

When a colleague develops cancer

One in seven Danes develops cancer before reaching pensionable age

Original "Når en medarbejder får kræft" - Jutta Ølgod

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Foreword

A colleague has cancer: it may happen in any business. Every year over 11 000 Danes of working age develop cancer. Nowadays, many are cured and many live a long time with their illness.

Over the past few years, *Kræftens Bekæmpelse* ["Fighting Cancer"] has received an increasing number of enquiries from managers, colleagues and cancer patients experiencing problems at work during or after the illness. These enquiries show a great deal of uncertainty about how the problems can best be tackled.

A few typical examples would be that managers and colleagues take too little account of the situation of the person who is sick, or that, on the other hand, they worry too much about it, so that the sick person is isolated both at work and socially. Another problem may be the difficulty of making the necessary changes in the work the colleague has to do while suffering from the illness, or that a long absence from work or, perhaps, a period when the person concerned is not able to do as much work as usual after treatment, means that he may lose contact with the labour market.

With these points in mind, *Kræftens Bekæmpelse* has carried out *Projekt Kræft og Arbejde* ["Cancer and Work Project"] with financial support from the Social Affairs Ministry. The project has resulted in practical solutions to problems of dealing with workers who have cancer, taking into account both the individual resources of the cancer patient and the working conditions of the business in question.

One of the aims has been to improve employers' knowledge of cancer and of the special situation of cancer patients in order to reduce the risk of their exclusion from the labour market.

This handbook is based on our experience with this project, and has been written for managers and others with responsibility for human resources in workplaces in Denmark. We hope the book will be useful for managers, colleagues and workers who are seriously ill, in both small and large businesses.

Anne Nissen
Head of Department

Introduction

A diagnosis of cancer does not affect the person concerned alone: it also affects those with whom he comes into contact. At work, managers and colleagues are often shaken by the news. They would like to help and "do the right thing", but many are not sure what the "right thing" is, exactly.

At the same time, managers may well have to make quick decisions – about how the person can be relieved of some of his work while he is ill, for example. It may be difficult to consider the needs of the sick employee as well as solving urgent practical problems at a time when there are many imponderables.

This handbook has been written for managers and others with responsibility for human resources. It includes both background information and practical suggestions as to how to deal with various problems involving workers who have cancer or another serious illness.

You do not have to read the whole book

The book is intended as a reference work, to be used by those who are suddenly confronted with a specific problem arising from a colleague's serious illness. But readers will, of course, have a better basis for dealing with the situation if they read the whole text.

The background to what we have written

Our inspiration came from two sources: firstly enquiries from both managers and cancer patients about problems in the workplace arising from the illness and the second a survey which *Kræftens Bekæmpelse* carried among human resources managers in 50 large businesses. They were asked, for example, what in particular led to problems at the workplace when a colleague developed cancer.

The two sources mentioned the same problems, and it is these which are tackled in Chapters 1-6.

The seven chapters

Chapter 1 deals with the immediate aftermath of a cancer diagnosis. Many patients find themselves in a state of shock for 6 to 8 weeks. All those who have a life-threatening illness such as cancer will react in their own fashion, but it is nevertheless possible to describe how they may react when they learn they have the disease and what their needs are in that early period. The chapter also contains a section with general information on cancer and treatment methods.

Chapter 2 then deals with the period when treatment has begun. Many cancer patients wish to live as normal a life as possible during this period, and some would like to work in between treatments whereas others will not be able to do so. We describe what businesses can do in both situations.

Chapter 3 deals especially with those problems which may arise when a sick person has to resume the work he did before his illness.

Chapter 4 discusses possible ways of seeking financial and practical support for the business or for the sick colleague. Some arrangements come into play if the person concerned is still receiving treatment and others apply if it turns out after treatment has finished that he has problems carrying out the work he did previously.

Chapter 5 describes how a colleague who is not able to work again may leave work, and shows what can be done if the cancer proves fatal.

Chapter 6 deals with the sick employee's colleagues. Those he works with are often affected by his illness, and this chapter includes suggestions as to what the manager can do if colleagues' reactions become a problem in the department. It also contains some pages which can be copied and handed out to the sick worker's colleagues.

The final chapter, **Chapter 7**, suggests how a business may forestall many of the problems which may arise in connection with the serious illness of an employee by introducing a personnel policy on serious illness. Three cases are then discussed, i.e. examples of stages through which the disease may pass, cases which may be used when working on such a policy.

Further points to note

The book invariably refers to the sick person in the masculine form. This does not mean that cancer affects only male workers: in fact, almost as many women as men develop cancer. But from the language point of view it is clumsy to write " he or she" every time a worker with a life-threatening illness is referred to in the text.

For a quick look at the content of the book, go to the website www.cancer.dk/arbejde, which gives both an abridged and the full version.

Cancer patients, too, can use the suggestions in the book for inspiration or for practical help when they are trying to solve problems at the workplace.

Even though the book uses as its starting point what can be done when a colleague has cancer, the content will also be relevant to other life-threatening illnesses.



1. The first few months

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A cancer diagnosis is generally a shattering experience, both because cancer is a life-threatening illness and because there are still many preconceived ideas and taboos attached to it. All those who develop a cancer react in their **own** way, and that way will depend on how they normally tackle problems and what their situation is in other respects.

There is therefore no "right way" to react when you have a potentially fatal illness. It is important to remember this when a colleague comes to you and says he has cancer.

All those who develop cancer will react in their own way

But there are some common threads in reactions to cancer, and it is therefore possible to describe some typical reactions and needs in those who have just been diagnosed.

1.1 Typical reactions of those who are seriously ill

For most people, the news is a great shock. They find it difficult to take in the fact that they have a life-threatening illness – especially if they have not felt particularly ill before the diagnosis. The most common reactions are fear, denial, tears, unhappiness, uncertainty, a temptation to give up, anger and guilt. Many people are shaken to the core because their very lives, the fact of their being alive, something normally taken as a given, are suddenly in the balance.

The first few months

Those who are ill and their families often look on the early days as chaotic, full of uncertainty as to what the illness will mean in the short or longer term. Once the first shock has passed and the existence of a potentially fatal illness has begun to sink in, it is usual for someone to feel alternately depressed and hopeful that things are not as bad as they seem. There may be times when the fear of dying takes over.

A sick person may, especially at the beginning, find it difficult to control his feelings and may burst into tears easily. Friends and colleagues may find that a sick person has serious mood swings.

Most people are shocked by the news that they have cancer, and many newly-diagnosed cancer patients thus go through a crisis in the first 6 to 8 weeks.

1.2 What does the sick person need to begin with– and how does one go about things?

A little concern goes a long way

Most people will appreciate a bouquet of flowers or some other sign that the management and their colleagues are sorry they are ill and are thinking of them. Some patients have experienced the opposite, finding that close colleagues or their boss distanced themselves somewhat on hearing of the cancer diagnosis. They found this hurtful, even though they realised that the main reason was uncertainty as to how they should react.

Emotional support

After the diagnosis, a sick colleague will most of all need emotional support from management, along with concern and kindness. Contact the sick person and ask how he is feeling. Show your understanding of your colleague's difficult situation and make it clear that he should concentrate on getting well again.

It is possible that your colleague will start weeping as you talk, but that doesn't mean you should not ask how he is any more. Such a reaction may also mean, of course, that he doesn't want to talk about his illness because he is afraid. If in doubt, ask him outright if he feels like talking about how things are.

Information on the illness is confidential

Information about a sick colleague should always be considered confidential and treated as such. It is vital that managers do not tell a worker's colleagues about his illness unless he has given permission. Make sure that you talk to the sick person somewhere where you cannot be overheard, and that you cannot be disturbed as you talk. Get the telephone switched over, for example, and give orders that you are not to be disturbed.

The sick person decides how much colleagues should be told

Ask the sick employee how much his colleagues should be told initially and whether they may contact him directly or whether he prefers to have a contact person at work.

An early meeting, i.e. after 6 to 8 weeks

Suggest an early meeting at which you can talk about the illness, work, colleagues and the financial situation. Experience shows that it is a good idea to wait 6 to 8 weeks, until the initial crisis period has passed. You must expect to have to take the initiative and arrange a meeting, since a newly-diagnosed cancer patient will rarely have the energy to make the first move himself. The meeting is referred to as "early" because many cancer patients will find that their illness is long-term.

Be available for your sick colleague

It is important to show that you are ready to help. You may, of course, say so in so many words, but you can also do so by setting aside sufficient time when your colleague wishes to talk to you, ensuring that you are not disturbed and that you actually listen to what he has to say. You should not shrug off any problems he mentions which relate to work.

Update your information on the business's sickness policy

It may be a good idea for managers to update their information on the firm's sickness policy. You can at the same time find out whether the business has drafted a policy on what should be done if an employee develops a life-threatening illness. This will make it easier for the manager to give guidance and answer any questions the sick person may have during the initial period or at a later stage.

Some employees very quickly become worried as to whether they risk losing their jobs because they are ill. If this is the case, they will naturally be very relieved to know that their job will definitely be kept open for them. On the other hand, it is important to avoid making promises which prove impossible to keep.

The first few months

Are special working conditions possible for sick colleagues?

If a sick person says he would welcome being able to work when his illness allows, see if it is possible to be extra flexible, to offer home working, for example. Or maybe there are specific jobs that he is able to do in his particular circumstances.

In many cases, a sick colleague finds it difficult to make decisions

It will in any case almost always be seen as very supportive for a manager to make it clear that the sick worker does not need to take any serious decision immediately. At this early stage he can in any event make only tentative statements rather than hard-and-fast commitments – about, for example, how many hours he expects to be able to work while ill (see also Section 1.5: “*When can you find out about the course of the illness?*”).

1.3 How does the sick person feel about work?

Compared with the fact of having a life-threatening illness, most other things – new, exciting projects at work, a good friend's wedding etc. – fade into the background.

Reasons for not working at first

Even though treatment does not generally begin immediately, many take sick leave for some weeks, at least. Many people find it totally impossible to go to work during the days following diagnosis. Others find they are indifferent. At this stage, so many thoughts may be focused on the illness that it is difficult to concentrate on work.

There will also be cases where newly-diagnosed cancer patients have such serious symptoms (e.g. pain) that it will not be possible for them to work.

Some of those who are ill want to work at first

There may be various reasons why sick people return to work a few days after being given the diagnosis of a life-threatening illness. It may be, for instance, that they would quite simply rather be at work than sit at home where their imagination may run riot and lead their thoughts in frightening directions.

Others do not really feel ill because their symptoms have not affected them very much at this time. They may prefer to stay at work both because they are able to do so and because staying at home would really make them feel ill. Yet others feel that their work is a kind of "refuge" from the period of illness which lies ahead. At work, routines from the time before the diagnosis are familiar, and here they can stand back a little from their illness for part of the day.

