

Appendix 2: Return to Work Plan

Return to work plan for:

Meeting Date:

Planned return to work date:

1.	Review of pre-departure checklist:
2.	Length of absence:
3.	Has absence extended beyond that originally expected? If so, what impact has this had? (If unplanned absence, please give reasons)
4.	What level of training is the trainee returning to and how long had they been practising in that role prior to absence?
5.	Forthcoming roles and responsibilities (In particular are there any new responsibilities, especially if ST3 to ST4):
6.	How does the trainee feel about their confidence and skills levels?
7.	What support would the trainee find most useful in returning to practice?
8.	Any relevant contact with work and/or practice, during absence (e.g. 'keeping in touch' days/ SPLIT days)
9.	Any changes since the trainee was last in post: e.g.: <ul style="list-style-type: none">• new equipment, new NICE guidance,• Changes to RCEM curriculum• Significant developments or new practices
10.	Issues relating to the trainee's next ARCP and preparation for this
11.	Any other factors affecting the return to practice
12	Has the trainee been put in contact with the return to work simulation team in order to book their RTT EM simulation session?
13	Overview of plan for supervised return to work programme including attendance in a School of EM return to work simulation
14	Evidence of active clinical practice during absence (only if supervised return to training deemed unnecessary)

15	Required assessments in this period (including WPBS & FGS)
16	Provisional date for confirmation of readiness meeting
<p>Signatures:</p> <p>Trainee Date</p> <p>ES/TSTL Date</p>	

