disciplinary rules should state that any employee who unreasonably refuses to attend an appointment made for him or her with an occupational doctor, or who unreasonably refuses to consent to the doctor subsequently providing a report to the employer, will be subject to disciplinary action. However, even where there is a clause in the contract requiring the employee to agree to an examination/report, the employer cannot force the employee to be examined by a doctor, as this would amount to a breach of the individual's right to privacy under the Human Rights Act 1998, and should not take disciplinary action in these circumstances unless it is reasonable.

Employee's should note that, under the Data Protection Act 1998, they must not process an employee's sensitive personal data (which includes information about the employee's physical or mental health or condition) without his or her express consent (unless one of the other conditions in sch.3 to the Data Protection Act 1998 applies), regardless of any general contractual provision stating that the employee consents to the employer obtaining medical reports on him or her. The employer should also bear in mind that the Employment practices data protection code provides that, in order for a worker's consent under the Data Protection Act 1998 to be valid, it must be freely given, and there must be no penalty imposed for refusing to give consent.

Further, guidance from the General Medical Council on Confidentiality: disclosing information for insurance, employment and similar purposes published in September 2009 requires occupational doctors preparing reports for employment purposes to obtain the employee's consent before passing any report to the employer. The doctor is also required to be satisfied that the employee is fully informed of the purposes and likely results of disclosing the report to the employer, and should offer to show the employee the report before passing it to the employer.

The real sanction for an employee who refuses to comply with his or her employer's request for a medical examination/report is that the employer may have no choice but to make a decision about the employee's ongoing employment without the benefit of that medical information.

Preventing and managing stress in the workplace

The Health and Safety Executive estimates that 13.4 million working days per year are lost due to employee stress, anxiety or depression (III-health costs introduction).

There is a great deal that employers can do to minimise the likelihood of employees experiencing workplace stress. They can begin by giving high priority to mental

health and stress when conducting risk assessments, making an objective assessment of the volume of work involved in each job, and taking positive measures to ensure that workloads, targets and deadlines are reasonable and within each employee's coping resources.

Employers should also ensure that they provide each employee with adequate training, particularly prior to a promotion or transfer to different work. Responsibility should be placed on line managers to ensure that no employee works excessive hours and that all employees take proper breaks from work. It is good practice to ensure that all members of staff take their full annual holiday entitlement and not to permit payment in lieu of holiday (except where an employee is leaving).

Other initiatives include:

- conducting anonymous attitude surveys and including questions about factors in the workplace that cause stress or anxiety;
- adopting a flexible attitude towards working patterns and hours of work (see Absence and attendance > Attendance management > Flexible working practices);
- keeping staff fully informed at all times about what is going on in the organisation generally, for example through an information and consultation committee;
- consulting staff members on all matters that affect them and taking on board the feedback that they give;
- implementing an effective and accessible grievance procedure and ensuring that employees know that they can use it without fear of retribution;
- training managers to provide feedback to staff on job performance and ensuring that this feedback is regularly and effectively delivered;
- devising and implementing a stringent anti-harassment/bullying policy and accompanying confidential complaints procedure; and
- providing confidential counselling so that members of staff have the opportunity to talk through any stress-related problems with a qualified person (see Employee assistance programmes).

Managing stress in practice

Case studies > City and Hackney NHS Trust builds a preventative framework for managing work-related stress City and Hackney Teaching Primary Care Trust believes that the NHS should be an exemplar employer when it comes to employee health and wellbeing, and has put in place a range of measures for preventing and managing stress at work.

Case studies > Metropolitan Police cuts stress-related sickness absence The Metropolitan Police Service has radically reduced its annual sickness absence from 10.3 days per officer in 2003 to 6.8 days in 2010 by implementing an innovative series of three stress management training programmes.

Employee assistance programmes

Many employers offer an employee assistance programme (EAP) to promote the health and wellbeing of their staff and provide support to those who have personal or workplace problems.

The key purpose of an EAP is to allow employees to contact an independent adviser (by telephone and/or by making an appointment for a meeting) on a confidential basis to discuss any issue that is troubling them, causing stress or interfering with effective job performance or attendance.

Although this type of service can be of considerable benefit to employees, and therefore to the employer too, it will not act to prevent or reduce stress, but only to deal with problems after they have arisen. Nevertheless, offering an EAP can be a valuable mechanism for helping to address issues that might otherwise critically affect employees' attendance, wellbeing or job performance.

