

MANAGEMENT OF SICKNESS and ABSENCE PROCEDURE

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PROCEDURE SUMMARY		
<p>The purpose of this procedure is to set out the Trust procedure for managing sickness and absence, reporting and record keeping. It describes the steps to be taken by managers and the responsibilities of employees in cases of short and long term health related absence.</p> <p>It also describes the approach to be taken in the case of disability and maternity related absence thereby ensuring equality and fairness. It sets out for managers what they need to do, when and how and the Trust inputs that exist to support their management of absence.</p>		
The Trust monitors the implementation of and compliance with this procedure in the following ways;		
<p>The implementation and compliance of the Managing Sickness and Absence Policy and Procedure will be monitored by the Human Resources Department. The Human Resources team will provide regular reports to operational managers highlighting areas of concern and ensuring they implement the processes outlined in the procedure.</p>		
Services	Applicable	Comments
Trust wide	✓	

**The Director responsible for monitoring and reviewing this procedure is
Executive Director of Corporate Governance & Strategy**

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

MANAGEMENT OF SICKNESS AND ABSENCE PROCEDURE

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ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

PROCEDURE FOR THE MANAGEMENT OF SICKNESS AND ABSENCE

ASSURANCE STATEMENT

This procedure aims to ensure that Essex Partnership University NHS Foundation Trust (the Trust) secures the maximum attendance at work of all employees throughout their normal working week and provides a clear process to be followed to support this.

The procedure seeks to provide guidelines to line managers and staff on how to manage and support staff through absence due to ill health and ensure that this is done fairly and consistently.

1.0 INTRODUCTION

- 1.1 The Trust aims to promote good employment practices and recognises and values the support, contribution and commitment of all its employees. This procedure is to ensure that arrangements are in place for the management of health-related absence, and other absences, from work in a manner that minimises the impact of absence on the employee, service users and the Trust.
- 1.2 All staff are expected to make a full contribution to delivering services, in support, the Trust recognises the importance of balancing the health needs of employees against the needs of the organisation and is committed to providing excellent working conditions and appropriate support to achieve that balance.
- 1.3 Employees have a right to be accompanied by a Trade Union representative or currently work colleague only where the outcome of a meeting is likely to be:
 - The termination of employment, or
 - Confirmation of some other formal sanction (such as a written warning) or
 - Some other formal action (conduct hearing, grievance meeting or appeal hearings)

The right to be accompanied does not extend to informal discussions, meetings to discuss absence or any other review meetings, the Trust may however choose to accommodate this request where it feels it does not compromise its ability to progress sickness and absence management procedures expeditiously. In these circumstances the request will only be considered if it is by a recognised Trade Union representative.

2.0 PROCEDURE FOR REPORTING ABSENCE

2.1 Notification

- 2.1.1 Where an employee is unable to attend work due to illness, or any other reason, they are responsible for contacting their line manager, or in their absence a nominated individual, verbally, by telephone of their sickness absence and reasons for it. Please see Reporting Absence flowchart at Appendix 1.
- 2.1.2 For clinical services this should be done, where possible, 1-2 hours before working hours/shift is due to start if not before.
- 2.1.3 For non-clinical services this should be done as soon as possible from the employee's normal start time for work.
- 2.1.4 Only in exceptional circumstances (i.e. when hospitalised) can an employee nominate someone else to make contact with their line manager or leave a text message. Text messages should where possible be followed up by a telephone call within 3 hours.
- 2.1.5 Failure to report an absence may result in the employee being placed on unauthorised unpaid leave and will be considered to be absent without leave (AWOL). Where contact has not been made or maintained, the line manager will attempt to contact the employee to ensure their wellbeing within 24 hours of absence. If no contact can be established, then the employee's identified emergency contact will be contacted. This action could result in the Disciplinary (Conduct) Policy and Procedure being instigated.

2.2 What to record

- 2.2.1 When phoning their manager, employees must provide the following information where appropriate:
- The reason why they are absent
 - When they last worked
 - When they expect to return to work
 - Are they suffering from vomiting and diarrhoea?
 - Hours of duty likely to be missed
 - Details of any outstanding or urgent work that needs to be dealt with and contact details where appropriate
 - A communication schedule and a contact telephone number and address details for the absence period.
- 2.2.2 This information should be recorded by the appropriate line manager and stored confidentially in the employee's personal file in the department.

