

Title of Report:	Sickness Absence Policy and Procedure
Committee Report Submitted To:	Corporate, Policy and Resources Committee
Date of Meeting:	26 th November 2019
For Decision or For Information	For decision

Linkage to Council Strategy (2019-23)	
Strategic Theme	Innovation and Transformation
Outcome	Successful implementation of the Convergence Plan
Lead Officer	Chief Finance Officer

Budgetary Considerations	
Cost of Proposal	
Included in Current Year Estimates	N/A
Capital/Revenue	
Code	
Staffing Costs	

Screening Requirements	Required for new or revised Policies, Plans, Strategies or Service Delivery Proposals.		
Section 75 Screening	Screening Completed:	Yes/ No	Date: 20 th November 2019
	EQIA Required and Completed:	Yes/ No	Date: 20 th November 2019
Rural Needs Assessment	Screening Completed	Yes /No	Date:
(RNA)	RNA Required and Completed:	Yes /No	Date:
Data Protection Impact	Screening Completed:	Yes /No	Date:
Assessment (DPIA)	DPIA Required and Completed:	Yes /No	Date:

1.0 Purpose of Report

1.1 The purpose of this report is to present Council with a new draft policy for managing sickness absence for all employees of Causeway Coast and Glens Borough Council. This will ensure a consistent approach to managing absence across the Council.

2.0 Background

- 2.1 Currently there are 5 legacy policies for managing attendance for employees in Causeway Coast and Glens Borough Council. These include
 - Ballymoney Attendance Improvement Programme
 - Coleraine Sickness Absence Policy
 - Limavady Sickness Absence Policy and Procedure
 - Moyle Attendance Improvement Programme
 - Civil Service Planning Inefficiency Sickness Absence Policy

For new employees, the Coleraine legacy policy is being used.

3.0 Request

3.1 Over the past number of months, the OD/HR team has designed and developed the following policy which will be used for all employees going forward, thus ensuring a consistent and equitable approach to managing attendance.

The draft policy has been approved both by the Senior Leadership Team and also the Trade Unions through the Joint Consultative and Negotiating Committee (JCNC).

In accordance with Council's duty under Section 75 Equality Legislation, the policies have been screened and the result is that they were screened "out".

Once the policy has been approved, a training programme is being planned for all Managers.

A copy of the policy is attached.

4.0 Recommendations

It is recommended that the Corporate, Policy and Resources Committee approves the Sickness Absence Policy and Procedure.



Sickness Absence Policy and Procedure

Policy Number	CCG/5/19
Version Number	1.0
Author	B Lofthouse

Date of S75 Screening	
EQIA Recommended?	YES/NO
Date of Rural Needs Assessment	
Date Adopted by Council	
Date Policy Revised	

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Section 1 – Introduction

1.1 Scope

Causeway Coast & Glens Borough Council is committed to the health, safety and well-being of its employees. The council aims to encourage all its employees to maximise their attendance at work whilst recognising that, from time to time, employees may be unable to come to work due to sickness. This policy is designed to improve employee attendance by ensuring that issues to do with employee health and well-being are addressed promptly and appropriately.

This policy applies to all employees except those serving a period of probation. Concerns about attendance for employees on probation will be considered as a factor in the review of the probationary period and in accordance with the probation policy. Comprehensive guidance, checklists and procedures are included in this policy. These are designed to equip and empower line managers to manage employee absence effectively, in light of each individual set of circumstances.

Signed: _	Date:
	Mayor Causeway Coast and Glens Borough Council
Signed:	Date:
	Chief Executive
	Causeway Coast and Glens Borough Council

1.2 Purpose

This policy and associated procedures provide a framework for the management and monitoring of absenteeism in a fair, consistent and proactive way, that is non-discriminatory and in accordance with equality legislation.

1.3 Policy aims

The sickness absence policy and procedures aim to:

- Provide an appropriate balance between the needs of the service and the needs of individuals when dealing with sickness absence.
- Provide clear and effective guidelines on the management and monitoring of absenteeism.
- Clarify roles and responsibilities in relation to the management of absence.
- Assist in the management of the cost to, and the impact of, absence on the organisation.
- Support employees to return to work as soon as possible.
- Improve the health and well-being of all employees by facilitating and supporting appropriate initiatives and interventions.

1.4 Roles and responsibilities

All employees have a fundamental role to play in the management of absence and it is expected that everyone will undertake their roles and responsibilities in accordance with this policy.

1.4.1 Line Managers' Responsibilities

Every employee whose role it is to line manage other employees must:

- Understand the policy and procedures, and how they operate.
- Develop the skills to be able to manage employee absence.
- Be aware of the support mechanisms that are available for employees and managers in dealing with sickness absence.
- Understand the legal implications of dealing with sickness absence.
- Manage absence in accordance with this policy by recording, monitoring, and reviewing the absence levels of all employees for whom s/he is responsible.
- Ensure new employees are made aware of their obligations under the policy, as part of induction.
- Maintain regular and effective contact with employees who are absent due to sickness. The frequency of which will depend upon the individual circumstances of the absence.
- Conduct return to work interviews for every employee who is absent due to sickness, immediately following every occasion of sickness absence. Complete and return relevant paperwork to the OD / HR Department.
- Provide appropriate Statement of Fitness for Work (fit note) to the OD / HR Department for absence monitoring and processing sickness payment.
- Implement action plans with individual employees to manage their absence, reviewing as necessary.
- Seek specialist advice from OD / HR and Occupational Health when appropriate.
- Chair case management and / or other relevant meetings with OH and OD / HR, the employee and the employee's representative when necessary.

- Facilitate and support employees in relation to reasonable adjustments and/or rehabilitation programmes.
- Encourage participation in internal health promotion initiatives.
- Where necessary, initiate action to deal with poor attendance and/or failure to comply with this policy and procedures.

1.4.2 Employees' Responsibilities

Every employee in the council must:

- Take responsibility for their own health to ensure regular attendance at work in accordance with contractual obligations.
- Be fully aware of their obligations and requirements under this policy and procedures.
- Maintain regular contact with their line manager during any period of sickness absence.
- Ensure self-certificates and statements of fitness to work are forwarded without delay to the OD / HR Department for appropriate action, and that they cover the whole period of absence.
- Comply with requests to attend occupational health.
- Participate in absence review meetings, and cooperate in the development of return to work and rehabilitation plans as required.
- Refrain from any activity that may delay recovery or potentially contribute to continued sickness absence. If in doubt, advice from Human Resources and/or occupational health should be sought.
- Refrain from other paid or unpaid employment whilst absent due to sickness.
- Be aware that sick pay is for absence due to sickness and not for other purposes such as caring responsibilities which are covered by other policies.
- Make their managers aware of any concerns they have regarding health, safety or welfare issues.

1.4.3 Role of Organisational Development / Human Resources (OD / HR)

The OD / HR team will:

- Provide advice, support and guidance to managers and employees on all aspects of the sickness absence policy and procedures.
- Provide statistical information and reports to assist management in the analysis of absence.
- Develop and deliver training sessions for managers on all aspects of the operation of the policy and procedures.
- Arrange pre-employment health assessments as part of the selection process.
- Participate in case management meetings with managers to review and progress individual absence cases.
- Assist in the development of rehabilitation programmes and reasonable adjustments as recommended by Occupational Health.
- Ensure the policy is applied fairly and consistently across the council area.
- Review and update the policy as and when necessary.

1.4.4 Role of Work Colleague / Trade Union Representative

The employee may be accompanied by a work colleague or trade union representative at meetings that are held to discuss a failure to meet or sustain the required levels of attendance. This includes any formal appeal hearings.

The person accompanying the employee has the right to question and speak to those involved in the meeting, including putting forward and summing up the employee's case, but does not have the right to answer questions for the employee. The companion can also confer with the employee during the meeting. Either party may ask for an adjournment.