An EAP can be open to employees' families as well as to employees themselves. It can provide information and advice on matters such as legal rights, finance, personal relationships and family care, as well as problems arising in the workplace.

Sickness absence policies

It is vital for employers to have clearly worded policies on sickness absence covering:

- how, when and to whom employees must give notification if they are unable to attend work due to sickness;
- what evidence of sickness must be produced;
- return-to-work interviews;
- levels of absence that will trigger a formal review;
- details of statutory and contractual sick pay and conditions for entitlement; and
- the requirement to attend medical examinations with an occupational health specialist on request.

Sickness absence policies reducing sickness absence in practice

Case studies > Culture change at GMB reduces sickness absence by 80% By introducing policies and procedures on absence management, and increasing employee awareness of stress and bullying issues, the GMB union's Yorkshire and North Derbyshire region reduced sickness absence rates from 7.3% to 1.3% over an 18-month period.

Rules on notifying sickness absence

Employers should specify and communicate to employees clear rules on the reporting of all periods of sickness absence.

The rules should stipulate a named person whom the employee must contact in the event of unexpected absence, by when the contact should be made and how it should be made. Telephone will be the usual method. Employees should not be permitted to leave messages with a receptionist or on a colleague's voicemail, unless no other option is available at the time. Other than in the event of serious illness or injury, the call should be made by the employee personally, and not by a partner, friend or relative. The employee should be required to speak to a named senior person, which will usually be his or her line manager, provide a reason for the absence and indicate how long he or she expects the period of absence to last.

If the line manager cannot be contacted at the time the employee phones in, the manager should telephone the employee at home later the same day to obtain the necessary information.

These rules should be rigorously enforced in every department, and any employee who fails to comply should be spoken to on his or her return to work and advised that proper notification must be made in the future. An employee who persistently fails to comply with the rules on notification should be dealt with under the company disciplinary procedure.

Personal telephone contact in the event of any unforeseen absence is an essential element of effective sickness absence management. It may be necessary for the employer to offer line managers appropriate training in the organisation's absence policy as well as the communication skills necessary to apply it effectively.

Innovative procedures for notifying sickness absence

Case studies > How United Response reduced absence by one-third An absence management system that gives autonomy to line managers and health-related support to employees has improved the personalised service that United Response provides to people in need - while also reducing organisational costs.

Recording absence

If sickness absence levels are to be measured and managed effectively, they need to be consistently and accurately recorded.

Responsibility for recording each instance of employee absence (whether it is for half a day or several weeks) should be allocated to named individuals in each location or department. Along with the date(s) and duration of the absence, the reason provided for it should be recorded. This data should be passed to the HR department or a named senior manager to whom responsibility has been allocated for collecting and analysing the data across the whole organisation.

Self-certification and doctors' certificates

Most employers operate a system of self-certification for periods of sickness absence lasting one calendar week or less.

The requirement for employees to self-certify all short periods of sickness absence from work should be rigorously enforced, and the rules should specify that any statutory and/or contractual sick pay that would normally be payable will be withheld in the absence of proper certification, or in the absence of proper notification - see Rules on notifying sickness absence.

As a matter of routine, employees should therefore be required to complete and sign a self-certification form for all short-term absences (including part days). Ideally, this should be done in the presence of the manager at the time of the return-to-work interview (see Return-to-work interviews). An alternative would be for the employer to facilitate electronic self-certification of absences. This could involve the employee completing a self-certification form online and emailing it to the manager, with the face-to-face element taking place at the return-to-work interview.

Line managers should check that self-certification forms have been fully and properly completed, for example by ensuring that the reason given for the absence is clearly stated. Any vague, woolly reasons such as "personal problem" or "debility" should be questioned.

If, for example, there is something in the workplace that is having an adverse effect on the employee's motivation to attend work, such as a problematic working relationship or a problem in the working environment, the manager needs to know about this in order to investigate and take appropriate steps to tackle the cause of the problem. Managers should therefore always read through what is written on the self-certification form to establish:

- that the form has been fully completed;
- that the employee has signed it (if the form was sent in electronically, the employee should be asked to sign it at a later time);
- if anything requires clarification; and
- if what is written on the form requires further investigation.

