



MINISTRY OF DEFENCE

The Guide to Managing Long-Term Sickness

Civilians in Defence



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Introduction

Who is this guide for?

1. This guidance offers managers advice on how to manage long-term sickness absence; support employees during sickness absence; and how to plan a successful return to work by using the guidance and [HR Form 2377: Fit for Work Plan](#).

What is the purpose of this guide?

2. MOD is committed to reducing civilian sickness absence. It is important; therefore, that managers do all they can to help employees return to work following sickness absence. In May 2010 DWP introduced the fit note to help as many individuals remain in and make a successful return to work. MOD has amended its sickness absence policies to meet the aims and benefits of the fit note process. This guidance aims to help managers and employees deal with long-term sickness absence and show that positive conversations between managers and employees who are absent from work will help to:
 - focus on what the employee is able to do or might be capable of doing
 - help the employee to establish positive beliefs that a return to work is possible
 - identify and agree the help and support needed to enable the employee to return to work
 - address any concerns the employee might have about returning to work
 - develop a structured return to work plan to include advice and guidance from the Fit Note where the manager has received one.
3. It does not mean that employees should feel compelled to return to work before they or their doctors feel that they are ready to do so.

SECTION 1 – Planning

Fit for Work: focusing on planning a successful return to work and full capability

4. This guidance focuses on helping managers and employees to plan a successful and speedy return to work from sickness absence by engaging positively and actively managing the absence. The manager can help employees believe that they can return to do their job or contribute to their job – do the tasks, manage their health in the workplace, and manage relations with colleagues. This is helped by active involvement of the manager through a clear endorsement that this should be the way forward.
5. The **Fit for Work plan** has been developed to help managers work with employees and other parties to plan all the goals and actions required. This guidance should be used by managers when conducting reviews with employees who are off work, or likely to be off work, due to long-term sickness for a period of 28 calendar days or more. This is likely to be most effective in cases where the employee has recently moved into the long-term sickness category. This is because the longer someone is absent from work, the more other factors start to impact on how they feel about returning. This approach is also appropriate for employees who have been absent from work for longer periods – a positive outcome is still achievable.

Why plan for return to work?

6. Whilst work is good for an employee's health and wellbeing, when someone has been off work for some time, planning or even contemplating a return to work can seem challenging. It is sensible, therefore, for managers and employees to plan for a successful, well-managed return to work. Atos Healthcare, MOD internal OH providers, and the DBS Wellbeing, Conduct, Absence and Leave (WCAL) Consultancy Service, including the MOD Employee Wellbeing Service are also on hand to support managers and employees in this process.

Do I need to seek occupational health advice?

7. When an employee is absent, or is likely to be absent, due to sickness for 28 calendar days the manager must contact the DBS for an occupational health (OH) referral. For absences due to psychological illnesses or musculoskeletal conditions the referral should be sought as soon as the condition has been identified. The advice received will help inform the Fit for Work plan. Further into the absence or when planning for an employee's return to work, managers should seek another occupational health referral. This will determine the likelihood of a return to work.

When referring to OH, managers should expect to ask and receive answers to the following key questions:

- Is the employee fit for any part of their job (the job description and absence history must accompany the OH referral)
- What specific functions can the employee carry out now with their health condition?
- What specific functions is the employee not able to carry out now with their health condition?
- To what extent might their functional capability be improved with help or workplace adaptations?
- When will they be back to both full duties and capability
- What advice can you give about practicable help/adaptations that MOD might consider?
- How long do you recommend we provide this help for?
- When would you estimate the employee will be able to return to work:
 1. on adjusted duties?
 2. and to full duties?

The answers can be used as part of the Fit for Work plan

8. Managers should only ask those questions that are relevant to their employee. Managers should also be aware that the occupational health practitioner may not be able to address **all** of the employee's requirements. For example, they might not identify a need for refresher training. This is because this need would not automatically be linked to the employee's physical or mental health.

