



Title:	Attendance Management Procedure		
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1.0 Introduction and Objectives

1.1 Introduction

- 1.1.1 The Northern Ireland Ambulance Service HSC Trust (hereafter referred to as 'the Trust') recognises that the health and wellbeing of its workforce is critical to its effective functioning and that the management of attendance is an important management issue which requires to be pursued in an open and transparent manner.
- 1.1.2 In this context, the Trust, as an employer, has a duty to support staff when they become ill, facilitating them, in so far as is reasonably practicable, to safely return to and remain in work as early as they can. The Trust also has a responsibility to actively encourage a culture of health and wellbeing within the workforce, while equally expecting employees to take personal responsibility for their own health and wellbeing.
- 1.1.3 The Trust has a primary responsibility to provide high quality services to the population of Northern Ireland. The Trust recognises that sickness absence places additional pressure on employees who are not affected by illness and carries a significant financial cost which draws resources away from service delivery. This procedure is intended to ensure effective attendance management in accordance with the Regional Policy Framework for Best Practice for Managing Attendance, the Trust's Policy on Attendance Management, NHS terms and conditions, relevant legislation and evidence based best practice principles.

1.2 Objectives

This procedure aims to:

- 1.2.1 Detail the roles and responsibilities of key stakeholders in attendance management.
- 1.2.2 Support employees in taking personal responsibility for achieving and maintaining good attendance by making clear their obligations and the importance of good attendance.
- 1.2.3 Ensure that employee attendance is managed in a fair, reasonable, consistent, transparent and proactive manner, taking into account individual circumstances, by providing clear guidelines for monitoring and managing attendance.

- 1.2.4 Improve the health and wellbeing of employees by promoting the facilitation of appropriate initiatives which enable employees to return to and/or to remain in work.
- 1.2.5 Minimise the impact and cost of sickness absence to the Trust by encouraging a culture of health and wellbeing and ensuring a focus on early intervention and rehabilitation in attendance management arrangements.
- 1.2.6 Comply with the Regional Policy Framework for Best Practice for Managing Attendance, the Trust's Policy on Attendance Management, NHS terms and conditions, relevant legislation and evidence based best practice principles.

2.0 Key Principles

- 2.1 Employees who are unwell will be treated with dignity and respect in the application of this procedure.
- 2.2 Line managers and Trade Unions will receive comprehensive training and professional advice and guidance in applying this procedure.
- 2.3 Early intervention and regular, effective communication by line managers are key to implementing this procedure.
- 2.4 Sickness absence must be recorded accurately for all employees using the Trust's Human Resources, Payroll and Travel System (HRPTS). This ensures correct processing of pay and supports consistent monitoring and reporting of sickness absence across all employee groups.
- 2.5 For the purposes of this procedure the following definitions apply:
 - Short-term sickness absence** is likely to be one day up to a week, but can extend up to four calendar weeks;
 - Long-term sickness absence** is continuous absence of four calendar weeks or more.

Please note that these definitions do not relate to trigger points for further management action.
- 2.6 The management of absence in specific circumstances covered by legislation (see Appendix 1) will be in accordance with the relevant legislation and recommended good practice.

- 2.7 In particular, in the case of employees with a disability, the Trust will ensure compliance with its statutory duty to make reasonable adjustments. Reasonable adjustment plans will be developed, agreed and implemented by line managers in consultation with the employee and their representative, the Human Resources Department, the Occupational Health Service and relevant external organisations where appropriate.

3.0 Roles and Responsibilities

All Trust employees play a fundamental role in relation to managing attendance and have key responsibilities in relation to attendance at work. Moreover, some employee groups have additional specialist roles and responsibilities in ensuring effective attendance management. It is the expectation of the Trust that all employees adhere to their responsibilities as detailed in this procedure.

3.1 All Trust Employees' Responsibilities

- 3.1.1 Ensure regular and effective attendance at work.
- 3.1.2 Take personal responsibility for their own health and wellbeing.
- 3.1.3 Be aware of their obligations under this procedure, as well as the importance of good attendance and the impact and consequences of poor attendance.
- 3.1.4 Understand that the HSC Sick Pay Scheme is intended to support employees who are impacted by ill-health and not to be used for other purposes, such as caring responsibilities. The Trust has established other policies to provide support to employees in dealing with these issues, eg Work Life Balance Policies.
- 3.1.5 Where absence is due to an injury at work, comply with Incident Reporting Procedures.
- 3.1.6 Notify their line manager of their absence from work in accordance with **Section 4: Notification of Sickness Absence**.
- 3.1.7 Ensure that appropriate certificates in relation to their absence are forwarded to their line manager in accordance with **Section 5: Certification of Sickness Absence**.
- 3.1.8 Co-operate with contact arrangements with their line manager in accordance with **Section 6: Keeping in Touch During Sickness Absence**.