Work colleagues or trade union representatives do not have to accept a request to accompany an employee and should not be pressurised to do so by the Council or its employees. No employee will be disadvantaged by the Council for using his/her right to be accompanied or for accompanying a work colleague.

Section 2 – Promoting Attendance at Work

2.1 Pre-employment

Prior to commencing employment, prospective employees will be assessed by occupational health to determine:

- they are fit to undertake the duties of the proposed role;
- whether they may be considered disabled under legislation and what, if any, reasonable adjustments may be necessary to enable the individual to carry out the job role;
- other support necessary for the prospective employee to do the job;
- any risks to prospective employees, colleagues or clients;
- a base-line of current health for future reference.

A job description and person specification for the role will be provided to OH in advance to determine what level of health assessment is justified. Giving false information, or failing to disclose relevant information, may lead to the withdrawal of a job offer or termination of employment.

2.2 Induction

All existing and new employees should be made aware of the Sickness Absence Policy and procedures, and have access to a copy in their place of work. Organisation and departmental induction programmes are an effective way of achieving this. Line managers must make sure that their teams know what the sickness absence notification procedures are, and provide the relevant contact details.

Employees should be encouraged to raise issues which they believe could affect their health, before it affects their attendance at work.

2.3 Probationary period

Employees should be aware that attendance is a factor that will be considered when determining whether an individual's performance has been satisfactory during the probationary period.

If an employee's attendance level gives cause for concern during the probationary period, the line manager must address that concern and give the individual an opportunity to improve. This may result in the probationary period being extended. Employees should also be advised of the consequences of unsatisfactory attendance and that it may result in the termination of their employment. See Probation Policy for full guidance.

2.4 Working environment

Creating a working environment where employees want to come to work can have a tremendous positive impact on attendance levels. Properly identifying and addressing factors in the working environment that contribute to absenteeism can influence how open an individual will be in terms of communicating the reasons for absence. Factors

may include management style; workload; job design; trust; communication; recognition and team dynamics.

How management address identified issues can impact on the furtherance of an open culture where employees trust in the management commitment to confront identified concerns. Adversely, ignoring or failing to address concerns can impact negatively on attendance levels.

Paying attention to occupational health issues in the working environment and taking steps to prevent work related ill health can positively influence service delivery and ultimately reduce sickness absence and associated costs.

2.5 Employee health and well-being

Health and well-being focus on much more than physical health. Mental, social, and emotional perspectives that make up the whole person are encompassed.

The Council has developed a Health and Well-being Strategy and Action Plan. The Health and well-being Working Group consists of employees from across all regions and directorates of Council who volunteered to champion health and well-being among staff. The working group contributes towards the Health and Well-being Implementation and Action Plan to promote and enhance employee health and well-being, both within and beyond the workplace, and is based on the 'Business in the Community' 'Work Well Model'.

The purpose of the Health and Well-Being (HWB) Implementation and Action Plan:

- To support and complement the implementation of the HWB Policy;
- To promote and develop the health and well-being of staff within the workplace;
- The HWB Working Group to devise, implement and evaluate a programme of initiatives;
- To effectively communicate HWB to staff and management;
- To report annually on the HWB programme;
- To build on the findings from the HSENI Management Standards Audit and Risk Assessment.

Section 3 – Sickness Absence Reporting & Certification

3.1 Purpose of reporting and monitoring procedures

Reporting and recording procedures are necessary to enable managers to make arrangements for service delivery to be maintained during the period of absence, and can highlight any concerns related to the employee's welfare. They also ensure that sick pay is processed promptly, and that the information provided feeds into absence monitoring systems.

Monitoring sickness absence data can point to areas within the Council where absence is a concern, and enable effective intervention. For this to happen, reporting procedures must be effectively implemented by line managers. A key tool in managing persistent absence is consistency in applying these procedures that, over time, build a health picture for each individual, team and department.

3.2 Notification of Sickness Absence

If you are unable through sickness to attend work, you must notify your line manager, or their nominee, as early as possible on the first day of absence, and normally within one hour of your usual starting time. You should state the nature of your illness, expected duration, and what tasks need to be completed in your absence.

Notification must be by telephone in person, unless in exceptional circumstances. **Emails or text messages are not acceptable.**

On the first working day of absence you must phone your Line Manager as close to your normal starting time as possible but at least within one hour of your normal starting time. Employees who work in front line posts integral to opening hours and public access e.g. leisure facilities should contact their line manager, as soon as possible and no later than one hour before their normal starting time or in line with local arrangements, so that cover arrangements can be made. A quick guide to the absence notification procedure is available at appendix 1.

3.3 Maintaining contact during periods of absence

Throughout the absence the employee must maintain regular contact with their line manager while they are absent from work. The frequency and type of contact may be agreed between the line manager and employee, this may be determined by the reason for, and duration of, the absence.

Regular contact reinforces the employee's value as a team member, and provides an opportunity to discuss the employee's current state of health and any medical reports; explore a return to work; and if appropriate provide any updates from the workplace.

3.4 Sickness Absence Certification

Provision of certification of absence is a necessary requirement for the authorisation of occupational sick pay. A quick guide of the absence notification and certification procedure is available at appendix 1.

3.4.1 Self-certification

On the fourth working day of absence an employee should again get in touch with their Line Manager or his/her nominee to give an indication of the likely duration of their absence, if they have not already provided this information.

The employee must complete and submit form SC2 (Statutory Sick Pay (SSP) Employees Statement of Sickness) to cover absences of 4-7 calendar days to the OD/HR Department. This form should be marked **Private and Confidential.**

3.4.2 Statement of fitness for work

If an employee's sickness absence exceeds 7 calendar days, medical evidence in the form of a 'Statement of Fitness for Work' completed by a registered medical practitioner must be forwarded without delay to the OD / HR Department. A statement of fitness for work is commonly known as fit note.

If the employee is receiving treatment in hospital, a hospital in-patient certificate may be accepted as certification of illness and therefore a fit note is not required.

3.4.3 Evidence of fitness to return to work

An employee may want to return to work prior to the end of the fit note for the following reasons:

- They have recovered from their illness or injury more quickly than expected
- Their employer can offer support to help a return to work

An employee can go back to work at any time (including before the end of the fit note) without going back to see their doctor - even if their doctor has indicated that they need to assess them again. A <u>suitable risk assessment</u> should be completed by the line manager to determine the employees' fitness to carry out their duties. The risk assessment should be based on the duties they perform on a daily basis. See appendix xx for a template risk assessment.

If you feel the employee is not fit for work and may be putting themselves or colleagues at risk you should discuss your concerns with OD / HR immediately. A referral may be required for Occupational Health.

3.5 Illness during working hours

If an employee becomes ill during normal working hours, the line manager must be notified as normal. Where an employee leaves work early due to illness, the absence will be recorded as sickness absence. The duration of sickness absence recorded will depend on the proportion of working hours worked on that day.

For example, if less than half of normal working hours have been worked, one day of sickness absence will be accrued; if more than half of normal working hours have been worked, a half day of sickness absence will be accrued.

3.6 Medical appointments

Individuals should inform their line manager at the earliest opportunity in advance of any planned and non-urgent medical or other appointment (such as dentist, optician, hospital). Where appropriate this should be recorded on the Time and Recording system or time sheets.

As far as possible, appointments should be arranged outside working hours or, if this is not possible, at the start or end of the working day. Line managers will endeavour to accommodate such appointments where possible.

3.7 Illness and annual leave

If an employee becomes ill during a period of annual leave, the period may be recorded as sickness absence. In such circumstances, the absence notification and certification procedures outlined above must be complied with. In addition employees must submit a fit note from your GP.