2.3 Keeping in Touch

- 2.3.1 Employees are obliged to maintain contact with their line manager during any period of absence. Furthermore, in order to ensure the appropriate support is provided to employees during periods of absence managers are responsible for maintaining regular contact with employees.
- 2.3.2 A reasonable communication schedule must be agreed between the manager and the employee. As a guide, it is anticipated in cases of absence exceeding three days that employees, where this is known, as a minimum, will contact their manager on a weekly basis. If the length of time is not known at the time of reporting the employee is required to contact their manager daily.
- 2.3.3 In cases of long term absence, communication will be agreed between the line manager and the employee. The degree of contact will depend on the individual circumstances and the duration of certified absence period(s) but once or twice a month is expected to be the norm as well as following any medical appointments.
- 2.3.4 Employees must advise their manager of the intended date of return. Employees must report on their fitness to work even if recovery takes place on a rostered day off or that period will be included within the calculation of sick leave.
- 2.3.5 Conversely, if an employee is unable to return to work as expected, they should inform their manager as soon as they become aware.
- 2.3.6 Employees must not undertake paid employment during confirmed sick leave unless the Trust has given formal permission that the alternative work requested is reasonable and may assist rehabilitation. Additionally, they must not engage in activities likely to impede their recovery or that are inconsistent with their sickness absence status.
- 2.3.7 Employees returning to work after sick leave who wish to undertake additional duties such as bank, temporary or agency in the Trust or any other organisation within 5 days following their return to work should seek permission from their line manager before doing so to ensure that additional duties are commensurate with sustaining their return to work.

2.4 Certification

2.4.1 Appropriate certification should be provided to cover the entire sickness absence period, as follows:

Length of Absence	Type of Certification	Where to Submit	Who to Submit to
7 calendar days or fewer	Self- Certificate (See Appendix 2)	On the first day of work following the absence or as part of a return to work meeting.	Immediate Line Manager
More than 7 calendar days	Medical or GP Certificate (Statement of Fitness for Work or “Fit Note”)	As soon as reasonably practicable and within 2 days of expiry of last certificate	Immediate Line Manager

2.4.2 In exceptional circumstances, employees may be required to produce a medical certificate before the eighth day of sickness absence. If this is the case, any charge for obtaining a certificate may be reimbursed by the Trust.

2.4.3 The medical certificate will state the reason for the sickness absence and that the employee is either “unfit for work” or “may be fit for work”. If the certificate indicates that the employee is “not fit for work” it will indicate the length of time the absence is likely to last. If the medical certificate indicates that the employee “may be fit for work”, it will indicate the length of time that recommended adjustments are advised for, to enable an earlier return to work.

2.4.4 Depending on the reason for the absence and length of absence, staff do not always need to go back to their GP for a certificate of fitness. Where there is a certified end date to the absence then this should be taken as being correct. If a return to work earlier than the certified end date can be achieved this will need to be certified by the GP and / or Occupational Health service.

2.4.5 If an employee remains ill beyond the end date given by their doctor, they must send in further medical certificates. Back dated medical certificates will not be accepted as valid, except where there are extreme mitigating circumstances that meant that the employee was unable to obtain a certificate.

2.4.6 Failure to follow the reporting procedure and/or failure to provide appropriate certification in a timely manner to cover the entire period of absence may lead to the absence being classed as unauthorised, pay being suspended and action being taken in accordance with the Trust’s Conduct (Disciplinary) Policy and Procedure

2.5 Falling unwell during the working day

- 2.5.1 If an employee falls unwell during their working day they should notify their line manager immediately. The Line manager or appropriate manager in charge will be responsible for authorising the employee to leave work. Any staff who leave without authorisation will be deemed as taking unauthorised absence.
- 2.5.2 In cases where an individual leaves work early due to sickness a local record of this should be retained by the manager. The record should detail the reasons for sickness absence, the time the individual reported sick and the time they were released from work. As only full day absences can be recorded for payroll purposes therefore the individual should continue to be recorded as worked on that day only for purposes of payroll returns/health roster.
- 2.5.3 Part day sickness should be monitored and any attendance patterns that are of a concern should be dealt with under section 12 of this procedure.

