IFDM WORLD FORUM 2026

A return that works

Return to work, reasonable adjustments and individual risk assessment

A trade union perspective

Luke Collins CMIOSH
National Health & Safety Adviser · Unite the Union

Edinburgh · 21–23 September 2026



The worker is the expert in how work affects them

Clinical advice informs the plan. Lived experience makes it workable.

Sustainable return

is designed with the worker

- **Start with capability** — Ask what enables good work, where barriers arise and how symptoms vary.
- **Test the real job** — Consider tasks, pace, hours, travel, supervision, equipment and workplace relationships.
- **Review in practice** — Treat the plan as a controlled trial with agreed review points and a route to change.

One return, three connected duties

Equality, safety and consultation must operate together.

01

Equality

Remove or reduce substantial disadvantage through reasonable adjustments.

Equality Act 2010, ss.20–21

02

Health and safety

Assess risk suitably and sufficiently, then implement effective preventive measures.

HSWA 1974 · MHSWR 1999, reg.3

03

Worker voice

Consult recognised safety representatives in good time and provide relevant information.

SRSC Regulations 1977

A process can fail even when one element looks compliant. The duties reinforce each other.

Return to work is a process, not a single meeting

Plan early, agree controls, then learn from the actual work.

1 Prepare

Contact by agreement
Understand the role
Seek consent for advice

BEFORE ABSENCE ENDS

2 Co-design

Identify barriers
Agree adjustments
Complete the assessment

BEFORE DAY ONE

3 Return

Brief those who need to know
Start with controls in place
Protect confidentiality

DAY ONE ONWARDS

4 Review

Check workload and symptoms
Record learning
Adjust or pause if needed

AGREED INTERVALS

The plan should name who can stop, vary or escalate the return if controls fail.

Reasonable adjustments change the conditions of work

The right answer depends on the person, the job and the disadvantage.

Work

Reallocate marginal tasks
Modify targets or sequencing
Offer suitable alternative duties

Time

Phased hours
Predictable breaks
Flexibility for treatment

Place

Accessible route and facilities
Quieter work area
Home or hybrid work where suitable

Tools and support

Adapted equipment or software
Communication support
Training, mentoring or job coaching

Access to Work can help fund support. It does not replace the employer's legal duty.

Suitable and sufficient means decision-ready

A generic form cannot explain whether this person can do this work safely under these conditions.

1	**Specific**	Names the actual tasks, foreseeable hazards, barriers and exposure patterns.
2	**Individual**	Reflects functional effects, variation, medication, fatigue and the worker’s experience.
3	**Controlled**	Records adjustments and controls, responsible people, contingencies and residual risk.
4	**Current**	Links reviews to change: symptoms, treatment, hours, duties, equipment or workplace conditions.

If the assessment would read the same for any worker, it is unlikely to be sufficient.

From medical label to work design

The assessment translates functional information into controls.

ASK WITH THE WORKER

- What tasks create difficulty?
- When do symptoms or fatigue vary?
- What has helped before?
- **What would signal that the plan is failing?**

RECORD IN THE PLAN

- Task or environment change
- Working-time arrangement
- Equipment or human support
- **Review trigger and contingency**

Diagnosis may explain the condition. Work design determines whether barriers remain.

Case example: maintenance engineer returning with fatigue

Same worker. Same role. Different quality of decision.

GENERIC APPROACH

- × ‘Fit note says may be fit’
- × Standard four-week phased return
- × No task or shift analysis
- × Review only if a problem occurs

INDIVIDUAL APPROACH

- ✓ Worker and rep map fatigue patterns
- ✓ Temporary day shifts and protected breaks
- ✓ Heavy or safety-critical tasks controlled
- ✓ Weekly review with agreed stop criteria

The second plan creates evidence. It can be strengthened, extended or stepped down safely.



TRADE UNION PERSPECTIVE

Representation improves the quality of the return

Voice

Help the worker explain barriers, preferences and concerns without being isolated.

Evidence

Bring knowledge of the real job, staffing, shift patterns, previous incidents and workable controls.

