
It is not clear who has actually written this toolkit, although there are acknowledgments to a general practitioner (GP) and a specialist occupational physician. EEF (formerly the Engineering Employers Federation) work on behalf of 6000 companies in ‘manufacturing, engineering, technology and beyond’ and represent a million employees. AXA cites itself as a world leader in
financial protection but will be known to most occupational physicians as a major provider of occupational health services and insurance services. The publication is aimed at employers to give them everything they need to make the shift to a high attendance culture.

The toolkit is divided into 20 chapters which contain 49 different tools. A route map is provided at the beginning and the toolkit is sub-divided into First steps, Short-term absence, Longer term absence, Medical support, Difficult cases and finally Well-being. The text is very clear and easy to read despite very little pictorial content. A minor gripe is the ring wire binding which gives it an industrial feel without being robust and my copy was dog eared after one read through. While the toolkit feels authoritative and certainly provides clear advice, there is no bibliography and virtually no meaningful references so it would fail as an evidence-based guideline. However, its target audience requires direction rather than scientific reassurance.

The toolkit is extremely comprehensive and thorough. A manager looking for a quick fix to attendance issues would soon realize that their work was cut out. On the other hand, they would also find everything they could ever possibly need from an explanation of the Bradford Factor to a model letter to write to a GP asking why someone's recommended absence post-surgical procedure exceeded that recommended by the DWP. I could not find any omissions and it could not make managing absence any easier. The toolkit will certainly do what it says on the cover if it is implemented and it appears to have thought of everything possible to make implementation straightforward. It just needs awareness, motivation and application.

In summary, this is a truly excellent piece of work and the authors, whoever they are, are to be congratulated on having produced a true masterpiece. While not intended for occupational physicians, you would certainly be advised to be familiar with its contents if one of your employing organizations might get their hands on it (the toolkit also deals with assessing the quality and suitability of your occupational health provider). Likewise, if you look after an organization with an attendance problem, you should point them in the direction of this document which for any employer provides excellent value for money. If employers do use this toolkit and we do what it says we should, our job will be easier and more rewarding and their business will be better, both in terms of its performance and respect for their employees.

Rating

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