

ISSUE	AUDIT	RESPONSE This section should be completed by the individual completing the audit or drafting policy and provides the evidence to either support or further review the policy
Auditing for Potential discrimination	Title of policy:	Attendance Management Policy
	What is the intention of this policy?	To maximise attendance at work, providing advice and assistance in relation to police officer/police staff health.
	Does this policy/function involve or impact upon any or all of the following: 1. Eliminating unlawful racial discrimination? 2. Promoting equality of opportunity? 3. Promoting good relations between people of different racial groups?	Y Each case will be dealt with in a fair and consistent manner taking into account the process to be followed as detailed in the policy and procedure. Any Unfair application would be addressed via FAW. Y Policy and procedure applicable to fair treatment of all officers and staff and will be applied on an equal and fair basis. Y to ensure that health issues are resolved satisfactorily following a defined process and engender good working relations between all groups.
	If the answer to all the above is No: there is no need to complete the rest of the template now: Please submit the template with the draft policy/procedure on the Policies database. The assessment will be checked by the Diversity Unit as part of the policy compliance process.	
	If you have answered Yes to any of the above please continue and complete the full assessment.	
	Has any potential been identified as to the policy being likely to treat racial groups differently?	The potential could exist. However monitoring of LT absence cases will be conducted by the Occupational Health review group on a quarterly basis. Monitoring of short term cases will be monitored by the Sickness Absence Champion on each division to ensure consistency of application.
Which racial groups?	All visible ethnic groups.	

	If the policy is likely to result in adverse impact on different racial groups, please outline what action is intended.	If the potential is identified there will be BPA consultation. Ongoing and quarterly monitoring by the respective parties outlined above will continue.
	Does the policy make explicit how any adverse impact on different racial groups could be justified?	N/A
<p>In light of the above responses, what priority does this policy have in respect of the general duty under the Race Relations (Amendment) Act? 0 being none - 6 being substantial 0 1 2 3 4 5 6 (delete as applicable)</p>		
Publication, Challenge, Audit and Inspection	Does the policy contain a statement in favour of the policy being publicly available, or is there justification of any reservation on public interest, other grounds?	Not a statement but not protectively marked
	Does the policy contain a statement on the methods of proposed consultation to the public (i.e. Internet, hard copy, distribution)?	The policy will be available on CAMNET. Hard copy distribution will be provided when requested.
	Does the policy include details of how the public or Cambridgeshire Police staff can challenge the policy? (e.g. externally – the Courts, Commission for Racial Equality, Independent Police Complaints Commission; internally – Policy Compliance,)	Any complaints must be routed through the Sickness Absence Champion to the Head of People Services and can be escalated if necessary. Cambridgeshire Police staff can also refer to the federation, UNISON, or BPA as appropriate. A Challenge can also be made through the Race equality scheme Co-ordinator Diversity Unit
	Does the policy recommend how it is proposed to audit and inspect decision-making (e.g. By future inspection, or thematic)?	Head of People services will meet with the Sickness Absence Champions to highlight current practice identify any. Quarterly monitoring by DSG
	Does the policy recommend any level of independent scrutiny of decision-making and complaints?	PA X will be given results of formal action taken under the Attendance Management Policy for comment as necessary.

Review Process	Has the policy got a review date to ensure ongoing compliance in light of emergent legislation and Race Relations case law?	12 months from last update
	What are the arrangements for: (a) Assessing and consulting on the likely impact of the policy on the promotion of race equality?	Consultation exercise to be conducted with UNISON, Federation, BPA, Acting DCC, and representatives from each BCU, Directorate. Minutes will be available through the intranet.
	(b) Monitoring of the policy for any adverse impact on the promotion of race equality?	Monitoring arrangements in place through spreadsheets/ reviewing of files and action plans on a case by case and quarterly basis.
	(c) Publishing the results of such assessments and consultation as are mentioned in (a) (b) above?	Publish through DSG and Intranet
	(d) Publishing the monitoring figures in relation to the policy?	Publication of formal Disciplinary Procedures/ Ill Health retirements through DSG and Intranet.

