



MANAGING A RETURN TO WORK AFTER LONG-TERM ABSENCE

Guide for HR



The CIPD is the professional body for HR and people development. The registered charity champions better work and working lives and has been setting the benchmark for excellence in people and organisation development for more than 100 years. It has more than 150,000 members across the world, provides thought leadership through independent research on the world of work, and offers professional training and accreditation for those working in HR and learning and development.



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Guide for HR

Managing a return to work after long-term absence

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Acknowledgements

This guide has been developed in collaboration with Dr Jo Yarker, Affinity Health at Work, and draws on research and perspectives of returning workers, colleagues, line managers, occupational health and rehabilitation professionals as well as HR professionals.



1 Bupa viewpoint

HR teams are crucial in supporting an effective return to work after long-term absence, helping both the individual and the manager.

Approximately 16,400 workers leave the workplace each year as a result of injury or illness, many of whom may have stayed in work with better support. For businesses, this is a huge loss of talent, as this employee will already have the skills, knowledge and training for that role and organisation.

Investing in and protecting employees is a significant responsibility for all businesses, and HR teams play an essential role.

While a line manager should hold the closest relationship to the employee, from dealing with them on a day-to-day basis and keeping in contact with them while they are out of the business, the role of the HR team is to help the individual and their line manager prepare an employee for their return to work, giving them all the information they need and ensuring a smooth and fair transition back to work.

The most common reasons why employees take a long-term leave of absence include mental ill health, musculoskeletal conditions and stress. Data from our Anytime HealthLine has shown a phenomenal rise in calls; at the start of the pandemic we saw a 250% increase in calls with people experiencing anxiety, stress and depression. These have remained steady throughout the pandemic, with people citing mental health as a key thing they were struggling with. Another trend is people being unable to access or worried about accessing primary care through their usual means. This means a lot of conditions have gone untreated, resulting in more employees needing time off to manage symptoms and later intervention.

For those working from home, the impact of not having a designated workspace has meant that more people are experiencing aches and pains. Our research¹ shows that only one in three (33%) people have a dedicated workspace in their home, and as a result, homeworkers are using their sofas, kitchen chairs or even beds as makeshift workstations. This was mirrored by data from our Physioline, which saw a spike in calls between June and October with posture-related problems.

With the majority of staff working from home and increased pressures, on top of the pandemic – which has heightened mental health conditions – we believe we will see more people needing long-term leave for these reasons in the coming months.

As well as this, as we move out of the pandemic and understand the impact it has had on our workforce, it's important that HR teams are able to support employees where they may be struggling. From bereavement to long COVID, there are a range of factors that will affect long-term absence over the coming months and extra considerations need to be taken to reflect this.

Working with occupational health professionals to provide support is also hugely beneficial. Their role is to make sure that employees are healthy and safe while in work and manage any risks in the workplace that are likely to give rise to work-related ill health. As we move out of the pandemic, this support will be hugely valuable to HR teams.

There is no 'one size fits all' approach to returning to work after long-term absence and it's key that the right support is in place to help with the transition.



Alaana Woods,
Bupa Health Clinics

¹ Research conducted among 2,003 UK adults by Opinium Research on behalf of Bupa UK, 24–27 April 2020.



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2 Introduction

This guide aims to provide information on effectively managing an employee's return to work after long-term absence.

Research shows that employees are more likely to return to work safely and productively following long-term sickness absence if they are well supported during their absence and on their return. Everyone has a role to play in the return-to-work journey: returning individuals need to prioritise self-care and self-management to sustain their health and work; colleagues can provide valuable practical and emotional support; line managers can help returning employees access the work adjustments and support that they need to work effectively; while organisations with compassionate and flexible absence management policies and rehabilitation approaches can help to accommodate individual needs.

The need to review existing provision to offer adequate support has been strengthened during the COVID-19 pandemic with the emergence of post-COVID syndrome, or long COVID (as outlined below). Sadly, more and more people are facing a long recovery from this new syndrome, meaning there is more need than ever before to ensure that those who need work adjustments or job modifications (including reduced hours or flexible work) are able to access them to facilitate a return to work.

The key considerations for managing an effective return, including for those suffering from long COVID, are outlined in this guide.

What is long-term absence?

Long-term absence is usually defined as four weeks or more of continuous absence.