Annual leave may be applied for during a period of sickness absence. Line manager approval is required.

If an employee is ill on a public or bank holiday, there is no entitlement to use this at a later date. If the employee is receiving sick pay, this payment will continue over public and bank holidays.

3.8 Unauthorised absence

Unauthorised absence occurs when an employee's absence:

- is not supported by medical evidence;
- has not been authorised by the line manager; or
- has not followed the sickness absence notification procedures.

Where a period of absence is unauthorised, occupational sick pay will not be paid. Employees should be aware that disciplinary proceedings may be invoked to investigate unauthorised absence.

3.9 Return to work interview

A return to work interview will be conducted by the line manager on the day that an employee returns to work after every absence due to sickness. If this is not possible, the employee will be advised of this and arrangements made for the return to work interview to take place as soon as is reasonably feasible.

The return to work interview aims to:

- Provide an opportunity for the manager to ensure that the employee is fit to return to their normal duties or agreed adjustments.
- Update the employee on any relevant work issues which may have arisen during their absence.

- Explore the reason(s) for absence, the likelihood of recurrence and, if feasible, any steps which can be taken to prevent or minimise further occurrences.
- Review the employee's attendance record.
- Provide the employee with the opportunity to discuss in confidence any medical or other issues which they feel may contribute to their absence.
- Agree appropriate action(s).
- Remind the employee of sickness absence trigger points, and the absence review procedure (see sections 4.4 and 4.5).
- explain to the member of staff the importance that the Council places on good attendance.
- any misconduct during sickness absences, such as not adhering to the notification procedure, failing to submit self/medical certificates, not attending Occupational Health appointments, can be addressed.

The line manager will complete the 'Return to Work Interview Template' (see appendix 2), and will return to the OD / HR Department. Further guidance on conducting return to work interviews can be found in the Managing Absence - Managers Guidance.

Section 4 – Management of Sickness Absence

4.1 Types of sickness absence

It is likely that most employees will become absent from work due to sickness at some point in their working lives, and it is recognised that individuals will have different types and levels of illness, including varying reactions and recovery times. Sickness absence can fall into a number of categories:

- 1. a single occasion of absence;
- 2. a series of absences due to one diagnosed cause;
- 3. serious long-term sickness absence;
- 4. absences due to minor unrelated illnesses.

Management of each type of sickness absence may require a different approach.

In the first category a period of recuperation and possibly treatment will usually be sufficient to enable a complete return to work.

Absences falling into the second and/or third category may require an exploration of the possibility of redeployment into another job, redesigning the employee's current job or changing the employee's work pattern to enable them to provide regular and effective service. Absences falling into the third category may lead to ill-health retirement or termination of employment.

In the fourth category, the frequency and pattern of absences due to minor and unrelated illnesses will normally be managed under the absence review procedure (see section 4.5), and may include referral to occupational health to seek to identify if there is evidence of an underlying medical cause.

4.2 Early intervention

Early interventions in a period of sickness absence, particularly where it is likely to be long term, are more effective than waiting for a time lapse to trigger action. The management of particular cases may be assisted by the efficient medical management of the case in co-operation with occupational health services and the employee's GP or health professional where appropriate. This can minimise time off, and identify at an early stage the employee's capacity to return to work.

In some circumstances it will be appropriate to make an immediate referral to occupational health. For example, in cases of workplace accident or injury, stress, musculoskeletal injury, and absence following maternity leave.

In dealing with instances of work-related stress, the line manager (or appropriate person) should meet with the employee at the earliest opportunity to assess the reasons causing work-related stress and attempt resolution. Any identified support should be provided prior to making an occupational health referral and advice should be sought from HR where necessary.

4.3 Attending meetings

Employees are likely to be asked to attend meetings regarding sickness absence that may include meetings under the absence review procedure, and employees must take all reasonable steps to attend. If attendance is not possible, the employee will be given the opportunity to reschedule the meeting. The employee can request to meet at a suitable alternative venue.

Attendance at meetings is important so that the absence can be discussed, the employee's well-being discussed and any relevant support offered, discussed and put in place.

A Human Resources representative will be in attendance at all formal meetings to take notes and provide procedural guidance.

Employees should be aware that non-attendance at meetings could result in a breach of this policy and as such their entitlement to occupational sick pay may be withheld.

4.3.1 Accompanied to meetings

The employee may be accompanied by a work colleague or trade union representative at meetings that are held to discuss a failure to meet or sustain the required levels of attendance. This includes any formal appeal hearings.

In the event of a representative being unable to attend on the date proposed, a mutually agreed date will be arranged, preferably within five working days. Meetings will only be rescheduled once for this reason.

4.4 Absence trigger points

Sickness absence trigger points for long and short term absences are an effective measure to indicate to employees and managers when sickness absence levels are becoming a cause for concern, and where further action may be necessary. They provide a consistent mechanism that initiates management action, and are openly communicated to employees who are aware that action may be taken when defined trigger points are reached.

Any subsequent action taken should be progressive over time to enable employees to improve their attendance, and to ensure that ongoing absence is addressed where no improvement is achieved.

The Absence Review Procedure (section 4.5) provides a framework for the progressive management of continued absence. Action will normally be taken under the absence review procedure if:

- Informal absence review: the employee has either 2 separate occasions or a total of 5 working days absence over the previous 12 months.
- Formal absence review stage one: the employee has either a total of 4 separate occasions or a total of 10 working days absence (or more than 10 consecutive

days on a long term basis) over the previous 12 months. A stage one absence trigger letter will be issued.

- Formal absence review stage two: following a stage one absence trigger, the employee has either a further 3 separate occasions or a total of 8 working days absence within the next 12 months. A stage two absence trigger letter will be issued.
- Formal absence review stage three: following a stage two absence trigger, the employee has either a further 2 separate occasions or a total of 6 working days absence within the next 12 months. A stage three absence trigger letter will be issued.
- Formal absence review stage four: following a stage three absence trigger, the employee has either a further occasion of absence within the next 12 months. Dismissal will be considered.
- A formal absence review stage 4 may also be scheduled in circumstances where an employee continues to be absent on a long-term basis, and it is indicated that a return to work in the foreseeable future is unlikely. Dismissal will not be considered until all viable options have been exhausted (see section 4.8).
- Management may initiate an informal or formal absence review in circumstances where a pattern of absence is emerging, or has been identified. Further advice should be sought from HR in the first instance.

The Council will treat each absence as genuine and every effort will be made to support employees to improve their level of attendance before formal action is taken. However, it must be understood that dismissal is a potential outcome if the level of absence is sufficient to justify it, and fair procedures have been followed in an effort to enable employees to improve attendance levels.

Absence trigger points may be adapted when justified in individual circumstances. For example, in the case of disabled or pregnant employees, or exploring the feasibility of reasonable adjustments.

4.5 Absence review procedure

4.5.1 Informal absence review

Where an employee has either 2 separate occasions or a total of 5 working days absence within the previous 12 months, an informal absence review meeting will be conducted with the line manager.

The purpose of this review is to remind employees of absence trigger points and the consequences of further absence by outlining the formal stages of the absence review procedure. It also provides an opportunity to consider any support required to improve attendance levels.

This review may be conducted at the same time as the return to work interview, if appropriate. There is provision in the Return to Work Interview Template (see appendix 2) to record what is discussed during the review. Alternatively, line managers may record details separately.

4.5.2 Formal absence review

In addition to the informal absence review meeting, the absence review procedure consists of three formal stages that are progressive in nature. The procedure is designed to support employees to improve attendance, ensuring that improvement in attendance is recognised; whilst also addressing continued failure to improve attendance.