3.0 REDEPLOYMENT AND SUITABLE ALTERNATIVE

- 3.1 In circumstances where it has been determined that an employee is not able to return to their substantive role due to health reasons and/or reasonable adjustments to the employee's substantive role have been explored, redeployment to a suitable alternative role will be actively considered and supported as early as possible.
- 3.2 Redeployment will be considered following advice from Occupational Health or expressed by the employee and may be on a permanent or temporary basis, with the latter being considered as a supportive measure to ensure an employee can return to work at the earliest opportunity.
- 3.3 Redeployment options, whether on a permanent or temporary basis should be discussed and agreed with the employee. The employee will be asked to complete a shortened application/skills form, outlining their experience, skills and knowledge. The completed application form will be used to match suitable vacancies during an 8-week redeployment period.
- 3.4 It may be possible to consider a period of training or refresher training to enable an employee to take up an alternative post within the Trust. The manager will need to balance the cost, length of time and type of training in deciding whether it is a reasonable and practical option.
- 3.5 Where suitable alternative employment is located within the eight-week period, employees will be given a 4-week trial within the new role. A review will be held between the employee and the line manager after 3 weeks in the new role to assess whether the post is suitable; assess an employee's progress and identify any further training or support that may be required.

- 3.6 If suitable alternative employment is not located after the 8-week redeployment period, a decision will be taken as to whether to terminate the employee's contract.
- 3.7 Redeployment to a role that is a lower band or reduced earnings than the substantive role will not be subject to pay protection arrangements.

4.0 MEDICAL APPOINTMENTS

- 4.1 Hospital, doctors or dentist appointments should be booked outside of normal working hours, wherever possible. Where this is not possible appointments should be made as close to the beginning or end of working hours to minimise disruption to the working day; Employees should agree with their line manager when time lost for the attendance of medical appointments will be made up or agree to take from annual leave allowance. This applies to all staff irrespective of whether they work full time or part time hours. Arrangements should be made in agreement with the appropriate line manager, providing as much notification as possible.
- 4.2 Time off for appointments will not be recorded or classified as sickness absence, however should treatment provided during such appointments prevent an employee from returning to duty such time should be classified as sickness absence.

5.0 SICKNESS AND ANNUAL LEAVE

- 5.1 If illness occurs during a period of annual leave, the employee must inform the manager and follow the normal reporting arrangements
- 5.2 The employee will be regarded, as being on sick leave provided a medical certificate is produced to that effect and annual leave will be suspended from the date of the certificate. If employees fall sick on a designated public bank holiday they will not be entitled to an additional day.
- 5.3 In line with regulation 13 and 13A of the Working Time Regulations 1998, an employee on long term sick leave continues to accrue annual leave and should not be prevented from taking this leave due to sickness. If an employee cannot, or does not wish to take annual leave, they must notify their manager and agree together when the accrued annual leave will be taken.
- 5.4 Employees on long term sickness absence which continues into the next annual leave year may carry forward up to a maximum of 12 months' worth of untaken annual leave. Any undertaken annual leave entitlement proceeding this twelve-month period will be lost.

- 5.5 Leave carried forward to a subsequent leave year should be taken within 3 months of the employee's return to work. Any agreed phased return to work will then follow this.

An employee who returns to work with outstanding annual leave entitlement will be expected to take annual leave during any phased return where this will ensure that accrued annual leave is taken in full during the leave year.

- 5.6 Where annual leave is taken in place of sick leave, this will continue to be counted towards the record of sickness absence for the purposes of managing the overall sickness absence.
- 5.7 In the event of an employee being dismissed on the grounds of capability (due to ill health) any untaken annual leave will be paid working back up to 18 months from the contract end date. The payment will be made with their final salary. The annual leave entitlement will be calculated pro-rata on contractual terms.
- 5.8 If an employee falls sick during approved annual leave they must notify their manager as soon as is reasonably practicable. The employee will be required to produce a medical certificate – a self-certificate is not acceptable in these circumstances, the employee is on holiday abroad and cannot obtain the normal type of medical certificate, a statement from a qualified medical practitioner, which is suitably endorsed, should be obtained, to enable occupational sick pay to be paid. Provided that the certification is received, as soon as is possible, the Trust may treat the absence as sick leave and replacement annual leave for days lost may be granted at a time to be agreed with the manager. NB. Under Government rules, you will not be entitled to receive Statutory Sick Pay if you are sick whilst in a country that is not a member of the European Union.

6.0 PAY AND INCREMENTAL PROGRESSION

- 6.1 If absence has been reported appropriately in accordance with this procedure, an employee will receive sick pay as set out in the relevant Terms and Conditions applicable to them. This includes non-NHS sick pay entitlements. Where employees are not entitled to occupational sick pay or where this has been exhausted, statutory sick pay will apply.
- 6.2 Extensions to occupational sick pay can only be approved in exceptional circumstances by a Director and following advice from HR.
- 6.3 Sick pay is not normally payable for absence caused by an accident/injury due to active participation in sport as a profession, or where contributory negligence is proven, or for voluntary procedures such as IVF or cosmetic surgery, which has no medical grounds to support it. Managers and employees should seek advice from Occupational Health or HR if they require further advice.

