

Sick Leave Management

Implementation Guide – Ministry of Health PD2014_029

Policy Number 3.140

Policy Function Human Resources

Issue Date 23 November 2016

Summary This policy provides a framework to ensure the sensitive and effective management of sick leave taken by employees within JH&FMHN in accordance with Ministry of Health PD2014_029 Leave Matters for the NSW Health Service.

Responsible Officer Executive Director Governance and Commercial Services

Applicable Sites

- Administration Centres
- Community Sites (e.g. Court Liaison Service, Community Integration Team, etc.)
- Health Centres (Adult Correctional Centres or Police Cells)
- Health Centres (Juvenile Justice Centres)
- Long Bay Hospital
- The Forensic Hospital

Previous Issue(s) Policy 3.140 (Oct 2012; Apr 2008)

Change Summary

- Consolidation of Ministry of Health PD2009_050 Sick Leave Management into PD2014_029 Leave Matters for the NSW Health Service

TRIM Reference POLJH/3140

Authorised by Chief Executive, Justice Health & Forensic Mental Health Network

1. Preface

The impact of sick leave absence is significant both on the individual and the employer. Frequent or prolonged sick leave absences may indicate deterioration in an employee's general well-being, and may also affect their financial situation, career prospects and relationships. For the employer, the effects range from increased financial cost to disruptions in service provision. Justice Health & Forensic Mental Health Network (JH&FMHN) has a responsibility to minimise the negative effects of sick leave on both individual employees and the Health Service.

This policy provides framework for the sensitive and effective management of sick leave in line with Ministry of Health (MoH) [PD2014_029 Leave Matters for NSW Health Service](#), and is based on the following principles:

- A commitment by management to the health, safety and wellbeing of all staff.
- Involvement of and consultation with staff in the development of this policy.
- Fair application across the organisation.
- An emphasis on the need to consider and be sensitive to each staff member's particular circumstances.
- Effective communication among management and staff regarding roles, responsibilities and procedures, facilitated through orientation, training and other education.

2. Policy Content

2.1 Mandatory Requirements

JH&FMHN staff are eligible for sick leave under certain conditions, as defined in section 3 of MoH [PD2014_029 Leave Matters for NSW Health Service](#), which includes when ill or injured, or, in certain cases, when looking after ill or injured family members. Sick leave must not be used when absences are not connected with ill health.

To support sick leave better practice guidelines under MoH [PD2014_029 Leave Matters for NSW Health Service](#), the following policy must be observed, along with the corresponding MoH policy section:

- Sick leave absences must be monitored and reviewed regularly by managers, senior managers and the Chief Executive (CE) (2.2).
- Managers must inform new staff members of sick leave policies and procedures, and expectations regarding attendance and reporting of illnesses (2.3).
- Staff and management should be provided with appropriate education, training, advice and support in the application of this policy, absence procedures and the appropriate handling of related situations (2.4).
- Where managers are concerned that a staff member currently at work may have an illness or injury that may pose a risk to their own health or safety, or the health and safety of others at the workplace, they must take appropriate action (2.5).
- Managers should develop strategies for promoting health and safety and encouraging attendance at the workplace (2.6).

- Specific requirements regarding the notification of absences are contained within the various Awards. Staff must take all reasonable practicable steps to inform their manager of their absence from work so that arrangements can be made to minimise disruption to service provision and impact on other staff. Refer to section 3.3 of the JH&FMHN procedures.
- Evidence of sickness or incapacity must be provided as required under MoH policy (2.8).
- Appropriate review points may arise from unacceptable levels of frequent absences, instances where trends in absences emerge and instances of long-term absence of serious incapacity requiring a review of ongoing employment. Refer to section 3.5 of the JH&FMHN procedures.
- Managers must ensure that procedural fairness is observed in relation to counselling, issuing warning letters and taking disciplinary action (2.11).

2.2 Implementation – Roles and Responsibilities

Chief Executive

The CE is responsible for providing overall direction for the policy, procedures and management of sick leave, taking into consideration the employer responsibilities under the work health and safety and injury management legislation.