SECTION 2 – Keeping in Touch

The importance of Keeping in Touch with employees on sick absence

9. Keeping in touch with employees is a key factor in helping them back into work after long-term absence. Contact may be seen as a sensitive topic by some employees who may fear that they are being pressed to come back to work before they are ready. Without contact, absent employees can feel increasingly out of touch and undervalued. Physical and mental health can worsen, the employee can lose self esteem, and a return to work becomes even more difficult to contemplate.

10. Dos and Don'ts of Keeping in Touch during sickness absence:

Do:

- Take time to know your employee and the things that affect their wellbeing (this information can help both parties to decide the kind of contact that would be welcome);
- Create a climate of trust by mutually agreeing how and when to keep in touch, being clear about the reasons for doing so, and by sticking to arrangements;
- Consider training on handling work-related issues for yourself, other managers and employees;
- Be flexible. Treat every case individually, but on a fair and consistent basis;
- Encourage discussion about how best to develop a workable plan;
- If the employee is able to travel, suggest that they come in to work to see colleagues at lunch time, or invite them to a work event, for example, a social gathering, or team briefing;
- Encourage the employee to meet with another colleague with whom they share similar interests or work projects if they are coming in to the workplace; this may not always be possible, but it can help to reduce any anxieties - big groups may be daunting;
- Keep a note of all contacts made and share this with the employee;
- Give the employee the opportunity to discuss in private their health or any other concern that might affect their performance, attendance or plans to return to work. Do not pry or insist that the employee discusses something that they are not happy with;
- Remember that medication may have side effects on things like stamina, concentration, mood, driving etc.
- Welcome the employee back to work, carefully follow welcome back procedures, and complete any actions promptly.

Don't:

- Wait until an employee goes on long term absence to begin to think about your keep in touch strategy. Instead, plan ahead in partnership with other managers and trade union representatives;
- Put off making contact, or pass responsibility for doing this to someone else unless there are very good reasons for doing so;
- Make any assumptions about the employee's situation or their medical circumstances;
- Talk to other people about the employee's circumstances without their knowledge and consent;

- Put pressure on employees to discuss their health or contemplate their return to work before they are ready;
- Tell the employee that colleagues are under pressure or that work is piling up whilst they are away;
- Forget that recovery times for the same condition can vary significantly from person to person.

Planning proactive and constructive Keep in Touch discussions

11. When keeping in touch, it is important that managers fully understand the MOD Sickness Absence policies and apply them in a consistent, accurate and fair manner. At 28 calendar days, when the sickness absence is regarded as having become long-term, the manager will be prompted by the DBS and should arrange to have a **supportive** conversation with the employee to discuss where they are now in their return to fitness and whether they are ready to start contemplating a return to work. This should happen in **all** cases of long-term sickness absence. This will allow both parties to begin to explore ways of enabling a positive dialogue, to set achievable goals by mutual agreement, and to consider practical ways of bringing coping strategies that are proving effective at home into the workplace.
- The important consideration is to keep channels of communications open, amicable and positive.**
12. The first few seconds and the tone of a conversation can be critical in determining a successful outcome. An active approach which seeks to build trust, insight and understanding should always be adopted. It is important to be respectful and not blame the employee for being off work. The key is to focus on the immediate and longer-term future, ideally involving the clear goals of a successful return to full fitness and work performance (see [HR Form 2377: Fit for Work Plan](#)).
13. It is better for managers to be relaxed and free of pressure when they make contact with the employee. Remember that the employee may well be feeling anxious in anticipation of the meeting/call. If the employee feels that their manager is just going through the motions or they are too stressed to listen properly, they will be less likely to engage in discussion. Managers should always check that the employee is happy for them to be the point of contact; if not, they should establish the employee's preferred contact. The important consideration is to keep channels of communications open, amicable and positive.

When is the right time to discuss an employee's return to work?

14. Whilst discussions about an absence must commence from the outset, talking about a return to work too soon might put an employee under pressure, particularly when there are underlying work issues to tackle (for instance workload or bullying and harassment issues). But to leave it too late may mean that the employee starts to lose confidence in their ability to return, even with appropriate support. In cases of long-term sickness, the right time will depend on the employee and the nature of their illness, injury or disability. Receipt of a fit note containing return to work advice from the employee's GP could be an appropriate prompt for a discussion. In any event, the manager would be expected to hold the discussion

at 28 calendar days of absence, because in many cases, this is the best time to begin working towards a return to work.

