# Return to Work / Stay at Work Discussion Plan

|  |  |
| --- | --- |
| Name of employee |  |
| Name of person conducting the meeting |  |
| Others present |  |
| Date and time of meeting |  |

## Discussion points:

* How are you currently feeling about staying/returning to work?
* What aspects of your work do you feel are *positively* affecting your mental health?
* What strategies, adjustments or changes would support you to carry out your work?
* Has your health professional outlined any reasonable adjustments to help you return to work/stay at work?
* How can we address any barriers or stressors in the workplace that may prevent your successful return to work?
* Are there actions outside of work that you feel you will also need to take? Please let us know if we can do anything to support you with these.
* If you are away from work, what method would you like to be contacted by us and how often?
* Is it OK for us to speak with your health professional about your recovery and work capacity?
* Are you comfortable with work colleagues being made aware of your work arrangements? (details of the employee’s condition and treatment to remain confidential)
* Outline workplace expectations to the employee – e.g. how an employee should contact the workplace in the instance of an absence, clearly explain policies relating to return to work

|  |  |
| --- | --- |
| Agreed date of next meeting |  |
| Attendees’ signatures |  |