

The Association of National Specialist Colleges



**A Short Study on the
Employment of Disabled Staff in
Independent Specialist Colleges**

Liz Maudslay

June 2011

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Part One: Background

Rationale and Purpose

With the passing of the Disability Discrimination Act (1996), the Disability Equality Duty (2006) and the Equalities Act (2010), Lifelong Learning UK became increasingly aware of the need to address the issue of the employment of disabled staff in lifelong learning organisations. In 2007 NIACE (the National Institute for Adult and Continuing Education) established a Commission for Disabled Staff which published “**From compliance to culture change: Disabled staff working in lifelong learning**” (2008) <http://www.niace.org.uk/sites/default/files/project-docs/from-compliance-to-culture-change-final-report-summary.pdf> . It recognised a

‘systematic failure of public policy to address the needs of disabled staff in lifelong learning’

and recommended that lifelong learning organisations embrace fully the Disability Equality Duty. The NIACE Report put forward eleven recommendations of procedural changes which needed to be adopted by organisations and these recommendations have been endorsed by LLUK (**Annex one**).

There was a perception that many Independent Specialist Colleges had a better record of recruiting and retaining disabled staff and in securing disclosure of disabilities than other lifelong learning organisations. In February 2010 LLUK commissioned Natspec to carry out a very short study to explore more fully the situation of disabled staff in Independent Specialist Colleges. The purpose of this study was to build on the work carried out by NIACE and see whether there were any additional lessons which could usefully be shared from the experiences of those working in specialist organisations.

Methodology

The study began with an email request from Natspec to all specialist colleges asking them to provide information on their total number of employees, the number of disabled employees and contact details of their head of Human Resources. Natspec then employed a consultant for seven days with the brief of carrying out semi structured interviews (both through visits and by telephone) with Human Resources managers and a small selection of disabled staff at some of the colleges which had returned positive proportions of disabled staff. In the course of the study four visits were carried out along with two telephone interviews (**Annex two**).

Results of the email survey

Eighteen colleges replied, with a total staff of 4580, of whom 371 declared a disability. Individual responses ranged from 3% to 14.6%, with an average of 8.1%.

This is higher than the ratio for other lifelong learning organisations. The workforce data report for 2009/10 stated:

In 2009-2010, 3.2 per cent of all college staff and 3.1 per cent of teaching staff disclosed having a disability. This has increased slightly as the equivalent figure in 2008-2009 was 2.9 per cent of all college staff and 2.8 per cent of teaching staff. However, the rate of staff disclosure remains extremely low. (Further Education College Workforce Data for England, LLUK, 2011)

However, one factor which needs to be taken into consideration is that the two specialist colleges with the highest proportion, one with 14.6% and one with 13%, included a proportion of staff with health related issues (e.g. high blood pressure), which would not necessarily fall under the DDA definition and were not always listed as disabilities by other organisations. This issue of definitions will be looked at in more detail below in the section **Definition of Disability**.

It is also likely that the specialist colleges which responded to the questionnaire would be those with relatively high ratios. This means that a tentative conclusion can be drawn that, while some specialist colleges have good ratios of disabled employees, the fact that a college caters for students with disabilities does not automatically lead to it employing large numbers of disabled staff. Interviews with Human Resource managers and disabled employees in those specialist colleges with high ratios of disabled staff clearly made the point that the fact that a college specialised in catering for disabled students did not automatically mean that it would also attract high numbers of disabled staff. Interviewees were clear that additional special steps need to be taken to attract and retain disabled staff, particularly those whose disability was different from that of the majority of students in the college. It is these additional steps which Part Two of this report will address.

Part Two: Findings from Interviews

Culture and ethos

Both Human Resources staff and disabled employees continually spoke about how the most important factor in the employment of disabled staff was the:

‘overall attitude and ethos of the place’.

They recognised the importance of the procedures listed in the eleven NIACE recommendations but also felt that there was an additional factor over and above this:

‘Basically it is creating a culture and not a checklist of requirements; it is about conveying the message that you will go out of your way because it is mutually beneficial.’

