

Case Study 4

Software developer in a medium sized public organisation (sedentary work)



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The 56-year-old female employee was diagnosed with breast cancer and treated by surgery (three times), radiotherapy, chemotherapy, medication and cancer specific medication. The employee was absent from work for three weeks after the first surgery. She then worked when she was able during the remaining treatment time.

Following treatment, the employee suffered from anxiety, concern about infection risks, fatigue, hot flushes, loss of appetite, poorer concentration and memory, reduced energy, reduced physical ability, and sleep problems.

Returning-to-work process

The process of return to work included maintaining contact when away from the workplace by the line manager and colleagues. A return-to-work plan was put in place, including the time of continued treatment. Although a formal risk assessment process was not made, the safety representative was available if required and advice about infection risks was given by the employee's general practitioner.

The good practices identified in this case study were:

- two-way contact between the employee and the line manager
- support from the line manager
- line manager controlling the employee's workload
- risk of infection considered
- fatigue considered
- working from home when possible
- desk space at home informally checked
- flexibility in relation to working hours
- work tasks that ensured the employee felt valued

The employee has continued in her role.