Executive and Service Directors

Executive and Service Directors are responsible for:

- Compliance with all legislation and policies relevant to the eligibility and management of sick leave, including the obligation to ensure the health, safety and welfare of staff in accordance with work health and safety and injury management legislation;
- Implementation of this policy;
- Managing systemic issues affecting sick leave levels through periodic monitoring of sick leave;
- Identifying and analysing trends or significant variations in sick leave absences by department, occupational groups, gender, age, job shifts; and initiating action as required;
- Ensuring managers are aware of their responsibilities in relation to the management of sick leave within their area and receive guidance in managing sick leave.

Managers

Managers, including team leaders and supervisors, are responsible for:

- Compliance with all legislation and policies relevant to the eligibility and management of sick leave;
- Implementation of this policy;
- Actively promoting a safe workplace;
- Ensuring the health, safety and welfare of all employees in the workplace in accordance with work health and safety and injury management legislation;
- Day-to-day management of a staff member's sick leave;
- Maintaining accurate and complete employee absence records;
- Monitoring sick leave levels of employees reporting to them;

- Distinguishing between incidents of chronic illness and patterns of unacceptable sick leave absences, and using appropriate strategies to manage each;
- Ensuring employees are aware of this policy and understand their responsibilities.

Employees

Employees are responsible for:

- Compliance with all legislation and policies relevant to the eligibility and management of sick leave;
- Taking reasonable care for their own health and safety and for the health and safety of all persons at the workplace who may be affected by their acts;
- Attending to their duties at the workplace in accordance with the industrial instrument (award) or employment contract applicable to them;
- Notifying absences in accordance with their award and this policy.

Workforce

Workforce is responsible for the coordination of the management of sick leave, while ensuring the employer obligations under the [Work Health and Safety Act 2011](#) are met. These include:

- Developing, reviewing and administering sick leave policy and procedures in line with Ministry of Health policy;
- Ensuring JH&FMHN has a system which provides the necessary information for the effective and efficient management of absences;
- Providing guidance, advice and support to Executive and Service Directors, managers and employees; and
- Undertaking benchmarking on sick leave matters, and providing advice to the CE.

In the case of excessive and unsubstantiated short term absences, Workforce may be involved in disciplinary procedures in conjunction with the line manager.

In the case of long term absences, Workforce and the line manager will agree on a process for managing this absence, including maintaining contact with the employee, organising a Fitness To Continue assessment if required, and implementing a return to work program.

3. Procedures

3.1 Sick Leave Eligibility

3.1.1 Eligibility & Accrual

An employee is eligible for paid sick leave when s/he:

- Is incapacitated for the performance of duties by a physical or psychiatric or psychological illness; an injury; or an illness or injury associated with pregnancy or childbirth (but not pregnancy / childbirth itself);
- Risks further impairment to his/her health by reporting for duty;

- Undergoes treatment by a registered health service provider as specified under “**Evidence of Sickness or Incapacity,**” where an appointment could not be obtained outside the normal working hours of the employee, or the treatment was urgently needed, or the employee is attending legitimate therapy, training, counselling or rehabilitation and provides evidence of need and of attendance;
- Would, as determined by JH&FMHN under advice of a registered medical practitioner, jeopardise the health, well-being or safety of others by their presence in the workplace e.g. by exposing other employees to a communicable disease;
- Is required to provide care for a family member who is ill or injured. In this case, sick leave can be accessed as Personal / Carer’s Leave; however, this is only possible when staff have an accrued sick leave balance. A medical certificate or statutory declaration is required stating the staff member is required to care for the family member.

Full Time Staff The provisions of relevant industrial agreements must be observed in relation to the eligibility of employees for the granting of sick leave. Awards can be accessed by contacting Workforce or via the JH&FMHN Intranet and Ministry of Health Intranet sites.

Part Time Staff Part time staff are eligible for paid sick leave on a pro rata basis.

Temporary Staff Temporary staff employed for periods not exceeding 13 weeks have no entitlement to paid sick leave. Temporary exempt staff engaged for a continuous period in excess of 13 weeks are entitled to sick leave in the same manner as permanent full time and part time staff.

Casual Staff Casual staff have no entitlement to paid sick leave.

3.1.2 First Three Months of Service

Any absence for reasons of sickness or incapacity in the first three months of employment will be regarded as sick leave without pay. This will not apply where an employee is able to transfer entitlements under the NSW Government Staff Mobility provisions.

Employees moving within the NSW Health Service maintain their accumulated sick leave balance regardless of which Local Health District they are currently working in. The accumulated balance of sick leave may be transferred and made immediately available without a further qualifying period. There is no entitlement to back pay sick leave taken in the first three months of service once an employee becomes eligible for paid sick leave.