There are also those who soon start to worry that their illness will last a long time and mean a long period of sick leave. They may well become concerned about the risk of being sacked for being away from work too much, but they may also worry about how their employer and colleagues will react in general terms. These worries may lead them to return to work quickly and to continue working as much as possible while they are ill.

How may their illness affect their work in the early stages?

No-one who is diagnosed with cancer will remain unaffected, but the effect and the reactions will, as already mentioned, vary considerably. This means, of course, that the consequences for the workplace may also vary:

- Some people are able to work efficiently while they are sick. They may be a little absent-minded, they may also become tired more easily or need more flexible working hours, but all in all the illness and treatment have only a moderate effect on them. This state of affairs may persist throughout their illness or there may come a time when their treatment makes them somewhat less efficient.
- The amount of work they can do may vary more, especially in the early days, when their concentration is most affected. This may mean, for example, that for a time their memory is impaired or that their conception of what is important as regards their work or their colleagues changes slightly. If their input is noticeably affected, it may be very helpful for both the manager and the sick worker to discuss and agree on what jobs can perhaps be delegated to others or abandoned temporarily.
- A sick person may also be emotionally unstable at work. Even though he may be attempting through work to hold on to the ordinary, everyday things, it is not always possible to keep conjecture and fear at bay. The cancer diagnosis may fill his thoughts to such an extent that it won't take very much to remind him and to start off an emotional reaction. In this case, too, changing the type of work – less customer contact, for example - may be a good way of solving the problem.

The first few months

- A sick person may be absent from work a good deal, since most of those who are newly diagnosed have to have further examinations which will provide more detailed information about their illness. The programme of investigations may mean short periods of hospitalisation or out-patient visits. In both cases, an examination may cause some discomfort and be followed by a short period of sick leave.
- A sick person's colleagues will often react to a diagnosis of cancer, regardless of whether he takes sick leave or not. The most common reactions are sympathy, fear, uncertainty, disbelief and perplexity. Chapter 6, "*Colleagues of cancer-sufferers*" gives further details of reactions and problems.

1.4 The illness takes a different course in different patients

Different people will find their illness a greater or a lesser strain and take shorter or longer periods of sick leave. This is understandable if the two people have different forms of cancer: one may have cancer of the intestine and the other breast cancer, and the two types of cancer are treated differently.

But even if two people suffer from the **same type of cancer**, and even if they both undergo chemotherapy, there may be enormous differences in the way the treatment affects them, for many reasons:

- **Chemotherapy is tailored to the individual patient.** The doctors select a combination of chemical substances which, among other things, target the specific type of cancer cell which the patient has at a particular stage of development of the disease. If **radiotherapy** is given, this is also adapted to the individual patient.
- **People do not all have the same (number of) side effects.** Cancer patients may, for example, react quite differently to virtually identical types of chemotherapy. Similarly, **radiotherapy** may give two patients different side effects.
- **The disease may be more or less advanced.** With some patients, the illness is discovered at an early stage, maybe when he is examined in connection with another illness. Others are not diagnosed until the illness has spread, and in such cases it will be more difficult to deal with.

- **No two people are the same.** No two cancer patients will have the same resources to draw on when they are ill. The differences may be physical, psychological, financial or social. People will cope with serious problems in their own way.

1.5 When can you find out about the course of the illness?

When someone has cancer, he and his family and also colleagues at work very soon need information. The sooner a manager can obtain information – about how long the patient expects to be on sick leave, for example – the better he is able to plan.

But there are two things that have to be taken into account. Firstly, there are limits to what the doctors know early on in the illness. There may also be limits to what the sick worker wishes the doctors to tell him – and how much he wishes to tell his manager.

What can one find out?

To begin with, one can seldom find out more than general information about the illness and the way it is normally treated. It is only after a more thorough examination that the doctors will have more detailed information on how far the disease has spread and how aggressive it is. With this information, the doctors can decide what treatment they will recommend, but only much later can they say whether the disease will react well to the treatment.

This means that at this point the doctors cannot tell the patient definitely how long he will be on sick leave or whether he can work during the treatment.

The patient himself decides how much he wants to know

Even though the doctors will after some time know much more about the sick colleague's condition, it is not certain that the patient will be able to say how much longer he will be off work. He may not, for example, be able to tell when he will feel ready to start work again. But it is also possible that he cannot bring himself to ask the doctors because he is afraid the news will be bad. You will then have to respect his wish to wait before obtaining further information.

The first few months

1.6 How are cancers treated?

What is cancer?

Cancer occurs when cell division runs out of control somewhere in the body. Normally, cells get rid of themselves, they "commit suicide" if they are defective. But this doesn't always happen and sometimes the cells divide over and over again. After some time, they form a mass in a lump known as a tumour.

Cancer is not one but many diseases. For example, there may be cancer in the breast, lungs or bladder, but the cells which have formed the tumours are different, the tumours have formed in different places and the treatment will be different.

Surgery

An operation is the most effective treatment method if the cancer has not yet spread and if it is sited somewhere from where it can be removed by an operation without damage to healthy tissue. If the doctors think there is a risk that the cancer has spread, they will generally give further treatment.

Radiation treatment

The aim of radiotherapy is to kill the malignant tissue by destroying it with radiation. In many cases, the healthy tissue around the tumour is affected too, but the healthy tissue can recover better than the cancerous tissue.

Those cancer patients who receive radiation therapy are normally treated weekdays over a fairly long period. Radiotherapy may be the only treatment or may be given in combination with another type, e.g. after an operation, if the doctors are not sure that all the cancerous tumour has been removed.

Chemotherapy

With this treatment, various substances act as a poison on the cancer cells so that they are damaged or killed. Chemotherapy is administered via a vein, using a drip, or in tablet form. When chemotherapy comes into the bloodstream, it affects the whole body, and thus it can also be used when the cancer has spread. It is not, however, effective against all forms of cancer.

The chemical substances also affect healthy cells, and for this reason the treatment often has side-effects. Chemotherapy is therefore generally given in series, with three to four weeks between treatments, so that the patient has time to recover from one treatment to the next.

Hormone treatment

Hormone treatment is based on the fact that some forms of cancer, such as breast cancer, depend on hormones, i.e. growth of the cancer tumour depends on hormones which occur naturally in the body. Treatment usually means administering substances which block those hormones which make the cancer grow.

1.7 Physical and psychological side effects

Cancer will often affect a patient both physically and psychologically, and in many cases no distinction can be made between the two effects. Physical pain may, for instance, lead to anxiety and at the same time the pain may feel worse if one is very much afraid.

However, for the sake of simplicity, physical and psychological problems are dealt with separately below.

Physical discomfort from various treatments

An operation may give rise to temporary or long-term side effects, but the possible variations are so great and dependent on so many factors that they defy a brief description.

The discomfort caused by **radiation treatment** may take the form of tiredness, burning of the skin or in some cases sickness. In addition, there may be discomfort because one particular part of the body is being radiated, i.e. radiation treatment for throat cancer may affect the formation of saliva and cause considerable pain. The problems caused by radiation treatment will frequently be more noticeable the longer one is undergoing treatment.

The most common types of discomfort caused by **chemotherapy** are tiredness and sickness. They may vary enormously in duration and intensity. One person may feel violently sick for over a week after each session of chemotherapy whilst another simply feels slightly unwell for a few hours after treatment. And some cancer patients react differently from one treatment to the next. The ill effects may get worse the longer the treatment continues.

In addition to tiredness and sickness, some patients lose their hair during the period of treatment, but it grows again after the chemotherapy is over.

The first few months

To sum up, most cancer patients experience physical discomfort as a result of their treatment, and this discomfort may be more or less of a problem. However, there is a small minority who say that their treatment has on the whole not led to any malaise.

Psychological problems

Having cancer is a psychological strain, and it may be a longer and more difficult process to get over the illness than many patients and their employers imagine.

If the psychological problems are great enough, they may prevent the patient from working, just as the physical problems do. A cancer patient may feel that his whole being is affected, physically, psychologically and socially. In some cases – but not all - the psychological aspect begins to stabilise after a few months. Some people find having a potentially fatal illness such a strain that it is difficult or even impossible for them to do their job. They continue to be upset and have problems concentrating, and they cannot get back into the normal everyday routine.

A **fear of death** and **periods of depression** are particularly stressful. In addition, many cancer patients face an extremely **uncertain** future. For one thing, there is no guarantee that the treatment will be effective against the illness and for another no-one can say how exhausted the treatment will leave them or what will happen to their families if they do not recover - or whether they will be capable of working again when the treatment is over. And only time will tell if the cancer will return. It can be very difficult to learn to live with the uncertainty.

Discomfort and stress may be long-term

Problems arising from the illness or treatment which last after the treatment has been completed are known as aftereffects. Chapter 3 gives an overview of the most common forms.

2. The further course of the disease

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Within a month or two of diagnosis, a sick person will generally have a clearer idea of his situation and will be better able to give some indication of whether he will be able to work while undergoing treatment.

In this chapter we go through certain points which are crucial to what happens next, regardless of whether the sick person is off work for a long time or continues at work full-time or part-time.

2.1 An early meeting

One of the key recommendations in this handbook is that the manager and the sick employee should have at least two meetings during the period of illness, one early on (preferable 6 to 8 weeks after diagnosis) and one when treatment has been completed and the employee is about to start work again (see Chapter 3).

The two meetings are so important because they give the sick person and his manager a chance to exchange information about the course of the disease and about what they both expect in this new situation. The meetings are thus a good basis for decision-taking and can reduce the risk of misunderstandings.

It is important for the manager and the sick employee to meet early on in his illness, i.e. 6 to 8 weeks after diagnosis.

Proposed agenda:

- Information about the illness and treatment
- Points the sick person wishes to raise
- The business's personnel policy as regards employees who have a life-threatening illness
- Contact with the workplace
- Informing colleagues
- Clarifying the financial situation
- Possibly a date for a further meeting.

The further course of the disease

The initiative is the manager's

In many cases, the parties concerned do not have such a meeting. It may be that the sick employee does not have the energy to contact his colleagues and the management after being diagnosed, or that his colleagues are afraid that the sick person will look on any move on their part as an intrusion on his privacy. But since a meeting has such obvious advantages, we thoroughly recommend that the manager or head of human resources should offer the sick employee a meeting at an early stage.

To enable the meeting to go as well as possible, the following points should be noted:

Wait 6 – 8 weeks after diagnosis

Before holding a meeting, it is often a good idea to wait until the first shock has passed, which is typically 6 to 8 weeks after diagnosis. By then, too, the sick employee will know more about his planned treatment, or treatment may already have begun. But he may also have his own ideas about when he wants to talk, and in that case it may be better to let him suggest a date.

Tell the sick person what the meeting will be about

When the meeting is agreed, you can stress that it will not be about dismissing him but that you want to talk about how he is getting on and how you can keep in touch while he is ill. You can also say that he may bring someone else along to the meeting – a close colleague, a trade union official or his wife, perhaps.