Accountability

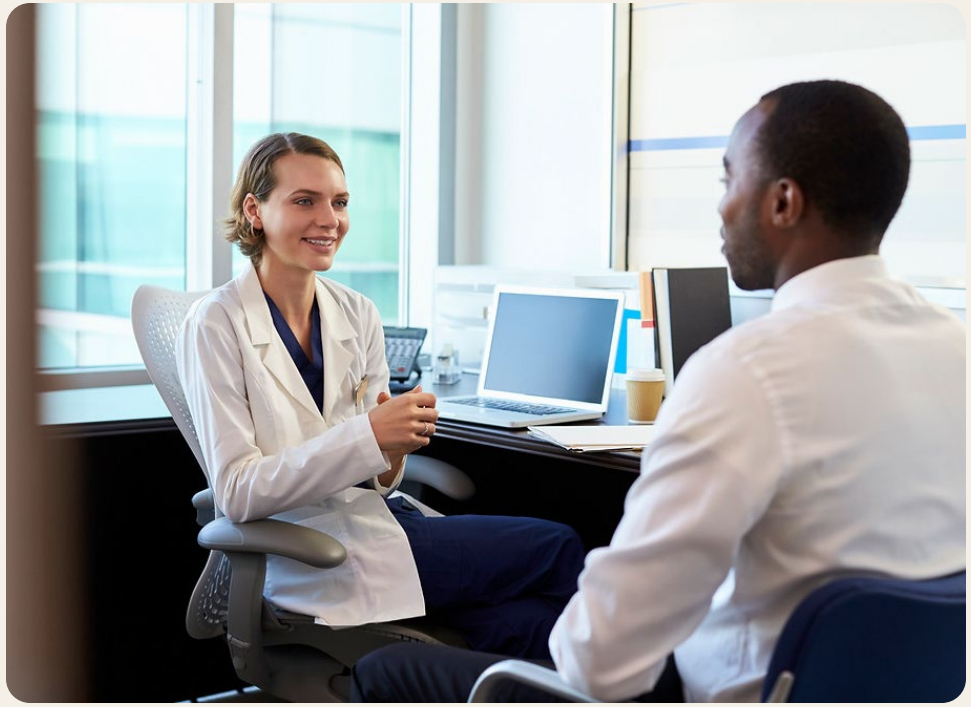
Test whether adjustments happen, challenge drift and secure timely reviews.

Collective learning

Turn individual cases into better policies, accessible work design and negotiated standards.

Occupational health advises. Workplace parties decide.

A report cannot substitute for consultation or assessment of the actual job.



Useful referral questions

Functional capability · relevant work demands · likely duration · adjustment options · review triggers

Employer responsibility

Understand the job · decide and fund reasonable controls · document reasons · monitor implementation

Worker and rep contribution

Correct assumptions · explain real conditions · propose workable changes · raise concerns early

Warning signs that a return is becoming unsafe

Early challenge prevents predictable failure.

01	**The assessment copies a template**	Re-open it around actual tasks, barriers and foreseeable variation.
02	**Adjustments depend on goodwill**	Name the control, owner, start date and escalation route.
03	**Performance pressure overrides the plan**	Align targets and absence management with agreed restrictions.
04	**Reviews slip or become informal**	Set dates in advance and record decisions with the worker.
05	**The worker fears speaking up**	Confirm representation, non-retaliation and a safe route to pause work.

A practical union test

Five questions for every return-to-work plan

1. Was the worker genuinely involved?
2. Does the assessment describe the real job and individual barriers?
3. Are adjustments agreed, funded and in place before exposure?
4. Can the worker or representative trigger a review without penalty?
5. **Will the organisation learn from this case collectively?**

If any answer is unclear, the process is unfinished.

CLOSING PROPOSITION

Safe return to work is collective work.

A worker should not have to choose between health, dignity and employment.

1 **Listen to the worker**

2 **Design the work**

3 **Assess the real risk**

4 **Review what happens**

Efcharistó · Thank you

Questions and discussion

Luke Collins CMIOSH · Unite the Union