

**Procedure for Sickness Absence Management**

**Issue 1: Nov 2015**  
**WWP- 057**  
**Owner: H Wealthall**

**1. Purpose:**

1.1 To advise Managers and/or Human Resources (HR) about the fitness of employees to undertake work activities following sickness absence and at other times where health issues may be affecting employment.

1.2 To provide independent advice which will assist employees to regain their health and return to work as quickly and safely as possible.

1.3 To advise managers and individuals on such issues as rehabilitation, retirement on health grounds, incapacity, intervention strategies and services.

1.4 It ensures the employer meets its statutory obligations including those of the Equality Act 2010 and health and safety legislation.

**2. Preparation: Manager/HR complete management referral form which details:**

2.1 Employee's personal details – Name, Post Details (Job Title, department etc.), current address and telephone number.

2.2 HR and/ or Manager Details for return of report including email address.

2.3 Specific Job duties including information arising from any relevant risk assessments.

2.4 Record of sickness absence (where appropriate).

2.5 Reason for referral including specific job problems and any known relevant home or other problems.

2.6 Confirmation that the employee understands the reasons for the referral.

2.7 Any specific questions.

**3. Procedure: Administration**

3.1 The documentation is date recorded on receipt and entered into OPAS under management referral episode.

3.2 The referral is triaged by the Occupational Health Nurse Manager or designated Occupational Health Nurse in her absence within agreed time scale (e.g. 2 working days)

3.3 In most cases, initial contact will be made with the referred employee by telephone or letter to arrange a face to face appointment with the appropriate OH Professional.

3.4 Where the client has seen a particular OH Professional previously, then continuity with this person will be maintained wherever possible.

3.5 General advice may be given to a manager. However, any discussion, in which a specific employee can be identified, must be entered into their clinical records on OPAS.

**4. Procedure: Clinical**

4.1 The Occupational Health Protocol for Case Management WWP- 054 should be used to guide OH Professionals in managing consultations for management and self-referrals.

4.2 Most cases can be managed to conclusion by the OH Band 6 Nurses and OH Physio therapist within their sphere of competence, with advice as necessary from an OH Nurse Manager or OH Physician.

4.3 Human Resources and/or managers should be kept regularly informed of progress.

**5. Report: The final written occupational health report should include (where requested):**

Fitness to undertake the full range of duties, or a limited range of his/her contracted duties including details on the functional limitations of any disabilities.

An estimate of the likely duration of absence/disability.

If modification/ limitation in duties is recommended, for how long.

Whether the employee requires suitable aids (mechanical, electrical etc.) for the performance of their duties.

A programme for rehabilitation to facilitate phased return to work.

Whether the employee should need redeployment or relocation or to retire from work on the grounds of incapacity and/or whether an application to the organisation's pensions agency on grounds of ill health could be supported.

Whether and when any further review would be appropriate.

Applicants with conditions that may, in an emergency, require medical aid at work should be advised to report this to an appropriate person in the workplace once employed e.g. first aider, line manager or colleague.

**6. Forms required:**

WWF-001 History Sheet

WWF-040 History Sheet pre filled

WWF-038 Consent Form to obtain medical report

WWP-043 Procedure for Obtaining Consent for Occupational Health Assessment and Report.

All information to be entered onto OPAS under management referral or self referral episode.

**7. Key Performance Indicators:**

A face to face appointment should be offered to the client to attend Working Well within 10 working days of the management referral being received.

The report will be despatched within agreed time scale (5 working days from the appointment) unless the client has requested to see it first (see WWP-043).

Urgent referrals will be prioritised as and when required.

**8. Additional References:**

9.1 To carry out this task will normally require knowledge of relevant local health issues, job risks, work demands, work environment, the organisational/social aspects of the client.

9.2 The nurse should be familiar with the organisations policy on managing sickness absence.

9.3 The nurse should have an awareness of the possibilities for rehabilitation and what areas may be able to support this.

9.4 An understanding of the implication of legislative and Health and Safety requirements.

9.4.1 The Management of Health and Safety at Work Regulations 1999 and the Equality Act 2010.

9.4.2 Data Protection Act 1998 and the Access to Medical Reports Act 1988.