15. In cases of injury or post-operative recovery, there may be clear physical milestones in the healing process that will influence the plan. In the case of absence caused by mental health issues (for example stress, anxiety or depression), additional third party support and advice may need to be sought. For example, the employee may wish to consult the MOD Employee Wellbeing Service (EWS), a health professional or trade union representative, or seek help in achieving simple life tasks like getting up at a certain time, re-establishing a daily routine and so on, before being able to contemplate a return to work. It is important to explain the purpose of the discussion as early as possible in the conversation. Uncertainty and anxiety can inhibit communication and may contribute to an employee's delayed return to work. These issues should therefore be addressed early on. Listening actively, carefully and sympathetically to what the employee is saying will allow managers to assess the situation much more quickly.

How do I approach an employee's worries or questions when planning a return to work?

16. Employees often feel that their ability to contemplate a return to work or perform their duties diminishes the longer they are away from work. This can give rise to understandable concerns. It is very important, therefore, to reassure the employee and reinforce the value they bring to their role, their team and the wider organisation. Praise and encouragement can bring a sense of worth and wellbeing to the employee at a time when they may be feeling both isolated and vulnerable. Common underlying concerns expressed by employees can include:

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- **Not being able to catch up with their work.** Managers should reassure employees that a carefully planned return to work and phased resumption of duties will help them feel in full control of their working situation;
- **Concerns about a particular colleague or situation at work.** Managers should explore what the specific issues are, and consider whether mediation or changes to the workplace environment might help plan an effective return to work;
- **Fears that colleagues might be resentful because they had to cover their work.** Be prepared to acknowledge if this is true, but reassure the employee that early arrangements for a supportive and well-planned handover of work will be made;
- **Worry that colleagues will not think them capable.** Reassurance by the manager about tasks that the employee has done particularly well before their illness will help allay these fears;

- **Worry about how colleagues will react on returning to work.** Managers should discuss how the employee would like their return to be treated by colleagues, and reassure them that their wishes will be respected;
- **Concerns about confidentiality.** Ask the employee if colleagues know why they are off and what, if anything, they wish them to know about. Respect their confidentiality at all times, Do not ask questions about their health if they are not happy to talk about it;
- **Worry about re-engaging in work where an employee believes it made them ill.** Managers should ask the employee if they feel specific tasks could be done differently or aspects of the working environment might be changed. They should explain that in most cases work is good for health and can aid recovery by giving an outlet for the individual's strengths and creative talents;
- **Concern that symptoms will recur or the condition might relapse.** Acknowledge the employee's concern that this might happen, but reassure them that many conditions can be managed well with the right level of support. The employee should only return to work when their doctor feels that they are ready. The employee should be given an opportunity to fully discuss their condition before they return so that ways to manage symptoms or allow medication to be taken at work can be explored. This will give the employee greater control and help them feel more secure in the workplace;
- **Anxiety about current work performance or workload pressures.** Worries about job performance can be a factor in an employee's absence from work. The manager should remind the employee of previous examples of good performance. If the employee feels that the manager believes in their ability to handle tasks well, this can have a very powerful influence on their level of self-confidence;
- **Worry about Restoring Efficiency (Attendance) action.** Uncertainty about whether the employee could be subjected to formal restoring efficiency action could be a barrier to returning to work. Managers should acknowledge and address any concerns as they arise. If the manager has decided that formal action will not be considered, then they should advise the employee of this to completely allay their fears. Equally, if they need to consider formal action on return, they should explain clearly why this is necessary, and what to expect. The manager should provide a copy of the Restoring Efficiency Attendance policy and process. Remind the employee about other sources of help and support that are available, for example the MOD EWS or their TU or Staff Association representative.