What might a manager find difficult about such a meeting?

A manager may find it difficult to hold a conversation with a colleague who has cancer or some other life-threatening illness. There are many things which may be a stumbling block:

- The manager may have personal experience of illness in his family or circle of friends, and that may affect him when he has to talk to his colleague. In this situation it is important to be clear that the course of the disease can be very different from one person to another. The manager may also be afraid of how the sick person will react during the meeting, e.g. that he may start to weep. If this happens, remember that it is not the meeting that is making him unhappy – he was upset about the illness before the meeting. There may also be things managers need to ask about, but they are afraid of overstepping the mark. Here, it may be a help to tell the sick person that you wonder whether the next question is intrusive but that you are going to ask anyway because you are concerned about that point. And your colleague may say, of course, that he doesn't want to talk about that subject.

The further course of the disease

It is a very good idea to draft an agenda before the meeting with an employee who has cancer. An agenda will ensure that you remember the most important points and give both you, the manager, and your sick colleague the chance to prepare for the meeting. You can then begin by going through the agenda and check whether your colleague has anything to add.

Proposed agenda for an early meeting:

- **Information on the illness and treatment**

The sick employee must have an opportunity to brief the manager on his illness and any planned treatment, including how long the treatment is expected to last. He may already know whether the illness and treatment are likely to affect resumption of work. Does he need to be on sick leave for the short or the longer term?

You should also ask how the employee is feeling. If this seems difficult, you may base what you say on the following sentences/questions:

"How has your cancer developed up to now?"

"What treatment are you having?"

"Can you tell me what effect such a serious illness has had on you?"

"How do you see your future as regards work?"

- **The business's personnel policy in connection with a life-threatening illness**

If the business does not already have a written personnel policy covering this area, it is important to let the employee know what the firm's position is as regards sick leave, including the point at which a worker with a life-threatening illness may be dismissed. It is very common for sick employees to be worried about losing their job, so it is important to take time to spell out the business's personnel policy. It is also important to hear what the employee thinks about this point. You may ask, for example, *"What do you think about what I've just said? Is there anything in what we have been talking about that is worrying you?"*

In this connection, you can also talk about any possibility of offering shorter working hours, home working, flexible working hours or maybe a different job. And you can say whether the firm offers support for psychological counselling etc..

The further course of the disease

- **Contact with the workplace**

If the employee wishes to work while sick and is able to do so, it is important to discuss whether he is able satisfactorily to continue with the job he has been doing. And what will happen if he cannot do so?

If the employee needs to go on sick leave, how can contact with his workplace and colleagues best be maintained? It is useful for the manager and the employee to agree on how often there should be contact, to avoid misunderstandings, so that he doesn't think a 'phone call means imminent dismissal.

- **Informing colleagues**

It is important to discuss what information should be given to the sick employee's colleagues, and to have a clear agreement as to how the information should be given. If the employee is on sick leave, ask whether he wishes to have a contact person at work and, if so, who. If he wants to continue working while sick, how frank does he want to be about his illness? Does he want the workplace to be a "cancer-free zone", where he can, as far as possible, "switch off" from his illness and not talk much about it with his colleagues? Or does he feel at ease talking about his illness and about how he feels? You should be aware that his wishes may change over time.

It is much easier to behave naturally with a sick colleague if you don't have to feign ignorance about what is happening. It is therefore advisable to urge the sick employee to be open about his illness, especially if lack of secrecy is part of the works culture. But his wishes should, of course, be respected if he doesn't want this.

- **Sorting out financial affairs**

Since the cancer may need long-term treatment, it may be relevant to talk about the financial consequences for the person concerned. Will he continue on full pay while on sick leave? If he belongs to a pension fund, you can also explain whether financial support is possible from the pension companies in cases of serious illness. It may also be useful to contact the local authority experts who handle such cases, who may, among other things, provide information on financial and social possibilities for those who are sick. See also Chapter 4 on "*Possible financial and practical support*".

- **A date may be agreed for a further meeting**

If the treatment and sick leave look like being long-term, it may be an advantage for both parties for one or more meetings to be held in the meantime, so that the employee can say how things are going. Such meetings may be quite short and take place, for instance, when the person concerned is in any case visiting his workplace, or they may be held over the 'phone of the sick person prefers.

It is a good idea to sum up at the close of the meeting what has been decided. It is also important to end the conversation on a positive note.

2.2 If the employee is off sick throughout his illness

If someone is absent through a long period of illness, it is particularly important for the manager to try to remain in contact with him, by ringing up, for example, to ask how he is. On the one hand, this shows that you are interested and on the other it means there is less risk of the sick person's feeling cut off from his workplace. Tell him why you wish to stay in touch while he is away, so that he does not misunderstand the reasons.

Social contact is important

Since someone who has a life-threatening illness may have very little energy, it is not a good idea to leave him to take the initiative. Instead, you can encourage him to come and visit, to have afternoon coffee with his colleagues from time to time, etc. Or a close colleague may ring the sick person at home to find out how he's getting on, and they can then decide what their other colleagues should be told. The information may be passed on by e-mail, for example. If the sick person has remained in touch with his fellow workers, it will generally be much easier for all concerned when he goes back to work.

It is important for the manager and the sick person to remain in touch

Any social contact between the sick person and one or more of his colleagues is no substitute for contact between manager and employee. It will always be an advantage for the manager to keep in touch with an employee in some way while he is off sick. The interest thus shown may be an important source of support for him, and may give the manager a better understanding of his situation. Staying in touch may, as in the case of continuing contact between the sick worker and his colleagues, make things easier for both the sick person and the manager when he comes back to work. But you should be aware that some people do not wish to maintain such contacts.

The further course of the disease

There should be a fixed framework for contact between the manager and the sick employee

How often you get in touch and how you go about it also depends on the workplace culture and the relationship between you, the manager, and the sick person. A rule of thumb could be that you get in touch every month or two. In some cases, it will seem natural to telephone, and in others a face-to-face meeting will be called for. Decide with the sick person early on how he wishes to keep in touch and how often, since a clear agreement can prevent misunderstandings and anxiety.

2.3 If he is off sick for part of the time

Some cancer patients will be able to work part-time or even, perhaps, almost full time for lengthy periods while they are sick – see also Chapter 4.

Be clear about working conditions

If the sick colleague is able to work between treatments, it is important to discuss in detail how he can do this. It will be advisable to clarify the details at the meeting we recommend early on in the illness, when you can find out how his work input can be adapted to his planned treatment, how flexible his working hours should be and whether he should continue with the same amount and the same type of work as usual.

You should continually assess with your sick colleague whether he is strong enough to cope with the amount of work he is doing

You have to realise that the amount of work agreed may not always continue to be within his capabilities. Many cancer patients find that they become less well as their treatment progresses, e.g. that they feel "down" because they feel sick and tired for some time after their treatment. It may be an advantage for the manager and the sick employee to discuss from time to time the amount of work being done and for the manager to urge the employee to speak up and agree to or refuse a given workload.

The further course of the disease

It may be difficult to get someone else to do the work the sick person is unable to do while receiving treatment. At some workplaces, a temporary appointment is made if the sick person is off work altogether over a fairly long period and in other cases his work is delegated to colleagues. This latter solution may mean that, because he has a guilty conscience that his colleagues are having to do more, a sick person will try to keep working for longer than he in fact has the energy to, or that he may try to return to work after sick leave earlier than is good for him. In some cases, a sick person may put pressure on himself in this way because he is worried that other colleagues will take over some of his preferred areas of work.

Make allowances only as agreed with the sick employee

A manager may, through misguided concern, cease to give a sick colleague the more interesting and demanding types of work. Although some people will be pleased to take it a bit easier because they are ill, others may take such concern as an indication that the manager is no longer relying on them or does not believe that they can cope with the work. It will therefore normally be best to ask the sick person if he wants a given job, instead of assuming that he doesn't.

2.4 What should be done if the sick person's work is not good enough?

A cancer patient may not always have the energy and powers of concentration needed to do his work. Sometimes he will not realise this himself, and sometimes he cannot bring himself to say no. The manager may then be forced to intervene and make sure that his workload is adjusted accordingly. This initiative will come as a relief for those cancer patients who find it difficult to tell colleagues or their manager that they cannot do the work expected of them.

Other patients may feel very hurt when the manager steps in, taking this as an indication that the management is no longer really relying on them, or perhaps believes they will die of their illness. Such sensitivity arises from the vulnerability of cancer patients throughout their illness. They may even doubt themselves whether they will ever regain their strength and energy.

The further course of the disease

One particular reason for some people's negative reaction is that work constitutes a specially important part of their identity. For example, the fact that they have particular professional qualifications, responsibility for particular tasks and a certain status at work becomes an important feature of the way in which they see themselves. It may therefore be a difficult balancing act to wish to change the work of a cancer sufferer without his feeling that he is seriously losing competence and status. And some people may well feel that they are being undervalued as a member of staff.

It may be even more difficult for the manager to intervene if the colleague concerned is one who "lives and breathes" for his work and who has a very small circle of acquaintances outside work. Such an employee may easily feel that the manager's initiative is taking things too far – see the case of Hans Nielsen in Section 7.2.

It is difficult to give good advice as to how the situation should be tackled, because the possibilities will normally depend on a whole range of factors, including the personalities of the parties concerned, how well they know each other, the type of work involved and the way it is organised, whether it is possible to juggle jobs and staff and the attitudes of the sick person's closest colleagues, etc. But it will generally be very much easier if you have talked frankly about things right from the start, at the meeting which it is advisable to hold early on.

Dismissal

There may, of course, be some situations in which a business feels obliged to give a sick employee notice. You should realise that it can be very hard for cancer patients to be dismissed from a job they have enjoyed. Work is often a necessary source of income, it is part of their identity and being with colleagues may be a vital part of a person's social life.

Some people become very angry and bitter if they are fired, especially if they have put a great deal into their job or have been employed for many years. In general, being dismissed will hit a sick person less hard if the manager has shown willingness to investigate various possible ways of helping him.

If the sick person is a member of a pension fund, you can help by contacting the fund to see whether any assistance is possible. Some pension schemes allow the fund to pay out a "temporary invalidity pension", until the situation as regards the public support system becomes clear.

3. Going back to work

- 3.1 A meeting before the employee goes back to work (including proposed agenda) p. 32
- 3.2 Aftereffects p. 34
- 3.3 If the sick person has to change jobs p. 37
- 3.4 Keeping colleagues informed p. 39

Those who have been off work for some time because they have a life-threatening illness may react in different ways when they are due to start work again. Some may think it's an enormous step to go back to work because they have found it hard to get through the period of illness. Or they may have changed psychologically and even physically and are therefore not sure whether they can cope with the same work as before they were sick.

Others are keen to get back to work as soon as possible once their treatment is over. This may be because they have a bad conscience at having been on sick leave for so long, especially if colleagues have done some of their work for them. Or it may be important for them to get into the swing again, full-time if possible, because this indicates – to both themselves and others – that they have made a full recovery.

