

Medway Council Managing Sickness and Absence Policy

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1.0 Introduction

- 1.1 The council believes that employee health and wellbeing at work is a fundamental part of delivering quality services to the public.
- 1.2 There will be times when employees are unable to come to work due to illness or something else that has unexpectedly happened. This policy, and the other leave policies the council has, are there to support employees during these times and help them get well.
- 1.3 Absences will be reviewed and managed, to make sure that employees are getting the right support they need and to try and minimise the impact of absence on delivering services.
- 1.4 This policy should be used in conjunction with the relevant managers guidance and available training.

2.0 Equalities Statement

2.1 Medway Council is committed to providing equal opportunities and access to all. This policy embraces the spirit of managing a diverse workforce and those managing and dealing with sickness matters must ensure that no employee is unlawfully discriminated against either directly or indirectly, harassed or victimised on the grounds of race; ethnicity; nationality; ethnic or national origin; colour; disability; gender identity or presentation; marital or civil partnership status; maternity or pregnancy; family and caring responsibilities; care leaver status; sex; sexual orientation; age; HIV status; religion or belief; political beliefs; social class; trades union activity; or irrelevant spent convictions.

3.0 Core Values

3.1 This policy aims to support the Council's Core Values. The council believes that a consistent and supportive approach to managing sickness absence, whilst promoting health and wellbeing, is a fundamental part of having an engaged, healthy and motivated workforce.

4.0 Scope

4.1 This policy applies to all staff except schools-based staff, centrally employed teachers who are covered by the School Teachers Pay and Conditions Document, all staff employed at short stay schools, previously known as Pupil Referral Units, the Chief Executive and The Section 151 Monitoring Officer.

5.0 Roles and Responsibilities

5.1 Managing sickness absence is a key activity for line managers. Every manager has a responsibility to manage sickness absence in a way that safeguards employee wellbeing whilst considering council resources and service provision.

5.2 This policy aims to ensure that all employees are treated consistently and fairly. The policy, processes and associated guidance provides managers with information and guidance to discuss absence in a supportive and fair way. This information together with wider training and awareness will provide the background for managers and employees to work together to discuss ill health and the support available.

6.0 Employee Responsibilities

- 6.1 Employees responsibilities are to:
 - familiarise themselves with this policy
 - ensure they comply with the reporting absence procedures for any period of absence.
 - understand that failure to adhere to the procedures or following their line managers instructions in relation to their absence may result in disciplinary action and/or suspension of sick pay, and
 - attend any booked Occupational Health appointments, or if they need to be cancelled or rescheduled provide a minimum of three working days' notice.

7.0 Manager Responsibilities

- 7.1 Managers responsibilities are to:
 - monitor and report all sickness absence (including part day absences),
 - continue to support and engage with the employee throughout the period of their absence, utilising the council's occupational health service and employee assistance provider Care First.
 - seek help from HR when required,
 - follow a consistent contact strategy for absences over 7 days,
 - ensure that return to work interviews and subsequent formal meetings are undertaken and recorded.
 - ensure that these procedures are applied consistently and fairly considering individual circumstances, including agreeing reasonable adjustments where applicable,
 - ensure that all staff are made aware of this policy and that they follow the requirements of the sickness absence notification procedure,
 - encourage and support employees to maintain good attendance, through good management practice, and use of other appropriate services,
 - ensure that all employees are aware of the council's confidential employee assistance provider Care first, and
 - undertake a stress risk assessment for their team where applicable.

8.0 HR Responsibilities

- 8.1 HR responsibilities are to:
 - provide line managers with the tools to be able to manage sickness absence, effectively such as training, guidance and up-to-date management information
 - provide line managers with specialist advice on implementing this policy and procedures,

- support line managers when referring employees to Occupational Health, and
- review this policy regularly or where required as per changes in legislation, internal procedures or updates to terms and conditions.

9.0 Management and Trade Unions

- 9.1 Management and the Trade Unions will work collaboratively in the interests of the wellbeing of employees by:
 - co-operating and working together in the implementation of this policy,
 - attending the Corporate Health and Safety Committee to discuss issues and monitor employee wellbeing, and
 - to take and act upon advice from the Health and Safety Executive.