3.1.3 After the First Three Months

Staff become eligible for a full year’s entitlement of paid sick leave on the first day of the fourth month of employment. In subsequent years further paid sick leave is available on the anniversary of employment.

Paid sick leave is cumulative and there is no limit to the total accumulation. The monetary value of accumulated sick leave is not payable on termination.

3.2 Payment of Sick Leave Taken

Fulltime staff employed under a 38-hour week agreement, are credited 76 hours of sick leave per year. If employed under a 35-hour week or 40-hour week agreement, staff are credited 70 hours and 80 hours sick leave per year respectively. Staff previously employed with the public service who have retained their entitlements, are eligible for 3 weeks paid sick leave per year. Part time staff are paid on a pro rata basis.

Sick leave is paid at the ordinary rate of pay, which means penalty rates (including public holiday penalties), shift allowances, and any other allowances are not to be included in payment for sick leave. Part time employees who receive part time loading are entitled to their part time loading on any paid sick leave.

Information regarding payment of sick leave can be obtained by referring to the appropriate Awards or contacting Workforce.

3.2.1 Annual Leave & Long Service Leave

An employee who becomes ill while on annual leave or long service leave may be eligible to be paid sick leave instead of annual leave or long service leave as per their award. There are requirements for producing evidence to support this claim and on how many days the employee is ill before sick leave can be paid. Employees should check with Workforce or their award for more information.

3.2.2 Public Holidays

An employee who is rostered for duty on a public holiday but takes sick leave is not entitled to any of the usual benefits associated with public holidays. If the employee is eligible for paid sick leave, they will be paid one day's sick leave and their sick leave balance will be debited the number of rostered hours.

For all JH&FMHN staff, sick leave is debited on the basis of actual hours worked. Once the 76-hour entitlement has been exhausted in any one year and no entitlement has been carried over from previous years, an additional four hours sick leave may be made available (subject to special conditions). The four hours is to be paid even though no credit exists. This concession is only granted to those employees whose Award provide for a 38 hour week. This is considered special sick leave and will not affect the next year's entitlement, i.e. it is not sick leave in advance.

3.2.3 Special Sick Leave for Bone Marrow Donors

Ministry of Health employees who are listed on the Australian Bone Marrow Donor Registry and are called upon to donate bone marrow, or who may not be listed on the Registry but are required to donate bone marrow for a family member, may be granted special sick leave for the ordinary working time lost in attending bone marrow donation procedures. Special sick leave in this instance is limited to 5 days on each occasion and is subject to the production of a medical certificate. Additional leave if required may be accessed from available sick, annual or long service leave credits or taken as leave without pay.

3.2.4 Workers Compensation Issues

Where an employee suffers a work related injury or illness and they are entitled to seek workers compensation, sick leave should not be used as a substitute. Annual or sick leave entitlements may be used from when absence commences until workers compensation payments commence. Once payments have commenced, leave used shall be reinstated.

3.2.5 Claims for Damages or Compensation Other than Workers Compensation

An employee who suffers an illness or injury which may give them a right to claim damages or compensation (other than workers compensation) e.g. third party, is required to reimburse JH&FMHN for the monetary

value of any sick leave granted for that illness / injury where the claim of damages or compensation is successful.

Before an employee is granted sick leave in these circumstances, they must complete a written undertaking to include in any general damages a claim for the monetary value of the said sick leave. Where an employee reimburses the monetary value of any sick leave granted, they shall have the amount of sick leave reinstated to their sick leave credits.

3.3 Notification of Absences

Employees are required to take all reasonable steps to inform their immediate manager of their absence from work. For evening and weekend shifts, employees are to notify the After Hours Nurse Manager. To minimise disruption to service provision, every effort should be made to notify the absence as much as possible before the shift commences. Employees should inform their manager of the expected duration of their absence, and their estimated return to work date. This notification should be made by phone in preference to a text message or email to the manager or After Hours Nurse Manager

3.4 Evidence of Sickness or Incapacity

Written certificates in support of sick leave applications for less than one week (5 working days), may be issued by the following registered health service providers:

- Registered medical practitioners
- Dentists
- Optometrists
- Chiropractors
- Osteopaths
- Physiotherapists
- Oral and maxillo-facial surgeons
- Nurse Practitioners

Where the period of sick leave exceeds one week, and unless the registered health service provider is also a registered medical practitioner, applications for any further sick leave must be supported by a medical certificate from a registered medical practitioner.