According to the CIPD's 2021 *Health and Wellbeing at Work* report, the most prevalent conditions responsible for long-term absence are:

- mental ill health (such as clinical depression and anxiety)
- musculoskeletal conditions (such as neck strain and repetitive strain injury, including back pain)
- stress
- acute medical conditions.

Having good absence management practices in place and being prepared to manage a return will give the returning employee the best chance of getting back to work safely, confidently and in a timely way.

The impact of long COVID

The COVID-19 pandemic has had a significant impact on absence management, not least in the emergence of what has been dubbed 'long COVID'. NICE defines post-COVID syndrome or long COVID as '*signs and symptoms that develop during or following an infection consistent with COVID-19 which continue for more than 12 weeks and are not explained by an alternative diagnosis*'.

We are still learning about the impact of long COVID, but we have learned that:

- One in five people experience symptoms lasting between 5 and 12 weeks.
- One in ten people experience symptoms after 12 weeks or longer.
- Symptoms vary between individuals, are overlapping and affect multiple systems in the body. The most common symptoms include fatigue, breathlessness, muscle and joint pain, chest pain and mental health concerns among others.



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- Symptoms are unpredictable and fluctuate over time, characterised by periods of recovery and sudden relapse (sometimes with new or different symptoms).
- Recovery can be slow and the fluctuation of symptoms means that employees often need to increase their activity and work slowly over time. This means some employees may need work adjustments or job modifications (including reduced hours or flexible work) over many months.
- The NHS provides some [rehabilitation services](#) to people recovering from the impact of COVID-19. However, access to support varies across the UK.

The Society of Occupational Medicine, with input from the CIPD and other organisations, has produced a [guide for recovering workers](#).

There are still a lot of unknown factors when it comes to managing an employee's return following long COVID. What we do know from employees experiencing other conditions (such as mental ill health or cancer) is that many absence management policies lack the flexibility to effectively support employees with fluctuating and long-term conditions. It is important that HR professionals review their existing provision, using the information provided in this guide, to ensure that adequate provisions are in place to support employees returning from long COVID.

This guide provides an introduction to supporting a return from long-term sickness absence and sets out the reasons why we need to take action, supporting HR professionals to develop a business case should further resources be needed. The principles of shared responsibility for supporting returning employees and the guiding principles to support the return-to-work journey are outlined. HR professionals are encouraged to review and update existing policies and practices in light of recent learnings from research. The legal obligations of employers to absent and returning employees are also provided. This guide equips HR professionals with the information needed to effectively manage an employee's return to work after long-term absence.

3 Why we need to tackle long-term sickness absence

The costs of long-term sickness absence to organisations, HR professionals and employees are significant. Some of the compelling reasons for tackling long-term sickness absence are outlined below.

From an organisational perspective

- Absence is a persistent problem for organisations and presents a major public health and economic concern.
- In 2020, 118.6 million working days were lost due to sickness or injury and nearly 560,000 workers suffered a new case of ill health which they believed to be caused or made worse by their work. New cases of ill health alone are estimated to cost Britain [£10.6 billion, the equivalent of £19,000 per case](#).
- [16,400 workers](#) permanently withdraw from the labour market each year as a result of a workplace injury or work-related ill health, many of whom may have stayed in work with better support. This is a significant loss of talent, skills, knowledge and training investment to organisations.



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- While the sickness absence rate reached a record low in 2020, this is no time for complacency as factors such as furlough, social distancing, shielding and increased homeworking during the COVID-19 pandemic may contribute to these figures. The world of work has changed and many people have experienced significant challenges during the pandemic through isolation, bereavement, illness or increased care demands, and the mental health of the nation has declined. It is important to monitor and enhance provisions to protect and support employees, including long-term sickness absence practices, to minimise the long-term effects of the pandemic.

HR perspective

- Support from HR can help to ensure a fair and supported return to work and decrease the likelihood of returning workers claiming unfair dismissal or discrimination. These situations often cause distress, cost and an increased workload for all parties involved.
- Typically, the longer someone is off sick, the harder it can be for them to return, and having supportive and proactive absence management policies in place can help to retain valued employees.
- HR is also responsible for populating and resourcing jobs and roles throughout the organisation. Long term-absence significantly adds to the burden of work.
- Long-term absence of one team member can have a knock-on impact to other team members, affecting their workload, motivation, engagement and wellbeing.