An employee who is absent as a result of an accident is not entitled to sick pay if damages are received from a third party. The Trust will advance to an employee a sum no exceeding the amount of sick pay payable under this scheme, providing the employee repays the full amount of sickness allowance when damages are received.

6.4 Trust sick pay is inclusive of Statutory Sick Pay (SSP) (provided an employee is entitled to SSP). SSP is not payable if an employee is:

- On maternity leave
- Taking part in industrial action
- Already in receipt of the full SSP entitlement
- In legal custody
- In receipt of state benefit during the previous eight weeks (employment and support, severe disability allowance, maternity allowance).

6.5 If an employee is in receipt of any of the above payments they will receive a letter from Her Majesty's Revenue and Customs (HMRC) advising how long their SSP exclusion lasts which should be passed immediately onto their manager to avoid an overpayment. All overpayments will be recovered.

6.6 Sick pay may be stopped, particularly if an employee:

- Fails to give their manager a satisfactory explanation for their absence
- Fails to report the absence to their line manager in line with this procedure
- Fails to submit a medical certificate within seven days of receipt
- Fails to complete the self-certificate accurately or within the time frame stated above
- Undertakes other paid employment during a period of sickness without express agreement from the Trust
- Participates in activities during sickness absence which are inappropriate with their reason for absence and prognosis for recovery e.g. involvement in DIY or sports.

6.7 Employees who are employed under Agenda for Change Terms and Conditions and have been absent continuously for a period of 12 months or more may have their occupational sick pay entitlements reinstated to half pay after the 12-month period has lapsed where in the following circumstances:

- Sick pay will be reinstated if the final review meeting for long term absence has not taken place within 12 months of the start of their absence.
- Reinstatement of sick pay will remain until the final review meeting has taken place
- Reinstatement of sick pay will only apply where the failure to undertake the final review meeting is due to delay by the employer. This reason will not apply where the delay is due to other reasons.

Incremental Progression

- 6.8 It is imperative that anyone absent from work through sickness is not disadvantaged and that their incremental progression is not delayed unnecessarily.
- 6.9 Where the individual has not been able to demonstrate the required standards for incremental pay progression due to absence from work the employee will automatically progress to their next increment, in line with AFC pay scales, with the exception of Bands 8c to 9 where increments will not be awarded for the final two pay points.

7.0 DISABILITY

- 7.1 The employee must have received confirmation from Occupational Health that they may fall within the Equality Act 2010 definition of person with a disability. Planned disability leave must be agreed in advance giving reasonable notice and may be a number of individual days each year. This could be for treatment, rehabilitation or assessment related to their disability and the employee must advise their line manager of the proposed time of the appointment/s as soon as possible and provide a medical card or letter. Where there are a series of appointments for regular and on-going treatment, acceptable arrangements need to be agreed by the line manager.

8.0 PROBATIONARY PERIODS

- 8.1 Probationary periods for new starters may be extended, where appropriate, during periods of sickness absence to ensure all employees are adequately evaluated. Managers should seek and consider Occupational Health advice. It is important to note that attendance will be assessed during the probation period and unacceptable attendance may lead to the termination of employment in line with the Trust's Probation policy and procedure.

9.0 ACCIDENT AT WORK & INJURY BENEFITS (work related illness/disease)

- 9.1 Where an accident or incident, such as a fall or assault has occurred at work or where an employee has a work-related illness that subsequently leads them being on sick leave with reduced or no pay, Injury Allowance (IA) may be applicable. IA is available for a maximum of 12 months only.
- 9.2 For employees applying for Injury Allowance (IA): the injury, disease, or other health condition must have been sustained or contracted in the discharge of the employee's duties of employment or where an injury that is not sustained on duty but is connected with or arising from the employee's employment.