4.5.3 Formal absence review stage one

When an employee has either <u>a total</u> of 4 separate occasions or a total of 10 working days absence within the previous 12 months, the line manager, in consultation with HR, will inform the employee in writing that a formal absence review stage one meeting will take place to discuss the matter, and that s/he has the right to be accompanied by a work colleague or trade union representative. At the meeting, the line manager will outline the employee's attendance record and the reasons why the employee is not meeting the attendance requirements.

The line manager will issue a stage one absence trigger letter to the employee indicating:

- his/her attendance is unsatisfactory;
- it is expected the employee will demonstrate and sustain an improvement in attendance to meet minimum standards of attendance:
- the expected improvement in attendance over the next review period, and the duration of that review period (normally a further 3 separate occasions or a further 8 working days absence over the next 12 months);
- the consequences if the employee's attendance levels do not improve.

Any stage one absence trigger issued to an employee will be confirmed in writing, and, if attendance standards are met, the stage one trigger will expire after a period of 12 months.

4.5.4 Formal absence review stage two

If an employee who has been given a stage one absence trigger letter fails to meet the expected improvement in attendance during the next twelve months (or the set review period), the line manager, in consultation with HR, will inform the employee in writing that a formal absence review stage two meeting will take place to discuss the matter, and that s/he has the right to be accompanied by a work colleague or trade union representative. The line manager will outline the employee's attendance record and the reasons why the employee is still not meeting the attendance requirements. The line manager will issue a stage two absence trigger letter to the employee indicating:

- his/her attendance is unsatisfactory;
- it is expected they will demonstrate and sustain an improvement in attendance to meet minimum standards of attendance:
- the expected improvement in attendance over the next review period, and the duration of that review period (normally a further 2 separate occasions or a further 6 working days absence within the next 12 months);
- the consequences if the employee's attendance levels do not improve, i.e. s/he may be dismissed.

Any stage two absence trigger issued to an employee will be confirmed in writing, and, if attendance standards are met, the stage two sickness absence warning will expire after a period of 12 months.

4.5.5 Formal absence review stage three

If an employee who has been given a stage two absence trigger letter fails to meet the expected improvement in attendance during the next twelve months (or the set review period), the line manager, in consultation with HR, will inform the employee in writing that a formal absence review stage three meeting will take place to discuss the matter, and that s/he has the right to be accompanied by a work colleague or trade union representative. The line manager will outline the employee's attendance record and the reasons why the employee is still not meeting the attendance requirements.

The line manager will issue a stage three absence trigger letter to the employee indicating:

- his/her attendance is unsatisfactory;
- it is expected they will demonstrate and sustain an improvement in attendance to meet minimum standards of attendance:
- the expected improvement in attendance over the next review period, and the duration of that review period (1 occasion of absence within the next 12 months);
- the consequences if the employee's attendance levels do not improve, i.e. s/he may be dismissed.

Any stage three absence trigger letter issued to an employee will be confirmed in writing, and, if attendance standards are met, the stage three absence trigger will expire after a period of 12 months.

4.5.6 Formal absence review stage four

If an employee who has been given a stage three trigger letter fails to meet the expected improvement in attendance during the next twelve months (or the set review period), dismissal may be considered.

The line manager, in consultation with HR, will inform the employee in writing of the circumstances leading the council to contemplate dismissal. A formal absence review

stage four meeting will take place to discuss the matter, and that s/he has the right to be accompanied by a work colleague or trade union representative.

The employee will be advised that the case will be heard by a panel comprising of the Head of Service and another relevant manager, ideally at the same level. A representative from OD / HR will be present, to provide advice, support and guidance on the sickness absence policy and procedures. The line manager will attend the case review to present management's case for recommending that the matter be progressed to a formal absence case review, contemplating dismissal.

At the meeting, the line manager will outline the attendance history, action taken to date, medical evidence, previous warnings, and support or adjustments implemented to support the employee to improve their attendance levels.

The employee will have the opportunity to present a response and raise any issues which they consider to be relevant. The panel will then make a decision based on the information presented by both parties.

The employee will be notified within 5 days of the panel's decision in writing.

A summary of the stages of the absence review procedure for short and long term absence has been included at Appendix 3.

4.6 Right of appeal

An employee who wishes to appeal against a decision to dismiss may do so by writing to Human Resources within 5 working days of receiving written notice of the decision, and setting out the basis of their appeal. The appeal will be heard as soon as reasonably practical.

The employee will be advised that the appeal will be heard by a panel comprising of the Director and another relevant manager, ideally at the same level. A representative from OD / HR will be present, to provide advice, support and guidance on the sickness absence policy and procedures. The Head of Service who heard the formal absence case review will attend the appeal hearing to present management's case for recommending the dismissal.

The employee will be notified within 5 working days of the panel's decision in writing.

4.7 Long-term sickness absence

A period of sickness absence of 20 days (4 weeks) or more (pro rata) will be regarded as long term. The council will work with each employee on a case by case basis to establish the most appropriate support in the given circumstances. An individual approach ensures that actions are tailored to suit each case.

When it becomes apparent that an employee will be absent for more than 20 working days (4 weeks) pro rata, the line manager should complete a referral to occupational health with a view to obtaining a medical opinion regarding the steps it may be appropriate to take to enable the employee to return to work (see section 5.2). Review

appointments with occupational health may be proposed until fitness for full duties is achieved.

Following the occupational health assessment, the line manager, in conjunction with HR, will consider what support and / or subsequent action is appropriate based on the medical report(s).

Appropriate action may include:

- managing the case under the absence review procedure (see section 4.5.6 Formal Absence Case Review), for example, in cases of persistent long-term absence:
- reasonable adjustment(s);
- phased return to work;
- redeployment;
- terminating employment.

4.8 Outcomes following absence

4.8.1 Return to work

See section 3.9 'Return to work interview' and refer to Managers Guidance – Managing Absence.

4.8.2 Incomplete recovery

If the employee is fit to return to some form of work, but is unlikely to recover sufficiently to enable a return to their current role, the following options may be considered in line with operational requirement:

- redeployment to a different job;
- reduction in hours;
- change of work pattern: or
- suitable adaptations.

4.8.3 No prospect of recovery

In cases where the occupational health assessment, advises that the employee is no longer capable of providing a regular and reliable service the Line Manager in conjunction with OD / HR should arrange a meeting with the employee to discuss the options available. In this case retirement on the grounds of III Health may be recommended.

Retirement on the grounds of ill health can only be recommended in cases where the employee is, in the opinion of Occupational Health, permanently incapable of carrying out his/her regular duties due to a medical condition.

The option to terminate employment on the grounds of ill health should only be considered when all options have been fully investigated and exhausted. In these circumstances, the line manager in conjunction with OD / HR, will:

- Review the employee's absence record and medical reports (length of absences and periods of good health between these) to assess whether or not it is having an adverse effect on their ability to perform their duties effectively;
- Consult with the employee and note all aspects of mitigation presented;
- Obtain up-to-date medical evidence or prognosis and the likelihood of recurrence;
- Advise the employee in writing as soon as it is established that termination of employment has become a possibility;
- Meet with the employee to discuss the options and consider the employee's views on continuing employment;
- Review if there are any other jobs that the employee could do prior to taking any decision on whether or not to dismiss;
- Consider any reasonable adjustments, including flexible working options such as reduced or adjusted working hours.

Upon receiving such advice, the OD / HR representative will immediately make arrangements with the employee to discuss the situation. The meeting must be handled with sensitivity, with due care being given to the potential need for counselling and support.

Arrangements should be made by the OD / HR representative to complete an application for III Health and to make the necessary arrangements for the employee to be examined by the relevant Pension Providers' Medical Advisor.

In some instances the employee may disagree with the Council's medical advice. If this is the case, the employee must submit a medical report to the Head of OD / HR, stating that they are not permanently unfit to undertake the duties of their post.