There are no exact figures on how many people go back to their job in Denmark after treatment for cancer. But American studies show that:

- 80% of American cancer patients go back to work, and
- those who have survived cancer are just as productive at work as other employees and have no more time off sick than others.

Regardless of an employee's reaction, his situation may be very much affected by a long period of illness, and it is therefore just as important for the manager to have a meeting with him when his period of absence is coming to an end and he is due to start work again as it was to have a meeting at an early stage – see Chapter 2.

Going back to work

3.1 A meeting before the employee goes back to work

A meeting before an employee's return to work is a good opportunity for him and the manager to discuss their views of the situation. They can agree on what they expect from each other and decide together whether any special arrangements are necessary in the early days.

It will be an advantage to have the meeting before the employee goes back to work. In cases where a sick person has started work again part time, the meeting may take place when his doctors consider treatment to have been completed.

If the sick person has worked for much of the time he has been ill it may be awkward or unnecessary to have a meeting. The manager and the person concerned may well think that things have already been sorted out. If this is the case, they may use our suggested agenda as a check list of important things that should be cleared up.

We recommend that an employee on sick leave should have a meeting with his manager before he returns to work.

Proposed agenda:

How much work can be expected in the short and longer term

Whether a gradual resumption of work is possible

The employee's financial circumstances

Whether he can be relieved of any particular jobs to begin with

How colleagues should be given information

Any special circumstances which the manager or employee wish to discuss

The date for a further talk.

It will, as a general rule, be a good idea to talk about the following topics:

•How effective can the person's work input be expected to be in the short or longer term?

Some cancer patients have medium-term or permanent aftereffects of their illness or treatment (aftereffects are described in Section 3.2). Can any arrangements be made to help solve any problems?

Going back to work

•Is it possible to start by working part-time and gradually work up to normal hours?

Experience shows that the best way for cancer patients to resume work is for them to work shorter hours to begin with and then increase their hours as they get their strength back. It will generally not be a good idea to welcome someone back with piles of work you have saved up for him. Note that the local authority in Denmark can provide information on whether it is possible to get supplementary daily allowances for sickness – see Chapter 4.

•Being clear about the employee's financial situation

Some employees will have continued on full pay while sick and soon start to take on their normal workload again, so it won't be necessary to talk about money, but others may have been receiving daily sickness benefits for some time. Some will not be able to work full time to start with, but will have to report a partial recovery. This may have a serious effect on their financial situation, and they may therefore discuss with their manager whether they should ask the local authority caseworker or, if they have one, a pension fund representative whether there are schemes which may help – see also Chapter 4 on the possibilities for support.

•Are there any particularly difficult jobs which can be shared out among other workers for a time?

If the work is particularly stressful or physically difficult it may be an advantage to discuss with the employee whether there are any jobs which he wishes to avoid for the time being – see also Section 3.4 on possible support.

• How should colleagues be given information?

Discuss with the employee what his colleagues should be told about his current situation. It may also be important to discuss what they should be told about any agreements (about particular jobs and working conditions). Finally, you can decide together whether the information should be passed on orally at a departmental meeting or whether written information should be circulated. You may also choose, of course, to pass on information less formally, such as over coffee on a Friday afternoon.

Going back to work

•Fixing a time for a further meeting, e.g. after 3 – 4 weeks

At this meeting, the manager and employee can discuss whether the agreements on particular jobs and workload need to be adjusted. Remember to fix a date for reviewing those agreements. This will also be a good time to discuss relations with the employee's colleagues. Are they showing sufficient consideration when necessary? And are they also remembering to include their sick colleague in events at work?

3.2 Aftereffects

In many cases, the treatment given to cancer patients is punishing, because the illness is life-threatening and because it often requires radical intervention. Invasive operations or the use of toxic substances or radiation attack both sick cells and healthy tissue, and this may lead to obvious discomfort, possibly in the long term.

The aftereffects of treatment may disappear after a time or they may prove to be chronic (if they do not change over one to two years). They may also be either obvious or less noticeable: they may be comparatively mild but in some cases they are so incapacitating that they make it extremely difficult or even impossible for the person concerned to return to the labour market.

There have been no detailed studies showing how widespread aftereffects are among cancer patients. A doctor who is an expert in this field has estimated that fewer than 10% or even under 5% of all cancer patients suffer aftereffects from their treatment.

Some of the best-known are as follows:

Heart

Chemotherapy or radiation treatment may result in tiredness, irregular heart beat and breathing difficulties, and these symptoms frequently occur for months after the treatment.

Lungs

Radiation treatment and chemotherapy may cause lasting damage to the lungs, the main symptoms being breathing problems.

Nervous system

Chemotherapy may affect nerves and produce symptoms such as numbness and/or muscle weakness. These symptoms will gradually decline, but may last for several months or even as long as a year after treatment has ended.

The brain may also be affected. In this case the symptoms will generally be memory problems, a lack of concentration and difficulties finding words. In some cases there may be a buzzing in the ears and hearing problems.

Lymphoedema

The lymphatic system may be damaged by an operation or radiation treatment. This may lead to swelling in the arm or leg which may be insignificant if the damage is not serious but may also be incapacitating after a serious operation, for example.

Intestinal problems/diarrhoea

Any intestinal problems in the form of diarrhoea are almost always the result of radiation treatment. If the symptoms do not ease after 6 to 12 months, there will generally not be any improvement.

Bones

Chemotherapy or radiation treatment may lead to an early menopause, with the associated risk of increased loss of calcium in the bones in the longer term. Radiation of the bones may also make them more friable.

Tiredness

A cancer patient may be extremely tired, both because of the illness itself and as a result of treatment. There may be many reasons for tiredness, such as depression and interrupted sleep patterns. It may be difficult to say what is caused by the specific treatment and what is due to other factors, and whilst the tiredness disappears in almost every case it may be a long time – even some years – before things are back to normal.

Going back to work

Psychological aftereffects

It is a serious psychological shock for most people to get cancer and it may take a long time for them to put the illness into perspective. People are affected to varying degrees, ranging from genuinely putting the illness behind them to being obsessed by what they have been through. Some feel that the illness fills a large part of their daily lives, even after several years. They may still wish to talk about their illness from time to time, which their friends and relatives find difficult to understand. Some people have periods of worrying about the risk of a relapse and some suffer from recurrent anxiety attacks.

There are two fundamental attitudes common among cancer patients whose treatment is over. Some say "I've had cancer, but the doctors say I've been cured and I believe them." Others have only to cough and they think the cancer is back. But common to both groups is an intermittent fear that the cancer will return. It can also be difficult to put the illness to the back of your mind when cancer is discussed so often in the media.

The fear of a relapse arises especially when it is time for a check-up at the hospital. Even those who seldom think about the fact that they have had cancer may become nervous and irritable in the days before their check-up.

A further point affecting many former cancer patients which does not come under the heading of "Aftereffects" but which should nevertheless be mentioned here is that many say that the cancer has changed their views on what is important in life. Often, close personal relationships become very important whilst material things may become considerably less important than they had been previously. Many also say that they have become much better at not wasting time on trivialities but that other people have not changed their priorities and that this may be a problem at times.

It may seem a paradox, but many cancer patients say they have gained something from their illness and some are even grateful that it has given them a chance to change their attitude to life.

Going back to work

3.3 If the sick person has to change jobs

In the long term, it may be untenable for a business to be left in limbo as to the length of time or the extent to which an employee's ability to work will be impaired. In small businesses, especially, there may be financial problems as well as problems with getting the work done and with colleagues. If this is the case, the manager has to try to solve the problems, which may not be an easy matter.

The situation will be more easily dealt with if the manager and employee have met at work early on, to assess whether the employee will be able to cope with his work. It may prove to be a very good preparation – for both parties – to have to take a realistic look at the employee's future at work. It is very likely, for example, that he himself has considered whether the situation is tenable in the long term.

Cancer patients frequently feel that changes in their work are yet another loss

If the manager suggests radical changes which may lead to a noticeable loss of earnings, the employee will in most cases take a negative view of his proposal. For example, a permanent drop in working hours or a special type of appointment such as a flexi job may mean a loss of earnings, the effect of which may be difficult to calculate. In addition, many will see changes in their work as an attack on their "work identity". As cancer patients, they have already experienced many losses during the course of their illness, such as loss of control over their existence, the loss of self-confidence, the loss of friends who now avoid them and the loss of a carefree existence. An attack on that part of their identity which has to do with their work will be a further blow in that another area of their lives will be affected by their cancer.

Experiencing so many losses may also mean that an employee does not appear to be particularly enthusiastic or grateful when his manager – possibly after a great deal of trouble – finds another job for him in the firm. The feeling of serious loss is so deep-seated in many cancer patients that it may be some time before they are able to appreciate the manager's help.

Talk about workload problems

To avoid deadlock from the start, we recommend that the manager and the employee who has reported fit for work have a meeting to discuss the latter's input in relation to the requirements of his job. The manager should also find out what the employee has been thinking in this respect. If he does not have any realistic proposals for coping with his work in the future, the manager can say what possibilities the business has come up with to enable him to continue to work for the same employer. It may then be an advantage for both sides to meet the employee's local authority case worker to discuss the whole situation.

Going back to work

If it becomes necessary to dismiss the employee

There may, of course, be reasons on the part of the worker or the employer which make it impossible for him to be offered a different job. He may have to be given notice.

Some cancer patients have told of losing their jobs as a result of the cancer and some of them have been very bitter about it. It knocked them for six that the business sacked them when they needed understanding and wanted allowances to be made. They were especially bitter if they had been employed in the same firm for many years or if the manager had previously promised that they would not be fired.

If you want to help the employee after he leaves, you can write a reference for him and ask about job opportunities in other businesses with which you have contacts.

There is probably no easy way of dismissing an employee and especially not one who has just suffered a serious illness. But you can prepare yourself before the meeting at which the employee is to be given notice.

You can, for instance, try, orally and in writing, to work out an introduction and reasons for dismissing him. This may make it easier to say what needs to be said and may also make it easier to appear comparatively neutral.

We recommend that the manager should always have a face-to-face meeting with an employee who has cancer and who is to be dismissed. For one thing, sacking him by letter may be a serious blow and for another it gives him no chance to ask questions or find out more about the reasons for his dismissal.

When a person's previous job involves dealing with critical illness

It may be particularly difficult to have to return to work after having cancer if in your work you are in contact with people who have a life-threatening illness, people who are dying or who have themselves just lost a loved one. Some doctors, nurses or social workers, for example, find themselves in this situation. In such cases, the workplace cannot normally act as a "cancer-free zone", where they can switch off from feelings such as anxiety about the possibility of their own disease spreading or returning. On the contrary, those who have cancer can easily be affected by patients' or clients' case histories and find it difficult to make a distinction between the course of their own illness and that of the people they are attending to.

