

MANAGING ATTENDANCE AT WORK

Staff in Grant Aided Schools with Fully Delegated Budgets

POLICY STATEMENT

The Employing Authority is committed to promoting high quality education by employing and supporting staff who will work with a high degree of commitment and professionalism in a healthy environment. The Employing Authority and Board of Governors are committed to providing a caring and supportive school environment which recognises that members of staff are individuals whose personal well-being is of value to the education of the children and the smooth running of the school. Staff health and welfare is an essential part of this and augments other aspects of school management.

The purpose of this policy and accompanying procedures is to establish a clear framework for managing absence at local level, supported by sound professional human resources advice. Principals and staff should familiarise themselves with the policy and procedures.

General

This policy applies to staff employed in grant aided schools with fully delegated budgets. The principles of the policy will apply to schools with partially delegated budgets.

The policy covers absence which is reported as sickness absence. It does not apply to authorised absences e.g. holidays, training courses, jury service, where appropriate, etc. nor to ante natal care or absence on maternity leave.

The policy and procedures have been drawn up jointly by the Northern Ireland Employing Authorities in consultation with the Department of Education and the recognised Trades Unions and comply with the Teachers' (Eligibility) Regulations (NI) 1997.

The Employing Authority recognises its responsibilities under the Disability Discrimination Act and the Health and Safety at Work Order and is committed to promoting equality of opportunity and a healthy working environment for all its employees.

The policy and procedures which take effect from 1 April 1999, shall be formally adopted by each Board of Governors.

Aims of the Policy

1. To ensure that all staff are treated fairly, consistently and with sensitivity during times of illness.
2. To inform staff and Boards of Governors of the policy and procedures for managing attendance in schools, to maintain confidentiality of information and to facilitate a consistent approach to staff attendance across all schools.
3. To promote and encourage an attendance culture which recognises that good attendance enhances the learning experience of children.
4. To address the negative effect on staff morale where frequent or prolonged absences of colleagues create additional workload, pressure and stress.
5. To raise awareness of the Staff Care Service (where applicable) and its supportive role.

STAFF CARE SERVICE

The Employing Authority recognises that from time to time staff may require support in resolving personal or other issues which may impact on their work life and affect their attendance at work.

The Staff Care Service provides, on a CONFIDENTIAL basis, support to staff when problems become persistent, unmanageable or affect health and well-being. It provides support for those suffering stress, anxiety or having difficulty coping with experiences such as bereavement, relationships, family, or financial difficulties, addiction and work related problems.

The decision to request or accept assistance from the Staff Care Service is the personal choice of the individual, whose identity will remain confidential to the Service and will not be disclosed to the School or the Employing Authority.

The Employing Authority also has in place a number of other policies to assist and support staff - the Alcohol Policy, special and compassionate leave, the Career Break Scheme and the Job Share Scheme. Further advice on these policies is available from Human Resources.

MANAGING ATTENDANCE AT WORK - PROCEDURES

1. INTRODUCTION

- 1.1 The following procedures have been developed to support the Policy on Managing Attendance at Work, to facilitate a consistent approach to staff attendance across all schools and to clarify the roles of principals, staff and the Human Resources Branch. Care should be taken by all concerned to ensure that personal, medical or other relevant information on individual members of staff is maintained confidentially.
- 1.2 It is recognised that circumstances differ and each case must be treated sensitively. In certain cases, such as terminal illness, referral to the Employing Authority's Occupational Health Physician may not always be appropriate.
- 1.3 Principals and staff are advised to familiarise themselves with the procedures.
- 1.4 Advice on the operation of the Policy and Procedures is available from the Employing Authority.

2. ROLE OF THE PRINCIPAL

within the context of the school's pastoral care policy:

- to ensure that all new staff are informed of sickness absence procedures and policy as part of the induction process;
- to monitor the absence of staff in a fair, consistent and confidential manner and to ensure that appropriate documentation is submitted to the relevant section of the Employing Authority on a timely basis;
- to maintain appropriate contact with staff, particularly those on long term absence;
- to liaise with staff regarding arrangements for referral to the Occupational Health Physician or other agency;
- to carry out absence interviews and keep appropriate records;
- to ensure staff are aware of the Staff Care Service (where applicable);
- to support, as far as practicable, any rehabilitation programme which may be recommended by the Occupational Health Physician.

