

Return to Work Discussion Guide

This guide is designed to help you conduct a thorough Return to Work discussion. This should be held either shortly before the employee returns to work or on their first day back at work (this may be by phone, if appropriate). It may not be essential or appropriate to cover every aspect, however the more information you can gather, the more responsive you are able to be to your employee's needs, and should the need arise in the future, you will be able to provide a clear rationale for any support you have given/not given.

Ensure you have read and are familiar with the details in the Attendance Policy before the discussion. There are also FAQ's to support any given situation, which are accessible in Knowledge (FAQ's) via People First.

Our aim is to safely bring an employee back to work in some capacity as soon as practicable. This may not always be in their current role, it may be to perform a role or part of a role that has been agreed for a **temporary** period of time. This will support their rehabilitation back to work as well as reduce overall absence for the immediate team/department. This may mean phased returns for more employees', particularly following short to medium term absence, to reduce the possibility of the absence becoming longer term.

Make notes about your discussions e.g. using Word, e mail etc. and provide a dated copy of your document to the employee.

If nothing else do this!	
1	Find somewhere confidential and allow time for a brief discussion
2	Record the relevant dates of absence and ask them how they are now
3	Is there any support that could be given?
4	Make a note of your discussion in case you need to refer to it again in the future
5	If one off absence, leave it there. If they have had previous absence, remind them of the policy and make sure you have their recent absence data to hand. Follow policy if monitoring is triggered

Pre-Discussion Action	
6	Ensure there is an appropriate confidential space available for your meeting, or confirm details if to be held by phone.
7	Signpost employee to the Attendance and Wellbeing Policies to encourage discussion
8	Gather together the information you have on their current absence i.e. Notification, Fit notes, OH reports etc
9	Gather together any information on past absences, if relevant to your discussion (if a trigger has been breached or patterns of absence become a concern to you)

10	Look for any patterns within your data e.g. the reasons for absence, levels of absence, current support plans, absence on the same days each week or same periods each month/year etc NB. Do this even if there is no trigger, in case there are any other personal issues you may need to talk about further e.g. family concerns
11	Have a copy of any Tailored Adjustment Agreement if in place.
12	If the employee is not 'fully fit', consider in conjunction with medical advice what duties they are able to perform in your department.
13	You may need to consider what transferable skills they have to return to work in a different capacity or department, as part of a phased return. You may already have had discussions with other department managers to discuss how they are able to support this.
14	Consider how you can use the Time off Work or Flexible Working Policies to support an extended phased return if appropriate. As part of this, have the employee's annual leave record available.
15	Consider what else is happening at work that may be a key factor in their absence? E.g. changes to working practices, relationships etc
16	As part of your preparation, should you have any concerns or questions prior to the meeting please discuss them with HR Direct (2 7700)

Discussion:

17	Was the local reporting procedure followed?
18	Establish the detailed reasons for their absence – if work related advise HS&W via HR Direct
19	Discuss any patterns of absence identified or if trigger/about to reach trigger points. If trigger point reached, explain monitoring starts from date of return from absence (note- this is not always the first working day) until a full meeting has been arranged)
20	What 'self care' have they carried out? i.e. what support have they sought from GP/Pharmacy/NHS111/changes to their diet/exercise etc. NB. This is an expectation in the Attendance and Health and Wellbeing Policies
21	Establish if there are any personal factors that have impacted on their ability to return to work sooner, to help you consider what options you have to support them. e.g. KIT days
22	Discuss any support that the employee may need from the organisation to help them in their return to work and to maintain regular attendance going forward NB this may not always be health related
23	Discuss any OH reports or any other appropriate advice received from a healthcare practitioner – including any medication that may affect their work
24	Have OH suggested any reasonable adjustment due to a disability – if so discuss Tailored Adjustment Agreement already in place or may need to complete
25	Is a phased return appropriate? If so agree what this will be (see policy for guidance on this).
26	If a change to a role is required temporarily, but for longer period than 4 weeks, consider options of: <ul style="list-style-type: none"> • temporary change to their working hours/pattern using the Flexible Working Policy • using annual leave
27	If a longer term or permanent change is required use the Flexible Working Policy and process

Post Discussion Action:

28	Where appropriate, agree a return to work action plan (with timescales) and ensure you follow up on any actions required of the individual or you have said that you will deliver.
29	Follow up on formal monitoring process if appropriate – i.e. invite to formal meeting and follow process and issue letter.