In addition to direct patient contact, they may find it hard to read the technical literature or take part in technical discussions because here, too, they are confronted with a reminder of their own potentially fatal illness.

It can be difficult to solve such problems. Some people may benefit enormously from individual guidance - therapy, perhaps - to enable them to distinguish between their own and their patients'/clients' serious illness. Others may need to change their field of work for a time, to avoid direct patient contact or to work with patients/clients who are not seriously ill.

3.4 Keeping colleagues informed

Even though the colleagues of an employee who has cancer may have expressed their sympathy with him, there may be some negative reactions when he returns to work after his illness. There may be many reasons for this – uncertainty, prejudice or a physical or mental change in their colleague as a result of his illness.

Typical reasons for uncertainty

The uncertainty felt by a person's colleagues may mean that his return to work is not totally trouble-free. They may feel uncertain about how they should treat him when he comes back or about how well he really is. They may also be unsure about any agreement the manager has made with him.

What should colleagues be told?

It may therefore be a good idea to brief colleagues before they have to start working with the sick employee again. We recommend that this briefing cover

- A short general description of the employee's state of health so that his colleagues can get some idea of the workload they can expect from him. Agree in advance with the sick employee what you should say.

Going back to work

- A description of what has been agreed initially between the manager and the employee. They may have agreed, for example, that the sick employee should not do certain heavy work or particularly stressful jobs to begin with, or that he will work shorter hours. If allowances have to be made for him, it will be an advantage to decide on the practical details. If any special arrangements affect one particular colleague or a group of colleagues, it may be advisable for the manager to talk to them in advance about how those arrangements can work. You should also say when any temporary arrangements will be reviewed.
- A few specific indications as to how the employee wishes his colleagues to behave, including how much he wants to be said about his illness, etc. He can decide this point himself.

If his colleagues are unsure, in particular, how they should behave towards a sick worker, the manager may decide to hand out copies of Section 6.4 "*For the colleagues of someone with cancer*".

Prejudices

Some of the most common misconceptions are that cancer is tantamount to a death sentence and that you are a poor prospect as a worker when you have had cancer. If some colleagues think like this about the employee who is returning to work, it may be difficult for them to work with him. They may, for instance, be afraid that his illness may suddenly recur or they may avoid working with him because they doubt that he is up to it.

Giving the right information to his colleagues may mean they are less prejudiced against the employee who comes back. But it is also important for the manager to ensure that the employee really is integrated again when he returns to work.

Possible financial and practical support

4. Possible financial and practical support

- 4.1 Support during the illness – when the patient is temporarily less fit for work p. 42
- 4.2 Support after the illness – when the patient is permanently less fit for work p. 44
- 4.3 Working together with the local authority p. 46

Many managers will willingly make allowances for a seriously ill employee, but it may be difficult for them to do so because they also have to take the business's general interests into account. That is the thinking behind this chapter on various possibilities which may come into play when you do not wish to dismiss a seriously ill employee.

Section 4.1 discusses the possibilities for those who can work to some extent while they are ill, i.e. those who are **temporarily less fit for work**.

Section 4.2 describes various tools which may be relevant when the illness is over and it transpires that an employee can no longer do the same work that he did before his illness i.e. that he is **permanently less fit for work**.

Useful internet addresses

Most of the possibilities referred to in this chapter are mentioned or described only briefly. If you want a more detailed description, we can recommend two internet addresses. One is: www.via2000.dk. This website deals particularly with sick leave and keeping jobs open, and has been written for human resources managers and union representatives. The various tools have been described under the heading of '*Fastholdelse*' on the first page and the information is constantly updated.

The second address is *Kræftens Bekæmpelse's* home page: www.cancer.dk. By first clicking on “*Alt om kræft*” and then on “*Hvis du har kræft*” and then on “*Dine rettigheder*” you can get information on relevant legal possibilities. This information is also updated constantly.

4.1 Support during the illness

4.1 Support during the illness when the patient is temporarily less fit for work

If the sick person is able to work some of the time "at reduced strength", the business may try to adapt some of his tasks in line with his state of health and situation. For example, one or more of the following internal possibilities may be used:

- A change or reduction in his working hours
- Relieving him of particularly difficult tasks
- A temporary move to a different job
- Job rotation and a change in the pace of work
- Home working.

There are also various legal provisions which may help businesses wishing to avoid dismissing sick employees:

[From this point until the end of page 43 the text is relevant only to Denmark and has therefore not been translated.]

Possible financial and practical support

4.2. Support after the illness when the patient is permanently less fit for work

Once a person with a serious illness such as cancer has completed his treatment, it is easier to assess his situation as regards work. Many workers given a clean bill of health will naturally go back to their previous work, but for others it is clear that they could not cope with it. This may happen, for instance, if a manual worker has had a serious abdominal operation and can no longer do heavy lifting.

But there may be workers whose situation is much less cut and dried. A serious illness may have physical or psychological aftereffects and this may mean that despite being cleared for work they need some time to regain their full ability to work.

A business may believe it is difficult to keep an employee who is less fit for work than before or who – for some time – is often away sick. If you, as his manager, wish to help him to stay at work, however, there are several things you can do. Some of the possibilities referred to below are a matter for the firm itself, while others require the cooperation of the local authority or job centre.

Possible ways of keeping on an employee who is less fit for work:

- Changing or reducing his working hours
- Relieving him of difficult tasks
- Transferring him to other work
- Job rotation and a change in the pace of work
- Job creation

The business can decide to create a job suited to the ability of the sick employee.

- Job under special conditions in line with social provisions

In many collective agreements there are social provisions allowing for jobs to be arranged under special conditions for employees who are not fully fit for work

- Training

This may be financed by the firm or the worker may apply for a training grant from the local authority.

Possible financial and practical support

[Page 45 and the first half of page 46 deal with provisions applying to Denmark and have not been translated.]

Possible financial and practical support

Round table discussions

The above sections propose that the manager, employee and case worker meet to discuss problems and propose solutions. This form of meeting is known as a **round table discussion** and can be used with many types of problem at work. In fact, when a job is to be kept open it has become more and more common for the local authority case worker to suggest a round table discussion at the workplace after an employee has been on sick leave for some length of time.

Those present may include, for example, the sick person, the employer, the case worker, the trade union representative and the doctor. Getting all the relevant parties together at the same time may make for a very effective meeting because the parties hear the others' ideas and suggestions. Experience with round table discussions shows that ideas are put forward and decisions reached which would not have emerged from the usual discussions between two parties, i.e. that round table discussions may provide many opportunities for finding satisfactory answers to problems.

If the sick person does not go back to work

5. If the sick person does not go back to work

5.1 Some people have to stop work altogether p. 47

5.2 If the sick person dies p. 50

Nowadays many people survive cancer, but not all of them become well enough to be able to start work again. There will also be some who will die of their illness. In this section we describe how a business may deal with these two situations.

5.1 Some people have to stop work altogether

If an employee does not become fit enough to work again, the business has to bid him farewell.

Some places have a traditional way of saying farewell to employees who retire or leave to take on a new job but others may not have any customary way of taking leave or, at least, none that is suitable for an employee who is leaving work because he is seriously ill.

It is important for the sick person and his colleagues that his departure should be marked in some way

It may be very hard to arrange an appropriate farewell and for this reason some people leave without one.

Many cancer patients have reported that their leaving work consisted of a few minutes' conversation with the manager, followed by farewells to any colleagues who happened to be nearby and to have the time. They felt that the manager at their workplace looked on saying good-bye as something to be got over as quickly as possible, and they therefore felt hurt and rejected. Those who had worked for years for the same firm felt especially bitter at the way their departure had been handled.

It is important for the sick person, his colleagues and the manager to say good-bye to each other properly because the sick person is not just anyone.

If the sick person does not go back to work

A farewell party marks the end of a period in which people have shared working conditions and experiences. When people work together for any length of time, they gradually get to know one another and build up a relationship. It is therefore important to say good-bye properly, so that those left at work do not later feel that there are lots of "loose ends".

Ask the sick person what kind of occasion he wants

It will generally be an advantage to arrange the kind of event which fits in with normal working relationships. It should comply with the wishes of the sick person. Even if the firm would like to organise a large-scale reception or hold open house, the sick person may prefer to keep to his own department, inviting only his closest colleagues. It may be, for example, that he does not feel strong enough to meet lots of people, or that he does not want "all and sundry" to see how much weight he has lost or that he has lost all his hair because of his illness.

A final meeting

Most people work for much of their lives, and they therefore find it an enormous change to have to embark on a life where they no longer see their colleagues or work for a firm. Many employees will be pleased to have a final talk with the manager in their department, because it is important for them to talk about their time at work. This is something which may help them to cope with the changes confronting them.

- Talking to the sick person about how he has found his work and what changes he has experienced in his job, about those qualities which the manager has appreciated in him etc. is a valuable way of drawing his working life to a close.
- It may be a good idea to close the conversation by asking whether there is anything the firm can do to help him.

If the sick person does not go back to work

Three points about the farewell event

You can bid farewell to an employee in various ways. If you are in doubt as to how to go about it, the following suggestions may help:

- The manager may give a talk to mark the formal farewell. It is important to say a few words about the employee concerned, to show him that he has meant something to the firm.
- At many workplaces, the other employees and the manager will wish to give the sick person a farewell gift or some other sign of recognition.
- Afterwards, time must set aside for those present to talk to the sick person informally. When saying goodbye, it is usual to talk about experiences in common, because remembering is a way of saying farewell.

A farewell party will most likely be tinged with sadness and sympathy. But there may well be room for humour as well, if the sick person feels like it.

If the sick person cannot or does not wish to be given a party at work

It may happen that a sick employee is unable to attend a farewell party at his workplace.

If this happens, you may instead contact him or, possibly, a member of his family and find out how you can say goodbye to him. Does he prefer a visit from the manager and his closest colleagues, or would it be better to say goodbye by telephone or in a letter? It may also be a good idea to ask a close colleague of the sick employee if he has ideas about how you can arrange some kind of farewell which the sick person will appreciate.

Let people at work know that the sick person has left

We recommend that the rest of the staff be told that the sick person is leaving work. You may put the news on a notice board, for instance, or give it out by e-mail or in the staff newsletter. If the manager or a colleague has written a few words about the sick person, a copy can be sent to him.

If the sick person does not go back to work

5.2 If the person dies

Not all those with cancer survive. If the sick person rings up or, perhaps, comes to visit and says that the doctors have told him that nothing more can be done, this may be a shock to both the manager and his fellow workers, especially if they thought he was getting better.

It can be hard to get the sack when you have an incurable illness

When the doctors say that their patient cannot be cured, his employer's reaction may be to fire him. There may, of course, be various financial and practical reasons for this, but notice may also be given because the manager wrongly believes that the employee won't care or that he will be relieved at being sacked so that he will no longer have to think about what is expected or required of him at work.