- 9.3 Any accident or incident at work must be reported immediately to the line manager or nominated individual. In line with the Trust's Adverse Incident Policy and Procedure the employee, or if unable to do so, their line manager should accurately complete a Datix as soon as the incident/accident has occurred.
- 9.4 Failure to accurately record and report an accident or incident at work may result in injury benefits not being paid.
- 9.5 Employees claiming injury allowance are required to provide all relevant information, including medical and incident evidence, that is in their possession or that can reasonably be obtained, to enable the employer to determine the claim e.g. Medical Certificate, Occupational Health report and DATIX (Incident form). Once all documents/information have been collected the employee must send the information to the relevant HR Advisor, via email and confirm a formal request for IA. The HR Advisor will acknowledge receipt to the employee.
- 9.6 The documents/information will then be sent to the Operational Director for the service in which the employee works, who will consider the injury, illness or other health condition and determine if appropriate medical advice is further needed. In all cases the Operational Director should use the civil burden of proof - "on the balance of probability" (more likely than not) - to determine the outcome within 10 working days of receiving the application for IA. Depending on the outcome, the employee will receive correspondence confirming or rejecting the IA, either outlining the payment conditions or giving the reasons for rejection. Where the employee disagrees with the employer's decision they are entitled to appeal the decision through the Trust's Grievance procedure.

10.0 ILL HEALTH RETIREMENT

- 10.1 Where a decision is taken to terminate an employee's contract of employment on the grounds of incapability due to ill health and the employee has been a paid member of the NHS Pension Scheme for 2 or more full years, the employee may qualify for early payment of lump sum and annual pension payments. An employee may wish to apply for Ill Health Retirement prior to any decision to terminate employment being made.
- 10.2 As Pension Scheme rules confirm that an employee must be in employment to apply for ill health retirement, the employee will be given a reasonable period to decide whether they wish to pursue ill health retirement and complete the appropriate paperwork prior to any decision being made in regards to possible termination of the contract of employment.
- 10.3 In circumstances where an employee is diagnosed with a terminal illness, terminal illness commutation, where the lump sum and annual pension payments are paid together, may be applicable.

- 10.4 Employees who are not members of the NHS Pension Scheme, or have not been a member for 2 or more full years, will only be entitled to payment in lieu of notice and any accrued and outstanding annual leave entitlement when their contract is terminated.
- 10.5 In the event that an employee, during their course of employment has been recommended or wishes to apply for ill health retirement benefits from the NHS Pension Scheme, it is their responsibility to ensure that their application to NHSBA is made in advance of any date of dismissal where a final meeting has been scheduled where dismissal is being contemplated by the Trust. The final meeting will not be deferred where an employee has been given reasonable opportunity to submit an application and failed to do so without exceptional rationale for delay. This action will protect any pension enhancements that may apply in their case in the event that they are dismissed. After dismissal, pension benefits may be less in some cases. Where an employee expresses that they wish to make such an application, the Trust may delay any final review meeting for a reasonable period to allow the application to take place and a response from NHSBA received.

11.0 SUSPENSION

- 11.1 Suspension on medical grounds is intended to help ensure safety of staff and service users. It seeks to make sure staff do not work when it is not safe for them to do so or where a risk to the safety of others is identified.
- 11.2 In such cases normal salary including allowances will continue to be made to the employee, even where no medical certificate can be provided for the period in question. This is a requirement of the Employment Rights Act 1996.
- 11.3 Circumstances when suspension on medical grounds can be used include:
- Employee is unwell or has a condition which causes the Line Manager concern and might present a risk to them or others;
 - The member of staff returns to work after sickness absence and the Line Manager has doubts about their ability to perform the full range of their duties in a safe way and prior to an Occupational Health assessment;
 - To comply with Trust Infection Control Procedures;
 - In line with Suspension from Work (on Maternity Grounds) Order 1994.
- 11.4 If an employee suspended on medical grounds provides a medical certificate to confirm they are not fit to attend for work suspension will be lifted with immediate effect and sick pay instated in accordance with terms and conditions of service.
- 11.5 Where suspension is being considered whilst an employee is already off sick, the line manager will write to the employee (with HR advice) advising them of any investigation and any restrictions which are enforceable. It may not be necessary to suspend an employee where they are confirmed as unfit to attend for work in any capacity.

- 11.6 When the period of sickness ends, and if the need to suspend remains, confirmation of the suspension will be put in writing. The employee will be offered a contact as additional support.

12.0 PROCEDURE FOR MANAGING SICKNESS ABSENCE / ILL HEALTH

12.1 Managing Sickness Absence / Ill Health

- 12.1.1 The purpose of this procedure is to provide a consistent basis for the management of sickness absence, be that infrequent, intermittent or long term absence, or in cases where an employee is at work but unable to fulfil the requirement of their role for health reasons.