Employee perspective

- Good work is good for health and can reduce health and economic inequalities.
- Returning to work represents a return to a sense of normality and restores an individual's identity, which can lead to an increase in self-respect, self-esteem, mental wellbeing and social inclusion.
- A poorly managed return to work can contribute to relapse, further absence and in some cases an exit from work.
- A timely, well-supported and well-managed return-to-work process can be the difference between someone staying in and thriving at work, and exiting work.
- The impact extends beyond the individual to their colleagues, who may be taking on additional duties, and family and friends, who may be taking on additional home responsibilities or sharing the financial burden of sickness absence.

Managing long-term sickness absence well has benefits for everyone. This is why there is a shared responsibility for supporting returning employees.

4 Shared responsibility for supporting returning employees

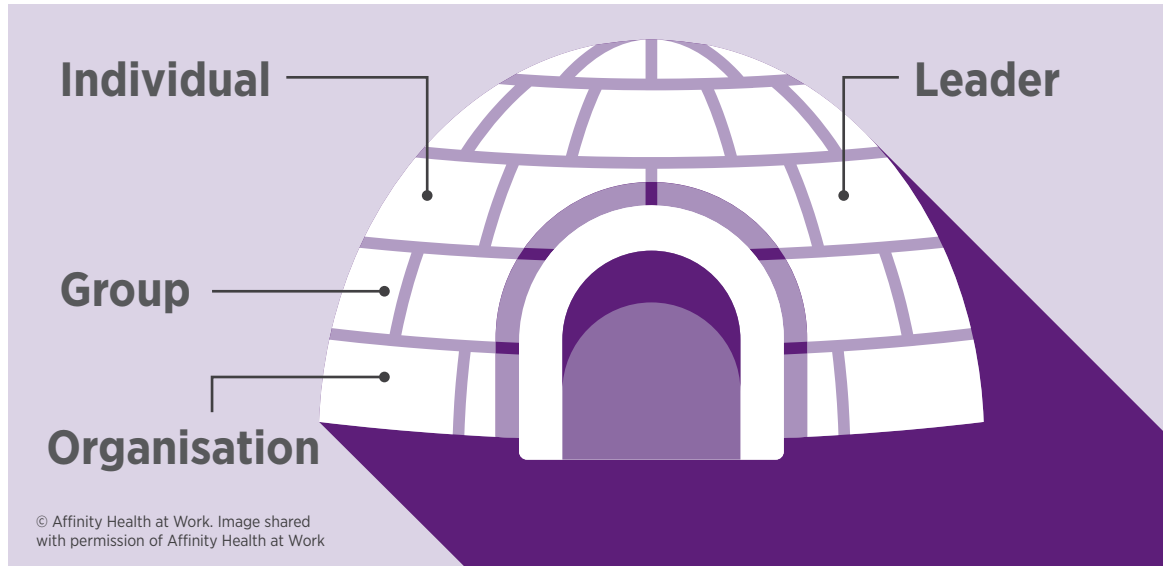
Everyone has a role to play in managing long-term absence. When we are unwell, we need other people to help us recover and return to work. No one can do it on their own. The IGLOo framework for sustainable return to work, developed by the University of Sheffield and Affinity Health at Work, outlines the different resources that can support return to work: these resources are at the individual level, the group level, the line manager level and the organisational level.

Individuals

- It is important that returning employees prioritise self-care and take appropriate responsibility to manage their condition. This includes developing an understanding of their condition and how best to manage the symptoms of their condition.

- Returning employees may need support to develop their ability to manage their condition effectively, for example in areas of self-management strategies, resilience and confidence in their ability to manage their work and health.

IGLOo framework for sustainable return to work



Groups

- Friends, family and colleagues play a vital role in supporting absent and returning employees. They help them to stay connected, retain their identity and feel valued when they offer non-judgemental support and understanding.
- Returning employees are best able to stay in and thrive at work when their colleagues support them through providing feedback on tasks, helping when completing challenging tasks and treating them as the person they were before their absence.
- Agree with the employee what information about their absence and condition they would like to be shared, how their return-to-work plan will be communicated and how they would like the team to support them. This helps to avoid misunderstandings and uncertainty for the returning employee and their colleagues.