When asked about why they felt many organisations did not employ more disabled people, disabled employees several times spoke of how they felt the biggest barrier was ‘fear’ with organisations seeing disabled people as a problem rather than recognising their potential strengths. It might seem obvious but it was clear that there was still a need to emphasise the message:

‘Always think of what a person CAN do, not of what they CAN’T’

Human Resources officers in specialist colleges recognised that they had a particular incentive to employ disabled people as it was essential that their students had positive role models. They also recognised that it would be hypocritical not to encourage the employment of disabled staff when their whole business was about opening up opportunities for their disabled students.

Recruitment and Interviews

There was a general recognition that, in order to encourage applications from disabled people, the recruitment base needed to be widened. Several of the colleges advertised with local disability organisations, as well as placing advertisements in regular newspapers and on general websites. Derwen College was employing one person with learning difficulties with the support of Enable. Some colleges had recruited employees internally, for example, Queen Alexandra College had recruited some members of staff from its own ‘Advance to Work’ programme. Derwen had employed two ex students, although the Human Resources manager did add that, with the changing nature of the student group, employment of ex students was becoming more difficult. Derwen’s Human Resource manager also said that, despite advertising very widely, the College had far fewer disabled applicants than they would like and felt this was in many ways due to their very rural location.

All of the colleges were part of the 'two ticks' programme, thus guaranteeing an interview to any candidate with a declared disability providing they met the person specification requirements. Several also mentioned on all advertisements that personal knowledge or experience of disability was an advantage. All of them had a confidential disability disclosure attachment to the application form and tried, in their questions about declaring a disability, to place emphasis on support requirements and on what support they could offer. Human Resource Managers spoke of how the 2010 Equalities Act had stopped pre-employment health screening; they now only give out a medical questionnaire after employment, thus removing the possibility of making judgements based on health conditions, although they felt it was unlikely all organisations were conforming to this.

There was a strong feeling about the crucial importance of showing,

'from the beginning what you can offer disabled staff'.

National Star College sends an attractive, easy to read copy of their Disability Employment Charter to every applicant, and has produced a multi media resource to encourage the employment of disabled staff within the college.



DIS EMPLOYMENT
CHARTER (3).doc

In terms of providing support at interview, it was felt to be very important to state at the outset what support you can offer:

'don't leave it all up to them to make the first move.'

Colleges went out of their way to ensure that any special requirements needed for interview (e.g. materials in alternative formats) must be fully established prior to interview, as it was extremely stressful for the candidate if these had not been settled beforehand.

Colleges also had procedures in place for measuring the impact of their recruitment procedures in terms of encouraging and supporting disabled applicants. Hereward College, after every recruitment process, analyses data on how many candidates with a declared disability applied, how many were interviewed and whether or not a disabled candidate was recruited, then collated this data into an annual report.

On-going opportunities for disclosure

Interestingly, even when they had what appeared to be excellent procedures for encouraging disclosure and emphasising the support they could offer, all colleges acknowledged that not everyone would disclose at application or on appointment. Leaving aside those employees who might acquire a disability during the course of their employment, there was also a recognition that some disabilities are easier to

disclose than others. Many of those with unseen disabilities would not disclose at this stage, either because of fear about stigma, or because they did not feel that their condition should be classed as a disability and did not believe it would interfere with their work. Disabled staff themselves were very understanding of the fact that many people would not disclose an unseen disability because of

'stigma', 'embarrassment' and a perception that 'it can be used against them'.

In response to this, all Human Resource managers interviewed had spent considerable time putting in place on-going opportunities for disclosure at a later stage, always stressing the benefits of disclosure and the support the college could offer.

The nature of these varied:

- Hinwick College had commissioned an external consultant to carry out an anonymous survey of all staff and as a result of this their ratio of staff with a declared disability had risen considerably. Although the Human Resource Department did not know who all these staff were, it did allow them to have a better understanding of the range of disabilities present within their organisation and to ensure that general support procedures were in place to address these.
- Hereward College wrote a letter to every member of staff. While this was a named rather than an anonymous approach, it still resulted in the college's proportion of known disabled staff rising by 2%.

Several colleges used times of staff sickness to check again whether staff wanted to declare a disability:

- Queen Alexandra College sent out a sickness form to be filled in by any member of staff absent for between 1 to 7 days. This contained a long list of disabilities and health conditions and asked them to state if their absence had been connected with any of these. They also carried out a Return to Work meeting with any member of staff who had had any period of sickness leave (**Annexes three and four**).
- Portland College sends out an annual Health and Wellbeing at Work questionnaire, emphasising that the information gathered will be treated confidentially and is for statistical purposes only (**Annexe five**).
- National Star College recognised that there were certain occasions when it was important, on grounds of health and safety, for all staff to have the opportunity to disclose any disability or health conditions. When there was high concern about Swine Flu, the Human Resources manager wrote to every member of staff asking them to state if there was any reason why they might be specifically at risk of complications. They stressed that this was a

temporary measure, and that information would only be used in connection with Swine Flu and would be destroyed when the risk subsided.

In addition to this, Human Resources managers, as a matter of course, were continually aware of the need to look out for certain patterns of sickness in case these reflected an underlying disability.

The overall message is clear. However sensitive and welcoming your organisation is, not everyone will disclose a disability at the outset. As well as initial procedures, all organisations also need to have proactive procedures in place which will allow members of staff to disclose a disability or related health issue once they are securely in post and feel confident about the supportive nature of their employer.

Anticipatory and Reasonable Adjustments

In terms of anticipatory adjustments many specialist colleges are at an advantage. Because of the nature of their student body, they tend to have in place as a matter of course several of the adaptations, such as clear marking on steps or handrails in appropriate places, which are not necessarily present in other organisations. As one Human Resources manager said:

'in my experience with sector colleges, they are aware of the legal obligation to make reasonable adjustments but not always clear how to do it,'

thus showing a real value in local FE colleges visiting and learning from specialist organisations.

However, good as these anticipatory adjustments are, there is still a need for organisations to carry out an assessment with each individual to ensure all necessary reasonable adjustments are in place. Here too specialist colleges tend to be at an advantage, as they will often have assessment centres for their students which then can easily be used for staff with additional needs. They also have easy access to Occupational Health teams. Disabled staff were very clear about how necessary it was to sort out any reasonable adjustments right at the beginning of their employment:

'the induction week was very important as it enabled everything to get sorted out right at the beginning – little things like the height of shelves which are so important.'

While physical adaptations might be easier to identify, staff with unseen disabilities were equally clear about the importance of a quick response. As one member of staff who developed panic attacks, said:

'It is critical to have a quick response. Without it there is a cumulative effect as you feel you are being a burden to the team.'

Adjustments for staff with mental health difficulties which were being put in place included the provision of counselling by external counsellors and the provision of a support worker for times when an individual faced particular stress. Human Resource managers emphasised the importance of regular review of adjustments both to ensure that they were being effective and also because, with many disabilities, requirements can be in a constant state of flux. Colleges also had examples of staff whose increasing disability meant that they needed to be relocated; for example, a woman whose arthritis meant that she was unable to continue as a member of care staff had been very positively relocated to work as a member of educational support.

Many reasonable adjustments involved an allowance of additional time off, and all colleges complied with legislation to ensure that disability related sickness did not count as general sickness. One manager spoke of how they had now included this approach within their redundancy policy, so that while days off for sickness could be a factor in determining redundancy, disability related sickness could not. All colleges also had examples of allowing a phased return to work when staff had been off for a period of time because of a disability related illness. Hereward College also had a policy that when teaching staff returned from a stress related illness, they had a period of time when they were exempt from the potential stress of lesson observation.

All Human Resources managers were very aware of the need to put appropriate reasonable adjustments in place to ensure that there were no barriers to disabled staff accessing staff training. They made clear in advance to all staff precisely what a specific piece of training would entail, for example would it involve being part of a larger group. Queen Alexandra College had a policy that any external trainers must let the college have their training materials two weeks in advance so that they could be translated into alternative formats. If the trainers did not comply then they would lose their contract.

In conclusion Human Resources managers were very clear, when arranging individual reasonable adjustments, of the need always to 'go that extra mile' and to use any strategies or external services they could as a means of

'keeping staff within the organisation and not in order to manage them out'.

Costs and Benefits

Managers acknowledged that there could be additional costs associated with employing disabled staff, but also that these costs were often much less than was commonly assumed. Once again specialist providers were at an advantage in that they tended to be very knowledgeable about Access to Work funding and often were in close contact with their local DEA teams. Many of the reasonable adjustments required by their disabled staff were paid for through Access to Work, although concern was expressed by one college that the criteria for obtaining Access to Work

might be tightened. In all of the colleges visited, any additional costs were covered centrally so that no one department or area of work was financially disadvantaged by the employment of a disabled employee. The manager of Human Resources at Hereward College said that their Occupational Health Budget paid for some of the adjustments not covered by Access to Work. He had managed to reduce the drain on this budget by spending less on bureaucratic aspects and hence having more to spend on actual support, such as external counselling or providing cover for long term disability related sickness.