And there will, of course, be some people who will feel relieved, but others will react differently. Some will not think that it doesn't matter if they are forced to leave work, because their working life is an important part of their identity. Being fired may be seen as yet another serious blow for a person who has cancer. He may already feel that the doctors have given up on him and now he thinks that he has also been "written off" at work.

Feelings of bitterness

It may also happen that dismissing an employee leads to a great deal of bitterness on the part of both the sick person and his family. If an employee has been with the same firm for many years, he may think that being dismissed indicates a lack of respect, that he is being given his cards at a time when he feels he does not have long left. Some cancer patients feel that their firm is showing "unseemly haste" if it cannot wait for him to die. They feel the same if the firm dismisses them because it wants to free their post or save the money on their wages.

If you prefer not to dismiss an employee

Note that the Danish legislation on the daily allowance for sickness includes a clause whereby the period during which a sick person is eligible may be extended if the doctors consider that he hasn't long to live. There is no time limit on this extension.

If the sick person does not go back to work

When a sick employee dies

Colleagues may be both shocked and sorry when they hear that their fellow worker has died, even when the news was expected.

If those in the department have been comparatively close, it may be a good idea for the manager to get the group together and tell them personally that their colleague has died. If they have a strong reaction to the news, you may decide to follow this up – possibly the next day – by having coffee or a glass of wine to give them the chance to talk to one another about the person who has died.

It is sad when an employee dies, and his close colleagues will instinctively feel regret. Show that you understand their unhappiness and that the atmosphere in the whole department may be affected by this death for some time to come.

Announce the death within the firm

It is important for management to ensure that an announcement is made quickly when an employee dies. For one thing, it means something to his colleagues and others who have known him and for another it can be extremely embarrassing for all concerned if they meet his wife several days after he has died, for instance, and ask after him.

The announcement may be made orally, for example, by gathering his fellow workers together, or a notice may be displayed on the central notice board or sent out on the firm's internal home page. An obituary can be placed in the firm's newsletter, if it has one. The deceased person's family will generally be pleased to receive a copy of the obituary.

The family will much appreciate an expression of sympathy

In many cases it will be natural for the firm to send flowers for the funeral, and this should be done, of course. It generally means a great deal to the family that the deceased's workplace sends an expression of sympathy – perhaps more so than many firms realise. It also means a lot that the manager and colleagues attend the funeral, unless that is "family only". If there is doubt about whether the family wishes to see lots of people at the funeral, we recommend that the manager or a close colleague ring up and ask.

6. Colleagues of cancer-sufferers

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6.1 Reactions among colleagues

When an employee develops cancer, colleagues and friends at work are affected. How greatly they are affected will, of course, depend on how well they know the sick person and how much they have normally seen of each other. Those who feel closest to the sick person will generally suffer the greatest reaction, but colleagues who have not had a great deal to do with him may be extremely upset if they have had experience of cancer in their own lives.

Colleagues may react in many different ways. Their immediate reaction will generally be shock and a feeling that it cannot be right, that there must have been a mistake. That first reaction is followed by other feelings which may vary considerably. Some will feel for their sick colleague whereas others will be more concerned with how his situation has affected them. The most common reactions are

- to feel sympathy for their fellow worker
- to worry about him
- to be afraid of getting cancer oneself
- to try to keep one's distance from the sick person and his cancer
- to deny the seriousness of the illness
- to turn the sick person's situation into a taboo subject, i.e. something not talked about
- to feel unsure as to what to say to or about the sick person, and what to do
- to feel irritated about increased pressure at work owing to the sick person's absence – and to have a bad conscience about feeling irritated!

The reactions of colleagues will often change during the course of someone's illness. The shock will normally be greatest in the early days and then recede. Or the seriousness of the illness may hit colleagues only when there are physical or psychological changes in the sick person, e.g. if he loses a lot of weight or his hair falls out or he gets depressed. The same applies when colleagues learn that the illness has worsened. But generally reactions will be more muted as time goes on because people become used to the new situation and find out how they can handle it.

Colleagues of cancer-sufferers

If reactions become a problem

But it may also happen that certain colleagues have a strong and lasting reaction which represents a problem at work. If it becomes evident that some or all of a group of colleagues are emotionally upset by the situation over some length of time, it may be a good idea to get them all together to talk about their reactions to their fellow worker's illness. You can ask them, for example, to say briefly how they have been affected and then ask if anyone has any suggestions as to how they should tackle the situation. Should they make sure they talk about it from time to time? Or do they perhaps talk too much about it? Is there anything anyone wishes to do for the sick person? And how can that best be done?

At the end of the chapter there are a few pages of guidance and good advice intended to be copied and passed round to the colleagues of a sick member of staff. Some of the advice may also be helpful for colleagues who continue to be very much affected by the situation, since they contain a few proposals as to what can be **done** for the sick person.

6.2 How others behave towards their sick colleague

When someone has cancer, his colleagues' behaviour towards him frequently changes. These changes may, of course, be due to the feelings aroused by his situation but uncertainty may be just as much to blame. Colleagues may be uncertain about how they should talk to someone who has a life-threatening illness, about how ready he is to be approached or to answer questions, about the amount of work they can expect from him or about what to do if he becomes suddenly ill or upset, etc.

As a rule, it will be an advantage for his colleagues to ask the sick person what he needs from them. Some may welcome help whereas others would rather cope on their own. Some would like a visit when they are off sick and others won't feel like it.

Colleagues of cancer-sufferers

You should realise that there is a problem if:

- the sick employee is isolated socially because his colleagues shy away from him;
- the sick person becomes isolated at work because too much consideration is shown him;
- not enough consideration is shown, e.g. for his limited strength;
- colleagues cannot manage to act naturally, which, of course, has a negative effect on the whole atmosphere in the department.

The most effective way to counter these problems is to be frank and to communicate. It may be a good idea to get the employees together over coffee and let the sick person talk about his illness, about how it affects his ability to work and how he would like his colleagues to behave.

It will often be useful for the sick employee to touch on the following:

- whether his colleagues may ask about his illness or whether he would rather they didn't;
- whether he wants a contact person whom the others may question, e.g. when he is away having treatment;
- specific information about his treatment, including about any special circumstances which it may be relevant for his colleagues to know about, e.g. any particular discomfort arising from the treatment;
- whether there are any jobs the sick person cannot do as he normally would;
- whether he would be pleased for colleagues to offer help or whether he would rather ask for help when he needs it;
- what the sick person and his manager have agreed as regards his work and working conditions while he is ill. Describe what has been agreed in as much detail as possible.

If the sick person wishes to "keep out of it", he may agree that the manager or a close colleague be chosen to pass on information when he gives the green light.

Colleagues of cancer-sufferers

In some cases, a sick employee will not want to be frank about his illness. The manager can then find out from his colleagues what in particular causes problems and talk to him about how those problems can be tackled. The manager and the employee may discuss whether the problems might be solved if his colleagues were clearer about what has been agreed as regards his workload and working conditions. They may then discuss again whether there is any vital information about the illness and its treatment which the sick person can agree should be passed on to his colleagues.

There may well be no satisfactory answer to all problems. But the very fact that colleagues are given a hearing and that the manager has made some attempt to solve the problems will sometimes make it easier for all concerned to put up with the difficulties.

6.3 Taking over the sick person's tasks

The problem of how to get the sick person's work done when he is off sick or working part-time only can be solved in various ways. If it is not possible, for financial or practical reasons, to employ a temporary replacement, many firms will hand the sick person's work over to his colleagues in the department, who will then have to do more work in the same amount of time. This may in turn mean they enjoy their work less because they are no longer satisfied with the result.

In addition, the increased pressure of work may mean that his colleagues start to resent the sick person, and that he, for his part, may develop a bad conscience because he is to blame for their extra workload. He will therefore try to do more work while ill or return to full-time work more quickly than he should in view of his state of health.

Finally, colleagues' resentment may also make it very difficult for someone to have to go back to work after a period of absence, not least because many cancer patients who have been away from work for a long time because their illness has been severe and long-lasting already feel very sensitive and lacking in self-confidence.

If you have opted to give the sick person's colleagues extra work, it may be difficult to avoid having frustrated employees who get tired from time to time. You may, of course, try to solve the problems by paying one or more of them to do overtime for all or part of their fellow worker's period of sick leave. If this solution is not possible, the best policy may be to admit that the situation is difficult while the sick person is absent, and to put up with the frustrations of his colleagues.

6.4 For the colleagues of someone with cancer

Many find it disconcerting to have to work with a colleague who has cancer. Some will find the situation difficult and feel uneasy because they are very unsure about what they can say and how they can best support their sick co-worker. The following pages contain information and proposals which may allay the uncertainty and make it easier to be with a colleague who is seriously ill.

It is important to remember that your rôle is not to be a professional carer for your sick colleague. You are simply a fellow human being who can help by listening when it is hard to do so and by holding out a helping hand when that is what is needed.

General reactions among colleagues

It will often be a shock to learn that someone you know well has cancer. You will be shaken by the news and perhaps think that such a thing cannot happen. It may be especially difficult to take it in if he appeared strong and healthy before he was diagnosed.

Many feel unsure how to behave. They do not know what they should say to the cancer-sufferer and they are frightened of doing something wrong. In such cases the sick person may easily become isolated because some of his colleagues keep their distance. This will often be hurtful and make the cancer patient feel lonely, not least if colleagues with whom he has normally had a great deal to do are among those who shy away from him.

After the early days it may be that changed circumstances make it difficult for you to maintain a close relationship with your sick colleague. It is a natural, instinctive reaction to feel uneasy when suddenly confronted with a life-threatening illness such as cancer. You will perhaps become aware of your own fear of death, because you become conscious that anyone can be struck down by an illness which may prove fatal. These feelings may be particularly strong if your sick colleague is of the same age and sex as you. The fear of death is extremely disturbing and in order to avoid such uncomfortable feelings some people will try to avoid the person who is ill.

The sick person can easily become isolated

Many of the reactions described above may lead to behaviour which leaves the sick person feeling isolated. This isolation may be very hard for him to cope with, since cancer-sufferers often do not have the strength to change their situation. It will therefore be an enormous help if his colleagues seek out the sick person and keep in touch instead of going out of their way to avoid him.

Colleagues of cancer-sufferers

You and your colleagues have possibly found out already whether or not the sick person welcomes talking about his cancer. If you have not done so, ask him if you can talk freely or whether he prefers to talk only when he himself brings up the subject. Find out, too, whether the sick person wants you to ask how he is feeling or whether it would be better to leave well alone. If you are unsure how you should go about things, it will often be easier to take the bull by the horns and tell your sick colleague about your doubts. Remember, too, that most cancer patients will want to talk about something other than their cancer as well.

Do not be afraid to touch the sick person. If it comes naturally to do so – depending on your relationship before the illness – don't be afraid to give him a hug. That may be just what he needs.