Line managers

- Evidence shows that line managers have a significant impact on successful return to work; what they do and how they behave can affect whether the returner is able to return to and stay in work. This is because line managers are:
 - often the employee's first contact point
 - responsible for the day-to-day management of the employee on their return
 - key to providing access to work adjustments and the implementation of job modifications on return and in the long term
 - can influence employees' exposure to workplace psychosocial hazards (for example work demands, control, and so on) and these are likely to be felt more keenly by those returning following a period away from the workplace
 - can cause employee stress (or prevent additional stress) or anxiety, particularly in those who are vulnerable returning after a period of sickness absence.
- Research (funded by the CIPD and led by Affinity Health at Work) identified five key behavioural areas for line managers to support the health, wellbeing and engagement of those who work for them:
 - Being open, fair and consistent
 - Handling conflict and people management issues



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- Providing knowledge, clarity and guidance
- Building and sustaining relationships
- Supporting development.

To learn more about the five key behavioural areas and access free resources to help develop managers in your organisation, including self-assessments and practical guides, visit the [line manager support pages](#) of the CIPD website.

You may also want to refer to the line manager guide on supporting return to work after long-term absence.

Organisations

- Organisational policies can help or hinder a return to work in the way that they are designed and implemented. Further information about absence measurement and management practices, including the main components of an absence management policy, can be found in our [factsheet](#).
- Work-focused counselling has been found to improve an employee's ability to return to and stay in work following absence. While counselling is typically seen as relevant for people with mental ill health, it can be useful for people with other conditions. Mental health can often deteriorate as a result of the symptoms or impact of illness, for instance when there are changes in capacity and a sense of identity, or when they are faced with the uncertainty of living with a new or fluctuating illness.
- Advice and guidance from HR professionals within the organisation can help make sure that processes and procedures are fair and are designed to prevent discrimination.
- Organisations may also provide access to services from other specialist professionals: [occupational health](#), medical professionals who specialise in health and work, can generate an individualised recovery and rehabilitation plan and can ensure relevant medical investigations have been performed. Other professionals such as vocational rehabilitation practitioners and occupational therapists can provide specialist support depending on the condition and employee's needs.

Watch a [short video](#) about how the IGLOo model for sustainable return to work was developed and learn more about the roles we all play in supporting a returning employee.

HR professionals can play a central role in implementing the IGLOo model through ensuring that:

- Individuals returning to work are able to prioritise self-care and have the skills and resources to self-manage their work and health.
- Groups working with the returning employee know what they can do to support returning employees and feel confident in doing so.
- Line managers have the knowledge, skills and confidence to implement the policies and practices and behave in a way that will support returning employees effectively.
- Organisational policies and practices are designed and implemented in a way that fully supports returning employees and are flexible to accommodate the needs of those with fluctuating conditions.

The IGLOo resources play a role during absence and throughout the return-to-work journey and should be kept in mind at all times.



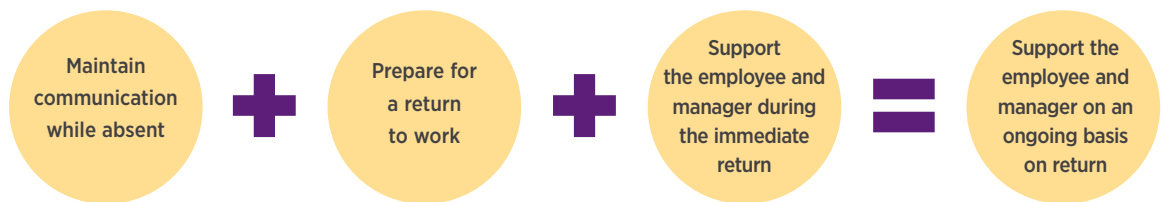
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5 Guiding principles to support the return-to-work journey

Return to work is often managed as if it is a one-off event, but in reality, it is a (sometimes long and unpredictable) journey. How employees felt about their work before their absence, and how they are communicated with and whether they feel valued during their absence, plays a role in their return. How employees are managed during their initial return and supported on an ongoing basis has a direct impact on their ability to stay in work.

Below we discuss the guiding principles to follow when navigating the key steps to managing an effective return to work:

- 1 Maintain communication while absent.
- 2 Prepare for a return to work.
- 3 Support the employee and manager during the immediate return.
- 4 Support the employee and manager on an ongoing basis on return.



Step 1: Maintain communication while absent

Every situation is different, but maintaining contact can help the employee feel valued and help managers and employers plan ahead.