- 3.1.9 Attend Occupational Health Service appointments as requested. Employees must attend such appointments on time and, if for some reason they cannot attend, must contact their line manager as early as possible to explain the reason for non-attendance. The line manager will, if considered appropriate, re-schedule the appointment. Employees should not contact either the Occupational Health Service or the HR Department in this regard as appointments cannot be re-scheduled at the request of staff without line manager approval.
- 3.1.10 Participate in case conference meetings as requested and assist in the development of return to work, rehabilitation and reasonable adjustment plans with line managers and other key stakeholders as appropriate.
- 3.1.11 Refrain from any activity (eg social or sporting) whilst on sickness absence, which may be prejudicial to their recovery or be likely to bring into question the reason for continued absence.
- 3.1.12 Refrain from working elsewhere, in paid or unpaid employment, whilst on sickness absence from the Trust. However, if an employee has more than one job, either with the Trust or an alternative employer, and their GP considers, in the context of their medical condition, that this work may be beneficial to their recovery, the employee should advise the line manager at the outset of their absence and provide appropriate documentary evidence from their GP. The Manager may seek an assessment from the Occupational Health Service regarding the employee's fitness for other work in these circumstances. Employees who are found to be working elsewhere and have not complied with these requirements may have their pay withheld and/or be subject to disciplinary proceedings.
- 3.1.13 Be aware that taking a holiday whilst on sickness absence may call into question the genuineness of their illness. However, if the employee intends to take a holiday and their GP considers, in the context of their medical condition, that this is not incompatible with their illness and may be beneficial to their recovery, the employee should advise the line manager as soon as possible, giving dates and location. Appropriate documentary evidence from their GP may be required. The line manager may also seek advice from the Occupational Health Service in this regard. Employees who have not complied with these requirements may have their pay withheld and/or be subject to disciplinary proceedings. Employees should note that, in some circumstances, holidays outside of the EU may preclude the payment of Statutory Sick Pay (SSP).
- 3.1.14 Not remain away from work on sickness absence, where adjustments/modifications could be made to facilitate their return.

- 3.1.15 Participate in return to work meetings in accordance with **Section 7: Return to Work following Sickness Absence**.

3.2 Line Managers' Responsibilities

Line managers are expected to monitor and manage employees' attendance; this is a fundamental and legitimate aspect of a line manager's role.

When an employee's attendance is affected by sickness absence, this situation demands a sensitive, reasonable and fair approach, consistent with attendance management principles. If sickness absence is handled poorly, or worse still ignored, this can lead to feelings of resentment, disinterest and discontent amongst all staff.

Line managers must adopt a proactive approach to monitoring and managing employees' attendance in order to support staff in feeling valued.

To this end, line managers have the following responsibilities:

- 3.2.1 Promote a culture of health and wellbeing throughout the Trust.
- 3.2.2 Encourage employees to avail of health and wellbeing initiatives, such as flu vaccination clinics, and, where possible, facilitate attendance.
- 3.2.3 Ensure that all employees are aware of all their obligations under this procedure, highlighting the importance of good attendance and the impact and consequences of poor attendance.
- 3.2.4 Manage absence in accordance with this procedure by recording, monitoring and assessing employee sickness absence levels and taking timely and appropriate action as required.
- 3.2.5 Ensure that employees adhere to notification, certification and keeping in touch procedures and that appropriate arrangements are established and communicated to employees in the event that the line manager is not available.
- 3.2.6 Process sickness absence notifications/certifications and maintain accurate sickness absence records on HRPTS in a timely manner. This is to ensure that employees are paid correctly during periods of sickness absence and that statistical sickness absence reports are accurate.
- 3.2.7 In consultation with the employee, make referrals to the Occupational Health Service as appropriate. In support of the principle of early intervention, this would normally be initiated where sickness absence has lasted, or is expected to last, for four calendar weeks or more, except in extenuating circumstances.

Moreover, in the following cases, an immediate referral to the Occupational Health Service is appropriate:

- Musculo-skeletal;
- Injury at work;
- Sickness absence following maternity leave.

- 3.2.8 Ensure Trust Incident Reporting Procedures are followed as soon as it becomes known that an employee has suffered an injury and/or other condition associated with their employment; consider what additional support the employee may require and take appropriate action.
- 3.2.9 Maintain regular and effective contact with employees on sickness absence, the frequency of which will depend on the individual circumstances of the absence; however, initial contact should normally be made by an appropriate line manager within the first three days of absence and at regular intervals thereafter. In addition, contact should be scheduled to coincide with the approach of half- and no-pay stages.
- 3.2.10 Seek specialist advice and guidance from the Human Resources Department and the Occupational Health Service in relation to specific cases, including participating in case management meetings.
- 3.2.11 Arrange and participate in case conference meetings with representatives from the Human Resources Department, the Occupational Health Service, the employee and the employee's representative.
- 3.2.12 Consider, develop and agree rehabilitation and/or reasonable adjustment plans to support employees in returning to and/or remaining in work. These may be informed by the employee, the GP Fit Note and/or the Occupational Health Service report. Further advice may be sought from the Occupational Health Service, the Human Resources Department or relevant external organisations, eg Employers for Disability. Where adjustments are considered reasonable, they should be implemented at the earliest opportunity and reviewed regularly in consultation with the employee to ensure continued effectiveness. A record of any adjustments, including any reviews, should be retained and communicated to the employee.
- 3.2.13 Undertake Return to Work meetings with employees in a timely manner in accordance with **Section 7: Return to Work following Sickness Absence**.
- 3.2.14 Where necessary, initiate appropriate action in accordance with the Trust Disciplinary Procedure to deal with misconduct in relation to employee attendance, eg in cases of abuse of sick pay provisions or failure to comply with the Trust's Attendance Management Procedure.

3.3 Role of the Human Resources Department

- 3.3.1 Working in partnership with key stakeholders, lead the development of health and wellbeing initiatives.
- 3.3.2 In consultation with key stakeholders, lead the monitoring and review of the effectiveness of this procedure in accordance with emerging legislation and best practice.
- 3.3.3 Develop and deliver communication and training programmes to support the implementation of this procedure.
- 3.3.4 Provide Trust Board, Senior Executive Management Team and Senior Managers with meaningful management information reports at agreed intervals to monitor sickness absence levels across the Trust, progress against sickness absence targets and compliance with this procedure.
- 3.3.5 Provide consistent, professional advice and guidance to Managers and employees in relation to health and wellbeing and attendance management issues.
- 3.3.6 Participate in case management meetings with Managers and the Occupational Health Service to review and progress complex sickness absence cases.
- 3.3.7 Participate in case conference meetings with Managers, the Occupational Health Service, the employee and the employee's representative.
- 3.3.8 Provide consistent, professional advice in the development of rehabilitation and/or reasonable adjustment plans.
- 3.3.9 Provide consistent, professional advice in relation to procedures for ill health retirement and ill health termination.
- 3.3.10 Co-ordinate the process for ill health retirement applications.
- 3.3.11 Arrange Ill Health Termination Appeal Hearings on receipt of written requests from employees.
- 3.3.12 Provide advice on and co-ordinate the process for injury allowance applications.

3.4 Role of the Occupational Health Service

- 3.4.1 To provide medical advice, carry out assessment of physical and psychological ill health and provide advice to management on fitness for work and rehabilitate back to work.
- 3.4.2 Provide advice on fitness for work in relation to an employee who has health issues which may be affecting their attendance, performance or behavior in the workplace.
- 3.4.3 With the employee's consent, provide confidential reports to the line manager in respect of the employee's fitness for work, including recommendations where appropriate.
- 3.4.4 Provide advice in relation to rehabilitation/phased return programmes, adjustments/modifications plans and redeployment.
- 3.4.5 Liaise with the Human Resources Department in relation to complex cases.
- 3.4.6 Participate in case management meetings with line managers and the Human Resources Department.
- 3.4.7 Participate in case conference meetings with line managers, the Human Resources Department, the employee and the employee's representative.
- 3.4.8 Provide advice on the attribution of ill-health in employee applications for Injury Allowance.
- 3.4.9 Provide advice and, where appropriate, completes medical evidence on employee applications for retirement on the grounds of ill-health.
- 3.4.10 Provide confidential support, health education and advice to employees.
- 3.4.11 Provide health awareness/health improvement training as appropriate.
- 3.4.12 Provide rapid access physiotherapy to employees with a musculoskeletal injury which is impacting on their work.

3.5 Role of Trade Unions

- 3.5.1 Engage with the Trust in the development of health and wellbeing initiatives and attendance management policy, procedures and practices;

- 3.5.2 Provide support to individual employees in relation to health and wellbeing and attendance management issues;
- 3.5.3 Promote employee compliance with agreed attendance management arrangements.
- 3.5.4 Participate in attendance management meetings at the request of the employee.

4.0 Sickness Absence Notification

- 4.1 An employee who is unable to report for work due to sickness must notify their line manager, or in their absence a nominated contact person, as early as possible on the first day of absence. As much advance notice as possible should be given before the employee's normal starting time to enable cover arrangements to be made.
- 4.2 The employee must make the contact personally and by telephone; text messages or emails are not acceptable. In exceptional circumstances, contact may be made by another person, eg in the case of hospitalization of the employee.
- 4.3 The employee must indicate the reason and expected duration of the sickness absence and whether or not they have contacted their GP. Failure of an employee to notify their line manager of the nature of their sickness absence may result in the withholding of sick pay.
- 4.4 The line manager must record and update the employee's sickness absence record on HRPTS. On the employee's return to work, the sickness absence dates should be confirmed by the Manager during the return to work meeting to prevent any under-/over-recording of absence. Any discrepancies should be amended and Payroll Shared Services Centre notified accordingly.

5.0 Sickness Absence Certification

- 5.1 Under the terms of the Trust's Occupational Sick Pay Scheme, employees are required to submit the following certification to their line manager:

1-3 calendar days' sickness absence: No certification required
4-7 calendar days' sickness absence: Self-certification required
8th calendar day of sickness absence: Medical certificate required

- 5.2 Certificates (either the original or a copy) must be forwarded to the line manager who will record/update the employee's sickness absence record on HRPTS and retain the certificate. Certificates must cover the whole period of sickness absence.
- 5.3 The employee must keep in regular contact with their line manager and inform them prior to their certificate expiry date of the current state of their health and whether they are fit to return to work. If a new certificate is required, this must be forwarded to the line manager within three working days of the expiry of the previous certificate. Statutory Sick Pay (SSP)/ Occupational Sick Pay (OSP) cannot be paid if certificates are not received on time.
- 5.4 If an employee fails to submit a certificate, the line manager, after three working days of the expiry of the previous certificate, should:
- 5.4.1 Attempt to contact the employee by telephone to ascertain the reason for the failure to submit the appropriate certificate.
- 5.4.2 If contact is made, the line manager must decide if the reason given by the employee is acceptable. If it is not considered acceptable, the line manager should discuss with their senior manager whether the employee's pay should be stopped.
- 5.4.3 If contact is unable to be made, the line manager should write to the employee advising that failure to make contact and/or to produce a certificate by a set date may lead to withholding of pay.
- 5.4.4 If a decision is taken to stop pay, the line manager must advise the staff member immediately and follow this up in writing. The line manager must also advise the Human Resources Department and Payroll Shared Services Centre of the decision in writing and without delay to ensure correct processing of pay.
- 5.5 Employees should be aware that continued absence from work without appropriate certification will be deemed as unauthorised absence and may be managed in accordance with the Trust's Disciplinary Procedure.

6.0 Keeping in Touch during Sickness Absence

- 6.1 An employee must keep in touch with their line manager during a period of sickness absence to ensure they are updated on their progress and when they are likely to return to work. If an employee fails to maintain contact and/or to respond to contact from their line manager, disciplinary action may be considered.

- 6.2 An action plan regarding continuing contact/return to work must be agreed between the employee and their line manager when the sickness absence is first notified.
- 6.3 Throughout the period of sickness absence, it is acceptable for the line manager to contact the employee when they deem it appropriate, eg to seek feedback on progress, offer support, or discuss relevant work matters if necessary.
- 6.4 Pre-arranged annual leave will normally be re-instated during periods of sickness absence. However, in cases of sickness absences occurring during a period of annual leave, the employee must formally notify their line manager on the first day of their sickness absence, advise when they are fit to resume duties and provide appropriate certification for the period of sickness absence, in order for annual leave to be reinstated.
- 6.5 Employees are not entitled to accrue public/bank holiday leave while on sickness absence.

7.0 Return to Work following Sickness Absence

- 7.1 An employee may only return to work once they are fit to do so. If a line manager has any concerns about an employee's fitness for duty on their return to work, they may delay the return pending advice from the Occupational Health Service. Such a decision will be dependent on the particular individual circumstances and such cases, the employee may be given special leave with pay, pending receipt of this advice.
- 7.2 If there is conflicting medical advice between the employee's GP and the Occupational Health Service, efforts should be made to resolve the matter by seeking further information or clarification. However, it should be noted that Occupational Health Service advice at the appropriate level takes precedence.
- 7.3 Following each period of sickness absence, the line manager will undertake a return to work meeting with the employee. The meeting will be conducted from both a welfare and an attendance management perspective.
- 7.4 Return to work meetings should normally be undertaken on the day of return, or as soon as practically possible, and in a confidential setting. Normally this would involve only the line manager and the employee.
- 7.5 Although these meetings are informal in nature, a record should be retained.

- 7.6 In all instances the line manager should:
- welcome the employee back to work;
 - reassure the employee that their contribution has been missed;
 - provide an update on work related issues.
- 7.7 Depending on the reason for sickness absence, the line manager should also discuss any ongoing difficulties in or outside of work and/or medical conditions which may result in further absence.
- 7.8 Any agreed rehabilitation and/or reasonable adjustment plans should also be clarified and confirmed.
- 7.9 If an employee's sickness absence record is causing concern, the employee should be made aware of this. The line manager should highlight the impact of the absence, discuss the improvement required and advise that continued poor attendance may lead to action being taken, as described in the remainder of this procedure.

8.0 Management of Sickness Absence during the Probationary Period

- 8.1 Where sickness absence during the probationary period gives cause for concern, line managers should clearly communicate this to the employee at the earliest opportunity.
- 8.2 The line manager should ascertain whether there are any underlying medical or work related issues contributing to this absence, and refer the employee to the Occupational Health Service if necessary.
- 8.3 The line manager should take individual circumstances into account and, in particular, be mindful of any sickness absence which is associated with a disability or is pregnancy-related. However, in general:
- 8.3.1 Following two periods of sickness absence during the probationary period, the line manager should notify the employee in writing that their sickness absence is giving cause for concern and that, should there be a further period of sickness absence, it is possible that they will not be confirmed in post.
- 8.3.2 Following a third period of sickness absence, the line manager should consider extending the probationary period by between one to three months duration. The employee should be advised that if there is a further period of sickness absence during the initial or extended probationary period, it is possible that they will not be confirmed in post, which may result in termination of their employment.

9.0 Management of Short-Term/Recurrent Sickness Absence

9.1 Line managers should be alert to any potential patterns of sickness absence and take appropriate action where these raise concern. It is important that line managers establish the cause of each episode of sickness absence at an early stage and understand each individual's circumstances. Discretion should be used in all cases, taking account of individual circumstances while striving to ensure a consistent and fair approach for all employees.

9.2 Recurrent short-term sickness absence may indicate a pattern which gives cause for concern. For example:

- sickness absence associated with particular rota arrangements;
- sickness absence associated with particular periods of time, eg weekends, public/bank holidays;
- recurrent reasons for sickness absence;
- extensive use of uncertified/self-certified absence.

This list is not exhaustive.

9.3 Employees should be kept advised at every stage of this procedure of the impact and consequences of continued poor attendance, which may ultimately result in dismissal. Such discussions should be documented and any action proposed/taken to manage the employee's attendance should be followed up in writing to the employee.

9.4 While line managers are required to exercise judgement in relation to individual circumstances, normally three episodes of absence OR less than three episodes totaling 10 working days within any rolling 12 month period should prompt consideration of appropriate action, which could be one or a combination of the following:

Advise the employee that their sickness absence record in the preceding 12 months is giving cause for concern. Highlight the impact of these absences and emphasise the importance of good attendance. Advise the employee that any further episodes of sickness absence in a 12 month rolling period may result in the issue of an informal warning and confirm this in writing to the employee.

Establish if there any underlying reasons or difficulties, such as medical, domestic or work-related, which are contributing to the sickness absence and discuss any steps which could be taken to alleviate such problems. This may include referral to the Occupational Health Service.

Discuss how the attendance could be improved, which may involve considering support measures such as a reduction in hours (including overtime), taking planned time off (unpaid or annual leave) or applying for other work life balance arrangements.

Use discretion – line managers are required to use their judgement when managing attendance, taking into account individual circumstances in all cases. In particular, where absence is associated with circumstances covered by legislation (see Appendix 1), line managers must comply with the relevant legislation and recommended good practice.