3. ROLE OF HUMAN RESOURCES

- to provide available information to principals to facilitate monitoring.
- to advise, assist and support principals in the management of attendance.

- to arrange medical referrals and act as liaison between principals and the Occupational Health Physician.
- to provide advice and support to principals and staff on welfare issues and the appropriate use of staff care policies and services.
- to assist principals in the investigation of re-deployment opportunities within the school where a member of staff is found incapable of continuing in their current position.
- to monitor the application of the policy and ensure that there is a fair and consistent approach to all members of staff who are ill.

4. **ROLE OF FINANCE**

- to provide available information on the cost of absence.
- to monitor financial expenditure on absence.

5. **ROLE OF THE EMPLOYEE**

- to report all sickness absence in accordance with procedures and provide appropriate documentation **promptly** - refer to paragraph 11 "Reporting Absence".
- to maintain appropriate regular contact with the principal during any period of absence.
- to follow any professional advice, including medical, aimed at ensuring a timely return to work.
- to advise the principal of matters relevant to the absence particularly where there may be other problems either at home or at work contributing to the absence.

6. **MONITORING ATTENDANCE**

It is the responsibility of the principal to monitor the attendance of staff.

Monitoring ensures that issues of public accountability for expenditure on salaries and sick pay are satisfied; it enables principals to make decisions about temporary arrangements such as deputising; it also ensures that principals are fully aware of the absenteeism rates of staff and can address any problems promptly.

The Human Resources Branch will provide principals with regular reports, detailing the number of self/medically certified absences.

Action by the principal should normally be initiated by any of the following:

- (a) More than 8 casual days absence in a 12 month rolling period.
- (b) More than 3 periods of absence in a 12 month rolling period, each in excess of 3 days duration.
- (c) Continuous absence of 4 weeks or more.
- (d) An individual member of staff with an absence rate of 5% or more.

Circumstances will vary from case to case and principals may have additional information which would make action under this procedure inappropriate. In such cases advice should be sought from Human Resources.

7. **CONTACT DURING ABSENCE**

There is a responsibility on the management of the school and the teacher to maintain contact with each other whilst the teacher is on sickness absence. Such contact should always be of a friendly supportive nature and mindful of the welfare needs of the teacher. The maintenance of such contact should enable effective communication between the parties and facilitate the teacher's return to work.

8. **MANAGEMENT OF THE DIFFERENT TYPES OF ABSENCE**

8.1 **Short Term Absence**

This is defined as frequent, minor and usually unconnected illnesses which cause regular absence from work.

The principal has a valuable role to play in the management of short term absence and is well placed to ascertain the full facts of the situation. It is his/her responsibility to monitor absence and observe patterns and this will be assisted by regular information provided by Human Resources. Where a principal is concerned about the absence of a staff member he/she should contact Human Resources for advice. The action necessary will depend upon the circumstances of each case. Where a member of staff's absence falls within this category a medical referral may not be considered appropriate.

In situations where the frequency of absences gives cause for concern, the principal must ensure that the member of staff is aware of the difficulties caused by the absence, the improvement which is required and the possible consequences of failure to improve. (See Paragraph 9 Absence Interviews)

Persistent short term absence which gives cause for concern may lead to disciplinary action. Principals must consult Human Resources before invoking the Disciplinary Procedure.

8.2 **Persistent Intermittent Absence**

This is defined as regular short and/or long term absences which may or may not result from an underlying medical condition. In this type of absence the medical prognosis may be such that the member of staff could not be deemed to be permanently unfit for work but the absences may be of such a significant level that the member of staff can be deemed to be incapable of giving regular attendance at work.