- Agree how and when you will keep in touch early in the absence (at the time the fit note is issued is best). For example, *‘We would like to keep in touch while you are absent from work. Please let us know who you would like to be your point of contact (HR, manager, trusted colleague), how often (bi-weekly, monthly) and what mode you prefer (phone, email, text, letter).’*
- Agree with the employee what information about their absence should be shared with others to avoid misunderstandings and respect confidentiality.
- Remind the employee of any support available from the organisation (such as employee assistance provider or occupational health service).
- Focus on them as an individual, not the work that they have left open. For example, *‘How are you? We are missing you/thinking of you,’* rather than *‘We wondered where you had put x,’* or *‘This project has really been left in the lurch. We are struggling without you. When are you coming back?’*
- Give them permission to rest and recover. Guilt is a common experience and it can prevent people from focusing on their recovery. Make sure your employee knows they can do what they need to do to get better – this may be a walk in the park, lunch with a friend, a swim.
- Ensure that the employee is aware of your absence policy and terms, including the pay they will receive and support they are entitled to (such as employee assistance provision).



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Step 2: Prepare for a return to work

Taking time to prepare for the return to work can help to anticipate challenges and avoid unnecessary struggle.

HR professionals

- Support employees and managers in their planning of a phased and flexible return.
- Consider whether the individual requires medical clearance before returning to work, for example where work involves high exertion or stress or is a safety-critical role.
- Check in with the manager and reflect on whether their behaviour as a manager will provide a supportive environment for the returning employee. Provide managers with the tools to self-assess (such as the behaviour alignment quiz in the CIPD's line manager support materials) and support them with guidance and training if this is an area of concern.
- Connect the employee (and manager where appropriate) to occupational health services or other allied health professionals to gain advice on appropriate work adjustments and job modifications.
- Ensure that a return-to-work conversation is scheduled and that the manager and returning employee are aware of how best to prepare for the conversation and what to expect during the conversation. Offer support and guidance where needed.

Managers should be encouraged to:

- Put themselves in the employee's shoes: encourage managers to think how would they feel if they had been seriously unwell and absent from the daily routines of work.
- Consider the possible adjustments and job modifications that could be accommodated: what would these mean for the team/organisation?
- Consider the impact on the team: how has the employee's absence impacted the team, the team's workload? How can the requirements of the returning employee and the needs of the team be balanced?
- Reflect on their behaviour as a manager to ensure they manage in a way that will support the returning employee. Managers can use the interactive self-assessment and the resources to develop their managerial competence.
- Seek help, guidance and training if they do not feel confident in managing the return-to-work process.
- Most importantly, managers should aim to nurture trust-based relationships with employees because this will enable genuine and supportive conversations with the employee about health and return to work. You may want to direct managers to the resources relating to the behaviour Building and sustaining relationships to improve in this area of management capability.

Employees should be encouraged to:

- Reflect on how their health might impact their ability to do their job, including a consideration of the commute and breaks. Encourage them to walk through the day in their mind and identify any concerns that need further discussion or clarification.
- Write down what they feel able to do now, and what tasks or roles they may need to build confidence in (for example, a teacher may feel ready to teach a class and mark work, but may not feel ready to lead an assembly or manage playground duties).
- Consider adjustments or job modifications that might be helpful in the initial return.
- Think about whether they would benefit from developing or refreshing any skills to equip them to do their job having been away from work.

Considering work adjustments, accommodations and job modifications

While there are some things we cannot change about work, there are some things that can be easily adjusted, at least in the short term, to help employees. Most adjustments cost



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little or nothing to implement; they just require some time to make a change in a process or task. For example, an employee commuting to a city centre may find starting late morning to avoid the rush hour helpful, while a teacher may benefit from a recalibration of work with higher marking or administrative load and fewer student-facing activities.

- Every individual and every situation is unique. Think creatively about what could work and be prepared to try different things until the best fit is found.
- Work adjustments can include changes to an employee's work schedule, roles and responsibilities, work environment, policy changes, additional support or assistance, or redeployment.
- [Rethink](#) and [Acas](#) have useful information and case studies on work adjustments. Information on long-term absence and managing a return to work for people with a disability is also available in the CIPD's joint [line manager guide with the DWP](#).
- [Access to Work](#) is a government organisation that provides free advice and support regarding work adjustments (including the provision of technology and equipment) to keep employees in work.

Arrange a return-to-work conversation and work together to agree a return-to-work plan

- A return-to-work conversation provides the opportunity for employees and managers (or employers) to explore together how the return to work can best be managed.
- Employees and managers will have more productive conversations when they are prepared and have a clear framework for the return-to-work conversation, so they know what to cover and what to expect. You can direct managers to information on holding a return-to-work conversation on the [Mental Health at Work website](#).
- Ensure that expert advice has been sought where necessary before the return-to-work conversation (such as from an occupational health professional).
- There is no set time for the conversation to happen. The best time will depend on the reason for absence. Sometimes it is held before the return (where equipment or adjustments may be required) and other times it is during the first week once the employee is back in work.
- During the conversation it is important to agree a return-to-work plan. The plan should include any changes to the employee's roles and responsibilities, key work priorities, work adjustments, timeframes for the phased return, when and how managers and the employee will monitor and review, and what action should be taken if any questions or concerns need to be discussed.
- Remember, plans may need to change as employees returning from long-term absence learn to manage their work and health, particularly those with fluctuating conditions. It is important that all involved are encouraged to keep an open mind, and to remain flexible and patient.

Step 3: Support the employee and manager during the immediate return

- Welcome the employee back to work and ensure someone is there to greet them on their first day.
- Gradually increase the quantity and complexity of the work over time. Giving an employee too much work too soon can lead to relapse.
- Monitor and review how the returner is managing their health and work. Consider if further adjustments are required.
- Monitor and review the impact of any work adjustments or modifications on the line manager and the team.
- Remember the IGLOo framework for a sustainable return to work. The individual, their group (that is, colleagues), their line manager and the organisation's professionals all have a role to play in helping employees to return to and stay in work.



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Step 4: Support the employee and manager on an ongoing basis on return

- Discussions to review how the returner is managing their work and health may become less frequent over time, but it is important to check in on an ongoing basis. This will allow the employee, manager and organisation to take early action to prevent work impacting on the employee's health; or the employee's health impacting on their own work or that of the team.
- Some people return to full health and are able to return to full capacity at work. Some may have a fluctuating condition that means there are ongoing periods where their health and ability to work is compromised. There is increasing evidence that this is the case with long COVID, so employees and managers should be prepared to adjust plans accordingly.
- Some people may never fully recover from long-term absence and their condition may be classified as a disability. Open communication and regular check-ins will help to prevent further absence, ensure that appropriate support is provided and, where necessary, address capability and work ability issues early. Health passports and/or a wellness action plan can be a helpful and empowering way for the employee to manage an ongoing condition or their mental wellbeing. More information is available in the CIPD and Disability Confident guide on [*Recruiting, Managing and Developing People with a Disability or Health Condition*](#).
- Remain flexible and seek expert advice from an occupational health or allied health professional where needed.

While these four steps seem quite simple, they are often overlooked. Too often absent employees report that there is no communication from anyone in the organisation, except for the policy and sick pay terms, and many return to their full workload only to struggle and relapse. Following these steps will give returning employees the best chance of return to work safely and confidently, and will ensure that line managers are equipped to support them through this process.

6 Updating policies and processes in light of the pandemic

The pandemic presents a unique opportunity to build back better. Many absence management policies and practices are outdated and do not reflect the more compassionate, inclusive and flexible ethos of today's workplaces:

- The formal, legalistic language is not always understood by employees and the trigger systems and disciplinary processes in place to manage absence often place additional pressure that exacerbate the health conditions of returning workers and prevent recovery.
- While many more people with long-term and chronic conditions are able to stay in work now as [*compared with five years ago*](#), too many people with fluctuating and chronic conditions struggle to return to and stay in work. With growing understanding of chronic conditions and an ageing workforce (in whom chronic conditions are increasingly prevalent), providing work conditions that accommodate fluctuating conditions is vital.
- Wider HR policies and practices across recruitment, inclusion and leadership increasingly reflect the benefits of flexible, individualised approaches and compassion: there is a need for absence management policies and practices to follow their lead.
- None of us has been untouched by the pandemic. Employees are reporting increased mental ill health; employees with long COVID report fluctuating and ongoing symptoms; employees who have been furloughed are returning from periods away from the workplace having lost muscle tone and fitness and require graduated returns; millions



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of people across the globe are experiencing fear and anxiety about returning to the workplace following extensive periods working at home. These experiences are not new. Many returners will acutely recognise these concerns. However, the scale and volume of these concerns from furloughed and homeworkers places a sharp focus on the systems and policies we have in place.