If the employee is not a member of the pension scheme the case will be referred for a Formal Absence Review Stage 4 Meeting, to consider if the employee is no longer capable of discharging the terms of his/her contract of employment. This will be heard in compliance with arrangements of the formal absence review stage four meeting (see section 4.5.6), where dismissal is being contemplated.

Should the relevant Pension Providers' Medical Advisor not approve the application for III Health Retirement, the case will also be referred for a Formal Absence Review Stage 4 Meeting, to consider if the employee is no longer capable of discharging the terms of his/her contract of employment. This will be heard in compliance with arrangements of the formal absence case review (see section 4.5.6), where dismissal is being contemplated.

4.8.4 Where the sickness absence or prognosis continues to give cause for concern

In cases where the sickness absence or prognosis continues to give cause for concern, it may be appropriate to consider the long-term employment prospects of the individual. The Line Manager in conjunction with OD / HR will need to consider,

after extensive consultation with the employee and his/her representative, the following factors:

- the length of the absence to date, and the likely length of the continuing absence;
- the nature of the illness and medical advice/prognosis on the individual;
- the effect of the individual's absence on the workload and performance of the Department.
- the steps that have been taken and have failed to secure regular and sustained attendance (in the case of intermittent sickness absence see Sections 4.5); or
- the steps that have been taken and have failed to secure the employee's return to work (in the case of long term sickness absence see Section 4.7).

In any of these situations the case may be referred for a Formal Absence Review Stage Four Meeting, to consider termination of employment on the grounds of ill health capability. The panel will consider if the employee is no longer capable of discharging the terms of his/her contract of employment due to unacceptable levels of absence. This will be heard in compliance with arrangements of the formal absence review stage four meeting (see section 4.5.6), where dismissal is being contemplated.

Before any decision to terminate employment is put into effect, the options outlined in section 4.8.2 must be fully explored and exhausted.

5.1 Role of occupational health

The role of occupational health (OH) is to provide independent and professional occupational health advice and guidance to assist the council in promoting health and well-being; maximising attendance; and managing sickness absence.

As such, the council may require employees to undergo a medical examination by a medical practitioner at any stage of employment, and it is a condition of employment that employees co-operate fully with any medical investigation, including attendance for medical examinations. Employees are reminded that contractually they are obliged to attend any Occupational Health appointment scheduled for them and that their entitlement to Occupational Sick Pay is based on compliance with this policy.

5.2 Referring to occupational health

Line managers can refer employees to OH in order to provide assistance to the individual on a health-related matter, and to enable OH to provide the line manager with advice about the employee's health in relation to their work. Referral to OH may be appropriate in a number of circumstances, e.g. where an employee:

- has exceeded absence trigger points;
- continues to be absent on a long-term basis;
- has requested to be referred;
- is at work and displays symptoms or behaviour that management believe warrant referral.

It is essential that a referral is not portrayed as a punishment, and that the reasons for it are fully explained. The reason for referral should be clearly set out in the referral document, along with any specific issues on which the manager wishes to receive advice. In general, the types of issues about which questions might be asked include:

- whether the employee is fit to undertake their current role;
- whether the employee is fit to attend meetings in relation to discipline or grievance issues;
- whether there is an underlying medical condition which could affect performance;
- the prognosis and likely effect on fitness for work;
- restrictions to, or adaptations needed for work;
- the need for, and nature of, a programme of support;
- · recommendations for rehabilitation into work;
- ill-health retirement issues, if relevant.

If an employee has been hospitalised, is undergoing treatment, or in cases of very serious illness, it may be more beneficial to defer making an appointment. Advice can be sought from OH on specific conditions if necessary.

5.2.1 Self-referral

Employees can self-refer to Occupational Health, particularly if it relates to, or is affecting their work. To self-refer contact the relevant HR Business Partner. No OH Report will result from a self-referral unless the employee concerned requests it.

5.2.2 Employee consent

Occupational health referrals must be completed with the **informed consent** of the employee, and this must be sought on each occasion a **referral** is initiated. OH may request further medical evidence from an individual's GP or treating medical professional in order to gain an understanding of their medical history or ongoing treatment of a current condition. Again, an employee's informed consent to release these records is mandatory.

An employee may withdraw their consent at any stage. Employees considering withdrawing consent must be aware that in the absence of medical guidance, management will have no alternative but to take action based on the information available.

5.3 Failure to attend occupational health or any meeting

If an employee is unable to attend an OH appointment, or any meeting with Management relating to their absence, they must advise their line manager within 2 days of the appointment, so that an alternative date/time may be scheduled. If no reasonable explanation is given, the manager should advise the employee of their contractual obligation to attend.

5.4 Occupational health report

Following an occupational health appointment, OH will forward a report to management that may include recommended action(s). Employees will be offered the opportunity to see the written OH report before it is forwarded to management.

If on receipt of a report any details are unclear, managers should contact OH for clarification.

5.4.1 Disagreements about medical advice

In circumstances where the employee's GP and OH advice is in disagreement, the council will consider the independent medical opinion of OH to be final, unless in exceptional circumstances where it is deemed necessary to obtain a further medical opinion.

5.5 Occupational health recommendations

5.5.1 Reasonable Adjustment(s)

In accordance with discrimination legislation, the Council has a legal requirement to consider adjustments which would enable an employee with a disability to remain in work and provide reliable and effective service. Consideration must be given to making temporary or permanent adjustments to working practices or premises.

Managers are encouraged not to attempt to make a judgement as to whether an individual is covered by the statutory definition of disability, but to instead focus on meeting the requirements of each employee on a case by case basis.

In all cases advice and guidance should be sought from OH and HR. Adjustments could include:

- temporary or permanent changes to duties, working pattern, or hours;
- redeployment to a different job;
- changing the place of work; and
- making reasonable adjustments to the features of a building or access to it, including its fixtures, fittings and design, although this list is not definitive.

A clear written programme, including timescales and review periods, must be agreed before any return to work can take place. HR advice should be sought prior to any agreed variation to contract.

5.5.2 Phased return to work

When an employee is fit to return to work but cannot carry out their full range of duties, every effort should be made to give them the opportunity for an earlier return to work. This might include reducing or amending their range of duties, where possible. This amendment of duties will take place over a short period of time, usually 4 weeks and will be subject to review. In exceptional circumstances and following advice from Occupational Health, a phased return may be more than 4 weeks.

Occupational health may advise that an employee phases their return to work over a period of time. A phased return can support an employee to reintegrate into the work routine gradually, while also ensuring that they are fit to resume normal duties. This option can result in an employee returning to work earlier, as opposed to waiting until they are capable of performing their full hours and duties.

It should be clear from the outset how working hours and duties will increase throughout the phased return so that by the end of the agreed period the employee is ready to commence normal working. Reduced hours on medical grounds is regarded strictly as an alternative to sickness absence.

Phased returns are normally for up to a period not exceeding 4 weeks. The employee should be reminded that it is expected that there will be a return to full duties and normal working hours at the end of the agreed period.

The line manager will monitor progress and review the arrangement prior to confirming a return to normal working arrangements. If it is clear that the employee requires more time, this should be discussed and a further time period agreed. If at the end of the agreed extension the employee feels they are unable to return to normal working

duties and/or hours, the line manager should contact HR for further guidance regarding whether this can be accommodated on a permanent basis.

Where an employee continues to have health difficulties and cannot comply with the phased return plan, the line manager will again refer the employee to OH for review.

5.5.3 Phased return plan

Where a phased return to work has been recommended, the line manager should complete a phased return to work form (appendix 4), in conjunction with the employee, in advance of an employee's return to work. The plan should include:

- the proposed duration of the arrangement (up to a period not exceeding 4 weeks);
- adjusted work pattern for each day / week;
- range of duties and how this will progress;
- when and how the arrangement will be reviewed;
- how temporary changes to normal hours will be managed e.g. by using annual leave for hours / days not worked; temporarily reducing normal working hours where the employee is paid only for the hours / days worked; or days not worked will be recorded as sickness absence.