A self-certification form should require the employee to state:

- the first and last day of sickness;
- the dates and duration of the period of absence;
- the specific reason for the absence; and
- whether or not he or she consulted a doctor.

It is customary for employers to accept self-certification forms for periods of sickness absence of up to one calendar week and to require a doctor's certificate (now

known as a statement of fitness for work or "fit note") to cover longer periods of absence (see Fit notes). This requirement is in line with the regulations governing statutory sick pay.

There is nothing to stop an employer from requiring employees, either routinely or on specific request, to produce doctors' certificates to cover all periods of sickness absence whatever their length. However, some GPs may not be willing to provide medical certificates for very short periods of absence and might be against a policy that encouraged people with ailments such as common colds to visit their surgery.

Fit notes

From 6 April 2010, the traditional doctor's sick note was replaced by a statement of fitness for work ("fit note"). The fit note allows doctors to state either that the employee is "not fit for work" or that he or she "may be fit for work" taking account of specified advice from the doctor.

The purpose of the fit note scheme is to facilitate return to work in circumstances where adjustments by the employer would help the employee resume working sooner than might otherwise be the case, as the employee's doctor will be able to suggest ways that the employer can help the employee return to work.

The fit note system gives doctors the opportunity to highlight one of four options to help facilitate the employee's return to work. These are:

- a phased return;
- amended job duties;
- altered hours of work; and
- workplace adaptations.

The doctor may also write in any other option that he or she believes may be appropriate in the circumstances and can add any other relevant information.

There is no legal obligation on an employer to comply with any recommendation made on a doctor's fit note. Equally, any changes to employees' hours or job duties, whether temporary or permanent, should be made only with the agreement of the employee, and the employer and employee should agree how long the changes will last.

Nevertheless, employers should take what an employee's doctor has written seriously and give fair consideration - in consultation with the employee - as to whether or not any of the changes recommended by the doctor can be accommodated. It may be that the employee can return to work from long-term absence earlier than would have otherwise been the case if a particular change is implemented, or a change might lead to a reduction in the frequency of an employee's short-term absences.

If the employer is unable to facilitate the change(s) that the doctor recommends, the employer should explain this to the employee and treat the employee as unfit to carry out his or her normal job.

Employers should be aware that, if the employee's condition amounts to a disability in law (under the Equality Act 2010), a refusal on the employee's part to entertain an adjustment recommended by the employee's doctor could fall to be considered by an employment tribunal if the employee were to make an allegation of disability discrimination because the employer had failed to "make reasonable adjustments".

The doctor can issue a fit note for a maximum duration of three months during the first six months of an employee's ill health or condition. If the employer and employee decide that the employee is able to return to work sooner than indicated in the fit note, the employee does not need to return to the doctor for formal confirmation.

Fit notes in practice

Survey analysis > Impact of fit notes on absence management: 2012 XpertHR survey Employers continue to try to make the most of the fit note regime, despite the difficulties they have in interpreting and implementing inadequate GP advice provided on the forms.

Paying sick pay

Although it is not a legal requirement, many employers pay employees in full for defined periods of time when they are off sick. This is usually known as occupational sick pay. Sometimes a period on full pay is followed by an equivalent period on half pay.

Each employer is entitled to make its own decision on whether to pay full or part salary when employees are off sick.

It is often helpful for employers to maintain some discretion over the payment of occupational sick pay, thus allowing management to decline to pay, or withdraw payment from, a particular employee if there is good reason to do so.

A discretionary policy does, however, carry the danger that employees who are not paid will perceive the policy (and management) to be unfair. If payment of sick pay is to be discretionary, managers should be provided with written guidelines on the factors that should, and should not, be taken into account when deciding whether or not to grant sick pay. Consistency and fairness in the application of the policy will be paramount.

A policy could, for example, state that payment of company sick pay may be withheld where:

- the employee has less than six months'/one year's service with the organisation;
- the employee has had more than a defined number of absences in the previous 12 months;
- the employee has failed to comply with the company's notification and/or certification requirements (see Rules on notifying sickness absence and Self-certification and doctors' certificates);

- the employee has unreasonably refused to attend a medical examination with an occupational doctor;
- there is some evidence to suggest that the employee's absence was not for a genuine reason, although this would need to be investigated and discussed with the employee first;
- the employee's incapacity has been caused by participation in dangerous sports or activities;
- the employee has given false or misleading information concerning the reason for his or her absence;
- the employee has, in the previous 12 months, been subjected to the employer's disciplinary procedure; or
- the employee has gone off sick while under investigation for a disciplinary offence or immediately after being invited to attend a disciplinary hearing.