12.2 Return to Work Discussion / Informal Management

- 12.2.1 Managers must monitor all sickness absence of their staff, including investigating the causes of any sickness absence.

Return to Work discussions and discussions held regarding sickness, health and well-being during regular supervisions are considered to be informal action in the management of sickness absence and support of staff at work.

- 12.2.2 The return to work discussion should happen as soon as reasonably possible. This can be done face-to-face, telephone or via video conference. This will involve an informal but confidential discussion with the employee on their return to work. This return to work discussion will allow managers to gather all the relevant facts on the individual's sickness absence; ascertain what support may be needed and ensure the individual is aware of the impact of their absence. The manager should also use this as an opportunity to make the employee aware that if they have or are triggering the absence indicators which may require escalation to formal procedures. The discussion will be recorded on the Return to Work Interview Form at appendix 4 retained on the employee's personal file in the department.

- 12.2.3 Where adjustments are made during the Return to Work these should be recorded via a Risk Assessment which must be reviewed prior to a return to full duties.

12.3 Occupational Health

- 12.3.1 Ill health, of whatever nature, may affect the work performance of an individual and may also have an impact upon colleagues or service provision. If a manager has any concerns about whether an employee has an underlying health condition which may affect their ability to continue in their present job or may result in a detriment to their health or need advice on whether an employee is fit to return to work a management referral to Occupational Health should be completed. It

is a condition for all staff that their manager can refer them to occupational health or for a medical assessment during the course of their employment.

- 12.3.2 All referrals should be completed using the Referral Form which can be found on the Intranet under the forms section, in partnership with the employee and should be copied to the employee and if relevant an HR Advisor. Individual consent to a management referral to Occupational Health is not required however the manager must advise the employee when they are being referred and for what purpose.
- 12.3.3 Failure to attend or engage with Occupational Health appointments will be investigated and if necessary referred to the Trust's Disciplinary (Conduct) Policy and Procedure.
- 12.3.4 Where employees refuse, or are unable, to attend Occupational Health or obtain an up to date GP/Medical report then the Trust will have no alternative but to make a decision regarding an employee's absence/s based on the evidence available.
- 12.3.5 Where Occupational Health makes recommendations in order to facilitate a return to work, or in order to sustain regular attendance, these should be recorded and reviewed prior to a return to full duties.

12.4 Trigger Points – Irregular Attendance and Long Term Absence

- 12.4.1 Trigger points are agreed levels of sickness absence which, when reached, will trigger management action. When someone is approaching a trigger point, it may be an early indication of a problem and line managers should informally discuss an employee's attendance record with them, including reminding them of the standards expected and of the support and interventions available to bring attendance to satisfactory levels.
- 12.4.2 Pregnancy related absences will be disregarded for all trigger point purposes.
- 12.4.3 Before considering action line managers should consider each case on its merits and take account of:
 - Isolated illnesses/accidents that should not lead to formal action in an otherwise good attendance record.
 - Staff who are disabled, where special consideration may have to be given to a higher level of absence as a reasonable adjustment.

- Whether the absence has resulted from an occupational injury or illness (including vomiting and diarrhoea), in these circumstances further action may not be appropriate.
- Whether the absence is related to pregnancy or an assault in connection with their duties, in which case no further action should be taken, however OH referral, meetings and on-going support will be facilitated to support the individual. Where absence following an injury at work becomes protracted the long term sickness procedure should be followed.
- Terminal Illness

12.4.4 The Bradford Score is a diagnostic tool that assists in identifying frequent short term absences. This is calculated by multiplying the square of the number of absences over the previous twelve months by the total number of calendar days lost.

For example:

Five periods of one day	$5 \times 5 = 25 \times 5 \text{ days} = 125$
Five periods of 5 days	$5 \times 5 = 25 \times 25 \text{ days} = 625$

Bradford Factor scores of below 150 should be discussed with employees during return to work meetings and / or supervision and are considered to be informal interventions; these should be recorded on individual supervision records.

12.4.5 The Trust considers the following trigger points as indicators that formal procedures should be considered and instigated:

- A Bradford Factor score of 150 or more;
- 4 or more occasions within a rolling 12 month period;
- A clear pattern of absence (e.g. days off adjoining, or immediately preceding or following; weekends, days off or annual leave, or days falling on the same day(s) of the week / time of year i.e. Mondays / festive holidays);
- Intermittent absence due to an underlying health condition where the reasons for absence are directly connected to that condition;
- A continuous period of 4 weeks' absence;
- where an employee is in attendance at work but has an underlying health condition which means they have been unable to undertake the full duties of their role for a continuous period of 4 weeks or more

12.4.6 Trigger points do not preclude the instigation of sickness absence management procedures where a 'trigger' may not have been reached but the nature of absence, health reason or attendance at work give cause for concern.

