



Leicestershire Traded Services

Therapeutic Return to Work Procedure for Thurlaston CE (Aided) Primary School

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1. Introduction

This document is an Annex to, and must be used in conjunction with, the Procedures for Managing Employee Attendance in Schools/Colleges/Academies and is intended to apply to all School based employees, including Head Teachers.

The employee's General Practitioner (GP) and/or Occupational Health may recommend and provide advice that the employee returns to work on a therapeutic basis and how that could be facilitated – although this does not always need to be the case and alternatively you may wish to suggest this as a way of supporting an earlier return to work (but a medical certificate would be needed to support periods of time not worked due to ill health). This means that the employee will initially work less than their contracted hours and it is also important that consideration is given to duties/responsibilities as well as hours.

2. Definition

Throughout this document the term General Practitioner (GP) is to be read to mean the medical practitioner who is responsible for the employee's care and is legally certified to issue medical certificates, or any consultant or specialist which the employee is under the care of.

3. Receiving advice from the GP and Occupational Health

During the period of a therapeutic return to work an employee should be issued with a Medical Certificate by their GP either stating that the employee is fit to return to work or fit to return to work on a therapeutic basis during the agreed period. (If you have staff absence insurance you may find that medical ratification is required for the phased return to work in order that claims can continue to be made against your policy).

The possibility of a therapeutic return to work can be considered at any stage throughout the procedure to support an employee back to work. Discussions regarding

the possibility of a therapeutic return should begin as soon as possible because the steps in a) or b) below may take some time to complete with all of the necessary arrangements being in place in advance of the therapeutic return period commencing. In cases where the employee's GP recommends a therapeutic return to work, consideration may be given to a referral to the Occupational Health Service, if their advice has not previously been sought in respect of the proposed return. However, this is not a requirement and you can work with GP advice to facilitate a phased return.

If a referral to Occupational Health is made, the school will be notified of the date and time of the appointment in order for them to notify the employee directly. The employee is required to attend the appointment.

Following the appointment, Occupational Health will write to the referring officer with their advice and recommendations.

Should Occupational Health advise that there is no underlying medical condition, it will be useful to work closely with HR on case management and advise the employee to make arrangements to meet them to discuss how they should start to prepare for a return to work.

Where there is an underlying medical condition, Occupational Health may identify work-related factors which are either causing or contributing to the medical condition or other barriers that are preventing the employee from returning to work. It is important that you fully consider the advice and information provided by Occupational Health, GP, HR, the employee and, if requested, their representative to try to address the work-related factors or remove the barriers. In some cases the employee might be invited to take part in a case conference whereby all parties are involved in addressing the issues that are preventing the employee from returning to work. If there is anything in the Occupational Health report that is not clear, then this should be referred back to HR to follow up.

Occupational Health advice once received should provide some level of understanding about what might now be needed to help the employee return to work.

A structured programme (Support Plan) will be drawn up with a view to the employees contracted working hours being resumed at the appropriate time but this should be kept under review in light of the employee's progress. If the employee is not able to demonstrate some progress towards resuming their contractual hours within a 6 week period, further advice should be sought from HR with a view to an alternative course of action which could include consideration of a permanent change in hours or working pattern.

4. Preparing for Return to Work

There are many options and changes which may need to be considered when preparing the Support Plan, the following are some of the issues that should be taken into account:

- a) Recognition of the nature of the difficulties that the employee has suffered and the problems they may face when first returning to work

- b) To help the employee to overcome any problems and expedite a successful return to work the Support Plan, wherever possible, flexibility may be needed about:
 - i. hours of work and/or
 - ii. duties and/or
 - iii. responsibilities.

If the employee has a disability as defined by the Equality Act there is an obligation to consider reasonable adjustments. HR can provide advice on what you may need to consider.

- a) Before consideration of a to return to work on a therapeutic basis it may be useful or necessary that the Occupational Health Service is consulted about whether the employee is fit to return to their specific post and if so, on what basis. In addition the employee's GP should have provided a certificate which advises a return to work with adjustments or the certificate has not been renewed.
- b) Consideration should be given as to the nature, cause and length of the absence and whether a referral to the Occupational Health Service is necessary prior to agreeing the return to work.