Other employers adopt a policy of not paying sick pay for the first three days of an employee's absence. This has the advantage of discouraging short-term absence, but the disadvantage of penalising employees who are genuinely ill. One method of minimising this disadvantage is to make the three days' sick pay payable once the employee has been absent for, for example, two weeks and has provided a doctor's certificate covering the whole period of sickness absence.

Sick pay in practice

Survey analysis > Access to occupational sick pay schemes and rates of pay: 2012 XpertHR survey This part of the 2012 XpertHR survey of occupational sick pay looks at access to schemes and the levels and duration of payment.

Survey analysis > Occupational sick pay policies: 2012 XpertHR survey This report on the XpertHR survey of occupational sick pay schemes looks at notification and evidence requirements and the circumstances in which sick pay can be withheld. We also give an overview of changes that organisations have made, and are planning to make, to their sick pay policies.

Return-to-work interviews

Return-to-work interviews have been shown to be one of the most effective interventions in managing sickness absence.

A key advantage of conducting return-to-work interviews on a regular and consistent basis is that they give line managers an opportunity to identify the possible underlying cause(s) of frequent absences at an early stage. Return-to-work interviews also:

- provide a forum for frank discussions about any relevant issues that may be contributing to the employee's absences;
- help to pinpoint any underlying pattern of absence or cause of absence, which can then be discussed and tackled;

- allow managers to establish as accurately as possible the reasons for absences;
- demonstrate to employees that their employer notices their absences and consistently implements a policy of monitoring and recording all absences; and
- make it more difficult for employees to lie about the reason for their absence, thus discouraging casual absence.

Return-to-work interviews are normally informal, but should be held in private. At the interview, the manager should:

- explain to the employee that the purpose of return-to-work interviewing is to manage and monitor employees' absences so that any problem areas can be identified and support offered where appropriate;
- ask the employee about the reason(s) for his or her absence, ensuring that the question is asked in a supportive way;
- ask the employee whether or not he or she consulted a doctor or attended hospital;
- avoid asking intrusive medical questions of the employee, while at the same time seeking to establish the basic underlying cause of the absence;
- check that the employee is well enough to attend work;
- if there is any discrepancy between the employee's stated reason for the absence and the information given when notification of absence was originally provided, ask the employee to explain the discrepancy; and
- review and check the employee's self-certification form, make sure the employee has signed it, and countersign the form.

If the manager has any grounds on which reasonably to conclude that the employee's absence was not genuinely for the reason given, the manager should put the evidence to the employee directly so that he or she has the opportunity to respond and provide an explanation.

The manager should make a record of each return-to-work interview. The record should show:

- the name of the person who conducted the interview;
- the employee's name and employee number;
- the employee's job title;
- the date and time of the interview;
- the length of the absence;
- the date of the employee's return to work;

- the reason given for the absence;
- whether or not the employee gave proper notification of absence and, if not, why not;
- whether or not the employee consulted a doctor or attended hospital;
- whether or not there is any suggestion that factors at work may have caused or contributed to the absence and, if there is, what these factors were and what action has been agreed to support the employee;
- whether or not the absence is part of an overall pattern; and
- whether or not the employee has any type of disability.

This type of record can be a very useful tool for the accurate and consistent recording of both long- and short-term periods of absence.

The form should be completed at the conclusion of each return-to-work interview and a copy provided to the employee. It should be borne in mind that each employee will, under the Data Protection Act 1998, have the right of access to the record once it is placed in his or her file.

Return-to-work interviews in practice

Commentary and analysis > Reaping the benefits of return-to-work interviews IRS spoke to three organisations that have revamped their absence management procedures, to find out how they maximise the potential of return-to-work interviews.

Case studies > Culture change reduces absence at John Wheatley college At John Wheatley College, it has taken several years for HR to instil a culture where managers carry out return-to-work interviews as a matter of course.

Case studies > Partners adopt new approach to absence at Robinson Low Francis Introducing return-to-work interviews at construction and property consultants Robinson Low Francis has helped reduce absence and improve relationships between partners and their staff.