10.0 Care First - Support for Employees and Managers

- 10.1 The council has a free confidential employee assistance provider to support employees, members of their immediate household and managers on any issues that may be concerning them, available 365 days per year.
- 10.2 Line managers can also make a referral to Care First for, or on behalf of, an employee providing they have express permission to do so.
- 10.3 Dealing with sickness cases and managing sickness absence can sometimes be daunting for line managers, in particular dealing with sensitive issues. Advice should be sought if there are any concerns to ensure timely support for employee's health and wellbeing.
- 10.4 As well as the internal HR team, guidance and support on how to approach employees and undertake meetings, such as return to work interviews or formal review meetings, is available from Care First who can guide managers through a number of issues including sickness absence.
- 10.5 Care first can be called on 0800 174319 for 24/7 information and support or can be found online via www.carefirst-lifestyle.co.uk

Username: Med001Password: dway1234

11.0 Absence Reporting

- 11.1 Employees who are unable to come to work for any reason must let their line manager know by phoning them (or video call if appropriate). Texts, emails, messages including those from another person (unless there are mitigating circumstances) are not accepted. This allows for the manager to understand the reason for absence, record it accurately and support the employee.
- 11.2 Employees must follow the absence reporting procedure for every unplanned absence as not doing so will be viewed as an unauthorised absence / absence without leave (AWOL), which could result in pay being stopped and disciplinary action being taken.

11.3 Please refer to the sickness notification guidance document for further information.

12.0 Confidentiality and Medical Information

12.1 When an employee is off sick the reason for this will be kept confidential. There may be times when line managers will need to discuss the employees' medical condition with people other than HR. Consent from the employee will be required before sharing any information unless there is an emergency where the employees' health is deemed as being at significant risk.

13.0 Sickness Certification

- 13.1 Employees self-certify for sickness absence up to and including seven calendar days.
- 13.2 For sickness absences over seven days, a fit note from an approved healthcare professional, i.e. a doctor, nurse, occupational therapist, pharmacist or physiotherapist is required to cover the absence from day eight onwards.
- 13.3 Sickness absence must be covered by self-certification or a fit note for the duration of the absence, any period that is not covered may be classed as unauthorised absence.
- 13.4 Backdated certificates may be accepted if there are issues with gaining one from a healthcare professional.

14.0 Sickness Absence Monitoring

14.1 Sickness absence monitoring is an essential management task for the early detection of notable patterns or reasons for absence which may be caused, or exacerbated, by work. Early intervention helps managers to understand the employees' health and wellbeing needs, demonstrates support and concern for an employee's wellbeing and can increase the chance of preventing further absence and/or an earlier return to work.

15.0 Disability Related Sickness Absence

- 15.1 Employees who have, or think they have, a long-term health condition and/or disability should talk to their line manager so that any support or adjustments that may be needed can be considered. More information is available in the Reasonable Adjustments Policy.
- 15.2 Disability-related sickness absence will be recorded separately from non-disability related absences. This will allow for these absences to be identified separately and accurately.
- 15.3 As a reasonable adjustment, disability related absences may not be considered as part of the absence triggers. For example, these may be amended to support the employee or not be used at all depending on the individual circumstances. Please contact HR support for advice if required.
- 15.4 It is recognised that those with a disability or long-term medical condition may take longer to fully recover from illnesses that may not be a direct link. This needs to be factored into any sickness management considerations.

16.0 Maternity Related Sickness Absence

- 16.1 Pregnancy related absence will be recorded separately from other sickness absence and will not be counted towards any absence review triggers.
- 16.2 If the employee is off work because of a pregnancy-related illness within 4 weeks of the due date, maternity leave begins automatically.
- 16.3 A risk assessment must be undertaken by the manager once they have been notified in writing that the employee is pregnant, has given birth in the previous six months or is breastfeeding. Further details can be found in the Council's Maternity Policy.

17.0 Sickness caused by Industrial Injury

- 17.1 Where absence is as a result of an industrial injury then Medway Council's Accident and Incident Reporting and Investigation Policy must be followed.
- 17.2 Any employee who is absent due to an injury sustained in the performance of their contractual duties and without them being at fault shall be paid in accordance with normal sickness absence.
- 17.3 An employee who is absent because of an accident where damages may be receivable from a third party, will be paid occupational sick pay subject to the employee undertaking to refund to the authority the total amount of occupational sick pay, or a proportion of it, from the damages received from a third party in respect of such an accident.