Medical certificates should indicate the date on which the examination took place; the degree of incapacity of the employee; and the date the health service provider or medical practitioner considers the employee is likely to be able to return to work. Certificates should also indicate whether an injured or partially incapacitated employee could return on reduced / altered duties, and which duties should not be attempted on return.

Employees have a right to confidentiality in relation to the reason for sick leave; however, where JH&FMHN has concerns about the ability of the employee to perform the duties of their position safely, it is able to:

- Seek the employee's consent to discuss their prognosis with the provider of the medical certificate, or, if the employee does not consent to this,
- Seek a second medical opinion.

3.4.1 When are Medical Certificates Required?

Medical certificates are required for any sick leave absence of longer than 2 days, or for each sick leave absence if requested to by the manager, following unsatisfactory sick leave. Medical certificates should be presented to the manager on the employee's first day back at work following sick leave. They should then be scanned into the employee's electronic records management personnel file.

Where unacceptable trends emerge, medical certificates may be required of all employees for any sick leave absences that occur either side of annual leave, long service leave, public holidays, rostered days off (RDO), allocated days off (ADO) or during seasonal/holiday periods. Consultation will occur with unions prior to this action being taken and all employees will be notified.

3.5 Review Points for Absence Review

Review points are used to assess employees' sick leave levels. In applying review points it is essential that they are applied consistently across JH&FMHN and a review of sick leave is undertaken when the review points are reached. Following the review, alternatives for possible further action should be considered in relation to the particular circumstances of the employee. In all cases, it is important that the employee concerned has an opportunity to discuss their reasons for the unsatisfactory levels.

Documentation should be kept of any discussion or agreed actions following a review of an employee's sick leave record.

Review points should be set on a case by case basis for each employee, but as a minimum should include:

First Three Months of Employment

Particular attention should be paid to absences that occur within an employee's first three months of employment, when they are not eligible for paid sick leave. In the first three months of continuous employment, three separate absences without a medical certificate will be considered unacceptable / unsatisfactory.

Appropriate action, if this situation occurs, is to provide counselling and advice, issue an initial warning and request medical certificates for all further absences. If a further absence on sick leave without a medical certificate occurs within the first three months after the issue of an initial warning, the employee will be given final notice that disciplinary action leading to possible termination of employment will follow any further absences.

Frequent Short Term Absences

During an employee's annual performance review or at other times if a manager identifies excessive sick leave, a review of that employee's sick leave should be undertaken.

An employee who has had eight separate absences, unsupported by medical certificates, in a 12-month period is considered to have unsatisfactory sick leave. Please note when calculating eight absences a single absence may be of one or more consecutive days.

Managers may initiate discussion with the staff member concerned after five separate absences unsupported by medical certificates, prior to an unsatisfactory level being reached. This should include discussion with the staff member to ensure that valid reasons for absence exist, and that the staff member is aware of the sick leave policy and procedures.

Where the employee's sick leave record reaches unacceptable levels, it must be reviewed to determine what action should be taken (see Section 3.7 on Procedural Fairness, Counselling, Warnings & Disciplinary Action).

Consideration will be given to the following in determining what action to take: employee's length of service, their accrued sick leave, the employee's circumstances, the number of single sick days taken, and trends which may be apparent.

Sick leave taken as Personal Carers Leave will not be included in any calculation of excessive sick leave.

Absences Displaying Trends

Sick leave absences should be reviewed to see if trends are emerging, such as:

- Periods of absence not certified by a medical certificate immediately before or after a public holiday, or before or after an approved period of leave (annual leave, long service leave, ADO or RDO);
- Periods close to where the employee may work overtime;
- Periods of absence adjacent to Saturdays or Sundays respectively, or on a particular day of the week in a specified period;
- Periods of absence associated with health and safety incidents;
- Large amounts of sick leave taken prior to retirement.

Where a trend can be identified, JH&FMHN may require the employee to produce a medical certificate for all future absences for a defined period of time.

3.6 Long Term Illness/Injury or Serious Incapacity

Long term absences and serious incapacity of employees has a negative impact not only on the employee concerned, but also on management and work colleagues. It is important that regular contact is maintained with the employee and that review points are set for reviewing their capability to return to pre injury / illness duties, and for discussing with the employee what action will be taken next.