Case studies > Line manager training improves absence at Staffordshire Council Staffordshire Council sees return-to-work interviews as an "invest now to save later" plan. This case study explores the work done in training line managers and the support offered by HR.

Permitted sick days

Some employers operate a policy of allowing employees to take a defined number of days off work in consequence of minor illness each year without activating any formal procedures (although employees are required to notify their employer of their absence in the normal way and complete a self-certificate on their return to work).

Generally this type of policy is not to be recommended as it has one major disadvantage: employees are likely to form the view that taking time off work up to the number of "sick days" permitted by the employer is their "right". It is arguable that such policies encourage employees to take time off work, irrespective of whether or not they are genuinely sick.

Communication with employees who are absent due to long-term ill health

One of the most important aspects of managing sickness absence is to maintain contact with absent employees. Employers should therefore be proactive in respect of employees' absence and rehabilitation. This will increase the likelihood of the employee returning to work sooner rather than later.

While some managers may, understandably, feel uneasy about the notion of contacting an employee who is off sick, from the employee's perspective this may be vital for his or her wellbeing and confidence, and to avoid isolation and maintain a link with his or her "normal" life.

It is therefore advisable to write into the company's absence policy that line managers should arrange to make regular contact with sick employees throughout any lengthy period of absence. The manager can instigate this process by writing to the employee to ask whether he or she would prefer personal visits, telephone or email contact, or a combination. The task of maintaining the contact can, of course, be delegated, ideally to someone who is a trusted colleague and friend of the absent employee. The form, or forms, of contact should always be agreed with the employee.

It will be very important to make sure that no pressure of any kind is put on the employee, and that he or she understands that the purpose of the contact is to keep in touch, provide support and, at a later stage, properly manage the rehabilitation process. Provided that contact is maintained using a sensitive and non-intrusive approach, it can act to prevent the employee from feeling unwanted and undervalued while absent from work.

Rehabilitation after a period of sickness absence

Regular contact with an employee who is absent from work due to sickness or injury will pave the way for a successful return to work once the employee has recovered. It is as important for the employer to manage the process of rehabilitation as it is for it to manage the absence itself.

An employee who has had a lengthy period of absence is likely to experience considerable anxiety over the prospect of returning to work. The employee may be worried about his or her ability to cope with the work, whether things will have changed or how colleagues will react. It will therefore be very important for the employee's line manager to take positive steps to welcome the employee back, make him or her feel at home and facilitate re-integration into the workplace. To achieve this, it will be helpful if the employer:

- arranges a social visit for the employee prior to the proposed return date so that he or she can meet up informally with colleagues and have a general chat;
- holds a meeting with the employee on the first day back to discuss his or her capabilities, and review if support or special arrangements need to be provided initially (see Adjustments and support for a returning employee);

- agrees with the employee how his or her progress will be monitored in the first few weeks back at work;
- takes great care not to overload the employee with work when he or she first returns, for example if a backlog of work has built up in his or her absence;
- ensures that the employee is given meaningful work to do; and
- takes positive steps to ensure that the employee feels that his or her return to work is welcomed.

The employee's line manager should always ensure that a structured return-to-work plan is devised and agreed with the employee, and any other staff members who may be affected.

Adjustments and support for a returning employee

The manager of an employee who is returning to work after a period of long-term absence should hold a meeting with the employee on or before his or her first day back to discuss the employee's capabilities and any required support or special arrangements. Special arrangements or support could include:

- by agreement with the employee, reducing his or her hours of work for a temporary period, thus allowing a gradual return to full-time work over a period of several weeks;
- allowing the employee to do some of his or her work from home;
- varying the employee's hours, either temporarily or permanently, to fit in with medical care, for example weekly hospital appointments for therapy;
- providing additional rest breaks if, for example, the employee is taking medication that has side effects such as tiredness;
- changing working arrangements to give the employee more control over what he or she does or to reduce pressure;
- making special arrangements to accommodate reduced mobility; or
- exempting the employee from certain job duties, such as heavy physical work if the employee's absence was due to a physical injury, or work that involves meeting tight deadlines where the employee experienced mental illness brought on by stress.

It would also be advisable for employers to take into account any recommendations contained in a statement of fitness for work provided by the employee's own doctor (see Fit notes).