Where an employee wishes to cover their period of phased return with sick leave they are required to submit a medical certificate, to the OD/HR Department, up to the date when their phased return finishes. Should the employee chose to cover their period of phased return with annual leave they do not require a medical certificate for that period.

5.5.4 Redeployment

If an employee has been identified as unfit to perform the duties of their current post, the council will, within reason, explore options for other suitable employment. The line manager should fully discuss with the employee all the options for redeployment.

Medical Redeployment

There will be occasions when the Council will need to consider redeploying employees as a result of their current health situation. Following medical advice an employee can be considered for redeployment when they have an underlying medical condition and have been deemed unfit to return to their substantive post for a prolonged period and/or no reasonable adjustments can be put in place. Advice must be sought from Occupational Health regarding whether redeployment should be considered.

Redeployment is a positive act, which can enable the Council to maintain the skills and experience of valued employees, as well as meeting its legal obligations.

Where redeployment is necessary due to an underlying medical condition, and

• the employee has been designated by Occupational Health as being covered by the provisions of the Disability Legislation,

- has been deemed unfit to return to their substantive post for a prolonged period,
- there are no reasonable adjustments that can be put in place, or
- it is not possible to make reasonable adjustments, following medical advice from Occupational Health

There is no salary protection associated with a medical redeployment.

Managers in consultation with OD / HR will work alongside the Sickness Absence Policy and Procedures. If no suitable alternative employment has been secured and a decision is made to terminate employment by reason of ill health, the employee will remain a candidate for redeployment during their notice period.

Section 6 – Managing Specific Cases

6.1 Stress

Stress is recognised as "the adverse reaction people have to excessive pressure or other types of demand placed on them". This makes an important distinction between pressure, which can be a positive state if managed correctly, and stress which can be detrimental to health. The stress threshold varies from person to person.

6.1.1 Addressing work-related stress

The council is committed to protecting the health, safety and well-being of employees and recognises that work-related stress is a health and safety issue. The council will support those individuals reporting sickness absence through work-related stress.

Employees are responsible for identifying where work-related stress is causing concern and for communicating this to their line manager. It can be helpful to suggest practical solutions such as additional support / training that may help alleviate the symptoms of stress. Individuals may also self-refer to occupational health for a confidential discussion.

Link to Managers Guidance on Stress

6.1.2 Absence due to stress

Line managers are responsible for managing the work demands placed on employees, and where concerns are raised by individuals, working with them to find a resolution. If concerns raised by an employee are not resolved whilst the employee is at work, and the employee is absent due to stress (work-related or not), the line manager should continue to try and identify and alleviate the problem. Line Managers should make an immediate referral to occupational health for employees reporting absence due to stress for medical advice.

Where stressors exist outside work, consider what support the individual needs, for example debt counselling, coping with bereavement, family illness, or relationship concerns.

Where the stress is work-related, consider measures that could be put in place to alleviate the stress.

The Health and Safety Executive (HSE) website provides comprehensive guidance for both staff and managers in assessing and managing stress.

http://www.hse.gov.uk/stress/index.htm

6.2 Mental Health

Mental health problems can affect all of us. In many cases people recover completely from an episode of mental ill health; in others, symptoms may be more long-term or intermittent.

There are benefits from managers adopting an early intervention approach for employees experiencing mental ill health, since this makes it more likely that the individual will recover quickly and be able to remain in work. The line manager and colleagues may have a role in identifying early symptoms of distress, and encouraging the individual to see their doctor.

Managing an employee experiencing mental ill health can be particularly difficult. The first step is to identify the mental ill health and the reasons for the employee's behaviour. It can very difficult to decide what action to take. It is important to seek medical advice from the Occupational Health Doctor to determine the best action to take.

Many people with ongoing mental health conditions meet the definition of disability under the Disability Discrimination Act. This means that people experiencing mental ill health are protected from discrimination and harassment and the Council are required to consider adjustments to adapt their job or work.

Line managers who become aware that a member of their team is experiencing mental ill-health should support the individual and encourage them to seek help.

Councils Employee Assistance Programme is available to all staff. A range of support and materials are available to include a confidential counselling service.

Link to Inspire

6.3 Musculoskeletal disorders

Musculoskeletal disorders are problems affecting the muscles, tendons, ligaments, nerves or other soft tissues and joints. The back, neck and upper limbs are particularly at risk. Unlike most other workplace health issues, MSDs can happen outside the work environment and then be affected by work.

Prompt reporting of symptoms is required to ensure the individual gets the right support and help from Council to enable them to manage their condition at work.

Line Managers can:

- Encourage employees to report symptoms early;
- Discuss jobs / tasks that are contributing to the MSD or making it worse, and consider reasonable adjustments at work, equipment or work arrangements where appropriate;
- Carry out and regularly review risk assessments of all activities which have the
 potential for MSD's, for example, 'Moving and Handling' and 'Display Screen
 Equipment' assessments;
- Seek support and advice in managing cases of MSD's from occupational health, or health and safety.
- Signpost employees with MSD's to relevant services.
- Signpost employees to Occupational Health for financial support for up to 6 sessions of physiotherapy

Employees experiencing musculoskeletal symptoms should:

- Report MSD symptoms which may be affected by their work activities to their line manager;
- Report problems in the workplace which could cause MSD's or exacerbate existing conditions;
- Comply with any workplace risk assessments;
- Cooperate in seeking suitable adjustments to work, equipment, and working arrangements;
- Follow the advice of health professionals.

Further useful advice and guidance can be found at the following websites:

https://www.hseni.gov.uk/sites/hseni.gov.uk/files/publications/%5Bcurrent-domain%3Amachine-

name%5D/guide on prevention and management of musculoskeletal disorders msds_pdf

https://www.nidirect.gov.uk/articles/safe-manual-work

6.4 Pregnant employees

Periods of sickness during pregnancy which are directly related to that pregnancy will not be counted towards the trigger points for managing sickness absence. The absence should be recorded as per procedure, and the line manager should carry out a return to work interview to discuss and explore options that will support the employee. It may be appropriate to refer the employee to occupational health for advice on steps that may be taken to assist the employee.

If an employee is absent due to sickness before the four week period leading up to the expected week of childbirth and the employee is still working, they will receive sick pay as normal. After this time, within the four week period leading up to the expected date of birth, any pregnancy-related sickness occurring whilst still working will automatically start the maternity leave period.

Line Managers should carry out a Pregnancy Related Risk assessment with the pregnant employee. This should be reviewed throughout the pregnancy. See Risk assessment template.

Link to Family Rights at Work Policy (in draft)

6.5 Menopause

Council recognises that women may need additional consideration, support and adjustments during the time of change before, during and after the menopause. The Council is committed to ensuring that all individuals are treated fairly and with dignity and respect in their working environment. It is also committed to ensuring the health, safety and wellbeing of the workforce. The Council may consider any adjustments

where necessary to support women experiencing the menopause in line with Occupational Health recommendations and operational requirements.

Managers should ensure risk assessments consider the specific requirements of menopausal women and ensure that the working environment is suitable and will not make women's symptoms worse. The risk assessment will assist with the identification of any potential adjustments which may be required. Line managers can make a referral to OH for employees who have menopausal symptoms that are impacting their work.

6.6 Disabled employees

There may be certain disabilities that affect an employee's ability to meet expected standards of attendance. In these circumstances, the council will explore with the employee what reasonable adjustments, if any, can be made to enable the employee to meet expected attendance standards.

In some cases, such as where adjustments are being introduced, it may be appropriate to adjust trigger points when considering issuing warnings for absences that are disability related. It may be appropriate to seek medical advice regarding what steps may be taken to assist the employee to meet the expected standards of attendance.