18.0 Sickness caused by Infectious Disease

- 18.1 When an approved medical practitioner attests that there is evidence to show, with reasonable probability, that an absence was due to an infectious or contagious illness (that may present a significant risk to human health), and this was contracted directly in the course of employment full pay shall be allowed for such period of absence.
- 18.2 The period of absence on this account shall not be counted against the employee's entitlements under the occupational sick pay scheme, though such absences are reckonable for entitlement to statutory sick pay.
- 18.3 Where an employee is exposed to a person suffering from an infectious disease within their place of residence the employee must notify their manager and, if required, take precautions as advised by a medical practitioner. If it is considered inadvisable to attend their place of work other working arrangements such as working from home or alternative duties should be considered.
- 18.4 Full pay will be provided during any enforced absence under sickness absence. This period of absence will not be counted towards sickness entitlement.

19.0 Gender Reassignment

- 19.1 Medway is committed to being a fair and inclusive employer and will not discriminate against an employee who has or who is undergoing gender reassignment.
- 19.2 Transsexual employees may need several different medical interventions which require absence from work. Such absence is covered by the Equality Act 2010 and the council will not treat a person absent because of gender reassignment less favourably than they would treat an employee who is absent due to sickness, injury or absent for some other reason.
- 19.3 Gender reassignment treatment should not be considered as cosmetic or elective and as such will not subject an employee to a disadvantage for taking time off for gender reassignment and any related absences such as medical appointments and counselling.
- 19.4 Managers should record time off for gender reassignment treatment separately as special leave absence and it should not be used for absence management or monitoring purposes.
- 19.5 Further guidance for managers can be found on Medspace.

20.0 Absence for Medical Appointments

20.1 Employees should be encouraged to arrange for appointments (for example at the dentist, GP) to take place outside of normal working hours, or at the beginning or end of the day. Where this is not possible, employees should arrange appointments so that the time away from work is kept to a minimum.

- 20.2 For some appointments it is not possible to choose the time and date (such as hospital/consultant appointments). Employees should inform their manager of the appointments at the earliest opportunity to allow for cover to be arranged if required. This does not mean that employees are unable to attend if cover cannot be arranged.
- 20.3 Where the length of the appointment takes or is expected to take more than half a working day then this will be recorded as sickness absence.
- 20.4 Employees who attend appointments for reasons relating to a disability or serious illness will not have the time away from work recorded as sickness absence and will be provided with the time to attend. This will be recorded as special leave; further information can be found in the reasonable adjustment guidance.
- 20.5 Managers should contact HR Advice <u>via Service Desk</u> or call 01634 334499 if further guidance is required.

21.0 Cosmetic and Plastic Surgery and Overseas Travel for Operations

- 21.1 Where surgery is certified by a medical practitioner indicating that this is essential to the employee's health or wellbeing then this would be a valid reason for an employee to receive sick pay. If there is surgery, this would be regarded as a planned operation.
- 21.2 Where surgery is certified as essential, as above in 21.1, and the medical practitioner/NHS recommends travelling overseas for surgery this would be considered in the same way as a planned operation and the employee would receive sick pay.
- 21.2 If voluntary surgery is carried out and is not certified by a medical practitioner as essential and absence from work is required then arrangements for annual leave and/or unpaid leave (where approved) must be made in advance.

22.0 Sickness and Annual Leave

- 22.1 If an employee is off sick and has pre-booked annual leave that they are too unwell to take then this annual leave will be cancelled to be taken at another time.
- 22.2 If an employee becomes unwell during annual leave (unwell enough that they would not have been able to attend work) the employee should follow the absence reporting procedure and request the annual leave to be cancelled. This also applies if they are on leave abroad.
- 22.3 If an employee is off sick during annual leave, they do not require a fit note to claim back their annual leave during the first seven days of absence but are required to provide a fit note from day eight of the sickness absence. This is with the exception for Bank Holidays or ex gratia days where sick pay should continue and no substitute annual leave should be given, unless sick pay is at half or nil pay for the Bank Holiday or ex gratia day, when the annual leave can be respectively partially or fully allowed.

22.4 Any sick leave taken during a period of planned annual leave will still be managed within the normal sickness management procedures, which may in certain cases require further investigation into the sickness absence.