Dependent upon the particular circumstances of the case a referral to the Occupational Health Physician may be considered appropriate. Where a referral is considered appropriate, the principal should, where possible, contact the member of staff and advise them of the referral. Persistent intermittent absence is the most difficult type of absence pattern to assess and control as it requires sensitive judgement, supported by all available information. This judgement could lead to one of two approaches -

- (a) Where it has been established through medical referral/assessment that the member of staff is not suffering from any significantly debilitating illness and where counselling has failed to achieve improved attendance the Disciplinary Procedure should be implemented. Any resultant disciplinary action will be by reason of 'inability to attend work regularly'.
- (b) Where, through medical referral/assessment, the prognosis establishes the member of staff's medical incapability to work, the relevant procedure for termination of employment on grounds of ill health should be implemented.

It should be noted that a member of staff's absence pattern can straddle all categories of absence. In this situation the key assessment is the member of staff's likely ability to attend work regularly based on any continuing absence which has occurred following counselling/warning.

8.3 Long Term Absence

This is defined as illness or injury which is likely to result in an absence from work of at least 4 weeks or longer or which could result in staff being unable to return to work.

When a member of staff has been absent for 4 weeks continuously and there is no indication of an imminent return to duty, the principal should assess the situation in consultation with the Human Resources Branch. Each case will be dealt with sympathetically, on its own merits with full consideration of the circumstances. Dependent upon the particular circumstances of the case a referral to the Occupational Health Physician will be considered. Where a referral is considered appropriate, the principal should, where possible, contact the member of staff and advise them of the referral.

Following the medical examination, the Human Resources Branch in consultation with the principal, will consider what subsequent

action is necessary based on the report of the Occupational Health Physician.

In cases where the prognosis indicates that a return to work is not possible, the procedure for the retirement of staff on grounds of permanent ill health or termination of employment on the grounds of ill health will be implemented.

9. ABSENCE INTERVIEWS

In order to effectively assess and manage attendance it may be necessary to meet with staff either during the course of their absence or on their return to work. The purposes of such meetings will be for some or all of the following reasons:

- to welcome the member of staff back and to reassure him/her that the principal is concerned about his/her welfare and attendance;
- to establish the current status of the absence and to attempt to establish whether there is an underlying cause for the frequent absences such as difficulty at work, a more serious health condition or a personal or domestic problem. (Principals must be sensitive to the fact that staff may not wish to discuss personal problems with them. In such cases, it may be appropriate for a member of the Human Resources Branch to deal with the case);
- to update the member of staff on school developments;
- to explain the importance of regular and reliable attendance and to draw his/her attention to the effect of absences on the workload of colleagues;
- to advise of the availability of the Staff Care Scheme/Welfare Service (where applicable);
- to encourage improved attendance, establish the level of improvement required, the monitoring period for review and to explain the consequences of maintaining an unsatisfactory level of attendance;
- to establish if a medical referral is required if this has not already been established;
- to provide feedback on a medical referral and any proposed action.

Principals need to exercise discretion with regard to the nature and content of an absence interview.

Following such a meeting a brief note should be compiled noting the substance of the meeting and any action which it is proposed to take including continuing monitoring, medical referral, potential movement to formal discipline if attendance does not improve. A copy of this note should be made available to the member of staff and a copy forwarded to the Human Resources Branch for the personal file together with any requests for medical referral.

NB If attendance is subsequently referred for disciplinary action, such action will be started at least at written warning level.

Principals have a responsibility to ensure that all information relating to staff absence is treated with sensitivity and confidentiality. An absence interview must be conducted in private and in a sympathetic and helpful manner. Staff who wish to be interviewed by a person of the same gender should be accommodated where possible.

In particularly sensitive or difficult cases the Human Resources Branch may be in attendance by way of assistance to local management.

10. SICK LEAVE

The Employing Authority provides a supportive occupational sick pay scheme which is designed to alleviate hardship and anxiety on those occasions when staff are unable to carry out their duties due to illness or injury.

Paid sickness absence is designed to facilitate a full and proper recovery. Sickness absence is not an extension of leave, an alternative to special or unpaid leave or an entitlement to a certain number of days per year. All staff should note that the misuse of sickness absence is regarded as misconduct and will be dealt with under the Disciplinary Procedure.