Council has a legal requirement to consider reasonable adjustments which would enable an employee with a disability to remain in work and provide reliable and effective service. Consideration must be given to making temporary or permanent adjustments to working practices or premises.

Further details can be found in section 5.5 regarding occupational health recommendations.

6.7 Drug and/or alcohol misuse

Council recognises that drug and alcohol addiction is a health problem which can be treated. Line managers will endeavour to address issues relating to drugs and alcohol misuse sensitivity and confidentiality whilst considering the health, safety and welfare of employees and customers.

Link to Workplace Drugs and Alcohol Policy (in draft)

6.8 Sickness Absence as a result of other employment or activities

In accordance with the Code of Conduct for Local Government Employees, employees should not engage in any other business or take up any other additional appointment without the express consent of the Council. Where an employee wishes to engage in other business or take up additional appointment/s he/she must seek the permission of the Council and act at all times in accordance any contractual obligations in this respect. Any such employment must not, in the view of the Council, conflict with or react detrimentally to the Council's interests. Therefore employees should refrain from undertaking any secondary employment or activities that may affect their capacity to attend work. Where there is evidence of recurring or excessive absence due to either of the above, entitlement to occupational sick pay may be withdrawn.

6.9 Sickness Absence during employee related issue

If an employee is absent due to sickness at any stage of an investigation or process, the council should continue with proceedings so far as possible in the absence of the employee. For example, continuing to interview and take statements from any other witnesses to the particular matter.

Where the employee's sickness absence is minor and for a short duration, simply await the employee's return and continue with the process on their return.

Where the employee's absence is likely to be more prolonged, referral should be made to occupational health to determine whether or not the employee is fit to take part in an investigation and / or employment related issue. The employee should be advised that a referral is being made and the reasons for it.

Potential questions for occupational health could include:

- Does the employee have the ability to understand the allegation?
- Is the employee well enough to respond to the allegation?
- Is the employee well enough to attend a disciplinary hearing?
- If unable to attend, does the employee have the ability to provide a written submission?
- Are there any adjustments to the disciplinary process which could be made to enable the employee to participate?

If an employee refuses to provide medical evidence regarding any employment-related issue, it is appropriate to make a decision based on the information available.

If the employee is likely to be off sick on a long-term basis and is not fit enough to undergo any part of the investigation / employment-related issue in the meantime, there may be no alternative but to place proceedings on hold and continue managing the situation as sickness absence. In these circumstances, the employee should be informed that proceedings are on hold pending an indication of their fitness to proceed.

If the reason for the employee's absence is stress caused by the process, it may be to the employee's detriment to delay proceedings, and prompt resolution may be better for the employee's health.

Relevant factors in terms of deciding whether or not it is fair to proceed with the process without the employee being present would include:

- the importance of dealing with the matter promptly;
- how long the employee has been off sick and whether or not there is any likelihood of a return to work in the near future: and
- whether or not a long delay in dealing with the matter might be to the detriment of the Council.

Managers should only consider continuing without the employee being present where it is reasonable in all the circumstances and subject to HR advice.

Link to Disciplinary / Grievance / Dignity & Respect at Work / Mediation policy

6.10 Having surgery abroad / Elective surgery

Employees who are travelling overseas for surgery or who are undergoing elective surgery, may be entitled to occupational sick pay, depending on the circumstances of the case. Individuals should discuss the circumstances with their line manager in the first instance. Sickness absence reporting procedures should be followed throughout the period of absence. Line managers should seek advice from HR before the employee commences sick leave.

In cases where elective surgery is not medically necessary, the employee may request annual leave, or special unpaid leave which will be granted or refused in line with the operational requirements. Advice may be sought from Occupational Health in these circumstances.

In all cases, the line manager or appropriate officer must ensure that contact and communication is established and maintained to obtain the information necessary to assist with the management of the case and facilitate a prompt return to work where possible.

6.11 Industrial Injury

Employees who consider their illness/absence arises from an incident/accident or injury at work must notify their Line Manager as soon as reasonably practical. The manager is responsible for ensuring the Accident Reporting procedures are adhered to.

Following an investigation into the accident, the sickness absence relating to a workplace injury will be reviewed.

6.12 Discretion

In managing specific absence cases, discretion may be particularly appropriate in cases related to: disability; maternity; workplace injury; or terminal illness. Some examples of occasions where discretion may be exercised includes, but is not limited to:

- deferring a referral to occupational health e.g. if the employee is following a programme of treatment.
- setting alternative trigger points instead of issuing a warning e.g. in cases where reasonable adjustments have been identified by Occupational Health or in case where a disability has been identified

Guidance will be sought from Occupational Health in these circumstances before a decision is made.

Section 7 - Evaluation and review of the policy

The Sickness Absence Policy and Procedure will be reviewed annually.

Section 8 - Section 75 Equality and Good Relations

Causeway Coast and Glens Borough Council is fully committed to meeting its obligations in relation to Equality and Good Relations under Section 75 of the Northern Ireland Act. In this regard this policy will be screened using Section 75 guidelines and will be subject to an Equality Impact Assessment if found necessary as a result of the screening process.

Section 9 - Contact Details

Any issues or queries relating to this policy should be addressed to:

Brid Lofthouse Head of Organisation Development / Human Resources Absence Notification and Certification Procedure Flowchart

Day 1 - 3 of absence

Employee must notify line manager in person at least one hour prior to usual starting time or in line with local arrangements, stating nature of illness, expected duration, and tasks to be completed.



Day 4 – 7 of absence

If no likely return date given on day one, employee to contact line manager to provide an update on likely duration and agree next contact if no return in the interim. Employee returns self-certificate to OD / HR.



Day 8 onwards

For absences of more than 7 days, employee submits Doctors fit note.

Certification must cover the entire period of absence.



Continuing absence

If absence continues, employee submits Doctors fit notes without delay to cover entire period of absence.

Maintain contact with line manager, participate in Occupational Health Appointments to secure an expedient return to work.



Return to work

Participate in return to work interview with line manager.



Evidence of fitness to return to work

If requested, employee to provide evidence of fitness to return to Work, e.g. where returning before expiry of Doctors fit note. You may be required to attend Occupational Health Doctor.

Days are counted in calendar days, not working days, and include public holidays and non-working days.



FORM N2

RETURN TO WORK NOTIFICATION/INTERVIEW FORM

SECTION A:	
to be completed by EMPLOYEE on the first	st day of return to work following sick leave
Employee Name:	
Directorate:	
Department:	
Date of first day of absence:	
Date of last day of absence:	
Date of return to work from absence:	
Reason for absence:	
Please tick appropriate box to identify	General Work-Related
nature of absence (see glossary of definitions overleaf):	Industrial Injury Disability
definitions overlear).	Disability Disability
	Pregnancy
	Related
SECTION B:	
to be completed by LINE MANAGER	
Underlying medical condition known/DDA Reasonable Adjustment considered:	
- Review previous absence of last 12	
months: (Details available by emailing	
absence@causewaycoastandglens.gov.uk).	
- Short-term or Long-term Triggers:	
(Absenteeism Policies for each of the legacy Councils are available on the Staff Portal under	
OD/HR Information folder). If employee hits a	
trigger, the HR Business Officer/HR Assistant	
will alert Line Manager to this fact. Update on work issues/commitments	
discussed:	
Please give brief details opposite on discussions held.	

Future Action Points, if applicable:	
Please give brief details opposite on any future action points discussed.	
Return to work interview carried out by: Signature of Line Manager	
Date return to work interview held:	
I confirm that this form is an accurate	
record of my sickness absence and I certify	
that I am fit to resume work.	
Signature of Employee:	
Details	
Dated:	

Please note that knowingly making a false statement may result in disciplinary action being taken and occupational sick pay terminated.