23.0 Accrual of Annual Leave during Absence

- 23.1 Employees still accrue annual leave during sickness absence.
- 23.2 Employees who have not been able to take their annual leave during the leave year due to a period of long-term sickness absence can carry forward their annual leave into the next leave year (pro-rata for part time workers). Employees should be encouraged to take leave, where appropriate, before the end of the leave year to try and reduce the amount of carry forward leave. Please see Phased Return Guidance for further information.
- 23.3 Employees, who are off long-term sick, can choose to take annual leave during the period of long-term absence. A break in long-term sickness absence for taking annual leave does not trigger a new period of sickness absence in terms of monitoring.
- 23.4 In circumstances where employment ends after a period of long-term sickness absence employees will be paid in lieu of the contractual leave that they would otherwise have carried forward.

24.0 Medical Suspension

- 24.1 If an employee's condition is a health and safety risk, either to themselves or to others, they should be suspended from work on medical grounds with full pay. Managers should seek advice from the Employee Relations Team before taking this action, this will also require support from the Assistant Director or equivalent Corporate Management Team (CMT) member before agreement. Further information can be found in the Medical Suspension Guidance document.
- 24.2 An employee who is medically suspended would normally have been referred to the occupational health service or would be in the process of being referred for a medical opinion.
- 24.3 The employee will then be advised to visit their GP to gain their opinion on the state of their health. If the GP agrees that the employee should not be in work, the employee should send the fit note and any supporting statements (if required) to their manager. The medical suspension will be reviewed upon the receipt of the fit note and any other medical information.
- 24.4 For cases of suspected drug or alcohol abuse managers should refer to the Drugs and Alcohol Misuse Policy.
- 24.5 There may be occasions where the medical advice received from the GP or Occupational Health service cannot be practically implemented. In such cases the manager has the authority to suspend on medical grounds, subject to consultation with their Assistant Director (or equivalent CMT member) and the Employee Relations Team.

25.0 Differences of Medical Opinion

25.1 On rare occasions there may be a difference of medical opinion between the employee's medical professional and the Occupational Health Physician. Occupational Health will provide advice, but it would be expected that the most knowledgeable and experienced health professional would take precedence. Ultimately it would be the decision of the employer and HR will support in any such cases.

26.0 Absent Without Leave (AWOL) / Unauthorised Absence

- 26.1 Where an employee does not attend work without letting their manager know, the manager must try to contact the employee to do a wellbeing check and try to find out the reason for absence.
- 26.2 All reasonable attempts should be made to get in touch with the employee, if this fails the emergency contact person should be contacted. If there is still no information about the reason for absence it may be necessary to inform the emergency services or make a wellbeing check at the home, please contact the Employee Relations Team for advice.
- 26.3 For further information please see Managers Guidance on AWOL.

27.0 Statutory and Occupational Sick Pay

- 27.1 Information about statutory sick pay (SSP) can be found via GOV.UK.
- 27.2 Occupational sick pay (OSP) is paid in line with the terms and conditions of employment and subject to the conditions contained in this policy.
- 27.3 If you qualify for SSP and OSP then OSP will be paid as the difference between SSP and your normal wage.
- 27.4 The rate of sick pay and the period for which sick leave shall be paid will be calculated on a 12-month rolling basis.
- 27.5 Further details of sick leave and sick pay entitlement are contained on Medspace. In exceptional circumstances Directors can extend the period of sick pay, however this must be following consultation, and sign off, from a HR Business Partner and the Chief Organisational Culture Officer.
- 27.6 It is not necessary for an employee's sick leave entitlement to be exhausted before termination of employment on medical grounds can be implemented. If a line manager is considering this action, the Employee Relations Team must be consulted first.

28.0 Stopping of Statutory and/or Occupational Sick Pay

28.1 Sick pay may be stopped if employees fail to comply with the Statutory/Occupational Sick Pay requirements and absence process. For example, not following the absence reporting procedure as soon as possible and maintaining regular contact with the line manager.