11. REPORTING ABSENCE

On those occasions where illness prevents a member of staff from attending work, he/she **must** personally, or make arrangements to:

- a. notify the principal by telephone, if possible, one hour before school starts and no later than 9.30 am (or within one hour of start time). If the principal is unavailable, the vice principal or other designated member of staff should be informed. In exceptional circumstances, if a member of staff is incapable of notifying the principal, a relative or friend may do so. In the case of a principal, he/she should notify the vice principal or other designated member of staff who in turn should inform the chairman of the Board of Governors;
- b. at the time of the initial notification give an explanation of the absence and, if possible, an estimate of its likely duration;
- c. ensure that the principal is kept informed of the illness regularly in order that alternative arrangements can be put in place;

- d. provide documentation **promptly** to the school in support of any absence from work due to sickness as follows:
- | | |
|-----------------------|--|
| Up to 3 working days | appropriate form must be completed on day of return to work. |
| Up to 7 Calendar days | self certification form must be submitted on or before the 7th day of absence. |
| More than 7 days | Doctor's statement must be submitted before expiry of the 2nd week of absence. |

Note: The Teachers' Salaries Regulations (N.I.) 1993, Regulation 19(8) (b) states:

"A teacher who has been absent because of illness for a total of 20 working days in any year ending 31 March and who has not submitted a doctor's statement in respect of any of those 20 days shall not be entitled to salary for any subsequent days of absence through illness in that year unless he furnishes a doctor's statement.";

- e. notify the principal in advance of the date of return to work. If the absence has been of 4 weeks or more duration the principal, or in the case of a principal, the chairman of the Board of Governors, should be given, where possible, one week's notice of intention to return to work.

It should be noted that failure to comply with the above may result in the absence being regarded as unauthorised, in pay being withheld and/or disciplinary action being taken.

Where the original doctor's statement covers a period exceeding 14 days, or where more than one statement is required, the member of staff must, before returning to work, obtain a final statement certifying fitness to resume duties.

12. CONDUCT DURING ABSENCE

In all cases of sickness or injury which necessitate taking time off work, it is expected that staff will do their utmost to facilitate a speedy return to fitness and to work. The following are examples of activities which would be considered inconsistent with genuine sickness or injury and may result in disciplinary action being taken.

- participating in any sport, hobby, social or other activity which is inconsistent with the illness or injury or which could aggravate the illness or injury or which could delay recovery;
- undertaking any other employment, whether paid or unpaid;
- altering or causing to have altered any details on a medical statement, eg. dates or signature;
- failing to respond to requests to attend absence meetings or medical examination without good reason;

- taking holidays during sickness absence will be a cause of concern unless there is acceptable evidence to support the contention that the holiday is deemed to be required as part of treatment or necessary recuperation. Staff contemplating taking holidays should discuss this with the principal in advance.

The above list is illustrative only. The type of behaviour expected of staff will depend upon the individual nature of the case and the nature and severity of the illness. Principals are expected to be alert to such issues and report any **substantiated** incidents which come to their attention to the Human Resources Branch. Such cases will be fully investigated before any action is taken.

13. **MEDICAL EXAMINATIONS**

A member of staff shall, if required, submit to a medical examination by a registered medical practitioner or a medical consultant appointed by the Employing Authority or recommended by the Employing Authority's Occupational Health Physician. This medical examination will be at no cost to the member of staff unless he/she fails to attend without reasonable notice and/or good reason.

Information may also be sought from the member of staff's general practitioner or specialist with the permission of the member of staff. The seeking of such information is governed by the provisions of The Access to Personal Files and Medical Reports (NI) Order 1991.

The process of medical examination will be governed by separate procedures.