Attendance Management Procedure

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1.0 Introduction

This procedure should be read in conjunction with the Attendance Management Policy. The aim of the procedure is to provide an effective framework for the management of sickness absence and fitness for work to ensure that attendance at work is maximised. The procedure provides guidelines for the successful handling of both short and long term sickness absences from work, in line with the new Statement of Fitness for Work which came into effect on 6th April 2010.

2.0 Roles and Responsibilities

The following section outlines the duties and responsibilities of those involved in managing attendance. This is a non-exhaustive list and occasionally circumstances will require the use of other initiatives to resolve a specific problem. Nothing outlined below is intended to prevent the use of other methods of overcoming sickness absence issues.

2.1 The Role of ACPO

The ACPO team will monitor Force attendance levels through the Delivery Board, Occupational Health Review Group and Performance Challenge meetings to ensure that a culture of effective attendance management is embedded within the organisation. They will determine an efficiency plan and set and monitor targets in conjunction with the Police Authority on an annual basis in order to maximise attendance at work and minimise ill health retirements.

2.2 The Role of BCU Commanders/Heads of Department

BCU Commanders and Heads of Department will ensure that attendance issues form a standing item at management team meetings and that they attend the Occupational Health Review Group meetings. They will appoint a Sickness Absence Management (Fitness for Work?) Champion to advise them on BCU performance and will regularly monitor the attendance of their staff dealing effectively with poor attendance as well as formally acknowledging good attendance. They will also provide support to and monitor their managers approach to attendance management through effective leadership, coaching and through the PDR process.

2.3 The Role of the Sickness Absence Management (Fitness for Work?) Champion

Each BCU/Directorate or major investigation team must appoint a sickness absence management (Fitness for Work?) champion whose main responsibility is to

- take an overview of sickness levels within the department/division,
- ensure line managers undertake all necessary actions, including return to work interviews, action plans and supportive action when trigger points are reached, or when the doctor suggests the employee may be fit for work on the Fitness for Work Statement (formally known as a sick note.)
- provide support where necessary.

The SAM (FFW) champion will be of Superintendent or MB2 status or above.

2.4 The Role of Senior Managers/Chief Inspectors

Senior Managers/Chief Inspectors must support line managers in the day to day management of attendance issues ensuring that a consistent approach is taken and that all individual attendance management action plans are reviewed on a regular basis. They should provide coaching and guidance to line managers in the resolution of individual cases ensuring that the Attendance Management Policy and Procedures are applied consistently and fairly. They will review overall sickness levels in their respective areas to ensure that action under the Police Efficiency Regulations and Fitness for Work Statements is considered and invoked if and when appropriate.

2.5 The Role of the Line Manager

Line managers have day to day responsibility for the management and welfare of their staff. Consequently they have a key role to play in managing attendance. Specific duties will include the following:

- ◆ Maintaining the sickness recording database ensuring that all details are recorded throughout the period of absence and that the absence is closed off by the individual on their return to work
- ◆ Monitoring attendance records using IT systems as appropriate
- ◆ Establishing if there are sickness patterns and taking action to resolve any underlying causes
- ◆ Monitoring the attendance of any individual within their probationary period, taking early action to address any issues
- ◆ Making contact at the earliest opportunity, on the first day of absence, with an individual who has reported sick (delegate this responsibility when absent due to annual leave etc)
- ◆ Maintaining appropriate contact during absence [LINK](#)
- ◆ Conducting a timely return to work interview on return from absence
- ◆ Making referrals to the SAM (FFW?)Champion after an absence of 8 days
- ◆ Making referrals to the Occupational Health Unit. This may be the immediate reporting of cases of trigger illnesses or cases where welfare assistance is required or where an employee has been absent for 28 days consecutively [LINK](#)
- ◆ Taking appropriate action where an individual's sickness record has reached unacceptable levels and has hit the cause for concern trigger points. [LINK](#)
- ◆ Reviewing and taking appropriate action following submission of a medical certificate (or Fitness for Work Statement) or at the end of a period of unauthorised absence
- ◆ Investigating and taking action to address any underlying work-related causes of absence
- ◆ Investigating any stress related issues that may impact on a person's ability to do his/her job. Reduce/eliminate any stress inducing factors using a risk assessment approach

- ◆ Utilising an action planning approach to all issues related to attendance management, taking into account the Fitness for Work Statement if appropriate.

2.6 The Individual

An individual has primary responsibility for their health and well being. They also have responsibilities towards the Force and must co-operate with force procedures including:

- ◆ To personally report their sickness absence to their line manager at the earliest opportunity. They must give some detail of the nature of the absence. Where contact cannot be made report their sickness to OSCAR 2 in the Control Room.
- ◆ To actively seek, externally or internally, appropriate medical, occupational health or welfare advice to aid their speedy recovery
- ◆ To maintain regular contact with their line manager giving any updates upon their condition, its prognosis, treatment and likely duration
- ◆ To make themselves available for visits or telephone calls at reasonable times from the supervisor/line manager with responsibility for managing their absence. It will not be acceptable for an individual to declare that they are unwilling to receive visits or to have contact from a constabulary representative
- ◆ To work with their line manager and the Occupational Health Unit in exploring the feasibility of using the recuperative duties programme (or any other initiatives) including suggestions in a Return to Work Statement to aid a speedy return to work
- ◆ To attend the Occupational Health Unit for consultations, examinations or case conferences as required. Exceptions from this requirement will be extremely rare. In such rare instances e.g. in the event of a very serious illness which prevents the individual from attending to see the FMA personally, the individual should nominate a person to be their representative and to act with their authority
- ◆ To avoid activities which would be detrimental to their recovery or which may cause a recurrence of the condition
- ◆ To complete the sickness reporting database on return to work
- ◆ To provide timely medical certificates for all absences lasting over seven days.

2.7 The Resource Office

The resource office will:

- ◆ Input sickness data accurately onto the appropriate systems and provide line managers with information if necessary to aid in the analysis of attendance management issues.

2.8 The HR Department

The HR department will:

- ◆ define the force structures, policies and procedures for managing attendance
- ◆ provide force-wide sickness absence data for analysis and interpretation
- ◆ advise when an individual has reached the Bradford Factor trigger point [LINK](#)
- ◆ provide advice and support to managers in their application of the attendance management policy and procedures
- ◆ facilitate the use of a case conference approach to managing Basic Command Unit/Directorate attendance
- ◆ process ill health retirements
- ◆ following identification that an individual is to move to half or no pay, the relevant HR Manager will write to the individual to notify them of this

2.9 The Control Room Staff/CIM

The Control Room OSCAR 2 will be the point of contact for an individual reporting absence from work due to sickness where they cannot contact their line manager. They will create an entry on the sickness recording database in order that managers can access the individual details of their member of staff.

2.10 The Role of the Occupational Health Review Group

The member of the ACPO team will chair the Occupational Health Review Group which will meet quarterly and report to the Delivery Board. The aim of this group is to:

- ◆ Review attendance management policies and procedures to ensure that they reflect the needs of the organisation
- ◆ Challenge BCU and department attendance performance
- ◆ Provide a forum for sharing good practice
- ◆ Review specific cases of sickness absence which have hit the 40 day trigger point or which cannot resolved locally, but require instead a wider view [LINK](#)
- ◆ Ensure the consistent implementation of the Attendance Management Policy and Procedures, specifically the invoking of Police Regulations proceedings in relation to poor performance, pay restrictions or ill health retirement.

2.11 The Role of the Occupational Health Unit

The Occupational Health Unit will:

- ◆ Provide health and welfare advice, guidance and support to both individuals and supervisors/line managers
- ◆ Provide advice to the Occupational Health Review Group
- ◆ Provide written reports following any management referral
- ◆ Provide a gate-keeping approach to any OHU services considered appropriate to the needs of the individual
- ◆ Contribute all disclosable and relevant information at case conferences
- ◆ Undertake proactive initiatives aimed at improving attendance levels
- ◆ Work with line managers to produce recuperative/restrictive duties programmes where a risk assessment has identified the need for such activities

- ◆ The FMA will provide advice relating to questions of ill health retirement
- ◆ Refer an individual through the Fast track scheme for a specialist service

3.0 Routine monitoring of sickness absence

The Constabulary will undertake regular monitoring of sickness absence levels to ensure that not only individual records that give cause for concern are highlighted, but also that underlying trends and patterns may be investigated. Compliance against this procedure will also be monitored, specifically the completion of return to work interviews, home visits and the use of an action plan approach to managing sickness absence.

