

PSYCHOLOGICAL FITNESS FOR WORK ASSESSMENTS

Helping you deal effectively with problem absenteeism

ICAS provides psychological fitness for work assessments and effective recommendations to fully support and enhance your organisation's attendance management strategy.

- An ICAS Psychological Fitness for Work Assessment gives you an expert opinion on whether or not an individual employee is fit enough to return to work
- ICAS's independence counters the possibility of patient advocacy issues that can stem from GP reports and from perceptions of partiality
- ICAS comprehensive reports include recommendations which enable you to act in the very best interests of all parties
- Recommended treatment programmes and ICAS case management protocols working with your own OH and HR functions help successful re-entry into the work place
- Early decisions on frequent or long term absentees minimise costs and liability risks

If you wish to find out, without any obligation, how we can help you with an individual case of frequent or long term absenteeism, please call 01908 285285. Our specialist team will be pleased to talk with you

*Is your absent
employee fit
enough to
return to work?*

Let us help you.

As a Manager, you are concerned with reducing absence in the work place and minimising the enormous costs that can arise from continuing absenteeism. Often you may have to decide whether or not an individual employee is fit enough to return to work, given the demands and risks of the job.

Best practice demands that all such decisions should be supported by expert medical opinion for practical and, increasingly, liability reasons.

Ever increasing 'stress related' absence requires companies and organisations to seek expert psychological assessments and recommendations as best practice.

ICAS Psychological Fitness for Work Assessments and Recommendations enable managers to make informed and early decisions helping the organisation minimise the costs and liability risks of absence, whether frequent or long-term.

Carried out by Chartered Clinical Psychologists working under ICAS supervision, and where applicable, alongside existing company OH services, this ICAS service has already proved effective and supportive in personal, organisational and financial terms.

ICAS's independent, comprehensive reports and practical recommendations enable your company or organisation to act in the best interests of both parties.

Where a return to work is possible, ICAS psychological treatment programmes and case management protocols integrate the psychological assessment with your organisation's OH and HR functions ensuring a successful reintegration in the work place.

ICAS's independence provides a basis of understanding by all concerned, countering the possibility of patient advocacy issues that occasionally stem from GP reports, and from perceptions of corporate partiality.

Experience gained from a range of clients, shows that ICAS Psychological Fitness for Work Assessments and Recommendations support and enhance your organisation's overall Absence Management strategy.



Case study one - Modification of an employee's role

Harry, a sales representative, had been off work with stress and depression for 18 months, in the care of his GP. An existing psychiatric report stated that there was no diagnosable illness.

Harry's employers were at a loss as to how to move forward with this situation, they believed they had tried everything until they considered a psychological assessment and counselling as a platform from which to move forward.

The ICAS psychologist spent two hours with Harry exploring both his current problems and how his personal history exacerbated the situation. With Harry's consent a full report was prepared for his occupational health advisor.

The assessment highlighted a need for a gradual return to work in a different capacity. Harry was offered a series of focussed counselling

sessions to support him through the return to work process. In addition to personal support, the case consultant worked with the OH advisor and the line manager to plan for the first three months of Harry's return to work. The plan included review sessions and the counselling was spaced to work in conjunction with the work place changes.

Harry ended up returning to full time work. His rehabilitation took six months and his role was permanently modified so that he could be both productive and face limited exposure to the isolation he had felt being on the road as a sales representative.

Case study two - Rehabilitating an employee

Felicity, an administrative manager, had been off work for four and a half months with panic attacks and irritable bowel syndrome. Employed for five years, Felicity had a high level of sickness absence throughout her employment.

Felicity's employers asked ICAS to help with a psychological assessment and report to provide additional information with which to decide to how to best help Felicity return to the work place. The Human Resources Manager involved in Felicity's case was keen to make changes that reduced the risk of ongoing sickness absence levels for her.

Following an assessment, ICAS recommended a series of counselling sessions to help Felicity understand the triggers to the panic attacks and take action to prevent them be so debilitating. The report from the psychologist also recommended further consultation with the GP. Felicity was helped to understand how diet added to the stress related problems. With suggestions from the ICAS Case Consultant to help define

responsibility and role the HR manager was able to work with the line manager to address some of the work-related issues.

Taking a systemic approach to the whole problem (that manifested with an individual) many organisational problems were reviewed. These included clearly defining departmental roles, some of the attitudes towards work were challenged and changes in duties for several people were instigated. The line manager was provided with some mentoring so that he could fully support Felicity in her return to work. Over a period of time Felicity was able to manage both her IBS and panic attacks more effectively. She changed some of her thinking and took responsibility for her diet. Feeling more fully supported in the work place enabled her to return to her job.

Case study three - Early retirement

With 23 years service as a delivery driver, Robert had been off work for two years following a suicide attempt and subsequent depression. The medical report stated that he was fit to return but his employers were concerned about his safety.

Understandably Robert's employers were concerned for him. By asking ICAS to intervene, and with Roberts's full consent, they gained far more information and background to this period of illness and how they could reopen discussions with him and his medical advisors.

ICAS provided a full psychological assessment and report. The additional

information gained from the assessment and detailed in the report helped Robert and his medical advisors understand more about his background and its impact on his current circumstances.

This in turn enabled Robert's doctor to review the situation and to recommend an early retirement on medical grounds. The process was concluded in three months.

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