JH&FMHN may refer an employee for a medical assessment if the employee does not appear capable of returning to work, or there are concerns about the employee's fitness to carry out the duties of their position, or their ability to do so safely. Should the employee disagree with the outcome of the medical assessment, they are able to request a review. All referrals for independent medical assessments are to be coordinated through Workforce.

The JH&FMHN Workplace Injury Management Return to Work program may be used in cases where employees are returning from long-term illness/injury or serious incapacity that is not work related. As with any work related illness or injury, the return to work program would be done in consultation with the employee's treating doctor, Injury Management Coordinator (if required).

Options for consideration when returning to work are:

- Returning to their current position on pre injury / illness duties and hours.
- Returning to current position on reduced / suitable duties and hours.
- Undertaking a job redesign to facilitate a return to work.
- Returning to an alternate position for a temporary (specific) period of time.
- Returning to an alternate position on a permanent basis.

- Continued absence for a specified period of time.
- Medical retirement.

3.7 Procedural Fairness, Counselling, Warnings & Disciplinary Action

Unacceptable absences or unexplained absence patterns by individual employees may have a negative impact on workplace morale, on the workload of colleagues, or on health service provision. Therefore, it is important that managers take appropriate action to manage such absences and it is essential that the principles of procedural fairness are adhered to throughout this process. In all cases, the employee will be provided with an opportunity to comment on absences considered to be unacceptable or unexplained.

Procedural fairness refers to the right of the employee to:

- be fully informed of any issues or concerns about their employment;
- have a fair hearing at all times;
- present information to support their circumstances;
- objective decision making about their employment based on relevant material.

Process

At every stage of the process, the employee has a right to have a support person with them. Privacy and confidentiality must be maintained at all times, and adequate documentation must be kept of all stages of the process.

Informal Process - Counselling / Return-to-Work Interviews

Counselling should always precede any sanctions (such as a requirement to produce medical certificates for further absences), and must include clear indications of the next steps to be taken. The counselling or return-to-work interview may be conducted after each absence, after a trend emerges or after a long-term illness. The return-to-work interviews should not be confused with return to work plans which are used to assist employees returning from a work related injury or long-term injury / illness.

The interviews provide the manager with an opportunity to:

- Demonstrate support and concern for the health of the employee;
- Investigate any underlying reasons for absence and any strategies to deal with them;
- Outline the impact of absence on JH&FMHN in general and fellow workers;
- Reinforce desirable attendance attitudes;
- Discuss the implications of continued absence, including the agreed procedures, and the availability of the Employee Assistance Program (Refer to policy 3.045 *Employee Assistance Program*);
- Set individual targets for improvement; and
- Discuss the option of a medical assessment to review the employee's ability to continue to undertake their duties;
- In cases of long-term absence, to re-acquaint the employee with the work place and any changes.

The interviews provide the employee with an opportunity to:

- Discuss their sick leave absences in a confidential manner with their manager; and

- Seek guidance and support from their manager.

Records of any actions agreed on following interviews are to be retained on the employee's personnel file, and the employee is entitled to access these records.

Formal Warnings

Please note that formal warnings:

- Are not appropriate where the employee has a chronic illness, supported by medical certificates. Where the absences are frequent and have occurred over a prolonged period, the employee may need to be referred for a fitness to continue assessment to ascertain their fitness to perform the duties of their position.
- May not be appropriate where the attendance record for the whole of a person's career is considered satisfactory. It should be assessed whether the absences in the preceding twelve months were a result of abnormal sick leave or were the commencement of a trend.

Initial Formal Warning

If, following counselling, the employee continues to have unacceptable sick leave absences, they may be issued with an initial warning letter. The letter should contain the following:

- Confirm the employee has been advised of the JH&FMHN sick leave procedures and of the implications of unsatisfactory attendance.
- Advise the employee that their attendance record is considered unsatisfactory and unacceptable.
- Bring to the employee's attention the amount of sick leave they have taken or the trend that has emerged and provide them with a copy of their sick leave record for the review period (12 months or less).
- Advise the employee their attendance record will be closely monitored for the next 6 months and that an improvement is expected within that time.
- Outline the consequences should improvement not occur e.g. second warning, possible disciplinary action.

Should an employee show improvement in their attendance record in the 6 months following the issue of the formal written warning, the monitoring of their attendance can revert to normal.