A return to work on a therapeutic basis should be agreed as part of the Support Plan and the Support Plan must also include the period of the therapeutic return, any changes to hours, responsibilities or duties as well as any expectation that the agreed reductions to initiate the therapeutic return are gradually increased. The expected date of the employees return to their normal hours and full range of duties and responsibilities must also be included in the Support Plan.

4.1 Annual Leave

Employees should be encouraged not to take annual leave during a period of therapeutic working since it would defeat the purpose, and may require an extension of the plan is leave is taken.

For that reason:-

- a) School closure periods should not form part of a therapeutic return period for teachers or support staff employed during term time only.
- b) Annual leave which has been booked and cannot be changed, (e.g. main family holiday) should also not form part of a period of therapeutic return.
- c) Head Teachers/Principals will need to have regard for the above when considering a therapeutic return during the weeks immediately before a) or b) above.

5. Upon Return to Work

During the return period the employee should be fully supported to enable them to undertake the full range of their post and hours within the agreed time frame. The

employee should be monitored and discussions held regularly throughout the therapeutic return period by the Head Teacher/Principal/Line Manager who must ensure that they take all reasonable steps to ensure the employees return to full duties.

If it is becoming apparent that the employee will be unable to cope with their normal hours of work and/or duties by the end of the therapeutic return period, then consideration could be given to an alternative course of action, instead of the therapeutic return to work continuing.

Should the Head Teacher/Principal/Line Manager have serious concerns for the welfare and/or safety of the employee during the period of the therapeutic return to work period, (in consultation with HR), the employee may be suspended from work on medical grounds and with full pay. In addition the employee may also need to be referred back to Occupational Health. The employee should also be advised to consult their GP as soon as possible.

5.1 Sickness Record

The School/College must notify their payroll provider that an employee is returning to work on a therapeutic basis, with details of hours to be worked, and subsequently notify any changes to the hours. A Phased Return Plan is available in Appendix A to complete for this purpose.

For the purposes of the sickness record (and calculating future sick pay entitlements) hours which are not worked by the employee should be recorded as sick leave on weekly and monthly sickness returns.

During the period of the Therapeutic Return period any periods of sickness will be deemed to be continuous for the purpose of sickness absence recording.

5.2 Funding

Where a school has been claiming funding in respect of the sickness absence of an employee who returns to work under this procedure, the school will be able to continue to claim that portion of the special payment which covers hours which are not being worked.

5.3 Payment

A return to work results in the forfeiture of SSP or sickness benefit. To remove this potential deterrent, the following pay arrangements apply:

Sick pay entitlement at time of return	Payment for balance of entitlement period*
Full Pay	Full pay
Half Pay	Full pay for contractual hours of the week actually worked. Half pay + (if entitled**) SSP/sickness benefit lost for the remaining

	contractual hours of the week recorded as sickness absence. (The combination of full pay for hours worked and half pay + SSP/benefit for hours not worked will not exceed full weekly pay)
No Pay	Payment for hours worked only and, if entitled**, SSP/sickness benefit lost

*If the employee's entitlement moves from full to half pay or half to no pay during the period of therapeutic working, payment will change accordingly.

**Married women paying reduced rate NI contributions do not qualify for the addition of sickness benefit.

Example 1

Sick pay entitlement at point of return to work: Half Pay (50%)			
Normal working hours: 32½ hours over 5 days (100%)			
		Contractual % Actually Worked	Pay Entitlement (% of weekly contractual hours)
Week 1			
Actual hours worked	13 hours	40%	40% at full pay 60% at half pay
Sickness absence	19.5 hours		
Week 2			
Actual hours worked	19.5 hours	60%	60% at full pay 40% at half pay
Sickness absence	13 hours		

Example 2

Sick pay entitlement at point of return to work: Half Pay (50%), and reduces to no pay by week 2 of therapeutic return to work

Normal working hours: 32½ hours over 5 days (100%)

		Contractual % Actually Worked	Pay Entitlement (% of weekly contractual hours)
Week 1			
Actual hours worked	6.5 hours	20%	20% at full pay 80% at half pay
Sickness absence	26 hours		
Week 2 (pay entitlement reduced to no pay)			
Actual hours worked	13 hours	40%	40% at full pay only
Sickness absence	19.5 hours		

Total	0	0	