Structuring the discussion

17. Conditions affect individuals and their adjustment differently, for example anxiety and depression, which may affect how they respond to reasonable suggestions by the manager. Dialogue can help the employee to take small but positive steps towards return to work. An apparent unwillingness to engage is a possible symptom sometimes experienced by people with such conditions. The DBS can offer managers

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professional guidance on how best to handle such discussions. Managers may decide to meet the employee in person or get in touch via telephone. Below are a few tips on how to have a successful, supportive and friendly discussion:

Engage with the employee

18. Begin on a positive note: "It's good to see (hear from) you again. I just wanted to see (hear) how you are and keep you up to date about work and colleagues."

Whenever you speak to the employee, explain the reason for contacting them

19. There may be various reasons, but typically it will be to keep in touch with the employee, enquire as to their employee's progress and give them an opportunity to discuss their needs or current situation. Managers should ask how their employee is (but should avoid making detailed enquiries about symptoms or treatment). Ask just enough to be able to gain a picture of how the health condition is impacting on what they can do. It is helpful for managers to be aware of any ongoing treatment or investigations, and the relevant dates, if the employee is happy to share that information. Managers should also ask what the employee hopes to get out of the conversation. Seeking an employee's input will give managers a good insight into the issues that need to be addressed and helps to focus effort on setting achievable and specific goals. During the conversation, ask what kind of improvements the employee has noticed since the last discussion, and what has helped them achieve progress.

Ask just enough to be able to gain a picture of how the health condition is impacting on what they can do.

SECTION 3 – Handling Setbacks

Handling setbacks

20. The manager may also have to be prepared to respond to situations where the individual reports little progress or has experienced setbacks. In such circumstances the manager needs to be prepared to respond in a way that recognises this but looks to support and reassure the employee. The manager should show interest and concern for the welfare and wellbeing of the employee by making links in the discussion where possible to the benefits of return to work. It is worth remembering that individuals recover and adjust over different timescales. Setbacks can and do occur but the manager should give positive messages to help the individual continue to make plans and encourage the small steps highlighting that these are really important. The manager should ask what can be done from a work perspective to support the individual.

Be positive and supportive

21. Managers can help by reassuring the employee that both they and their colleagues are keen to see them back at work. Contact with work can easily be established by updating the employee on what has been happening at work, and by mentioning colleagues. Managers should also take the opportunity to invite the employee to team meetings or work social events, provided of course they are able to travel or drive safely and feel ready to socialise.

Discuss where the employee is in the recovery process

22. In order to facilitate the employees return to work the manager should discuss with the employee the guidance on the fit note. They should then discuss with the employee which aspects of their job they feel they can do, or could do with help. Deal with specifics but let them talk freely. Emphasise that most conditions can be managed in the workplace and encourage them to talk through the possibilities about how their needs might be accommodated. Sympathetically question any assumptions the employee has made about what they can/cannot do. Be encouraging and positive, and offer to consider proactive solutions to ideas suggested. The employee may focus on their symptoms, treatment and negative impacts of these. Managers should acknowledge this but re-focus the discussion on the positive – what can the employee do, or might they be capable of doing, with help.

Be encouraging and positive, and offer to consider proactive solutions to ideas suggested.

23. Questions that the manager might ask the employee include the following:

- Do you feel that you are making progress in the recovery process?
- Have you had thoughts about work that you would like to discuss? This may include contact with colleagues, interest in particular projects, progress and developments

- Thinking about your job, what tasks do you think you will be able to manage on your return to work?
- How can I help you return to work? Is there anything that is causing you particular concern?
- Can you foresee any challenges affecting your return to work? If so, what are they?
- Could you help me understand why you feel you can't do that particular task?
- Can we identify a clear goal to aim for? (For example, the manager could invite the employee to a work or social event, or discuss setting a target date for returning to work).

Identify what needs to be done

24. This is an important stage in the discussion because it offers insight into how the employee perceives their chances of a successful return to work. Managers should be careful not to misinterpret signals the employee may give. Just because they do not seem to be enthusiastic or forthcoming about workplace adjustments or a gradual return does not necessarily mean that they are not interested or motivated. They may simply be concerned for their health and unsure if proposed actions will help. Be realistic – do not promise anything that cannot be achieved within a reasonable timescale, or indeed at all!

