**Sick Leave information.**

Use of Educators Notes:

* Any sick day should be recorded in ed.notes. This helps reveal any sick day patterns of behaviour
* Document initial discussion re: absence and any support offered (eg: signposting to GP, Practitioner Health, Occupational Health)
* Add Educator’s Note and inform TPD if trainee is off sick for more than 2 weeks.
* Record any contact with the trainee during their absence (eg: Med3’s received, copies of any emails between trainee and educators, summary of any phone conversations).
* Document SuppoRTT meetings and upload copies of SuppoRTT forms.
* Document details of any phased return

Supported Return to Training:

www.yorksandhumberdeanery.nhs.uk/professional-support/supported-return-to-training

* For planned extended leave (eg: surgery), meet with trainee and refer to SuppoRTT prior to sick leave.
* Trainees likely to be off sick for more than 3 months – refer to SupoRTT (or less than 3 months if they would benefit from SuppoRTT courses eg: wellbeing courses).
* Referrals can be done by CS, ES or TPD. The initial (pre-absence) form can be completed retrospectively in the case of unplanned leave.
* All forms are available in the Documents, Guidance and Forms section of the webpage, listed above. Copies should be uploaded onto the eportfolio, either by the trainee or in an Educators Note.

Pre-return meeting:

* Ideally 2 months before planned return.
* Discuss phased return, supernumerary period, enhanced supervision, LTFT, coaching and mentorship. Phased return to work would not count towards training and trainees should be informed of this.
* CPD in preparation for return to work -clinical and non-clinical courses are available via SuppoRTT. Funding for external courses can be applied for via SuppoRTT
* Complete SuppoRTT pre-return meeting form and upload to eportfolio.

Extended sick leave

After 4 weeks, inform Locality Support TPD.

After 3 months, Locality AD needs to be informed. These trainees will be discussed regularly at SMT.

After 2 years of sick leave, the trainee may lose their NTN and be removed from training.

Phased return to a GP post: The trainee must be fit to work, if starting a phased return.

* Consider reduced hours, sitting in, time to update mandatory training and refamiliarize themself with the IT system. Shorter surgeries/longer appointments, joint visits, enhanced debriefs (see example timetable).
* Regular tutorials – check how return is going, check wellbeing, discuss specific educational concerns.
* Phased return for 4 weeks is normally approved with TPD agreement.
* 4-12 weeks need to be approved by SMT and requires OH referral and involvement. SuppoRTT may also be a useful resource.
* Phased returns over 12 weeks are exceptional. These require SMT involvement, and usually a meeting with the Trust HR, AD, Trainee and an up to date OH report.
* Phased return to work does not count towards training time.

Return to work review meeting:

* after 4 weeks
* Review phased return, progress and wellbeing.
* complete SuppoRTT form.

K Simpson K Bradley May 2023