In general there was an overriding feeling that, when thinking about costs, you also needed to think about the returns and that the benefits tended to far outweigh any costs. As one manager said,

‘to get the best out of staff, they need to be supported’

whether they are disabled or not. There was a general agreement that if you have a good member of staff then of course you want to do all you can to keep them in your organisation. There was also recognition that the same disabilities which might require extra support could also bring additional rewards. One member of staff, who was receiving additional support for panic attacks and related OCD in the form of a support worker for eight hours a week, said that her OCD also had the effect of making her

‘very precise, a perfectionist, and someone who will stick at a task’.

Commitment of the whole organisation

Everyone interviewed emphasised the importance of all staff having an understanding of, and sensitivity to, people with the full range of disabilities. There was recognition that awareness was considerably raised if a college had disabled people in key positions throughout the organisation – one college had a disabled principal and one a disabled chair of governors. However, there was some recognition that certain adjustments, for example allowing for cover, was more difficult for some senior staff whose roles could not easily be covered by someone else.

The particular attitude of Human Resource managers was seen as crucial and it was encouraging to hear how positively disabled staff felt about their human resources manager and team. However, they also spoke of the need for their line manager, their co-workers and everyone in the organisation to be:

‘open minded’ and ‘prepared to learn and see that everyone is different’.

Everyone recognised the importance of ongoing disability awareness training for all staff, particularly in those areas of disability in which the college was not a specialist. More than one college had high numbers of staff with mental health difficulties; one had seven such staff, and this was felt to be an area where there was a particular

need for disability awareness training. One college had arranged for all staff to have had mental health first aid training which alerted them to indicators of mental health difficulties.

However, there was also a recognition that changes in attitude did not occur simply through awareness training programmes. There also needed to be opportunities for ongoing organisational learning where staff share their understanding, as one member of staff put it:

‘through osmosis’ resulting in a culture where ‘all staff give unspoken support’.

Listening to the voices of disabled members of staff

Colleges had mixed views on the best ways to ensure that the voices of disabled staff were heard and acted upon. One of the recommendations in the NIACE report (**Annex One**) suggests the establishment of ‘disabled staff groups’. Several colleges had established such groups, sometimes made up solely of disabled staff and sometimes a mixture of disabled staff and disabled students. Hereward College reported that they used to have both a disabled staff group and a black women’s staff group but that these:

‘had been disbanded on request of these staff who found the groups patronising and wanted to be represented along with all other staff.’

This indicates that different colleges may be at different stages in terms of their employment and inclusion of disabled staff and that they need continually to check with staff what they feel are the most appropriate methods to ensure that their voices are heard within the organisation.

Volunteers and Internships

Orpheus Centre has a large number of disabled volunteer staff. While recognising that there could be ethical issues in using volunteers, they also felt that volunteering could be a very important way for people with disabilities, especially those who had mental health difficulties, to experience a staged route into more permanent work. They stressed the importance of flexible modes of employment, for example one young woman with a disability had started off as a volunteer, which they had then developed into a paid internship as a result of which she was able to move into paid employment outside the college. Orpheus Centre also employed a number of sessional work disabled artists, which they found an excellent way of providing role models for their learners, although they did express concern that sometimes these people became caught in a ‘benefits trap’.

Has legislation made a difference?

When asked about the difference that legislation had made, both Human Resources managers and disabled staff felt that it had had a positive impact particularly in the

way in which it had opened up an awareness of disability and that disability was now much more obviously on peoples' agenda:

'it has made a difference in that disability is now much more talked about.'

In many ways Human Resources managers felt that they were doing what legislation required anyway, but they did acknowledge that it had made them focus again on their policies and procedures. They recognised the value of having to carry out impact assessments and also felt that certain legislative details had resulted in them revisiting and altering procedures and policies, for example stopping pre employment health screening and changing their referencing policy, although they were aware that not all organisations had made these changes.