Support for employees with an alcohol or drugs dependency

It is good practice for employers to implement a drugs/alcohol policy with the principal aim of providing support to any employee who has an alcohol or drugs

dependency. It is better to tackle this type of problem in a positive and supportive manner than to ignore it or deal with it through the disciplinary procedure. Disciplining an employee for developing an addiction without first offering support and the opportunity to become rehabilitated is, in most cases, likely to be inappropriate unless use of alcohol or drugs has led to serious misconduct.

The overall approach should be one of support not blame. The employer's policy should provide for:

- confidential exploratory discussions with the employee, ideally in the presence of an HR manager, to put observations about the employee's behaviour or unsatisfactory performance to the employee, establish the nature of the problem and make the employee aware of the employer's policy of offering support;
- treating an employee who has acknowledged that he or she has a problem with drugs or alcohol as "sick" rather than dealing with him or her through the disciplinary procedure;
- referral to an occupational doctor for a review of the employee's state of health and dependency, the likely effect of alcohol or drugs use on the employee's work and the likelihood of a recovery;
- reassurance that any admission of using illegal drugs will not be reported to the police;
- a programme of rehabilitation that could include time off work, an agreed course of medical treatment and counselling;
- recognition of any period during which the employee is undergoing medical treatment for an alcohol or drugs addiction as a period of sickness absence, and payment of normal sick pay during such periods of absence;
- a review of whether or not it would be beneficial for the employee to reduce his or her hours or undertake different, perhaps less stressful, work for a temporary period;
- agreement on a target time period for improvement or recovery; and
- agreement not to institute, or continue, disciplinary action while the employee is undertaking the process of rehabilitation.

Clearly the employee's acknowledgement that he or she has a problem with drink or drugs is essential if a programme of support and rehabilitation is to be successful. The employee should be reassured of the employer's support, conditional on his or her agreement to cooperate in trying to resolve the problem and genuinely seek rehabilitation.

If, despite the employer's support, the employee declines to acknowledge that he or she has an alcohol or drugs dependency, or appears to accept the support offered but lapses back into drinking or drug taking, the employer should advise the employee that any further instances of lateness, unsatisfactory performance or unacceptable behaviour on account of drink or drugs will have to be treated as disciplinary offences.

Case study

Sheila has been absent from work for nine months, having been diagnosed with depression. As he has obtained a medical report from the company doctor, her manager Jim is aware that Sheila's depression was brought on partly by personal problems and partly by pressure of work. During her absence, only part of Sheila's job has been covered by other members of staff, and there is now a considerable backlog of administrative work that urgently needs to be done.

Sheila's GP has now confirmed that she is fit to return to work. On her first day back, Jim takes Sheila into his office and tells her that he is very glad to have her back. He also informs her about the backlog of work, smiles and says "I'm sure you can cope, just let me know if you have any problems".

What is Jim doing wrong?

Apart from telling Sheila that he is pleased to have her back, Jim is doing everything wrong. He should have:

- investigated the "pressure of work" statement made by the doctor to establish exactly what factors in the workplace contributed to Sheila's illness;
- asked the company doctor (or Sheila's GP where consent to this had been given) to provide advice about Sheila's return to work, for example whether she is
 currently fully fit to perform every aspect of her job, or whether some adjustments might need to be made initially;
- considered whether or not an initial period of part-time working would have been helpful in easing the transition from full-time absence to full-time working;
- made concrete plans regarding completion of the backlog of work, making sure that Sheila was not expected to tackle it unsupported;
- discussed Sheila's capabilities with her on her first day back to agree what type of support should be provided initially; and
- agreed review points, such as weekly meetings, with Sheila to discuss how she is coping with her job and how she is feeling, and whether or not any adjustments need to be made.

In particular, Jim should have identified the factors in the workplace that may have contributed to Sheila's illness and taken positive steps to make sure that she was not exposed to these same factors on her return. This principle should be applied equally to physical and mental illness. For example, if Sheila's absence had been on account of a back injury sustained in a car accident, Jim would have been required to take steps to ensure that she was not expected, on her return, to carry out job duties that would put a strain on her back. Similarly, Jim should protect Sheila from any aspect of her employment that might reactivate her depression.

Key references

Ill-health costs introduction Confidentiality: disclosing information for insurance, employment and similar purposes Statement of fitness for work: A guide for employers

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