9.5 Short-Term/Recurrent Sickness Absence where no Medical Condition Exists

9.5.1 The following process is appropriate if the sickness absence is not associated with specific circumstances covered by legislation (see Appendix 1) and there is no other underlying medical condition as assessed by the Occupational Health Service.

9.5.2 However, if at any stage an underlying medical condition is identified and confirmed by the Occupational Health Service, the line manager must follow the process as outlined in **9.6: Short Term/Recurrent Sickness Absence caused by a Medical Condition**.

9.5.3 Every stage in this process should be followed up in writing to the employee.

9.5.4 If an employee has a fourth episode of sickness in a rolling 12 month period, the line manager may consider it appropriate to initiate further action in accordance with the principles of the Trust's Disciplinary Procedure as follows:

9.5.5 Informal Stage

If there is no identified improvement in attendance and there is no underlying medical condition, consider the issue of an informal warning.

9.5.6 Formal Stage 1

If there is no identified improvement in attendance after the issue of an informal warning and there is no underlying medical condition, consider the issue of a formal warning.

9.5.7 Formal Stage 2

If there is no identified improvement in attendance after the issue of a formal warning, consider the issue of a final warning.

- 9.5.8 Formal Stage 3
If there is no identified improvement in attendance after the issue of a final warning and there is no underlying medical condition, consider dismissal.
- 9.5.9 In accordance with the principles of the Trust's Disciplinary Procedure, the employee has the right to appeal the outcome of each stage of this process.
- 9.5.10 In accordance with the principles of the Trust's Disciplinary Procedure, the employee has the right to be accompanied by a trade union representative or work colleague at each stage of this process.

9.6 Short Term/Recurrent Sickness Absence caused by a Medical Condition

- 9.6.1 If it is established that the sickness absence is caused by an underlying medical condition as confirmed by the Occupational Health Service, the following process should be followed by the line manager.
- 9.6.2 Assess the facts of the situation, ie:
- the proportion of time actually absent;
 - when or how work performance is affected;
 - the Occupational Health Service assessment of the employee's fitness to carry out the duties of the post.
- 9.6.3 Based on the above information, the line manager may have to consider whether any adjustments/modifications, as recommended by Occupational Health Service, can be facilitated to allow the employee to remain in their current post (see **10.9 Adjustments/Modifications**)
- 9.6.4 If adjustments/modifications cannot be facilitated, the line manager should consider whether redeployment on health grounds is an option, in consultation with the employee, the employee's representative, the Human Resources Department and the Occupational Health Service (see **10.10 Redeployment on Health Grounds**)
- 9.6.5 If adjustments/modifications can be facilitated, they should be implemented at the earliest opportunity and reviewed regularly to ensure continued effectiveness. A record of any adjustments/modifications, including any reviews, should be retained and communicated to the employee. If there is no improvement in attendance following implementation, the line manager should consider other options, including further adjustments and/or redeployment, in consultation with the employee, the employee's representative, the Human Resources Department and the Occupational Health Service.

9.6.6 There may be some cases where termination of employment on ill-health grounds/ill-health retirement may have to be considered ie where adjustments/modifications and/or redeployment is not possible or where adjustments/modifications and/or redeployment have not resulted in an improvement in attendance (see **10.11 Termination of Employment on the Grounds of Ill Health**).

9.6.7 Employees must be made aware in writing of all possible options. If termination of employment is a possibility, this should be raised at as early a stage as possible. All options should be discussed via a meeting between the employee and their line manager and followed up in writing. The Human Resources Department is available to provide professional advice and guidance as appropriate.

10.0 Management of Long-Term Sickness Absence

10.1 There are times when ill health will cause longer periods of sickness absence.

10.2 Long-term sickness absence requires careful handling and particular consideration of legislation in relation to disability discrimination and sex discrimination, where absence is pregnancy-related. Nevertheless, long-term sickness absence requires to be actively managed.

10.3 In all instances of long term sickness absence, the line manager will be responsible for keeping staff appropriately informed of any major changes in the workplace during their absence.

10.4 The line manager should also ensure that staff on long term sickness absence are offered any relevant support services which may be available to assist their return to work at the earliest opportunity.

10.5 As soon as a long-term sickness absence is identified, the line manager must refer the employee to the Occupational Health Service and subsequently notify the employee of the appointment by telephone, followed up in writing.

10.6 The line manager must discuss the contents of the referral with the employee prior to forwarding to Occupational Health Service. This should normally be done by telephone or, if necessary, during a face to face meeting.

10.7 Following the employee's appointment with the Occupational Health Service, a confidential report will be provided to the line manager and copied to the Human Resources Department. The line manager should contact the employee to discuss the contents of the report, including the implementation of any recommendations made.

10.8 Rehabilitation/Phased Return

- 10.8.1 Occupational Health Service may recommend that the employee is fit to return to their current post under rehabilitation/phased return arrangements. Under these arrangements, an employee could be offered various measures to help 'ease' them back to work. Such measures could include: access to specific treatment interventions, eg physiotherapy or counselling; reduced hours; restricted/alternative duties within their own/another department.
- 10.8.2 Occupational Health Service will recommend the duration of the rehabilitation/phased return period. Line managers are encouraged to be supportive of the rehabilitation/phased return period and will be expected to determine the actual arrangements with the employee, in accordance with Occupational Health Service recommendations.
- 10.8.3 If Occupational Health Service recommends an employee returning from long-term sickness absence should return under rehabilitation arrangements involving reduced hours/alternative duties, the employee should receive their normal full pay based on their contracted hours for up to a maximum of 6 weeks following the return to work and will be recorded as being at work during this period.
- 10.8.4 Annual leave may be used to reduce the working week for a further period; however, this will be at the discretion of the line manager. There may be instances where a return from sick leave is close to the end of the annual leave year and the employee has the majority of their annual leave owing; in such cases, it may be considered appropriate for this to be used prior to returning to work and/or to further facilitate a shortened working week.

10.9 Adjustments/Modifications

- 10.9.1 Occupational Health Service may recommend that the employee is fit to return to their current post with adjustments/modifications. The line manager should consider whether the recommended adjustments/ modifications are feasible/practical, in consultation with the employee, their representative, the Occupational Health Service and the Human Resources Department.
- 10.9.2 In considering adjustments/modifications, line managers must be cognisant of the Trust's statutory duty to make reasonable adjustments under disability discrimination legislation.
- 10.9.3 Where necessary, an appropriate risk assessment should be carried out. Depending on the nature and extent of the adjustments/modifications, further

advice may be sought from external organisations, eg The Disability Employment Service.

- 10.9.4 If it is agreed that the adjustments/modifications can be facilitated, they should be implemented prior to the employee returning to work and reviewed regularly to ensure continued effectiveness. A record of any adjustments/modifications, including any reviews, should be retained and communicated to the employee.
- 10.9.5 If the adjustments/modifications cannot be facilitated, the line manager should explore whether alternative adjustments/modifications are feasible/practical in the first instance. If, however, it is agreed that no appropriate adjustments/modifications can be facilitated, the line manager should consider whether redeployment on health grounds is an option, in consultation with the employee, their representative, the Occupational Health Service and the Human Resources Department.

10.10 Redeployment on Health Grounds

- 10.10.1 Occupational Health Service may recommend redeployment of the employee on health grounds as a means of the employee remaining in work. The line manager should actively seek redeployment opportunities within the Trust, in consultation with the employee, their representative, the Occupational Health Service and the Human Resources Department.
- 10.10.2 Redeployment opportunities should be sought initially within the same managerial remit and/or at the same band as the employee's substantive post. However, if this is not feasible, posts within other Trust areas and/or at other paybands (both below and above) should also be considered.
- 10.10.3 In order for the redeployment opportunity to be considered suitable, it must be demonstrated that the employee has the essential knowledge, skills and abilities required of the post, or can readily acquire these.
- 10.10.4 Any search for redeployment opportunities should take place during a time limited period which should not normally exceed 8 weeks from the point when it was agreed that the search should begin.
- 10.10.5 If a redeployment opportunity is secured, payment will be at the appropriate pay band for that post; as such, protection will not apply in the circumstances that the redeployment is to a post of a lower pay band.
- 10.10.6 Redeployments should be formally reviewed after 4 weeks to confirm their suitability.

- 10.10.7 In some circumstances, Occupational Health Service may recommend a temporary period of redeployment to facilitate an employee's return to work.
- 10.10.8 A record should be retained of all discussions in relation to the redeployment process.

10.11 Termination of Employment on the Grounds of Ill Health

- 10.11.1 Termination of employment on the grounds of ill health will be through either:
- a) an application by the employee for ill health retirement under the HSC Pension Scheme; or
 - b) in circumstances where the employee cannot/does not wish to apply for ill health retirement, receipt of advice from the Occupational Health Service that the employee is unlikely to return to work in the foreseeable future and/or the Trust has exhausted all alternative options as outlined above.

Ill Health Retirement

- 10.11.2 Employees who are current members of the HSC Scheme, and have at least 2 years membership, may apply for ill health retirement. There may be occasions when the Occupational Health Service considers an employee unfit due to permanent incapacity and advises that they are a suitable candidate for an ill health retirement application. There may be occasions when the Occupational Health Service does not support an employee's application for ill health retirement. However, the employee retains the right to submit an application in these circumstances.
- 10.11.3 The line manager and a representative from the Human Resources Department should meet with the employee, if possible prior to an application being completed, in order to provide support and guidance in relation to application process and to inform the employee of the implications of applying for ill-health retirement.
- 10.11.4 If the employee decides to apply for ill health retirement, they should notify the Human Resources Department of this decision in writing. The Human Resources Department will co-ordinate the application process, liaising with the employee and the line manager.
- 10.11.5 The employee will be notified by the Human Resources Department of the outcome of their application. If the application is unsuccessful, they will also be notified of their right to appeal the outcome of their application and the procedure for appealing to the HSC Pension Branch.

10.11.6 If the employee's application for ill health retirement is unsuccessful, the Trust will proceed to terminate the contract of employment on the grounds of ill health.

Termination of Employment

10.11.2 The line manager must first inform the employee at as early a stage as possible of their intention to consider terminating their employment on the grounds of ill health and arrange a meeting to discuss, giving appropriate notice; this must be confirmed in writing.

10.11.3 The employee is entitled to be accompanied at this meeting by their trade union representative or a trusted work colleague.

10.11.4 The line manager must confirm the outcome of the meeting to the employee in writing. If the decision is to terminate the employment, the employee must also be advised of their period of notice, their last day of service, their right to appeal the decision and the procedure for appealing. The Human Resources Department is available to provide professional advice and guidance as appropriate.

10.11.5 Employees wishing to appeal the decision should write to the Assistant Director of Human Resources & Corporate Services, stating the grounds of their appeal, within seven working days of receipt of the outcome letter.

10.11.6 An Appeal Panel consisting of the Director of Human Resources & Corporate Services (or nominated deputy) and another Director (or nominated deputy) will be set up to review all the circumstances of the case and reach a decision. Appeal Panel members must have had no prior involvement in the case.

10.11.6 The employee is entitled to be accompanied at the Appeal Hearing by their trade union representative or a trusted work colleague.

10.11.7 The Appeal Hearing will, as far as possible, be:

- organised within 12 weeks of the termination;
- organised in a timescale which allows for proper representation;
- consistent with principles of natural justice.

10.11.8 The Appeal Panel will have the authority to confirm, or set aside, the decision to terminate. Where the decision of the Appeal Panel involves a variation of the original decision, it should state the reasons. The decision of the Appeal Panel is final and will be conveyed in writing to the individual within seven days of the decision being taken.

10.11.9 In the event of reinstatement following an Appeal Hearing, the appropriate back payment will be made, provided the employee was in receipt of Occupational Sick Pay (OSP) and/or Statutory Sick Pay (SSP) at the time of the original meeting.

11.0 HSC Injury Allowance Scheme

11.1 Injury allowance is a top up payment and tops up sick pay, or reduced earnings when on a phased return to work, to 85 per cent of pay for a period of up to 12 months. It is payable when an employee is on authorised sickness absence or on a phased return to work with reduced pay or no pay due to an injury, disease or other health condition that is wholly or mainly attributable to their NHS employment. The Human Resources Department can provide further information regarding the application process for injury allowance.

Appendix 1

Examples of absence associated with circumstances covered by specific legislation:

- Pregnancy related absence;
- Absence directly related to a disability or underlying health condition;
- Absence directly caused by an operation, or similar medical procedure, aimed at correcting the health condition;
- Absence due to reasonable adjustments having been identified but not yet implemented;
- Reasonable absences due to the after effects of infertility treatment or gender reassignment;
- Absence due to injury caused by an assault at work;
- Absence due to an industrial injury;
- Absence due to an accident caused by a third party in certain circumstances;
- Reasonable time off to recover from the adverse effects of bone marrow donation, or similar procedures intended to help someone other than the employee;
- Absence due to a notifiable communicable disease, supported by medical evidence.