12.5 Stage 1 – First Formal Absence Meeting

12.5.1 If the level of absence does not improve following informal management interventions and there continues to be concerns regarding the irregular attendance or long term absence triggers a formal sickness absence meeting should take place between the relevant line manager and the employee

12.5.2 The Line Manager should ensure that the employee is notified in writing of the nature of the meeting, details of their absences and provide them with the opportunity to be accompanied by either an accredited recognised staff/trade union representative or work colleague. A minimum of 5 calendar days' notice should be given prior to the meeting, unless there is mutual agreement to bring forward the meeting. In the meeting, the following points will be discussed:

- Reference to previous return to work interviews and supervision discussions regarding absence including contact maintained during long term absence(s);
- The number, nature and duration of the sickness absence(s) and any underlying issues over the period that has been monitored;
- Update on any medical interventions or treatments that have been recommended and the prognosis of a return to work (where appropriate);
- The standards of attendance required and the consequences of continued regular or enduring absence;
- Confirmation of referral to Occupational Health and / or outcome of any Occupational Health report and recommendations;
- Any support and assistance, including adjustments to the role or phased return to work arrangements that have been recommended (including redeployment – see Section 3);
- Any mitigating or extenuating circumstances that need to be considered.
- Confirmation of a period of review (appropriate to the circumstances) following which either no further action will be taken or a further Stage 2 meeting will be convened.

12.5.3 Details of this formal sickness meeting with the duration of the review period (which should not normally exceed a 3-month period) should be recorded by the Line Manager and be placed on file and a copy provided to the employee and the HR department.

12.5.4 If during the review period it is evident through further sickness absence, that the required significant improvement is not evident or a return to work has not been achieved or sustained, the Line Manager should initiate the Stage 2 of the procedure. It is not necessary to wait until the end of the review period to instigate the next stage of the procedure where absence continues to be a cause for concern.

12.6 Stage 2 – Formal Absence Review Meeting

12.6.1 If the level of absence has not improved during the Stage 1 review period and / or long term absence has continued a second formal sickness absence meeting should take place between the relevant line manager and the employee

12.6.2 The Line Manager should ensure that the employee is notified in writing of the nature of the meeting, details of their absences and provide them with the opportunity to be accompanied by either an accredited recognised staff/trade union representative or work colleague. A minimum of 5 calendar days' notice should be given prior to the meeting, unless there is mutual agreement to bring forward the meeting. In the meeting, the following points will be discussed:

- Reference to previous Stage 1 meeting discussion and outcomes;
- The number, nature and duration of the sickness absence(s) and any underlying issues over the subsequent period that has been monitored;
- Update on any medical interventions or treatments that have been recommended and the prognosis of a return to work (where appropriate);
- Confirmation of further referral to Occupational Health and / or outcome of any Occupational Health report and recommendations, including any implications under the Equality Act 2010;
- Any support and assistance, including adjustments to the role or phased return to work arrangements that that have been recommended (including redeployment – see Section 3);
- Any mitigating or extenuating circumstances that need to be considered.
- Confirmation that continued irregular attendance and / or long term absence cannot be sustained and that a failure to improve, return or sustain attendance during the review period may result in the termination of employment.
- Confirmation of a period of review (appropriate to the circumstances) following which either no further action will be taken or a further, final, Stage 3 Final Formal Absence Hearing will be convened which may result in the termination of employment.

12.6.3 Details of this formal sickness meeting with the duration of the review period (which should not normally exceed a 3-month period) should be recorded by the Line Manager to be placed on file and a copy provided to the employee and the HR department.

12.6.4 If during the review period it is evident through further sickness absence, that the required significant improvement is not evident, or a return to work has not been achieved or sustained the employee will be advised that the matter will progress to the third, final formal stage of the management of sickness absence / ill health procedure and that should attendance fail to improve and a return to work be achieved and sustained, that a possible outcome of this meeting may be the termination of their employment.

12.7 Stage 3 – Final Formal Absence Hearing

12.7.1 If there is no significant improvement in the level of attendance or where a return to work (or full duties) has not been achieved or sustained, a final formal absence hearing will take place. It may be necessary to refer the employee to Occupational Health prior to a final meeting. The employee will have the right to be accompanied at the hearing by an accredited staff side representative or a work colleague. A minimum of 10 calendar days' notice should be given prior to the meeting, unless there is mutual agreement to bring forward the hearing.