What does one say to a colleague who has cancer?

In the workplace, it may be very difficult to find a suitable comment. It has to be the right comment, depending on how well you know the sick person. It may be best and easiest to keep it very simple. The following suggestions may give you some inspiration:

"I don't know quite what to say, but I've thought about you a lot since I heard about your illness."

"I am very sorry you have cancer. "

"I find it a little difficult to talk about it, but I'm very sorry you are ill, "

"How are you?"

"If you feel like talking about it I'd be pleased to invite you for coffee/tea/a glass of wine".

Further suggestions as to how you can show support for the sick person

There are many different ways of supporting a cancer-sufferer. What you choose to do will depend primarily on your relationship before the cancer. It will also depend on your inclination and the time you have available to help. Some will prefer to help in some way which is not too demanding. Others can put themselves in the sick person's place and be prepared to support him when the going gets tough. There is no reason to have a bad conscience, however limited your strength and energy.

General points about work

There are various ways in which you can make life easier for your sick colleague. If you do the same work you may, for instance, talk about possible ways of organising the work so that it is better suited to his physical ability and the course of treatment he is undergoing.

It is also generally an advantage to treat the sick person as normally as possible. This means, for example, continuing to include him in the normal routines at work, i.e. asking him to attend meetings, sending him reports and other information and inviting him to all social occasions at work.

Ask the sick person

One good piece of advice is to ask your fellow worker what he needs, what would help him most. You may feel inclined to come up with some vague offer such as "*Just let me know if there is anything I can do to help*". But in many cases a sick person is reluctant to say anything, or he may be worried that you may not feel like helping with whatever it is he needs. It is therefore generally better to come up with a specific offer of help which the sick person can accept or refuse. Here are some possibilities to think about:

- Offer to listen out for his telephone if he is tired and needs a break.
- Offer to do some of your colleague's work, to prevent everything piling up when he is off sick.
- Together with the sick colleague, maybe, appoint a contact person to be responsible for contact with him and for information he wishes to be passed on to his colleagues if he is off sick for some time.
- Coordinate visits, letters and flowers for your sick colleague.
- Offer to do some research for him, with *Kræftens Bekæmpelse*, for example.
- Offer to help with looking after the children, collecting them from school, for example.
- Offer to go round with a ready meal at an agreed time.
- Offer to go with your colleague for his treatment.

We are not claiming that these suggestions are the only "proper way" of helping a sick colleague. They are merely suggestions which may give you some inspiration. Your personal knowledge of your colleague will no doubt give you more and better ideas.

Colleagues of cancer-sufferers

The most important thing may be how you listen

Always saying the right thing is not the main thing. Sometimes you can best help your sick colleague by listening when he needs to talk – about his anxieties and worries, for instance.

Some people may be nervous that a sick person might become more unhappy if he talks about what is on his mind. But in fact there is a greater risk of the opposite happening. There are several studies which show that those who cannot bring themselves to talk about the major problems which are really worrying them will become more afraid and unhappy about them than those who have someone to talk to. "Coming right out with it" may make things seem less threatening, i.e. in talking about his problems your colleague has a chance to shed a little of his fear and anxiety.

You can show that you are ready to listen by trying to create the right atmosphere. Make sure you have time for a proper conversation. If you have to go to a meeting in five minutes' time, you would do better to wait for a more propitious occasion. Take your jacket off and sit down. And if the sick person talks about his fears and doubts, don't rush away afterwards. That would make it look as if you were sorry you had talked to him or that you don't want to discuss or try to understand what he has just been saying. Instead, show your support by staying with him for a while and making it clear that you understand how hard it must be.

Remember that you neither can nor should save him from his illness. You can, of course, ask if there is anything you can do to help a little, but the sick colleague will not expect you to be able to solve all his serious problems.

Humour

Humour can be a useful way of relieving the tension in a difficult situation. It may also in some cases make it possible to talk about problems which would otherwise be too serious and overwhelming. But **it is important that you take your cue from your sick colleague, that you let him take the initiative and introduce the humour.**

If you are given extra work

You may be asked to take on some of your colleague's tasks. It is easy in such cases to become irritated with the sick person because of the extra work and mental pressure of always having to provide back-up. And irritation often leads to a guilty conscience because you realise, of course, that it is not the "sick person's fault", just as you are well aware that things are far from easy for him.

Colleagues of cancer-sufferers

Make sure that you discuss the extra workload with your manager if you think it may become a problem for you, otherwise you run the risk of turning against your sick colleague and that can make relations with him at work much more difficult.

Six things you should be careful about

- Don't be afraid to talk about the illness but don't rush to tell your sick colleague about members of your family or friends who have had cancer. Cancer takes different people differently, and your stories will not necessarily be helpful.
- Don't give advice unless he asks for it and don't pass judgement on the decisions he makes about his treatment.
- Don't automatically assume he cannot cope with his work. He needs to feel he is making a contribution to getting the work done.
- Don't take things personally. Most cancer patients will have good days and bad days. Your colleague may need to be alone now and again to think about his illness. He may also be angry or frustrated at times without his anger or frustration being directed at you and without your being the cause.
- But don't take it lying down if the sick person lets serious mood swings upset you, and is rude to you, for example.
- Don't tell a person who has been told he has cancer that you know how he feels. You don't.

After the illness

When your colleague comes back to work after the illness you can show how pleased you are by putting some flowers or a card or other token of welcome on his desk.

Special concern

Experience shows that many cancer patients start working full time as soon as their sick leave is over. But this often works out badly because they simply haven't got their strength back even though they have been declared fit for work. It is often better to start off working part-time. A person who has recovered may more easily return to work if his fellow workers can accept that he has reached a special agreement with their manager about his workload to begin with.

Colleagues of cancer-sufferers

Note that cancer patients do not all find chemotherapy or radiation treatment equally debilitating, but that the effects may be long-lasting. Some feel extremely tired for several months, maybe more than six months after the treatment has ended.

Appearances may be deceptive

Some cancer patients who have been discharged look fitter than they really are. There are also some who are very skilful at "pulling themselves together" for the three to four hours they spend at work, but when they get home they may feel totally exhausted for the rest of the day.

Both situations can be a problem, because they can make it difficult for colleagues to realise that the person who has recovered becomes tired easily to begin with and that he needs to work part-time for a bit.

A personnel policy on serious illness

7. A personnel policy on serious illness

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7.3 An example of personnel policy on serious illness p. 71

If you do not know what you have to do, what you do do will possibly fall short of what is needed or be simply a stab in the dark. A personnel policy on serious illness can be very helpful in avoiding or lessening many of those problems which may easily arise when an employee has cancer or some other life-threatening illness.

Such a policy may be drafted to include practical information on what a manager can and should do. His actions will thus be guided by decisions taken in the business which have been carefully weighed up. The policy will both reflect the business's attitude to serious illness and apply to all those who work there.

A personnel policy does not mean that one size fits all

Everyone is different and not all need the same thing from their work when they have a potentially fatal illness. Having a personnel policy does not mean ceasing to treat sick workers as individuals.

The importance of a personnel policy lies primarily in providing a framework for the way in which the business handles serious illness and in applying that framework to everyone. There is no single blueprint.

A personnel policy does not preclude an individual approach

It may, for example, state that a meeting will always be offered early in the illness, so that the sick person's situation and requirements can be discussed, but the policy does not dictate that that meeting will lead to the same decisions. Or the policy may lay down that contact with a seriously ill employee when he is off sick may be "in accordance with what is agreed between the manager and the sick person", wording which allows ample opportunity for individual needs to be catered for. But in writing down these guidelines, you ensure that the manager and the sick employee really do discuss how they should keep in touch. The policy thus also acts as a check list of essentials which must not be overlooked or forgotten.

A personnel policy on serious illness

7.1 How do you draw up a personnel policy on serious illness?

This chapter includes a proposal for drafting a policy in this field. It is worded in very general terms because it has to be usable by firms whose circumstances vary. For example, in many large businesses there will be liaison committees and safety committees which are always included in any work on personnel policy, and in other businesses liaison is organised differently.

The content of the various points is also worded in rather general terms, and some of the work of drafting a policy will consist in adapting it in line with conditions in the business or firm concerned.

1) The manager and union representatives discuss what is to be included in the personnel policy. They clarify the firm's attitude to the various points in question.

It may be useful in many cases to discuss the following points when a firm's policy is being drawn up:

- Is it desirable for the business/manager always to **react** in the same way to the news that an employee has a life-threatening illness? If so, you can decide, for example, that flowers should be sent, that the manager should contact the sick person, etc.
- Should the business ensure that **contact** is maintained while an employee is on sick leave? How should this area be tackled and who is responsible for keeping in touch? Experience shows that keeping in touch while someone is away makes it easier for him to return to work once his illness is over.
- Should the manager offer a **meeting early on in the employee's illness**? This is strongly recommended, since it can avoid many misunderstandings.
- If so, what items should always appear on the **agenda**? Examples would be:
1. Information on the illness and treatment; 2. Points the sick person wishes to raise; 3. The business's personnel policy as regards life-threatening illness; 4. Agreement on keeping in touch during absences; 5. Agreement on briefing colleagues; 6. Clarifying the sick person's financial situation; 7. Agreeing on a subsequent meeting. The individual agenda items are described in greater detail in Chapter 2.
- What rules should apply to **employment** if the employee contracts a potentially fatal illness? How much absence is acceptable? Are critically ill employees fired? If so, when? Describe the firm's position on serious illness.

A personnel policy on serious illness

- Are there any particular forms of **support** which the firm can offer the sick employee? It may be psychological help or financial support for specific problems - a housing loan, for example.
- Should the firm offer a **meeting when the employee returns to work**? If so, which points should be on the agenda? Examples would be: 1. Information on the sick person's ability to cope with the workload expected of him; 2. Possibilities for starting work part-time and gradually working up; 3. Clarifying the employee's financial situation; 4. The possibility of temporary changes in his work; 5. Briefing colleagues; 6. Agreement on a follow-up meeting. The individual agenda items are described in greater detail in Chapter 3.
- What rules should the business have on **keeping jobs open**? Should the firm try to arrange a transfer or employment on special terms (with a wage subsidy, for instance) if the employee is unable to do as much work as before his illness? When does one dismiss an employee who cannot do the work he used to do or the equivalent?

2) Use the following three examples to put a specific case into perspective

When a business decides to work out a policy on serious illness it frequently does so because it has had one or more instances of serious illness among its workers. Recent experience may in fact be a good starting point for drafting a policy for future use, but one should be wary of focusing too much on events in the recent past.

Firstly, there is a risk that discussion of a particular employee's situation will take up a great deal of time because colleagues and manager have been emotionally affected by what has happened. Secondly, the experience of a specific case may to a large extent govern how the policy is formulated and if this happens there is a risk that decisions will reflect what would have been advisable in the case of the employee in question rather than what may work well for the staff and the business in general.