Reviewing your absence management policies, processes and practices

Research shows that a compassionate absence management policy, access to work adjustments and a supportive line manager can make the difference between a successful return and someone struggling and likely relapsing soon after return or even exiting the workplace. Lessons can also be drawn from experiences of employees returning to the workplace following COVID-19 restrictions, where a strong focus has been placed on communication and flexibility.

Ask yourself: do your absence management policies, processes and practices...

Use compassionate language and convey support and care through your absence management processes?

- For example, do your communications include genuine concern for the employee's health and recovery, alongside information on the procedural aspects of absence and return policies and processes? This can include sharing information about the support available through the organisation or local resources (such as local charities, services).
- Sometimes this can include providing an explanation for why formal procedures are being activated. For example, *'Please could you provide us with a Fit Note from your GP or allied health professional as we need this in order to process your Statutory Sick Pay,'* rather than *'Please provide your Fit Note within the next seven days.'*

Allow for an individualised approach to be effectively implemented?

- For example, empower managers to make decisions and take action where it is in the best interests of the employee, the team, and the organisation, without seeking additional sign-off from senior management or HR.
- Encourage job-crafting where possible so employees work to their strengths.

Make clear that work adjustments are available and explain how we support employees to identify and access appropriate adjustments?

- While an Equality Act 2010 requirement, many employees will benefit from early and supportive work adjustment. Organisations should offer supportive adjustments for any employee with a health condition where possible.

Accommodate fluctuating conditions?

- For example, be clear about the terms of sick leave and pay.
- Encourage an ongoing conversation between the line manager and the employee to assess how they are coping and any continuing impact of their condition on their ability to carry out their role.
- Allow a slow, gradual return to work if required (for example, employees with long COVID may require a slow return over many months rather than weeks to prevent relapse).
- Remove or adapt absence triggers and caps for workers with known long-term or chronic conditions.
- Embed flexible working practices and time off for treatment and follow-up appointments where needed.
- Allow a flexible process that supports the manager and employee in monitoring, reviewing and adapting as needed. For example, many employees with fluctuating health conditions find that what works one month may not work the next.



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Tell people what needs to be done AND how to do it?

- Knowing what needs to be done is very different from knowing how to make it happen and feeling confident in doing it.
- For example, many policies will state that there is a need to ‘have a return-to-work interview’, but limited information about how this can be done to achieve the best outcome. Guidance on when, where, how to prepare, and what to ask would help managers and employees hold better return-to-work conversations. More information on conducting return-to-work interviews is included in the line manager guide on returning to work after long-term absence.

Equip managers with the knowledge, skills, abilities and confidence to manage absence and returns?

- A [BITC survey](#) found that only 8% of managers reported that they had received training to support return to work or implement work adjustments, and many are not confident that they are doing or saying the right thing.
- The CIPD’s 2021 [Health and Wellbeing at Work report](#) shows that in 64% of organisations, managers take primary responsibility for managing long-term absence, and 56% of organisations train managers in absence-handling. Two-thirds (65%) provide tailored support for line managers, for example through a case conference with HR.

Build a culture of psychological safety, where good-quality work, good work conditions and open conversations are prioritised and psychological health and physical health are given equal standing?

- There is increasing evidence that the employee’s work environment and work relationships prior to absence influence the employee’s experience of absence and return to work.
- The [Thriving at Work report](#) outlines the economic and social benefits of taking action to protect psychological health and outlines the key actions organisations can take to create healthy workplaces.

Updating your organisation’s policies and practices to incorporate these considerations will give returning employees the best chance of returning to work.

7 Legal obligations

Employers have a legal obligation to absent and returning employees. An awareness of relevant legislation is important to avoid discrimination and ensure fair treatment of absent employees.

The **Employment Rights Act 1996** covers areas related to the employee’s contract and includes areas such as unfair dismissal and the termination of employment on ill-health grounds, including a consideration of:

- conduct: for example, where absence is persistent, unauthorised or found to be dishonest
- capability: for example, where the employee’s absence affects their ability to do their job
- some other substantial reason: for example, where the absence negatively affects the business.

The Equality Act 2010 covers a number of different types of discrimination and applies to protected characteristics, such as disability. This includes not treating someone less favourably because of something connected to their disability:

- UK employers have a responsibility to make reasonable adjustments to accommodate the needs of a person with disability. These adjustments must be considered with a specific individual and their specific role in mind.



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- For many employees, the classification of their condition as a ‘disability’ may be unclear at first. The Equality Act specifies that to be classified as disabled, symptoms must be substantial and long term, lasting 12 months or more. The challenge of accessing reasonable adjustments through a legal route has been brought into sharp focus for employees with long COVID, as symptoms exist and employees want to return to work with adjustments, but they are not legally entitled to adjustments under existing legislation.
- It is good practice to support the employee as if they are protected by the Equality Act when making decisions about work adjustments where you are able to.

The **Health and Safety at Work Act 1974** places a duty on employers to ensure, as far as is reasonably practicable, the health, safety and welfare of employees. This includes considerations:

- where the design and management of work exacerbates the employee’s health condition
- where a worker’s health condition makes them or others more vulnerable to workplace risks or where the impact of work adjustments could affect the work and health of others.

Statutory Sick Pay (SSP)

Employees are entitled to a minimum of £96.35 per week (from April 2021) in Statutory Sick Pay from the fourth consecutive day of absence up to 28 weeks. Approximately half of employers pay more than this through Occupational Sick Pay.²

Employees are eligible for SSP if they:

- have been off work for at least four consecutive days in a row, including non-working days
- earn on average at least £120 per week
- have told their employer that they are unable to work before the deadline set in their contract (or within seven days if this is not specified).

Fit notes and proof of absence

Employees are required to give employers a fit note (this replaced the sick note) if they are off for more than seven days in a row (including non-working days). Fit notes are provided by a GP or, where employers agree, an allied health professional (such as a physiotherapist or occupational therapist). Ensure all employees are aware not only of their duty to provide a fit note, but also the reasons why it is important. An employee may need to be reminded that they are required to obtain a further fit note if they are not ready to return by the certified date.

8 Conclusion

Long-term absence can be challenging for organisations, managers, colleagues and returning employees. However, research shows that employees are more likely to return to work safely and productively following long-term sickness absence if they are well supported during their absence and on their return. Compassionate and flexible absence management policies that accommodate individual needs, access to work adjustments and supportive line management can make the difference between a successful return and someone relapsing or even exiting the workplace. By taking action to incorporate the considerations outlined in this guide, HR professionals will be well positioned to ensure that long-term absence is managed effectively.

² BEIS analysis of LFS microdata for Q1 2017.



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9 Useful resources

Sickness absence management and return to work

[NICE guidance on workplace health: long-term sickness absence and capability to work](#)

[Acas guide](#) on managing staff absence

[Access to Work](#)

[IGLOo guide](#) to sustainable return to work

[CIPD resources](#)

Fit note guidance

www.gov.uk

Menopause

[CIPD guide](#)

Mental health conditions

[Mind](#)

[Samaritans](#)

[Mental Health at Work](#)

[Good Thinking](#)

[Every Mind Matters](#)

[HSE guidance](#) for work stress

[Rethink](#)

CIPD and Mind: [People manager's guide to mental health](#)

Respiratory conditions

[Asthma UK](#)

[British Lung Foundation](#)

Musculoskeletal conditions (muscle and joint pain)

[Arthritis and Musculoskeletal Alliance](#)

[Versus Arthritis](#)

[BackCare](#)

Cancer

[Macmillan Cancer Support](#)

[Cancer Research UK](#)

COVID-19 Resources

Society of Occupational Medicine [COVID-19 return-to-work guide for recovering workers](#)

Society of Occupational Medicine [COVID-19 return to work in the roadmap out of lockdown guide for workers, employers and health practitioners](#)

[NICE COVID-19 rapid guideline: managing the effects of COVID-19](#)



1

[NIHR Living with COVID-19](#): A dynamic review of the evidence around ongoing COVID19 symptoms

[NHS Your COVID Recovery](#)

[CIPD COVID-19 Hub](#)

2

Professional and advisory organisations:

[Acas](#) (Advisory, Conciliation and Arbitration Service)

3

[BACP](#) (British Association of Counselling and Psychotherapy)

4

[BPS](#) (British Psychological Society)

5

[CIPD](#) (Chartered Institute of Personnel and Development)

6

[DRC](#) (Disability Rights Commission)

7

[HSE](#) (Health and Safety Executive)

8

[IOSH](#) (Institution of Occupational Safety and Health)

9

[RCOT](#) (Royal College of Occupational Therapists)

[SOM](#) (Society of Occupational Medicine)

[TUC](#) (Trades Union Congress)

[VRA](#) (Vocational Rehabilitation Association)



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