

This form should be completed when a member of staff returns to work after sick leave or, if still on sick leave, whenever a doctor's certificate is supplied. Staff can self-certify absences of seven calendar days or less using this form. For absences longer than seven calendar days, a medical certificate from the member of staff's doctor is required. Forms and certificates should be forwarded via the person's manager or supervisor to the HR office for the faculty/ division/ department as soon as possible.

Personal Information

College Identifier (CID): [] or Birthdate: _____
Surname _____ First name(s) _____
Dept/Div (PHRO) _____ Section (HRO) _____

Statement about Sickness Absence

(for completion by the manager if the member of staff is still off sick)

What date did this sickness absence start?.....
What date did you return to work? (give date) or tick here if still off work
What was your last day of sickness? (give date) or tick here if still off work

Reason for Sickness Absence

(for completion by the manager if the member of staff is still off sick, attach a doctor's medical certificate)

1. What was the type of problem causing the absence?

Tick the appropriate box below. Attach a doctor's Medical Certificate (Med 3 or 7) if this has been supplied. Ensure the member of staff's, address and CID number are completed in block capitals on the reverse of any doctor's certificate

- cold or flu ear, nose or throat problem Chest/ breathing difficulty asthma infection
- muscle or joint strain back problem injury skin problem blood disease
- mental health/ stress nerve problem headache/ migraine eye problem dental problem
- cancer stomach or gut problem heart or circulation problem gland/ hormone problem Pregnancy-related
- Urinary or gynaecological alcohol or drug problem Reason provided on doctor's certificate (attached)

2. Do you think the illness or injury may have been caused by work? Yes No

If Yes give details: _____

I confirm that the information I have given above is correct

Signed: _____ Date: _____

Departmental/Divisional Confirmation

Have any earlier medical certificates or sickness absence notification forms relating to this absence already been sent to HR?..... No Yes

If Yes, when: _____

If the member of staff has returned to work, for how many work days or shifts was s/he absent for? days/shifts

Comments: _____

Departmental/Divisional Signatory _____ Print Name _____

Telephone extension: _____ Date: _____

Once completed this form should be sent to the designated HR team for your Faculty/Department/Division, along with any Medical Certificates. See reverse of form for the return to work checklist

Return to Work meeting

This checklist is intended as an aide memoire. Not all points will be applicable to short absences. It is good practice to keep a written record of any important issues discussed at a return to work meeting

Recent illness

- Does the person feel fully recovered?
- Do they have any concerns over resuming normal duties?
 - If so, are any temporary alterations to duties needed?
- Does the person think their illness have been caused by work?
 - If yes consider referral for an Occupational Health assessment
- Is the person taking any treatment that may affect alertness?
 - If yes review risks & consider referral for Occupational Health advice

Future fitness & well-being

- Does the person have any continuing health problems that might affect attendance or fitness for duties in future?
 - If yes, consider referral for an Occupational Health opinion¹
- Will the person need time away from work to attend doctor's appointments etc?
- Does the person have any problems in their work or personal life that might affect attendance or ability to cope with their work
 - If yes, remind the person of support available via EAR, the staff counselling & advice service²
- Discuss expectations on future attendance

Resuming work

- Update on any workplace developments whilst absent (e.g. changes in procedures, staff, important announcements)
- Discuss handover of work covered by others whilst absent, if appropriate
- Discuss arrangements for dealing with backlogs of correspondence & work tasks
- Discuss rehabilitation plan e.g. build-up in hours of work and duties (if one has been recommended by Occupational Health)
- Review work plans or performance targets³

Documentation

- Sickness absence form (HR10) completed
- Doctors certificate supplied (*Required* for absences of more than 7 calendar days)
- Employee details recorded on reverse of doctor's certificate (if supplied)
- HR 10 & certificate sent to HR
- Local absence record updated
- Note made in personal file of any significant issues discussed or agreements made

Notes

1. A referral for an Occupational Health fitness assessment should be considered if the member of staff considers their illness may have been caused by work or indicates that they have a continuing medical problem that may affect their fitness for duties, or cause absence again in future or if the manager has concern over fitness to resume work.
2. The Staff Counselling and Advice Service can provide a wide range of support to staff and members of their family affected by problems in their work or personal life. See www3.imperial.ac.uk/occhealth/services/counselling
3. The Department's HR Adviser can advise on management of non-health issues or agreements to vary duties etc. to accommodate problems

For further guidance see Sickness Absence Policy and Procedure -

<http://www3.imperial.ac.uk/hr/procedures/health/sicknessabsence>