- 28.2 Manager's must always seek advice with the Employee Relations Team before stopping sick pay.
- 28.3 The payment of occupational sick pay may be suspended if the condition which has led to the absence from work is due to any of the following circumstances:
 - absence on account of sickness due or attributable to deliberate conduct prejudicial to recovery
 - the employee's own misconduct or neglect or active participation in professional sport or injury while working in the employee's own time, on their own account for private gain or for another employer, and/or
 - · abuse of the Managing Sickness Absence policy.
- 28.4 Where a decision to suspend sick pay has been made the manager must advise the employee in writing their reason(s) for suspending sick pay. The employee shall have a right to make representations to a more senior manager regarding the decision. If it is decided that the grounds were justified the employee shall forfeit the right to any further payment in respect of that period of absence.
- 28.5 Abuse of the sickness scheme will be investigated as per the <u>disciplinary procedure</u>.

29.0 Absence Triggers

29.1 Absence triggers aim to ensure that a consistent approach to managing sickness absence is maintained throughout the council. The absence triggers are detailed below:

Length and number of occasions of sickness absence	Short or Long-term trigger
A single absence of four continuous weeks or more	Long-term absence
Three separate occasions of absence in three months, or five separate occasions in a 12-month period	Short-term
Any other pattern of absence that causes concern. Examples may include illness on the same day of the week, at a particular time of year, preceding or following annual leave.	Short-term

- 29.2 When any of these triggers are met the line manager will discuss this with the employee whilst following the process for either managing short term sickness absence or managing long-term sickness absence.
- 29.3 Where the absence triggers have been met the employee will be monitored informally over the next six weeks. See informal stage process under section 32.0.

30.0 Return to Work Meeting

30.1 Following any period of absence, the manager will meet with the employee to welcome them back ideally on the first day they return.

The purpose of the return-to-work meeting is to welcome back the employee and:

- check on any concerns they may have on coming back to work,
- confirm any adjustments on the fit note or from the Occupational Health report, or any workplace adjustments that may not have been previously identified, discussed or implemented,
- update the employee on anything they may need to know about their work/changes whilst they have been off etc, and
- ensure the absence form is submitted to confirm the return to work and that the employee has provided a fit note if applicable.
- 30.2 The line manager will confirm if any absence triggers have been met and where applicable will invite the employee to an absence review meeting to talk about the levels of absence.

31.0 Managing Short-Term Sickness Absence

- 31.1 The management of short term absence is integral to make sure appropriate support is available and to check in on the employees overall wellbeing and working conditions.
- 31.2 Responsibility lies with the manager to manage this process in a consistent and appropriate manner.
- 31.3 The line manager may arrange for the employee to be referred to Occupational Health to seek advice, including whether there may be an underlying cause for the short-term absence(s).
- 31.4 Employee's can also request for an Occupational Health referral to be undertaken.
- 31.4 Managers should review absence levels with an employee where a pattern or level of absence has emerged which causes concern and/or the absence triggers have been met (having consideration for any exceptions).
- 31.5 In these instances an informal review meeting should be held between the line manager and the employee to discuss the concerns. At this meeting the employee should be provided with a copy of this policy. During the informal stage the employee will be expected to improve their level of attendance. The level of attendance required will be confirmed to the employee in writing and the employee informed that if they do not reach this required attendance within a specified timescale this could lead to the formal procedure being implemented (Appendix A).

32.0 Informal Stage

32.1 Early concerns about the level of an employee's absence should be raised at an appropriate meeting, for example supervision and return to work meetings. Employees may be unaware of how much absence they have had, and bringing it to their attention, along with a discussion about factors that could be affecting their health could lead to an earlier or more effective resolution. It is

- important to let the employee know that if the level of absence continues a formal approach will be adopted, which could result in the employee's eventual dismissal.
- 32.2 Where the absence triggers have been met the employee will be monitored informally over the next six weeks. If there is no improvement, or if absence levels increase either during the six-week monitoring period or if there are concerns regarding their attendance within the next 12 months, then a Stage One formal review meeting will be held between the line manager and the employee to discuss the managers concerns. The manager should keep confidential records of these discussions.
- 32.3 As this is an informal meeting, there is no requirement at this stage for the right to be accompanied by a union representative or workplace colleague. However, if one is requested this will be considered on a case by case basis.
- Where there is no improvement in attendance levels a move to the formal process will be considered. The formal absence management process is attached as Appendix A.

