



Kingsbury Parish Council

Working for the local community in
North Warwickshire

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Return To Work Discussion/Interview Form (RTW1)

If sickness absence has been longer than 7 continuous calendar days employees must provide a medical certificate(s) (known as the fit note) to cover them.

Name:

Post:

SECTION ONE: ABSENCE DETAILS

1. Date of return to work			
2. Dates of absence:	From:	To:	Hours Lost:
3. Did the employee follow correct absence reporting procedures: Yes/No			
4. Self-Certification/Doctor's Note received: YES/NO (If No, why?) Completed self-certification forms and doctor's notes should be forwarded to the Chair.			
5. Reason for absence:			
6. Is the employee fit to resume normal duties: YES/NO			

Employee Signature:	Date:
Chair's Signature:	Date:
Chair's Name:	

SECTION TWO: RETURN TO WORK INTERVIEW

1. Date of interview

2. Total absence over last 12 months: (Including this period of absence)

No of occasions:

Total days (or hours for part time employee) lost:

Currently under absence monitoring? YES/NO

3. Issues to address and employee response:

- How are you now and are you able to carry out normal hours and duties?
- What was the possible cause of your sickness absence and what action have you taken to avoid any future occurrence (work/accident or personal)?
- Did you consult a Doctor or other medical practitioner?
- Are you on any medication which may affect your performance?
- Do you feel that there is anything we can do to support you?
- Do you consider your illness to be work-related? If the answer is yes, in what way is it work related? *If so an incident or hazard report form should be completed.*
- If you feel it is work related did you complete an accident, incident, or hazardous report form?
- Update on work during period of absence, e.g. announcements etc:

SECTION THREE: NEXT STEPS

1. Summary of action points (if applicable) agreed and any other comments:

2. Review date for agreed actions:

Employee Signature:

Date:

Chair's Signature:

Date:

Chair's Name: