

WEEKLY SICKNESS ABSENCE RECORD - ALL EMPLOYEES

CONFIDENTIAL

Week Ending Saturday Date: []*

* Include **ONLY** employees who are either absent from work or return to work within this week.
Amend and re-send previous weekly returns for any missing entries.

Unit/Team: _____

**Responsible
Manager:** _____

Guidance Notes:

- 1 This return is to be completed **electronically** each week and be **e-mailed** to designated officer as early as possible thereafter.
- 2 Weekly Sickness Absence Records must be submitted even if there are no absences to report.
- 3 Absent Employee information must be included in every weekly return until a **Return to Work Date** is provided.
- 4 Please specify the absence employee's rota-days/-shifts for the whole week.
- 5 Please specify the rota-day(s)/-shift(s) the employee was absent from work due to sickness, including Industrial Injury or Third Party Accident.
- 6 Please indicate reason of sickness by using the Sickness Absence Code (**SAC**) on the right ➤ ➤ ➤ ➤ ➤ ➤ ➤ ➤ ➤ ➤ .
- 7 Where an employee is still off sick at the end of this particular week please remember to detail this employee's sickness absence on the following weeks record form.

Sickness Absence Code (SAC)			
A	Back & Neck problem	G	Neurological
B	Chest & Respiratory	H	Other muscular-skeletal problem
C	Eye, ear, nose, mouth & dental	J	Pregnancy-related
D	Genito-urinary/ gynaecological	K	Stomach, liver, kidney & digestion
E	Heart, blood pressure & circulation	L	Stress, depression, mental health
F	Infection	M	Other (including Industrial Injury)

***** Please complete the sickness absence record with care *****
Responsible Unit / Service Manager must ensure the accuracy of the information.