Please email the completed form to <u>absence@causewaycoastandglens.gov.uk</u>. If you have any queries or require any further information regarding this form please contact your relevant OD / HR Department.

Please ensure when holding and processing individual's personal data that you comply with the Council's Data Protection Policy and adhere to Data Protection legislation.

Glossary of Definitions (This is not an exhaustive list):

General	Colds, influenza, viral infections, broken bones, etc.
Industrial Injury	Absence attributed to an accident or injury at work.
Work-Related	The result of working conditions or the working environment which either caused or can be attributed to the absence, eg. stress, tendinitis, respiratory illness, etc.
Disability	A physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities. eg. multiple sclerosis, coronary heart disease, diabetes, cancer, chronic kidney disease, etc.
Pregnancy Related	Absence attributed to your pregnancy, eg. morning sickness, back pain, pre- eclampsia etc. If you are off sick with a pregnancy-related illness in the last four weeks before your expected week of childbirth, your employer can start your maternity leave automatically

Appendix 3
Summary of the stages of the absence review procedure for short & long term absence

Absence Trigger Points	Absences (Short Term & Long Term)	Action	Outcome	Who is responsible?
Informal Absence Review	2 separate occasions or 5 working days within the previous 12 months	Informal Meeting with Line manager to review	Remind employees of absence trigger points and the consequences of further absence by outlining the formal stages of the absence review procedure	Line Manager
Formal absence review Stage 1	A total 4 separate occasions or 10 working days within the previous 12 months	Stage one absence review meeting	Stage one absence trigger issued	Line Manager, in conjunction with OD / HR Representative
Formal absence review Stage 2	A further 3 separate occasions or 8 working days during the next twelve months	Stage two absence review meeting	Stage two absence trigger issued	Line Manager, in conjunction with OD / HR Representative
Formal absence review Stage 3	A further 2 separate occasions or a total of 6 working days during the next twelve months	Stage three absence review meeting	Stage three absence trigger issued	Line Manager, in conjunction with OD / HR Representative
Formal absence review Stage 4	A further 1 separate occasions or a total of 4 working days	Formal absence case review meeting	Consideration of dismissal	Head of Service and another relevant manager, ideally at the same level, in conjunction with OD / HR Representative

Appendix 4

FORM N3

PHASED RETURN TO WORK FORM

Where a phased return to work has been recommended by either the Council's Occupational Health Specialist or the employee's General Practitioner the details of the phased return must be agreed prior to the employee's return to work. The HR Business Partner or HR Business Officer will support you to co-ordinate the employee's phased return to work and may be present at this meeting.

Phased return to work is being offered to help the employee "acclimatise" back to the work routine and work tasks, after a period of long term sickness absence. The phased return is usually offered over a period of four weeks to enable the employee to build up their working hours.

Please note that during the phased return to work, the employee will receive their normal pay for the time they are at work and use either occupational sick pay (full pay/half pay/no pay) or annual leave for the time they are not at work.

At this meeting you should advise the employee that if they wish to cover their period of phased return with sick leave they require to submit a medical certificate up to the

date when their phased return finishes to the OD/HR Department. If they chose to cover their period of phased return with annual leave when they are not at work they require to submit a medical certificate up to the date that they return to work. For payroll purposes, please indicate below which option the employee wishes to use for their phased return, by ticking the appropriate box below.					
Occupational Sick Pay	Annual Leave				
If an employee uses annual leave during their 4-week Phased Return and they have another period of sickness during this time, it will be counted as a new period of sickness absence for trigger purposes.					
LINE MANAGER to complete details below.					
Employee Name:					
Directorate:					
Department:					

Please detail below the agreed days and times which the employee will be working over the following weeks. Where possible, phased returns will be based on full days unless half days have been suggested by either the Council's Occupational Health Specialist or the employee's General Practitioner. An example has been completed for you.

Date of Return to Work:

EXAMPLE (For full time employee) Week One – week commencing 2 November

Day	Time at Work	Time Not at Work
Monday	9.00 am - 5.00 pm	Nil
Tuesday	Nil	Occupational Sick Pay or Annual Leave
Wednesday	9.00 am - 5.00 pm	Nil
Thursday	Nil	Occupational Sick Pay or Annual Leave
Friday	Nil	Occupational Sick Pay or Annual Leave
Saturday	Off Day	
Sunday	Off Day	

Week One – Week Commencing	
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Day	Time at Work	Time Not at Work
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Week Two – Week Commencing _____

Day	Time at Work	Time Not at Work
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Week Three – Week Commencing

Day	Time at Work	Time Not at Work
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

	<u> </u>			
Day	Time at Work	Time Not at Work		
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
Please detail any oth applicable:	er adjustments to di	uties during the phased return period, if		
Signed by Employee	9 :			
Dated:				
Signed by Line Man	ager:			
Dated:				
Signed by HR:				
Dated:				
-	_			
When this form is completed by Line Manager or his/her nominee, a copy should be given to the employee and the OD/HR representative will take the original form. If no OD/HR representative is present at this meeting the Line Manager or his/her nominee will immediately email this form to absence@causewaycoastandglens.gov.uk .				
The OD/HR Departm	nent will liaise with	Payroll.		

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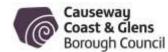
Protection legislation.

Week Four - Week Commencing

Please ensure when holding and processing individual's personal data that you comply with the Council's Data Protection Policy and adhere to Data



Title /TaXX/Activity	FaXX/Activity/Equipment/Workplace Location / Premises/Site				Revision					
									1.0)
RA Ref. No	Date	Review Date			Asses	sed by	Appro	ved by H	IOS	
Who might be harmed?	Employees Contractors	Public Maintenance		Othis (specify	<i>n</i>)				
General Controls:										
				itial Rix	ίX				Residual RiXX	
Hazards / RiXX	Existing Controls		S (1-5)	L (1-5)	RL	Additional Controls		S (1-5)	L (1-5)	RL



Working Arrangements		

		In	itial Ri	хх			Residual RiXX		
Hazards / RiXX	Existing Controls	S (1-5)	L (1-5) RL		Additional Controls		L (1-5)	RL	
					Contact OH for review asap				



thod Statement:													
Assessed by: XX			Date:					1.9.19 Next review	due: 1.10.19				
Assessed by:			l	Date:				Next review	due:				
Assessed by:			Date:					Next review	due:				
			S1	S2	S3	S4	S5						
Likelihood [L] Severity [S] RiXX Level (RL) 1. Very unlikely 1. Insignificant 2. Unlikely 2. Minor			1 2	2	3	8	5	<u> </u>	RIXX LEVEL 1 -6 Acceptable no furthis action but ensure controls are maintained 7 – 9 Adequate – monitor, look to improve within specified timescale				
3. Fairly unlikely 3 4. Likely 4	3. Moderate 4. Major 5. Catastrophic	L3	3	6	9	12	15 20	10 – 14 Tolerable – look to improve with 15 – 25 Unacceptable – stop activity & m	in specified timescale				
		L5	5	10	15	20	25	L					

A **Risk Assessment** is a careful examination of anything in your workplace that could cause people injury or ill health. A **hazard** is anything that has the potential to cause harm. **Risk** is the likelihood of a hazardous event occurring and the severity of the event. **Likelihood** (1-5) is a measure of the chance that the hazardous event will occur. **Severity** (1-5) is the outcome of the hazardous event. The **Risk Level** is determined by multiplying the numerical value for likelihood and severity.

Personnel to sign off they have read, understand and will implement the RAMS:



No	Signature	Date	No	Signature	Date



RAMS Action Plan OHS 020

ACTION PLAN

Item	Action required	Ву	Ву				
iteiii	Action required	Whom	When	Done			
1							
1							