4.0 Local Monitoring

4.1 Trigger Illnesses

The line manager will immediately refer an individual to the Occupational Health Unit in the following instances, where an individual is absent from work due to

- ◆ stress, depression, anxiety
- ◆ a back or knee problem, (muscular skeletal)

Where an individual has received an injury on duty referral must be made to the Occupational Health Unit after 3 days of absence.

This is to ensure the necessary support is provided and formulate an action plan to manage the absence.

5.0 Cause for Concern Trigger Points

5.1 Short Term Absence

When an individual's attendance reaches an unacceptable level, the line manager must take appropriate action, giving due regard to the individual circumstances of each case. The following section outlines the process to be used in cases of short and long-term absence, which by their nature will require different approaches. However, in all cases the first intervention made must be "supportive action".

Every line manager is responsible for monitoring the attendance of their team. If an individual reaches any of the following trigger points the line manager must meet with the team member and commence supportive action:

- ◆ 3 periods of sickness within 6 months or 15 days within a rolling year
- ◆ 4 periods of sickness within 12 months or 15 days within a rolling year
- ◆ 5 periods of sickness or 15 days within a rolling year.

Any pattern of sickness, such as:

- ◆ Absence on the same day of the week
- ◆ Absence on the same shift pattern
- ◆ Absence following a notified shift change
- ◆ Absence during a rejected period of leave
- ◆ Absence following a dispute/conflict situation
- ◆ Absence on the first and/or last day of shift

6.0 Supportive Action

If an individual's attendance reaches one of the first trigger points as listed above or there are issues with the agreed recuperative duties programme, then the line manager must conduct an informal meeting with the individual. The purpose of this is to bring the matter to their attention, give them the opportunity to identify means for improvement and agree any supportive action that may be offered. The individual must be given a review date and clear guidance on the improvement in attendance that must be shown. This must be completed through an action-plan approach.

At any meeting called to discuss poor attendance the following issues should be covered:

- ◆ The individual's complete sickness absence record
- ◆ Consideration of Fitness for Work Statements if appropriate
- ◆ Notes taken from return to work interviews
- ◆ Information on the Force/Department/Division's absence performance
- ◆ The effects of absence on the department/organisation
- ◆ Any apparent trends or patterns
- ◆ Any possible underlying causes
- ◆ Any further help or support the Force may offer
- ◆ Consideration of the benefits of a referral to the Occupational Health Unit
- ◆ The fact that if the current absence pattern continues, consideration may be given to further action under the attendance management procedures/efficiency regulations
- ◆ Development of an agreed action plan with a date for review

If supportive action has failed to bring about the necessary improvement in the individual's attendance or there has been insufficient progress through the recuperative duties programme within the agreed time scale, a formal interview should be conducted.

For members of Police Staff the interview will be conducted in accordance with the Discipline and Capability Policy; for Police Officers the interview will be conducted in accordance with the Police Efficiency Regulations.

6.1 Fitness for Work Statements

On 6th April 2010, the 'sick note' became a Statement of Fitness for Work. It enables doctors to suggest that a person may be fit for work with

suitable support from the employer. If the employer cannot accommodate the doctor's suggestions, the employee should be treated as though the doctor has signed them off as not fit for work.

The statement can still be used as evidence that an employee is not fit for work due to illness or injury and is still not required until the 7th calendar day of sickness. The requirement to pay Statutory Sick Pay remains unchanged if the employee is not fit for work. Obligations under the Equalities Act 2010 relating to reasonable adjustments for people with a disability are still required. Further details are available in the Reasonable Adjustments and Disability Passport guidance.