Staff may be referred for assessment or examination to the Employing Authority's Occupational Health Physician in any of the following circumstances:

- when absences in a rolling 12 month period give cause for concern and the Employing Authority wishes to establish whether or not there is an underlying medical condition which may be causing the absence;
- when a member of staff has been on a prolonged continuous absence (in excess of 4 weeks) and there is no prospect of a return to work;
- when a member of staff has been on prolonged sickness absence and wishes to return on a temporary or alternative working pattern for medical reasons;
- when the duration of the absence seems excessive for the nature of the illness;
- when, at any time, a member of staff's behaviour gives cause for concern;
- when a non-teaching probationer's sickness absence record is such that it raises doubt with regard to the advisability of continuing his/her employment;
- when a request is received from a member of staff for premature retirement on the grounds of ill-health;

- when the Employing Authority is of the opinion that dismissal on the grounds of ill health may be considered in light of previous and current sickness absences;
- when the rate of sickness absence in a particular work area is significantly higher than average and there is no obvious explanation.

14. CONSIDERATION OF ALTERNATIVE WORK/PHASED RETURN TO OWN DUTIES

On occasions where a member of staff is deemed by the Employing Authority's Occupational Health Physician to be incapable of maintaining regular and reliable attendance at work, it may be necessary to consider the possibility of alternative work to resolve the situation. This type of re-deployment must be discussed in detail with the Human Resources Branch. Examples of alternatives which may be considered, dependent upon the circumstances of each case, are, part-time work or duties of a different grade.

Where an employee is deemed to be fit to return to existing duties the Employing Authority may consider a phased return to facilitate a resumption to normal working. In normal circumstances this will not exceed a period of 4 weeks. Salary will be calculated and paid for actual hours worked, subject to the category of sick pay entitlement current.

15. TERMINATION OF EMPLOYMENT ON THE GROUNDS OF ILL HEALTH.

An Employing Authority may, having considered all available information including, where appropriate, medical information, determine that an individual's employment should be terminated on grounds of ill health. Such a determination does not automatically qualify the member of staff for release of pension entitlements where the member of staff is a member of an occupational pension scheme.

In circumstances where dismissal on grounds of ill health is proposed the appropriate procedures will apply.

16. MEDICAL RECOMMENDATION TO RETURN TO WORK

Where, following a medical referral, the Employing Authority's medical adviser indicates that a member of staff is fit to return to work the member of staff will be advised of this outcome and a date will be set for return. If the member of staff disagrees with the determination of the Employing Authority's medical adviser he/she will be offered the facility to appeal against the instruction to return. Such appeal must be lodged within 5 working days of the notification to return and must be accompanied by a medical statement. The appeal will be referred to an

independent medical examiner agreeable to both parties, who has not previously been involved in the case and whose medical opinion will be binding. Sick pay may be suspended from the expected date of return pending the outcome of the independent medical examination.

If the appeal is upheld sick pay will be restored and a decision will be taken on continued employment or continued monitoring. If the appeal is not upheld the member of staff will be given one final opportunity to return to work. If the member of staff fails to return to work he/she will be deemed to be in breach of contract.

17. ILL HEALTH AND DISABILITY

In keeping with the Code of Practice on Equality of Opportunity for People with Disabilities, the Employing Authority will, where practicable, attempt to re-deploy an individual who is found to be unfit for their current post provided he/she is deemed to be fit for alternative work. No guarantee can be given as to the availability of such work as this is entirely dependent upon a suitable alternative post being available. Consideration may be given to retraining, dependent upon the circumstances of the case, the resources available and the aptitude of the individual.

18. SICKNESS ABSENCE AND DISCIPLINE

Where a member of staff who is subject to disciplinary investigations or proceedings absents him/herself on health grounds, the Employing Authority reserves the right, at any stage, to require the member of staff to submit to a medical examination by a registered medical practitioner or consultant appointed by the Employing Authority and to progress the disciplinary case, as appropriate.

Health Declaration

Teaching Service

NOTES:

- i. This form seeks answers to a number of questions concerning your health and general physical condition. The information is required as you will be working with children and there is a pension scheme associated with employment. The Employment Authority must be satisfied the staff entering employment are in a fit state of health to give effective and efficient service. In doing so the Employing Authority recognises its responsibility under the Disability Discrimination Act and is committed to promoting equality of opportunity in employment.
 - ii. You are required to complete fully each section of the form, have it countersigned by your General Practitioner and return it to the Human Resources Officer in the envelope provided. All questions must be answered and all information given will be treated in strictest confidence.
 - iii. You are personally responsible for the payment of any fees due to an examining doctor for a full examination or other report, including this health declaration.
 - iv. The deliberate giving of false information or the wilful suppression of material information will render you liable for disqualification, or if appointed to a post to dismissal, additionally you may forfeit your right to certain superannuation benefits.
-