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25. The manager should ask the employee:

- Whether they have found anything that is helping them to manage their condition effectively. For example, if they have a bad back or other physical problem, how are they managing this away from work?
- What changes could be made in the workplace to enable the employee to undertake their duties?
- Is there anything the manager might do to help the employee come back sooner?
- How might they support them in a gradual return to work?

26. Conclude the discussion by:

- Asking the employee if they found it helpful and asking them if they would like to discuss anything else;
- Summarising actions that have been agreed and who is responsible for them;

- Inviting the employee to contact you if they have any concerns or wish to discuss plans/progress;
- Consider seeking Occupational Health advice if it is agreed that advice on managing a phased return to work or work adjustments would be helpful;
- Agreeing the next contact and wishing the employee well.

SECTION 4 – Using the Fit for Work Plan

Using the Fit for Work plan

27. Managers should complete the [HR Form 2377: Fit for Work Plan](#) to keep a record of all goals and actions and progress identified and agreed during discussions with the employee. Responsibility for completing and monitoring this document lies with the manager. This is a template for recording and monitoring the things that need to be in place to help an employee and manager plan a return to work. The plan contains the following four components:

Responsibility for completing and monitoring this document lies with the manager.

- **Checking the fit note for doctor's return to work advice.** This is a description of what the employee can and cannot do, or might be able to do, with help. This information can be provided either by Occupational Health or by the employee's GP on the fit note. The advice should be refreshed periodically (no more than 3 monthly intervals) as the employee makes progress.
- **Clear goals.** These clarify where the employee is now in their return to fitness and work, where they are aiming to be, and the goals that will help them progress from one to the other. Goals could include any of the following:
 - Establishing and strengthening links to work (by attending work social events, or meeting managers/colleagues in or out of work);
 - Developing the belief that they will make a successful return to work
 - Having the confidence to contemplate returning to work;
 - Returning to work as part of an agreed rehabilitation plan;
 - Doing more work for longer periods;
 - Remaining at work for whole days (subject to conditioned hours);
 - Increasing performance, e.g. completing more and more of the whole job.
- **Actions.** The plan should identify clear and specific actions that will enable the goals to be met. These could include any of the following:
 - the employee approaching their doctor or other NHS medical services;
 - contacting the MOD EWS;
 - changes to working patterns or hours, including temporary changes as part of a rehabilitation plan;
 - the provision of supportive equipment

- physical workplace adjustments;
- retraining;
- being mentored;

This is not a complete list. Each action should be assigned to the employee, their manager, or another named individual to carry out. Remember that goals are distinct from actions; a goal is a clear target to aim for, whilst an action is something that can be done to help achieve this goal.

- **Review.** All goals and actions should have agreed review dates by which achievement can be assessed. It is good practice to agree a clear direction with the employee and build in regular reviews to help achieve positive outcomes.

Manage expectations

28. It is not always possible to make recommended or preferred reasonable adjustments. For example, an alternative job posting may not be possible because there are no other suitable jobs in the area. Managers should be careful not to promise what they cannot deliver, but should act quickly and proactively to investigate whether and how the adjustments identified can be implemented, letting the employee know as soon as possible.

Managers should be careful not to promise what they cannot deliver.

Keep to further contact and review dates

29. Keep the Fit for Work plan up-to-date and make sure future contact and review dates are met. Both manager and employee should be clear about the date, time and format of reviews, for example whether they will be by phone, face to face and where they will take place.

Closing the Fit for Work plan

30. Managers should close the Fit for Work plan following the final review once the employee has returned to full fitness and is sustaining satisfactory performance and attendance. The decision to close the plan should be discussed with the employee.

What happens if the employee does not return to work?

31. If the employee does not return to work, consideration must be given to their future employment with MOD. Managers will already be in contact with a DBS HR Consultant and will be offered advice regarding Ill-health Retirement and Dismissal procedures. It is important that managers seek formal advice from the DBS before taking formal action.

This Guide is based on original guidance produced by the Department of Work and Pensions for their managers. We are grateful to them for sharing this information.