7.0 Centralised Monitoring - The Bradford Formula

In addition to local monitoring, the Bradford Formula will be used centrally to monitor unsatisfactory attendance.

The Bradford score is calculated by multiplying the square of the number of absences over the previous 12 months by the total number of working days lost. (For example, 5 absences with a total of 14 days lost would yield a score of $5 \times 5 \times 14 = 350$.)

Where a score of 350 has been reached the detail of the individual's sickness record will be analysed before consideration is given to invoking the Police Efficiency regulations or Police Staff Discipline and Capability procedures. Before invoking the Police Efficiency Regulations, or Police Staff Discipline and Capability procedures advice must be sought from the HR Manager.

Please be aware that the Bradford formula should not be applied to those who have taken sick leave for the purposes of IVF treatment or recovery.

8.0 Long Term Absence

Long term absence is defined as one absence of 8 days or more. Where an officer/staff member hits this trigger point the manager must prepare an action plan to be assessed by a senior manager taking into account Fitness for Work Statements if applicable. This assessment should determine the appropriateness of the plan, and what outcomes need to be considered at this stage ie referral to Occupational Health Unit . [LINK](#)

Where the absence continues to 28 days, 40 days and above the senior manager must follow the stages outlined in Appendix A. [LINK](#)

9.0 Individuals within their probationary period

Line managers will closely monitor the attendance of all police officers and staff during their probationary period. Where the sickness absence rate is unacceptable or a pattern emerges the line manager may instigate action through the Police Staff Discipline and capability procedure or Regulation 13 in the case of Police Officers even if the trigger points have not been reached. An individual

in their probationary period may ultimately have their employment terminated if their attendance is unsatisfactory.

10.0 Maintaining appropriate contact during absence

During periods of absence, line managers must decide, according to the circumstances, on the level of contact to be made with the individual. It is important that this is proportionate to the circumstances and ensures that the absent individual feels valued and missed, but does not feel harassed or pressured into returning to work too soon.

Following the initial notification of absence from the individual, the supervisor/line manager will make contact at the earliest opportunity within the first day of absence to understand the reason for the absence, the likely return date and any assistance that may be offered. Dependent on the likely length of absence/nature of illness/stage of treatment differing frequency of contact will be appropriate.

Managers should use their judgement and discretion in each individual case.

Appropriate contact may take the form of telephone calls, requesting the individual to attend work or an agreed location for a progress update, or home visits by prior arrangement. The supervisor/line manager must maintain contact at regular intervals throughout the period of absence. Details of the contact made can be recorded on the Sickness Database.

After 8 days any actions required must be recorded through an action plan, including recommendations of a Fitness for Work Statement if applicable. This is a working document owned by the line manager to aid all involved with any action undertaken or required by the manager/individual or specialist department.

11.0 Return to Work Interview

Any absence must be followed by a return to work interview. The line manager should conduct this at the earliest opportunity, preferably on the absent individual's first day back at work. This is an opportunity for the line manager to:

- ◆ Establish that the individual is fit to return to work, using the Fitness for Work Statement if applicable
- ◆ Explore any underlying issues relating to the absence
- ◆ Demonstrate that the individual's absence was noted and important
- ◆ Offer any support that may be appropriate
- ◆ Allow the individual to raise any issues that may be affecting their ability to attend work
- ◆ Bring to the individual's attention their attendance record if it is starting to raise concerns or inform them that they have hit a cause for concern trigger point

12.0 Recognition of Good Attendance

Police Staff and Officers who have had no absence throughout the year or 3 days due to an injury on duty will receive an acknowledgement of this by way of a letter from the BCU Commander Head of Directorate. After a 5 year period they will receive recognition through a meeting with the Chief Constable.

13.0 Sanctions

Attendance records will be assessed on receipt of Special Priority Payment applications, Competency Related Threshold Payment applications, recruitment and promotion board applications, secondments, and lateral assignments.

A view will be taken over a 3 year period to smooth out effects of specific circumstances, e.g. one off illnesses.

The Bradford Factor formulae will be used when calculating the sickness absence levels of the individual concerned. Where the Bradford Factor trigger point has been reached the detail relating to the sickness record will be analysed before a decision is reached.