1. Name (in block letters): Mr/Mrs/Miss/Ms/Dr or Title:
- Surname: Address:
- Forenames (in full):
..... Postcode:
- Date of Birth: Tel No: Home:
- Age: Work:

2. a. State the name of the school/college to which you have been appointed:
.....

and

- b. State the subject specialism:

3. a. What is your height (without shoes)? m or ft ins
- b. What is your weight (without shoes, in indoor clothes)?
..... kg or st lbs

IN CONFIDENCE

4. PAST WORKING HISTORY

Please list previous jobs you have had since school and detail any specific hazards or health risks to which you were exposed eg: dust/fumes/noise/chemicals etc.

<u>FROM</u>	<u>TO</u>	<u>JOB DESCRIPTION</u>	<u>EMPLOYER</u>	<u>HAZARDS</u>

IN CONFIDENCE

5. PREVIOUS SICKNESS ABSENCE

Please give details of time lost from work or college due to illness over the last two years:

From	To	Reason for Absence

	Yes	No
Are you in receipt of any type of invalidity pension?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever left/lost or retired from previous employment as a result of injury, a medical condition or unsatisfactory attendance?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been medically rejected for employment?	<input type="checkbox"/>	<input type="checkbox"/>
Has any insurance company declined to accept a proposal to insure your life?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been told that you have an industrial or occupational disease?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had an injury at work requiring time off work?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had any other illness which you feel may be relevant to your employment?	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered yes to any of the above questions please give further details below:

IN CONFIDENCE

6. MEDICAL HISTORY

Please answer the following questions and give details where appropriate.

	Yes or No	Please give details, where appropriate	Dates, where appropriate
A a. Is your eyesight satisfactory for all normal purposes? (with glasses or contact lenses if necessary)	_____	_____	_____
b. Are you able to recognise and distinguish all the various colours?	_____	_____	_____
c. Is your hearing in each ear good for all normal purposes including telephoning?	_____	_____	_____
d. Do you have any writing defect or specific learning difficulty (dyslexia)?	_____	_____	_____
e. Do you have any defect of speech or communication problem?	_____	_____	_____
f. Do you have any other health problems or disabilities?	_____	_____	_____
g. Are you now generally in good health?	_____	_____	_____
B a. Do you smoke? If yes, either indicate how much tobacco or how many cigarettes you smoke daily.	_____	_____	_____
b. Do you drink alcohol? If yes, indicate how much wine, beer or spirits you drink each week.	_____	_____	_____
c. Have you ever been treated for drink, drugs or other substance abuse?	_____	_____	_____
d. Are you at present under any medical treatment or observation (including alcohol/drug related problems)?	_____	_____	_____
	IN CONFIDENCE		
	Yes	Please give	Dates,

	or No	details, where appropriate	where appropriate
e. Are you, at present, taking any medicines?	_____	_____	_____
f. Have you ever had any treatment in hospital, undergone any operation or had a serious accident?	_____	_____	_____
g. Have you ever had treatment by radium or radiotherapy or with chemotherapy?	_____	_____	_____
C Are there any adjustments or requirements which would be necessary to enable you to fulfil your employment?	_____	_____	_____
D Do you suffer from or have you ever had any of the following:			
a. severe, frequent, prolonged or recurrent headaches or migraine?	_____	_____	_____
b. fits, fainting attacks, blackouts or epilepsy?	_____	_____	_____
c. mental ill health, nervous debility, depression or other mental illness (including eating disorders such as anorexia or bulimia)?	_____	_____	_____
d. serious head injury or been knocked unconscious?	_____	_____	_____
e. paralysis or other neurological disorders?	_____	_____	_____
f. heart disorder, rheumatic fever, abnormal blood pressure, or poor circulation (including chest pain and palpitations)?	_____	_____	_____
g. asthma, bronchitis, tuberculosis, or other chest illness?	_____	_____	_____
h. gastric or duodenal ulcer or helicobacter pylori?	_____	_____	_____
i. recurrent indigestion, vomiting or stomach problems?	_____	_____	_____

