

## Information Resource Sheet No.4

### **EMPLOYEE SELF ASSESSMENT CHECKLIST FOR USE WITH A PERSON WITH A LIFE-THREATENING ILLNESS**

#### **Introduction to employee's self assessment checklist**

This checklist has been given to you to by the Company to help you identify the issues you would like to discuss with your manager about how the Company may manage issues arising from your life-threatening illness.

Please tick each box that identifies an issue you would like to discuss with your manager. While the Company may not be able to meet all your needs during the course of your illness and treatment, the information you provide will assist us to do the best we are able.

***The information you provide here remains confidential, and will only be discussed with other managers who may need to be informed of particular issues after you have given your approval.***

#### **Human resource management issues**

##### Workforce planning

- Ongoing ability to negotiate changes in my work roles, tasks, rosters, work arrangements (e.g., part-time, work from home) and time away from work due to changes in my health status, my need to attend medical appointments, the impact on me of changes in production demands, and the level of flexibility at the Company that is possible.
- Succession planning (whether and how someone else may learn my job).

##### Performance management

- How my manager/supervisor will manage my situation when my condition impacts on other staff work loads and roles.

##### Health assessment

- How the Company will assess my health as an ill person and ensure my fitness for work.

##### Privacy

- How the Company can protect my need for privacy about my illness, and establish a protocol with me on providing information to management and staff about my needs.

### Rehabilitation (and illness management)

- Finding out about the existing Company human resource policy for managing the employment, work performance and rehabilitation of a staff member with a life-threatening illness.
- Maintaining my job security and employment opportunity during my illness.
- If and when I may need a work-mate/manager to be an advocate or support person to assist me raise issues of concern about my work or the work environment.
- Establishing my leave entitlements and access to any other Company support services.
- Ensuring that I do not experience discrimination at work because of my ill health.

### **Production issues**

- Being consulted about decisions to provide support to meet any diminished capacity in my work due to my illness.
- How relations with our business clients will be managed when my illness impacts on the Company's capacity to meet production requirements.

### **Occupational health and safety issues**

- Ensuring there is no harmful impact on my work-mates' workload due to any reduced physical capacities caused by my illness.
- Ensuring there is a capacity to reorganise or modify the physical environment to ensure my work continues to take place in a healthy and safe environment.
- Ensuring all staff are informed about any risks to their occupational health and safety associated with my continuing employment during treatment for my illness.
- Ensuring there is no harmful impact on the emotional well-being of staff due to their working with me, and their exposure to my illness.

### **Health promoting care issues**

- The need to keep things as normal as possible at work during my illness.
- The need for the Company to be aware of how my work may be affected by how my family is coping with my illness.