12.7.2 If the level of absence has not significantly improved and / or a return to work has not been achieved or sustained and / or reasonable adjustments (including redeployment) have been considered but are not achievable despite Occupational Health recommendations and any mitigating circumstances being taken into account, a termination of employment will be formally considered at this stage.

The hearing will be conducted by an appropriate Hearing Manager (with the authority to dismiss), in accordance with the procedure set out in Appendix 5. The employee will have the right to be accompanied at the final absence hearing by an accredited staff / trade union representative or current work colleague of their choice.

The employee's line manager will attend and present a statement of case outlining the factors considered at Stage 1 and Stage 2 detailed above and any recommendation regarding termination of employment. The management statement of case will include any evidence or documents referred to and will be shared with the employee, and their representative a minimum of 10 calendar days' before the date of the final absence hearing.

The employee or accredited staff/trade union representative will be given the opportunity to state their case and to question the case presented by the line manager.

An HR Adviser will be in attendance at the Final Formal Absence Meeting to provide advice, guidance and support to the Hearing Manager on procedure and best practice.

12.7.3 At the Final Formal Absence Hearing the Hearing Manager may decide:

- That satisfactory attendance and / or return to work has been achieved and no further action is required.
- That further investigation or information is required, in which case the Hearing will be adjourned and re-convened.
- To issue a final written warning (for up to 18 months) during which time absence and attendance will be regularly reviewed and if improvement in attendance is not sustained a further Final Formal Absence Hearing will be convened.
- To dismiss the employee from employment, with notice, on the grounds of capability (health) or for Some Other Substantial Reason.

In all cases the employee will be informed of this decision in writing within 5 working days of the outcome of the meeting and will be informed that they have the right of appeal as set out in the Appeals Procedure.

12.7.4 The review timescales in this procedure may be shortened or lengthened by managers on their assessment of the circumstances but they must operate the policy fairly and consistently documenting the reasons for their actions.

12.7.5 If an employee fails to, or is unable to, attend a final absence hearing, for a protracted period they will be informed that the Hearing will proceed and that a decision will be taken in their absence. An accredited staff side representative may attend the meeting to speak on the employee's behalf or they may submit written representation for consideration

12.8 The employee will be informed of the outcome of the Final Absence Hearing in writing within 5 working days of the outcome of the hearing and will be informed that they have the right of appeal as set out in the outcome letter and will cite details of the individual to whom to write to with grounds of appeal. Appeals must be lodged within 10 working days of the receipt of written notification of the sanction / outcome. For further details of the appeal procedure please refer to the Trust's Appeals Procedure

12.9 In respect of long term sickness absence cases need to be managed accordingly and concluded within 12 months. Set out in Agenda for Change terms and conditions are provisions for sick pay for those who have exhausted sick pay entitlements and states that this should be reinstated at half pay, after 12 months of continuous sickness absence, in the following circumstances:

- staff with more than 5 years' reckonable service: sick pay will be reinstated if sick pay entitlement is exhausted before a final review meeting for long term absence has taken place;
- staff with less than 5 years' reckonable service: sick pay will be reinstated if sick pay entitlement is exhausted and a final review does not take place within 12 months of the start of their sickness absence.

13.0 MONITORING OF IMPLEMENTATION AND GOVERNANCE

13.1 This procedure is subject to review as per the Trust HR policy and procedure review schedule and as agreed by the Trust's Partnership Committee.

13.2 Compliance with this procedure will be against the Trust's agreed minimum requirements/standards as detailed within its Auditable Standards and Monitoring Arrangements.

14.0 POLICY REFERENCES /ASSOCIATED DOCUMENTATION

- Employment Rights Act 1996
- Equality Act 2010
- Working Time Regulations 1998
- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Act 1999
- Working time (Amendment) Regulations 2003

15.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES

This procedure should be read in conjunction with other policies in place that may be relevant. These include:

- Employee Wellbeing and Management of Sickness and Absence Policy
- Management of HIV/AIDS in Employment Procedure
- Management of Staff with a Drug, Alcohol or Substance Misuse Problem Procedure
- Management of Stress Procedure
- Professional Codes of conduct
- Flexible Working Policy
- Adverse Incidents (including SIs)
- Occupational Health Procedure

END