33.0 Managing Long-Term Sickness Absence

- 33.1 When managing long-term sickness absence it is important that the line manager and employee keep in regular contact to make sure the individual is supported, does not feel isolated and also that any updates of the circumstances are provided. There is an obligation on the part of the employee to engage with their manager and keep them updated in relation to their health situation.
- 33.2 Regular review meetings should be conducted throughout the period of absence, the number and frequency will depend on the individual circumstances. However, the first of these meetings will normally take place soon after the first 4 weeks of absence and will continue regularly to a timescale agreed by the manager and employee.
- 33.3 In cases of stress, depression or another psychological illness, managers should discuss with the employee a possible a referral to Occupational Health to identify any support that can be provided. The timing and format of this will depend on individual circumstances taking into account the preferences of the employee. Further advice, guidance and support is available from the Employee Relations Team.
- 33.4 At the review meeting the line manager will discuss the absence, including any support that can be offered to help their recovery and/or any adjustments that can be made to assist them returning to work. A face-to-face meeting can help ensure communication and clarity this could be at a work site, a home visit or mutually agreed neutral venue. An online meeting may be appropriate depending on the reason for absence and the employee's preference.
- 33.5 Where the absence has been long term and/or for a condition that may require reasonable adjustments then an Occupation Health referral should have been carried out prior to the return date to identify any potential support/reasonable adjustments.
- 33.6 Before the return-to-work date any reasonable adjustments will be discussed to provide adequate time for support to be put in place. Any agreed adjustments and a

- timeline for implementation should be recorded locally (see Return to Work Plan) by the manager and a copy provided to the employee for reference.
- 33.7 For cases of stress, depression or other psychological illness managers must ensure a more in-depth return to work meeting is held and a stress risk assessment is undertaken where applicable. This assessment can take place before the return to allow any issues to be identified, guidance to be sought and adjustments made where required.
- 33.8 Once any adjustments have been agreed the employee should complete a Workplace Adjustment Passport to detail any arrangements, where mental health is the reason for absence completing a Wellbeing Action Plan may be appropriate. This will help if the employee was to move roles or a new manager is appointed to the current team as this shows what has been agreed and any review periods.
- 33.9 Access to work may also be able to assist the employee, this is a scheme which can help those with physical/mental health conditions or a disability. The employee needs to apply for this themselves and more information can be found on GOV.UK and also via the council's dedicated MedSpace page.

34.0 Referral to Occupational Health

- 34.1 A referral can be made by the line manager or requested by the employee at any point during the absence for a medical opinion on the employee's fitness to carry out their duties.
- 34.2 Occupational Health can provide advice on how to facilitate a return to work. This will normally be where the employee has been off sick for a continuous period of four weeks or in cases of stress, depression and other similar conditions during the second week of absence.
- 34.3 Managers should discuss the referral with the employee, the reasons why it is being made and that they require the employees consent to request one.
- 34.2 Employees do not have to consent to the referral, but if they don't then the absence will be managed based on the information that is known.
- 34.3 Referrals to Occupational Health must be appropriate to the nature of the absence. If after reading the dedicated guidance there are any questions managers should contact HR Advice via Service Desk or call 01634 334499 for further guidance.
- On some occasions, and with the consent of the employee it may be appropriate for Occupational Health to undertake a referral to Care first.

35.0 Unable to return to normal duties due to a disability

- 35.1 If an employee becomes disabled reasonable adjustments must be considered under The Equality Act 2010. See guidance on reasonable adjustments for further information.
- 35.2 Occupational Health guidance, the guidance of the employees medical professional and guidance from Access to Work may be available to assist with identifying reasonable adjustments required in the workplace to support the employee.
- 35.3 The council is not obliged to create a new position for an employee. However, if there is work available which may be suitable and considering individual capabilities at the time, this must be fully explored.
- 35.4 The Redeployment Procedure provides guidance on how redeployment to an alternative post would be managed in this circumstance.
- 35.5 No decision to progress with the potential exit of an employee from the council should be taken without first consulting with the <u>Employee Relations Team</u>.