However there was also a strong feeling that:

'legislation alone does not increase understanding'

and that organisations could be conforming to legislation but still not have the attitudes to become a positive employer of disabled people. There was recognition that legislation could be a double edged sword. An organisation needs above all to have a real commitment to employing disabled people. When this is present, legislation serves to strengthen this commitment. However, if the commitment is not there, legislation will not automatically make a difference. One Human Resources manager who had worked for several years in the private sector, said that he had found there was often an attitude that 'disability was a hindrance' and when this attitude prevailed legislation did not always act as an incentive but instead became:

'something to be got around'.

Definition of disability

The Disability Discrimination Act definition says that a person is disabled if he or she has a

'physical or mental impairment which has a substantial and long term adverse effect on his ability to carry out normal day to day activities.'

While the Act covers a wide range of possibly disabling conditions this wording still leaves considerable scope for different interpretations. Two colleges, one giving a return of 14.6% and one of 13%, acknowledge that a proportion of these people, whether known to the college, or unknown as in the case of the college who commissioned an anonymous survey, had conditions such as high blood pressure which would not be included within the DDA definition. There was also an acknowledgement by all colleges that

'many people with health difficulties, dyslexia or some other difficulties would never see themselves as disabled,'

and that:

'legislation is good for showing you what you should be doing, but the problem is that it makes labels.'

Human Resource Managers who knew that a proportion of their staff had health conditions which might not come under the DDA definition, still felt that it was important to know about these conditions as it helped them to recognise potential areas of difficulty for their staff. But there was also an acknowledgement that some organisations might use statistics of staff with minor health difficulties in order to boost their ratio of disabled staff, while not actually doing anything to become a more disability friendly employer.

Once again the issue comes down to the culture of the organisation. As one manager said, ideally what one should be striving towards is:

'a culture which doesn't have a fixed view of what is 'normal''

where all employees feel confident that they can be open about any physical or mental difficulties they might have, knowing that appropriate support will be available if and when they require it. The Principal of another college spoke of wanting to create:

'a situation where all staff feel supported and have appropriate adjustments made for them whether or not they adhere to the DDA definition of disability.'

This acknowledges the tension between wanting to create a social model within an organisation, and focussing solely on statistical evidence of how many disabled staff were employed according to the more medical definitions of the DDA.

Part three: Key Messages

These messages are not intended to replace any of the recommendations put forward in the NIACE report “**From compliance to culture change: Disabled staff working in lifelong learning**”, 2008 (**Annex One**). Instead they are additional messages gleaned from the interviews with Human Resource Managers and disabled staff from a selection of Independent Specialist Colleges which employ high proportions of disabled staff.

- **Creating a supportive environment for disabled students does not mean that a college automatically becomes a positive employer of disabled staff. Colleges need to make an additional, positive commitment to do this**
- **Successfully employing disabled staff requires more than adhering to a checklist of requirements. It is about creating a culture and ethos of inclusion and is a cumulative process. The advice of more than one disabled member of staff was not to wait until you had everything in place but to ‘*Just do it!*’**
- **Widen your recruitment procedures to include notifications of vacancies to local voluntary disability organisations, Disability Employment Advisers, Enable, and via your own cohort of disabled students.**
- **Ensure that all applicants know from the outset that you are an organisation which welcomes and supports disabled employees, for example by sending out to every applicant an easy to read version of your Disability Employment Charter.**
- **However good your procedures are, for a variety of reasons not everyone will disclose their disability immediately. Have in place a range of procedures, formal and informal, to encourage disclosure at a later stage.**
- **While being aware of the ethical issues which need to be considered around volunteering, recognise that sometimes volunteering is a very important way for people with disabilities or health difficulties to begin a route into employment. A flexible approach can often mean that disabled volunteers are, at a later stage, able to move into paid employment.**

- **Organise visits to colleges or organisations which specifically cater for students with particular disabilities in order to gain more understanding of the range of anticipatory adjustments which can be put in place.**
- **Ensure that any assessment of reasonable adjustments is carried out quickly and, in finding out about what kinds of adjustments are needed, always ask the individual member of staff. Make sure any adjustments which are in place are regularly reviewed.**
- **Where appropriate work with DEAs to see what costs can be covered by Access to Work funding. Always focus on benefits and not just on costs, and on what a person can do and not just on what they can't.**
- **If disabled staff are to be positively employed in your organisation, this requires the support of all staff. Ensure all your employees receive disability equality training covering the full range of disabilities.**
- **Look at the best ways of ensuring that disabled staff in your organisation have their views listened to and acted upon, and be guided by the staff themselves as to the most appropriate way for this to happen within your organisation.**
- **Of course ensure that you are scrupulously adhering to disability legislation, but also remember that *'legislation alone does not increase understanding'***
- **Aim to create *'a culture which doesn't have a fixed view of what is 'normal''* where all employees feel confident that they can be open about any physical or mental difficulties they might have, knowing that appropriate support will be available if and when they require it.**