14.0 Discretionary leave and unauthorised absence

The Force Discretionary Leave Policy outlines leave that may be granted for reasons of family, medical, community or other specific purpose.

Any period of leave which is neither sickness absence nor falls within the Discretionary Leave Policy will be treated as unauthorised and may lead to disciplinary action.

15.0 Court Appearance

If an individual is absent due to self-certificated sickness whilst due to attend court they are still required to attend the hearing. Where an emergency situation occurs near or on the court hearing date that may prevent their attendance the officer must contact their line manager as a matter of urgency.

16.0 Medical Reviews

Under certain circumstances the Force may require an individual to be referred to the Occupational Health Unit for review. Medical reviews may be requested where:

- ◆ in a case of frequent short term absence medical guidance is needed to identify any underlying issues;
- ◆ an individual has more than 28 days continuous sickness absence;
- ◆ an individual is preparing to return to work, in order to ensure that this will not cause the individual's recovery to be impaired or to ensure that appropriate recuperative/restricted duties are identified;
- ◆ a decision is required under the Police Pension Regulations prior to the retirement of a Police Officer on ill-health grounds or under the terms of the Local Government Pension Scheme in the case of Police Staff.

Where a medical review is required, the line manager must discuss this with the individual and complete an Occupational Health Referral Form. The individual must keep the appointment and should make every effort to co-operate with the Force in its efforts to understand and address any medical issues. Individuals can refuse to give permission for access to their medical records or an examination. However, in such circumstances the Occupational Health Unit will provide a report on the medical information available to them and the Force may take action based on this information, which could potentially be to the individual's disadvantage.

17.0 Medical Suspensions

If an individual's GP says that an employee is fit for work using the Fitness for Work Statement, the individual must contact their line manager before returning to the work environment. A risk assessment must be made by the line manager with reference to the Occupational Health Unit.

Where necessary an appointment may be made with the FMA to confirm the individual can return to the working environment. If the FMA does not agree with the GP's decision then the individual will be subject to a medical suspension. The individual will be required to remain at home on full pay whilst the situation is reviewed. Medical suspension will be regarded as a short-term measure. If a medical suspension is determined then there should be an urgent case conference between the line manager, employee, employee's representative and FMA.

The outcome of this case conference could be:

- ◆ a return on recuperative duties (which may include temporary redeployment to another role or work area)
- ◆ confirmation that the employee cannot return to work. In this situation the Force Medical Advisor would contact the individual's GP to discuss the situation.
- ◆ Following discussions where the GP is in agreement, the employee will refrain from work be required to obtain a doctor's note from their GP to sign them off work; from this point they will revert to the appropriate rate of sick pay.

18.0 Recuperative and Restricted Duties

18.1 Recuperative Duties

Recuperative duties are temporary rehabilitative duties or working conditions designed to assist an individual's ultimate return to full duty following illness or injury by permitting return to or continued work in a less demanding capacity. A recuperative duties programme will take into account the Fitness for Work Statement provided by the doctor, what is reasonable in terms of an individual's current state of health and what the organisation can accommodate for a period of time taking into account the service which is provided.

Recuperative duties will apply only to those individuals whom the Occupational Health Unit (or in clear-cut, short term cases such as minor

injuries, the Division), consider will recover to full fitness, within a limited period of time. A specific period of time will be set with an appropriate review period.

It will be a Division/Department Management decision to support a period of recuperative duties made on the basis of medical advice, as to the physical limitation to be observed in the employment of the individual concerned, and to decide if the limitations can be accommodated within the division.