36.0 Phased Returns to Work

- 36.1 Employee's returning to work after a period of long-term absence may need a phased return to work to allow the employee to return gradually, settle back into their work and to check if any adjustments are working. Usually, advice and guidance on a phased return to work is provided by Occupational Health or the employee's GP/healthcare professional.
- 36.2 Phased returns can include returning on reduced hours or an amendment to duties. They usually last four to six weeks but may be longer in some circumstances. Timescales for phased returns to work will be discussed in advance of the return and will be based on medical advice sought from Occupational Health and/or the employees' healthcare professional.
- 36.3 During the first four working weeks of a phased return the employee will be paid their normal contractual salary. If a phased return extends beyond four working weeks, then pay will be calculated based on hours worked. Annual leave for the hours not worked can be requested as part of the phased return plan.

37.0 Employees not fit to return to work

- 37.1 In cases of long-term absence where the employee is not expected to be fit to return to work within a reasonable timescale, and where any steps taken to secure a return to work have been unsuccessful, the manager should discuss this with the employee and HR and move to arranging a final review meeting.
- 37.2 The final review meeting will only be arranged once all other options have been considered, for example seeking advice on alternative duties, redeployment to another role and/or the possibility of ill-health retirement.

38.0 III-Health Retirement

- 38.1 Where employees cannot return to their role due to ill-health or be found suitable alternative employment within the council, they may be eligible for retirement on ill-health grounds. Where possible this will be explored before a final review meeting takes place.
- 38.2 In order to apply for IHR, the employee must be a member of the Local Government Pension Scheme (LGPS) and have a certificate of ill-health from and Independent Registered Medical Practitioner (IRMP) via the Occupational Health service confirming they are permanently incapacitated or unable to carry out their employment duties. Further guidance can be found via the LGPS website.

39.0 Termination of Employment on grounds of III-Health

39.1 Any decision to terminate the employment on medical grounds will be dealt with in accordance with the following process:

The final review meeting will be convened to discuss the situation once it is established that:

- an employee is medically unfit for their duties as confirmed by Occupational Health,
- there is no identified resolution to their sickness which is not sustainable, due to its impact on the provision of the service,
- the procedure for managing short term absence has been followed and there has been no improvement in attendance at the end of the review period and no further evidence of a health problem has come to light, or
- no reasonable adjustments are possible or any adjustments which have been put in place have been unsuccessful.
- 39.2 If Occupational Health determines that the employee will not be able to return to their normal duties, suitable alternatives within the council must be considered via the Redeployment Procedure.
- 39.3 The final review meeting may be arranged whilst the employee is in the redeployment pool. However, in the event of dismissal if suitable alternative employment is identified during the notice period this will be extended to provide the opportunity to undertake a four-week trial should the trial period be successful the notice will be rescinded.

40.0 Monitoring and Review

40.1 The application of this policy will be monitored and reviewed on a regular basis or where any operational change, legislation change, court or regulatory decisions or changes in regulatory guidance trigger the need for a review.

41.0 Diversity Impact Assessment (DIA)

41.1 A DIA will be undertaken at each review or alteration/update where any changes may have an impact.

42.0 Relevant Legislation

- Employment Rights Act 1996
- Equality Act 2010
- Social Security (Medical Evidence) and Statutory Sick Pay (Medical Evidence) (Amendment) Regulations 2010 (SI 2010/137)

43.0 Useful Contacts and Further Guidance

- HR A-Z: Find information on other leave policies and guidance
- Reasonable Adjustments Policy
- HR Teams contact information
- HR Advice contact number: 01634 334499
- Log a request for advice on Service Desk: Request HR Advice
- Occupational Health Referral
- Care first for employees and managers
- Disability Confident Scheme
- Toolkit for managing short term absence
- Toolkit for managing long term absence
- Further guidance and training on managing absence can be found on Medspace.

44.0 Version History

Managing Sickness Absence Policy		
Employee Matters Committee	01 May 2025	
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Author(s)	Nick Morgan (HR Business Partner)	
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Appendix A: Formal Process for Absence Management