Annex one

The Disability Equality Commitment

Lifelong Learning UK has set up a Disability Equality Implementation Group (DEIG) to drive forward the recommendations of the Commission for Disabled Staff in Lifelong Learning. The Commission launched its final and summary reports in March 2008, and recommended that lifelong learning organisations embrace fully the Disability Equality Duty.

The 11 key recommendations:

It is recommended that lifelong learning organisations: embrace fully the Disability Equality Duty, 'even where that involves treating disabled persons more favourably than other persons' in order to transform the organisation for staff as well as learners, by:

1. Clearly designating a senior member of staff with responsibility for disability equality and ensuring that all senior managers and every line manager are aware of their responsibilities with disability equality policies.
2. Ensuring that disabled people are encouraged to be trustees and governors and that bodies responsible for governance include disabled people.
3. Developing appropriate mechanisms to ensure that the voices of disabled staff are involved, heard and supported, such as through disabled staff groups, equality committees, liaison/focus groups and/or affiliation to national networks.
4. Reviewing and revising policies, processes and procedures for disclosure, and removing barriers to disclosure, to create a positive and secure culture for disclosure.
5. Ensuring that disability equality policies and schemes, staff appraisal schemes and impact assessments involve disabled staff and trade union officials, reporting to governing bodies/trustees annually, as the Disability Equality Duty requires.
6. Signing up to schemes such as the 'Mindful Employers' Charter', and the requirements of the 'Two Ticks' scheme.
7. Reviewing recruitment procedures in order to encourage applications from disabled people; guaranteeing interviews to disabled applicants meeting the job requirements; and adopting open and inclusive recruitment processes, especially for part-time and/or temporary staff.
8. Ensuring that each lifelong learning organisation sets out to achieve:

- a. staffing which reflects the disability profile of the adult working population;
- b. well-informed management and governance through training and appraisal programmes;
- c. sound policies and practices on disability absence and on disclosure;
- d. sharing good practice in supporting both disabled learners and disabled staff;
- e. better promotion of disability equality in staff training for part-time and full-time staff;
- f. full recognition of the need for individual responses to staff disclosure, with individual follow-up and support arrangements.

9. Financing reasonable adjustments centrally so that no section, department or faculty is disadvantaged, financially or otherwise, in meeting disability equality responsibilities;

10. Developing support for disabled staff, such as mentoring and work-shadowing, and a disability equality component in appraisal schemes – to contribute to raising the achievement of disabled staff;

11. Ensuring that disability equality good practice is shared between organisations, between staff and learners, and including where possible contractors and agencies delivering goods and services.

Annex two

Acknowledgments

Many thanks to:

The Human Resource managers and staff who were interviewed in the colleges visited:

- National Star College
- Queen Alexandra College
- Hereward College
- The Orpheus Centre

The Human Resource Managers who took part in a telephone interview:

- Derwen College
- Hinwick College

All the colleges that returned their data

Cherie Andrews, National Star College, for helping to scope the study

Alison Boulton, Chief Executive of Natspec, for overall project management and to Lifelong Learning UK for funding this study

Annex three

QUEEN ALEXANDRA COLLEGE

CERTIFICATION FORM

CONFIDENTIAL

This form should be completed for all periods of sickness absence of between 1 and 7 calendar days. If you are sick for more than seven days, you have to provide a medical certificate from your doctor.