IN CONFIDENCE

Yes

Please give

Dates,

	or No	details, where appropriate	where appropriate
j. recurrent diarrhoea, bowel problems or dysentery?	_____	_____	_____
k. typhoid or paratyphoid or recent contact with anyone who has had these illnesses?	_____	_____	_____
l. kidney disease or bladder disease?	_____	_____	_____
m. arthritis, rheumatism, joint problems, gout?	_____	_____	_____
n. any back trouble including prolapsed disc or bone problems?	_____	_____	_____
o. any blood disease?	_____	_____	_____
p. dermatitis, eczema or dry sensitive skin?	_____	_____	_____
q. other skin problems (such as psoriasis)?	_____	_____	_____
r. any allergy?	_____	_____	_____
s. diabetes?	_____	_____	_____
t. thyroid or gland problems?	_____	_____	_____
u. ear disease?	_____	_____	_____
v. eye disease?	_____	_____	_____
w. frequent sore throats or tonsillitis?	_____	_____	_____
x. vertigo, or tinnitus (ringing in the ears)?	_____	_____	_____
y. hernia or rupture?	_____	_____	_____
z. varicose veins?	_____	_____	_____
ai. any alcohol or drug related problem or illness?	_____	_____	_____
bi. problems with your hands, arms, legs or feet which affect movement or normal use?	_____	_____	_____

IN CONFIDENCE

	Yes or No	Please give details, where appropriate	Dates, where appropriate
ci. problems with standing, bending, lifting or other movements?	_____	_____	_____
di. blood disorders or jaundice or illness affecting your immune system?	_____	_____	_____
ei. any recurrent infections?	_____	_____	_____
fi. have you tested positive for any transmittable disease?	_____	_____	_____
gi. any adverse reaction to vaccination?	_____	_____	_____
hi. any other serious illness?	_____	_____	_____

7. Have you been abroad within the last 2 years Yes No

If yes, Please state where and when

8. Have you consulted a doctor during the last 5 years? Yes No

If yes, please give the following details:

Nature of Illness (use of separate line for each)	Dates of Beginning and End of Illness	Number of Days Unable to Attend School, College or Work

9. Have you ever had a chest X-ray? Yes No

If yes, please state: when
the result

10. Have you ever had an E.C.G.? Yes No

If yes, please state: when
the result

IN CONFIDENCE

11. Have you ever had a B.C.G.? Yes No

If yes, please state: when
the result

12. Have you ever had a HEAF test? Yes No

If yes, please state: when
the result

13. Please give the name, address and telephone number of your family doctor and hospital specialist(s), if appropriate.

	Name(s)	Address(es)	Telephone No.
Family Doctor

Hospital Specialist(s)

14. Declaration

- a. I declare that the information I have given is true and accurate.
- b. I understand that I may be required to attend a medical examination.
- c. I consent/do not consent* to my doctor or hospital specialist being approached, in confidence, for further information, including medical reports, in relation to this declaration.
- d. I understand that failure to disclose information or giving false information will result in either the withdrawal of the offer of employment or in the termination of my employment.

* Under the Access to Personal Files and Medical Reports (NI) Order 1991 you have the right to withhold your consent or, if you do consent, to see any medical report before it is sent to the Employing Authority. Your rights are summarised at Appendix I which you are advised to read and, if appropriate, discuss with your general practitioner or hospital specialist.

Signature: Date:

IN CONFIDENCE

15. Confirmation by General Practitioner

I have examined this Health Declaration and confirm it to be accurate/would comment as follows:

.....
.....
.....

Signature:

Date:

OFFICIAL STAMP OF HEALTH CENTRE:

16. FOR OFFICE USE ONLY

Fit/Suitable on information given

Further investigation required

Result of investigation

Fit/
Suitable

Unfit/
Unsuitable

APPOINT

YES

NO

Signature:

Date:

IN CONFIDENCE