1.0 Stage One: Formal Review Meeting

- 1.1 The purpose of the meeting is to discuss the situation with the employee in a supportive way, to establish whether the absences from work are related and to agree with the employee the best way forward. The employee can be accompanied by a Trade Union representative or a workplace colleague at the meeting. In exceptional circumstances a member of HR Services may be asked to attend if the matter is particularly complex.
- 1.2 By the end of the meeting, the manager would be expected to have a real understanding of the problem and any workplace issues that are affecting the employee's ability to attend work and determine reasonable ways of assisting the employee in reducing their sickness absence and/or making a successful return to work.
- 1.3 The outcome of the meeting is to be recorded in writing and a copy provided to the employee for reference and confirmation of any agreements. In situations where the manager is unable to fully understand the problem a further referral to Occupational Health will be appropriate to gain further insight.
- 1.4 If the reasons given for the absences appear to be unrelated and the level of absence and/or frequency and pattern is causing concern the line manager should try and identify through discussion with the individual if there are other problems of a domestic or work nature that may be affecting their attendance. If there are any work issues affecting attendance, the manager has a responsibility to make every effort to resolve these and to involve the employee in their effective resolution. A date should be set in 6 weeks' time to review the position at a Stage Two formal review meeting.
- 1.5 Where an employee has met a short-term sickness absence trigger, the line manager must review the need for a referral to Occupational Health. Action taken to refer to Occupational Health must be appropriate to the nature of the absence. Guidance on when this is appropriate is available from HR Advice via ServiceDesk or telephone 01634 334499.

2.0 Stage Two: Formal Review Meeting

- 2.1 The purpose of this meeting is to review the situation in relation to the success of any adjustments, any further information that may need to be considered and the level of sickness absence since the Stage One meeting.
 - An exception to this would be where medical advice indicates that the employee will not be able to return to their role or a suitable alternative role, and there are no reasonable adjustments that would enable them to return to work. In place of this meeting a Stage Three final review meeting will be convened.
- 2.2 The outcome of the meeting will be either an improvement or failure to improve. The following explains the next steps that need to be taken in either circumstance:

If the level of attendance has improved sufficiently this should be recognized and a further review organised in 6 weeks time. If after the further review, there is no ongoing concern, then no further action is required. A record of this decision should be made and shared with the employee and placed on the employees' personal record for 12 months.

Managers must make it clear to the employee that should there be further concerns regarding their attendance within the next 12 months consideration would be given to restarting the review process at Stage Two.

3.0 The level of absence has not improved sufficiently

- 3.1 If the level of attendance has not improved sufficiently a further review should be organised for 6 weeks' time. If there are still concerns following this review, the process will move to the final Stage Three review meeting. If the level of attendance improves sufficiently refer to (34.2) above.
- 3.2 When considering moving to Stage Three managers should ensure that they have considered all options available that could enable the employee to reach an acceptable level of attendance and where:
 - the level of short-term absence remains unacceptable, and/or
 - the steps taken at the Informal Stage, Review Stages One and Two have not secured the required improvement.

The manager should explain that the result of the Final Review meeting could result in their employment with the Council being terminated on medical grounds.

4.0 Stage Three: Final review meeting

4.1 Where all reasonable options have been considered during the stages of the formal process, the manager should recommend to a more senior manager that a Final Review meeting is convened. The employee will be informed of this recommendation in writing. Further Occupational Health advice will be sought before the Final Review Meeting.

4.2 The outcome of the Final Review Meeting will be either:

- further support and monitoring
- a written absence caution to remain on the employees personal file for 24 months, which would be referred to in cases of future sickness absence within this time or,
- termination of employment on medical grounds.

5.0 Final Review Meeting process

5.1 The Final Review meeting shall be conducted by a Senior Officer and they will be accompanied by an Employee Relations Consultant. The employee will be notified in writing at least ten working days ahead of the meeting and will have the right to be accompanied by a trade union representative or work place colleague. The employee

- is required to provide the panel with any documentation they will be relying on at least five working days in advance of the meeting.
- 5.2 Long term ill-health can be a fair reason for terminating an employee's contract of employment. The legal background is that an employee who is absent from work due to ill-health, where there is an underlying medical condition, may be fairly dismissed provided that fair and reasonable steps are taken.
- 5.3 Where an employee is dismissed they should be issued with appropriate notice and the right of appeal.
- 5.4 The employee will be notified in writing of the outcome and their right of appeal, normally within five working days of the decision.

6.0 Right of appeal

- The right to appeal against termination of employment on the grounds of ill-health is to a Members panel. Appeals must be lodged with the Chief Organisational Culture Officer within ten working days of the date of receipt of the letter notifying the outcome of the final review meeting, stating the grounds for the appeal.
- 6.2 The appeal will be heard as soon as possible.
- 6.3 The appeal panel's decision will be final.