NAME: _____ JOB TITLE: _____

I was unable to attend work from _____ to _____

due to the following illness: _____

(NB: these dates should be the first day sick and the last day sick)

SICKNESS REASON	CODE	SICKNESS REASON	CODE
Blood Disorder	BLO	Musculo-Skeletal Back	MUA
Cancer	CAN	Musculo-Skeletal Neck	MUB
Cardiac/Coronary	CAR	Musculo-Skeletal Other Joint	MUC
Cold/Influenza	COL	Neurological	NEU
Diarrhoea/Vomiting	DIA	Other Mental Disorders	OTB
Ears, Nose & Throat	EAR	Pregnancy Related	PRE
Eyes	EYE	Psychological	PSY
Gastro-Intestinal	GAS	Respiratory	RES
Genito-Urinary	GEN	Stress/Anxiety	STR
Gynaecological	GYN	Substance/Alcohol Misuse	SUB
Headache/Migraine	HEA	Surgery	SUR
Hypertension	HYP	Other*	OTH
Infections	INF		

- for "Other" please provide details

I have/have not consulted my doctor

All the above information is true and correct to the best of my knowledge.

I declare that I have not worked during this period of sickness absence and acknowledge that to do so would lead to a disciplinary hearing and possible dismissal.

Was this due to an accident at work? YES/NO

If so, when _____

Signed _____ Date _____

THIS FORM MUST BE COMPLETED AND SENT TO YOUR MANAGER FOR AUTHORISATION:

LINE MANAGER'S APPROVAL

Signed: _____ DATE _____

Printed Name:

AN APPROVED COPY TO BE SENT TO THE HR DEPARTMENT

Annex four

QUEEN ALEXANDRA COLLEGE

RETURN TO WORK MEETING RECORD

To be completed on the day you return to work

Employee's name		
Period of Absence		
Date of Meeting		
Welcome the employee back to work and explain the purpose of the meeting: <ul style="list-style-type: none"> • To discuss the absence • Update the employee on any developments during the absence • To identify any problem areas • Offer support where appropriate and manage attendance 		
Inform the employee that the absence will be recorded and monitored		
Ask the employee to confirm the reason(s) for the absence		
Discuss the impact of the absence on the department		
Ask the employee whether or not he/she has consulted a doctor or attended hospital and whether the advice given is being followed		
Ask the employee to complete the sickness reporting form (self-certification form), to certify the first 7 days of the absence (if appropriate)		
Discuss whether there are any other work or domestic problems the employee wants to raise		

Discuss whether there is an underlying condition that might be covered by the Disability Discrimination Act		
If there is a target for sickness absence in place , remind the employee about it and what might happen next		
Discuss whether an Occupational Health referral might be of benefit or whether any other support, such as counselling, is appropriate		
Update the employee on any developments during the absence		
Comments/Issues raised/Further Action		
Manager's Name		
Manager's Signature		
Employee's Signature:		
Date		

Once completed by the manager, copy to be given to employee and this form should be sent to the HR department for retention on the employee's file (for five years

Annex five



Health & Wellbeing at Work:

Name: «Personnel Records Title» «Personnel Records Known As»
«Personnel Records Surname»

Capturing relevant and up-to-date data on the Health and Wellbeing of our staff is imperative for 4 good reasons: -

1. It helps the College as your Employer to meet your individual needs
2. It improves your access to equal opportunities and training schemes
3. It helps the College retain current contracts and attract new funding
4. It helps the College strive towards being Champions of Best Practice

Please be assured that the following data is being collected for statistical purposes only.

Please answer the following questions:

	Question	Y/N
1	Do you have a hearing, speech or visual impairment (stammer, stutter, wearing glasses/contact lenses does <u>not</u> apply.	
2	Do you suffer from coordination, dexterity or mobility problems (e.g. polio, spinal cord injury, severe back problems, repetitive strain injury)	
3	Do you suffer from any mental health problems (severe depression, severe phobias, schizophrenia)	
4	Do you have any learning difficulties (e.g. dyslexia)	
5	Do you have any other physical or mental health conditions (arthritis, cardiovascular conditions, diabetes, asthma, cancer, haemophilia)	
6	Do you have a long term health condition that has lasted or is likely to last at least 12 months?	

7 If you have answered 'Y' to any of the above please provide further details below. If you have answered 'N' then you do not need to complete any further questions.

8. Has the College made any adjustments to support you with your day-to-day working activities?

9. Do you feel you have ever been treated differently because of your condition?

Yes, I am treated better	
No, I am treated worse	
No	

10. Have you ever experienced any difficulties in accessing employment and/or training opportunities?

Yes	
No	
Not required	

11. Would you be willing to discuss you comments further in a one-to-one confidential meeting?

Yes	
No	