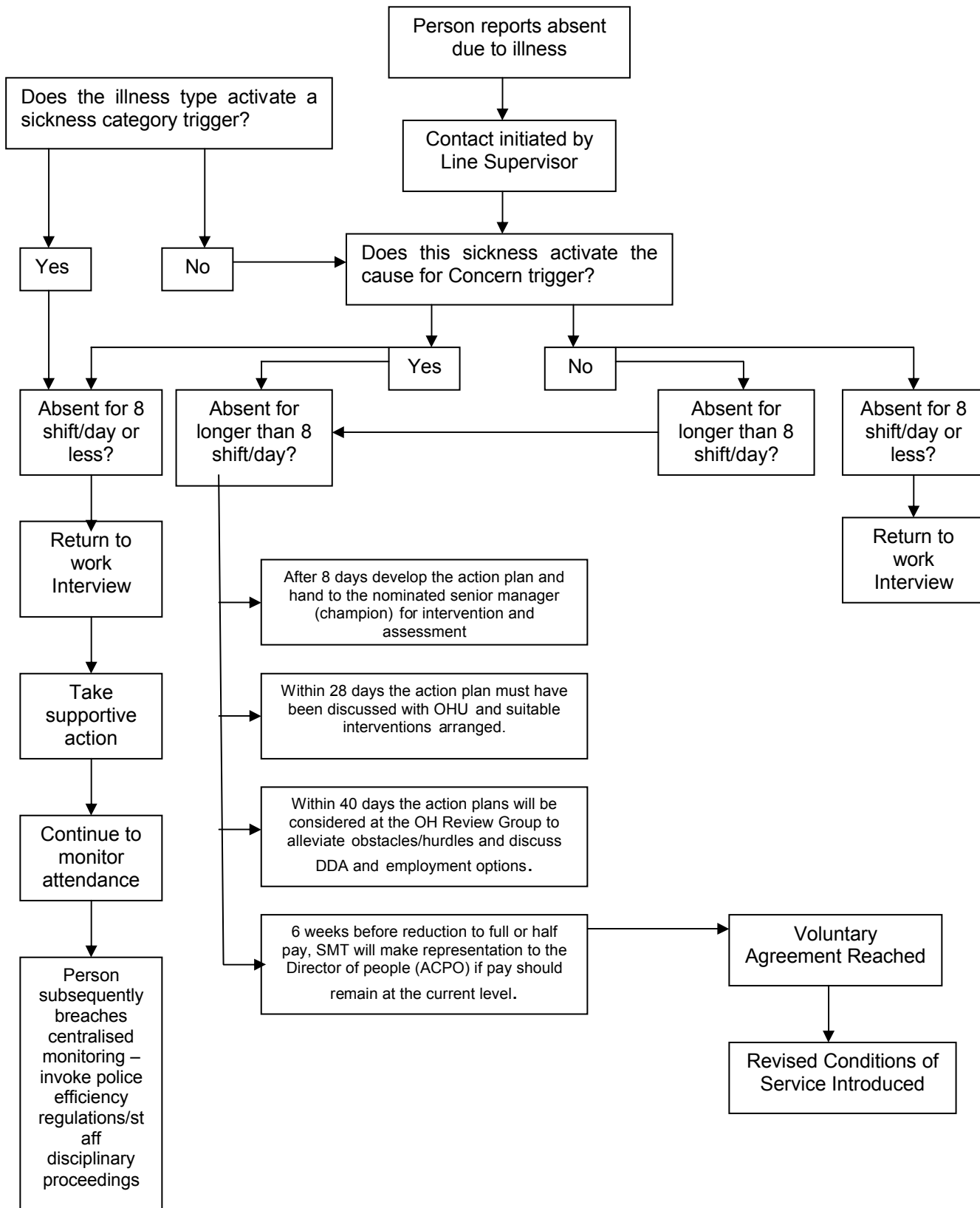
Please see Recuperative duties policy and procedure for further details.

19.0 Restricted Duties

Restricted Duties should be considered when an employee has a medical condition that restricts his/her ability to carry out the full range of duties of their job on a permanent basis.

Please see restricted duties policy and procedure for further details.

Appendix A



Appendix B - Action Plan

Name -----

Rank/Job Title -----

Collar No: -----

Line Manager -----

Sickness Absence Management Champion -----

Date:-----

Date Absence Reported : -----

Date Line Manager Made Contact: -----

Reasons Behind Absence:

Further Intervention Required Yes/No

Type of Intervention

Discussed with Individual Yes/No

Any Further Information Applicable