It may be a good thing to read about other cases where the problems appear different from those of one's own experience. After this section we therefore quote three cases, i.e. three examples where the course of events was very different. The first deals with a woman employed in the kitchen of a care home. Following treatment for her cancer she found it difficult to cope with the work she had previously done. In the second example, the workplace is an export firm employing a salesman whose cancer worsened. The sick man did not realise how ill he was and this affected the way he did his work. The third case illustrates in particular how the colleagues of a cancer-sufferer can be seriously affected by the situation.

A personnel policy on serious illness

3) Read the handbook as a basis for a draft policy

It may be an enormous advantage to have read the foregoing chapters before you begin drafting a personnel policy on serious illness. On the one hand, the sections are worded in such a way as to suggest the points which may be included in a policy and on the other Chapters 1-6 set out proposals for dealing with a range of particular problems which may arise when an employee has a life-threatening illness.

4) Get opinions and proposals for amendments from union officials /the Central Liaison Committee

When a draft policy has been worked out it is advisable for union officials to be asked to comment on it. In larger companies it will be handed out to the Central Liaison Committee members. Proposed amendments and other comments can then be collected together and the parties can assess whether and, if so, how the proposals can be incorporated into the draft.

5) Draw up the final plan and circulate it within the firm

If there are many changes, the above process may be repeated, otherwise the final version can be written and the usual procedure in the business followed.

The policy is sent out to employees or circulated in some other way within the firm. If the firm has introductory booklets for new staff, a copy of the policy may be included.

7.2 Three case studies of cancer-sufferers

It may be easier to draft a personnel policy if a few neutral examples are used as a basis. This section therefore covers three cases, i.e. three anonymised examples of what may happen. They focus on various types of problem which may arise when an employee has cancer and show at the same time how those problems may be interconnected.

For each case there are examples of questions which may be used in work on a personnel policy.

A personnel policy on serious illness

Case 1

Connie Sørensen is 55 years old. Eight months ago she was diagnosed with a large tumour of the intestine. While being treated, she was on sick leave from her work as a helper in the kitchen of a large care home for a good six months.

Just two months ago Connie was given a clean bill of health. She has gone back to work for 28 hours a week only, but even so she has found this difficult, since the pace of work and pressure in the kitchen have increased owing to staff cuts in her absence.

Connie cannot cope with the pressure of work and she feels continually weak as a result of her illness and treatment. There have been further problems following removal of the temporary stoma she had in the beginning, so that she now has to go to the toilet frequently. She has had only a few days of sick leave since she returned to work.

Connie was employed full time in the kitchen for five years and enjoyed her work. She was a good, reliable worker before her cancer developed. She lives alone and could not make ends meet on unemployment benefit, daily allowances for sickness or a pension.

The manager in charge of the kitchen had a brief talk with Connie a month ago. She said she found it difficult to cope with the work, which was also the manager's impression. They agreed to wait and see how things went and then to meet again.

Examples of points to be considered when working on a sickness policy:

Tomorrow you are to hold that meeting with Connie and her union official. You are planning to tell her that you think she isn't suited to work in the kitchen any longer.

1. How can you prepare for the meeting?
2. What exactly are you going to say to her?
3. Is there anything you are worried about?
4. What do you have to be especially aware of?
5. What will your workplace do in the above situation – and how can this be worded in a personnel policy?

A personnel policy on serious illness

Postscript

In the above case, the local authority case handler took part in a round table meeting at the workplace. The firm had a personnel policy on life-threatening illness whereby attempts are made, as far as possible, to transfer the sick person or arrange for him to be employed on special conditions if he is unable to take on as much work as previously.

A flexi job was arranged for Connie Sørensen, where her work was less stressful than in the kitchen.

Case 2

Hans Nielsen is a hard-working, conscientious 52-year-old who has worked for a production company for 22 years. He is unmarried and does not mind frequently doing overtime. When he was diagnosed with a malignant brain tumour, he agreed with his manager that he would continue to work during his illness. The firm has no policy on serious illness.

Hans Nielsen is responsible for his own area of work in the sales department, where he is in charge of both client contact and quotations for customers in the Fyn region.

Hans has been able to work almost all the time. He has been absent for only a few short periods of in-patient treatment at the hospital. But after some months his colleagues and the management realise Hans is becoming worse. He is losing weight and in certain situations his memory lets him down. He himself doesn't seem to realise that his health is deteriorating and when he talks about his illness he rejects any idea that there are signs that all is not well. At the same time his illness is beginning to affect his work.

A secretary who writes letters for him from time to time tells his departmental manager that there have been some things in the letters that she did not really understand. A few days later Hans Nielsen is again admitted for hospital treatment and a colleague takes over his work for that time. And now the extent of the problem becomes much more obvious. The colleague discovers that Hans has sent out a totally unrealistic quotation to a customer and tells the manager. This urgent problem is resolved by promptly contacting the customer. But it also emerges that there have been unfortunate mistakes in communications with several other customers and that there is neither rhyme nor reason in the way the sick man has been planning his work over the past few months.

A personnel policy on serious illness

Now the management is becoming seriously concerned but at the same time more and more at a loss. On the one hand it is crucial for the firm to be seen by its customers to be reliable and on the other the management would like to let Hans continue working because it is obviously important for him to do so. But to tell him he can no longer cope with the work he has been used to doing amounts to telling him how ill he really is – and that would be enormously unkind in view of the fact that he is doing everything possible to put what is really happening to the back of his mind. There would be a further problem: what work could he be given to do instead?

Examples of points to be considered when working on a sickness policy:

1. How would the above or a similar situation be dealt with at your workplace?
2. How can thoughts and ideas regarding the answer to question 1 be worded in the business's personnel policy on life-threatening illness?

Post-script

In this particular case, the management decided to let the departmental manager talk to Hans Nielsen, and, on the basis of his illness and the letter, insist that his illness made it necessary to call in a colleague to help him. The manager said that the firm was pleased for Hans to continue to work while he was ill but that it was also important that he took his condition into account and, for example, took a day's sick leave now and again when he felt he needed to. Hans was very hurt but had to accept the situation. A colleague then worked with him on sales for about a month, during which time his input rapidly became very unreliable. He became weaker and weaker but did not take sick leave "now and again". His last working day was three days before he died.

In deciding on this answer to the problem, the management tried as far as possible to take into account both Hans Nielsen's and the firm's own interests. It was probably not the ideal solution from all points of view, but it was one which everyone could accept. It will not always be possible to solve problems satisfactorily. Sometimes you are forced to choose an answer which is "only" acceptable and occasionally there are only "bad answers" to choose from.

A personnel policy on serious illness

Case 3

In a department with 16 employees – consisting of one manager, salaried staff and secretaries – a 32-year-old female employee, Susanne Jørgensen, was diagnosed with breast cancer just over a month ago. After an operation she has just embarked on a course of radiation treatment and chemotherapy.

Susanne, a single mother with a child of 7, has been employed in the department for just under four years and is well-liked. Some of her colleagues have known her ever since she joined the department and others are new. The age range in the department is from 21 to 56 years.

Susanne has visited the department a few times since her cancer was diagnosed. She looks well and seems happy. Some of her colleagues cannot believe she has a serious illness and others are very upset about it.

When Susanne visits she lets her manager know how the treatment is going. He then briefs her colleagues. They are very uncertain about what they can or cannot ask Susanne. When talking to the manager, does she want to say more about how she feels? They are also not sure how they, as colleagues, can best show support for her.

Some of her colleagues worry that one day Susanne will suddenly become depressed. They don't know what they should do if that should happen. Others talk about what they should do if Susanne starts to look ill and lose her hair.

One of Susanne's colleagues, a woman called Hanne, lost a friend to breast cancer two years ago. She has told her colleagues a little about this but none of them wants to admit that Susanne could die of her illness. It is virtually a taboo subject for her colleagues. Hanne thinks a kind of spell has been cast: it is almost as if Susanne will die if they as much as mention that she might do. Another colleague, Merete, who is roughly the same age as Susanne and who is also a single mother, has now become very frightened of getting breast cancer herself. She has just made an appointment with her doctor for a check-up. She has not told her colleagues about her anxiety.

There is no replacement cover for Susanne in the department, and three colleagues in particular now notice extra pressure of work. At the same time there is a lack of office space and they have discussed whether they should take over Susanne's office until she comes back to work. But they hesitate to do this, since it appears to be important for Susanne that when she comes back to visit her office should still be just as she left it.

A personnel policy on serious illness

Examples of points to be considered when working on a sickness policy:

1. What can Susanne's colleagues do about their doubts and uncertainties when she visits the department?
2. What do you think about the way Susanne's colleagues are being kept informed about her illness?
Are there any other ways of tackling this point?
3. Should Susanne's colleagues talk about the possibility that her cancer might prove fatal?
4. What further problems should Susanne's colleagues deal with in the short term and in the slightly longer term?
5. How can one forestall some of the above problems by having a personnel policy?

Post-script

Both the manager and Susanne's colleagues were very unsure how they should confront this situation. They wanted professional advice and the workplace therefore hired an adviser with specialised knowledge in this field. Susanne was told that the workplace had obtained advice.

The adviser held a meeting with all Susanne's colleagues and the manager. The staff had an opportunity to discuss their concerns, frustrations and doubts about how they should behave when with Susanne. It was agreed at the meeting that the manager should tell Susanne as soon as possible what had been discussed and ask what support she wanted from her colleagues. It was also agreed that the manager should look into the possibility of hiring a temporary replacement.

7.3 An example of a personnel policy on serious illness

The work of drafting a personnel policy on serious illness may appear onerous. This section gives a practical example of how the policy might look for a fairly large business with white-collar staff:

It is one of the business's aims that employees who become seriously ill should have as much peace of mind as possible. For this reason, the following points are important:

- The manager/human resources department should suggest a meeting with the sick colleague six to eight weeks after diagnosis. When the meeting is agreed, it should be emphasised that the purpose is not to fire the employee but to find out how he is and how the business can keep in touch during his illness.

A personnel policy on serious illness

- The sick person should be able to talk to the manager/human resources department or his immediate boss at any time during the course of his illness. If he so wishes, a union representative or a member of his family can be present.
- The colleague should be pointed in the direction of help and advice elsewhere – for example to a case worker in the social services department, to psychological counselling, to a pension fund or to *Kræftens Bekæmpelse*.
- Every effort should be made to enable the colleague to continue to work for as long as his health allows. The manager and fellow workers should ensure he has reasonable working conditions, reorganising his responsibilities, reducing his working hours, retraining, etc..
- His colleagues should be kept up to date, as agreed with the sick person.
- The firm should urge openness about serious illnesses at as early a stage as possible.
- A meeting should be proposed before the employee goes back to work after a long period of sick leave. The aim should be for the two parties to exchange information and to agree on what can be expected as regards workload to begin with. If the employee so wishes, it may be useful for a case handler from the local authority to be present.