Second Formal Warning

If no improvement is noted in the 6 months following the issue of a formal warning, or if a further 2 absences unsupported by medical certificates occur, the employee must be issued with a second formal warning letter. The letter will contain:

- Reference to the initial warning letter and the fact that no or insufficient improvement has been demonstrated.
- A requirement to produce medical certificates for all future sick leave absences for a period of six months.
- Advise the employee that unless their attendance record improves, disciplinary action up to and including termination of their employment may be taken.

- Provide further opportunity to discuss the reasons for their continued absences and possible strategies to deal with the problem (e.g. Employee Assistance Program or medical assessment).

Where the employee’s attendance remains unacceptable after the issue of two written warnings, the employee’s manager must notify Workforce who will review their sick leave record and documentation / details of the process to date. At this stage, consideration will be given to, but may not be limited to:

- The employee’s fitness to continue with their normal duties;
- Options for medical retirement, if appropriate; and
- Disciplinary action, including the possibility of termination of their employment with JH&FMHN. If disciplinary action is initiated, JH&FMHN policy 3.020 *Conduct & Discipline* must be followed.

4. Definitions

Must

Indicates a mandatory action required that must be complied with.

Should

Indicates a recommended action that should be followed unless there are sound reasons for taking a different course of action.

5. Legislative & Policy Framework

Legislation	<i>Disability Discrimination Act 1992</i> (Cth) <i>Anti-Discrimination Act 1977</i> <i>Carers (Recognition) Act 2010</i> <i>Health Administration Act 1982</i> <i>Industrial Relations Act 1996</i> <i>Privacy and Personal Information Protection Act 1998</i> <i>Work Health and Safety Act 2011</i> <i>Workers Compensation Act 1987</i> <i>Workplace Injury Management and Workers Compensation Act 1998</i>
Ministry of Health	<i>PD2014 029 Leave Matters for NSW Health Service</i>
JH&FMHN Policies	<i>3.020 Conduct & Discipline</i> <i>3.045 Employee Assistance Program</i> <i>3.170 Workers Compensation and Injury Management</i> <i>5.110 Work Health & Safety</i>

Attachment 1 – Initial Warning Letter (Example)

Ref: Personnel File

Ms Jane Doe
21 Station Street
RAILROAD NSW 2111

Dear Ms Doe

Re: INITIAL FORMAL WARNING - Unsatisfactory Sick Leave

During a recent counselling interview, we discussed your sick leave absences and I advised you of the Justice Health & Forensic Mental Health Network sick leave procedures and the implications of unsatisfactory attendance.

A review of your sick leave shows that you have had *(insert number)* separate occasions of sick leave in the past *(insert number)* months. A copy of your sick leave record is attached. JH&FMHN considers this to be unsatisfactory as per Justice Health & Forensic Mental Health Network Policy 3.140 *Sick Leave Management*.

Over the next six (6) months, your attendance record will be closely monitored, with an expectation of immediate and sustained improvement in that time. Should no improvement occur, you will be issued with a second formal warning and there may be a possibility of disciplinary action.

Should you wish to discuss this matter further please contact *(insert name)*, *(insert position)* on (02) *(insert telephone number)*

Yours sincerely

[Click here and type your name]

[Click here and type job title]

[Click here and type Date]

Enclosure: Sick Leave Record

Attachment 2 – Second Formal Warning Letter (Example)

Ref: Personnel File

Ms Jane Doe
21 Station Street
RAILROAD NSW 2111

Dear Ms Doe

Re: SECOND & FINAL FORMAL WARNING - Unsatisfactory Sick Leave

On *(insert date of initial warning letter)* you were advised that your attendance record was considered unsatisfactory and that immediate and sustained improvement was required. Since that warning your records show a further *(insert number)* sick leave absences.

Justice Health & Forensic Mental Health Network considers this unacceptable and requires you to produce a medical certificate from a registered health service provider for each further absence for a period of six (6) months. Again, your attendance record will be closely monitored with an expectation of immediate and sustained improvement.

Should no or insufficient improvement occur or you fail to produce medical certificates, disciplinary action up to and including termination of your employment may be taken.

Should you wish to discuss this matter further please contact *(insert name)*, *(insert position)* on (02) *(insert telephone number)*.

Yours sincerely

[Click here and type your name]

[Click here and type job title]

[Click here and type Date]