

Model Sickness Absence Procedure

1. Introduction

1.1 This procedure is intended to be read in conjunction with the Managing Sickness Absence Policy. [See below]

1.2 The ***** is a caring employer and provides considerable support to all staff in times of sickness and personal difficulties. The aim of this document is to provide Heads of Departments, and those responsible for staff, with guidelines on how to deal with individual employees, from all categories of staff, who are absent due to sickness.

1.3 It is important that a consistent approach is adopted and a balance struck between providing support to the employee, recognising individual circumstances whilst ultimately securing their return to work and improving attendance generally.

1.4 Whilst recognising the need to be reasonable and sensitive in cases of sickness absence, the company is very conscious of the fact that poor attendance at work can contribute to reduced efficiency and can disrupt the quality of service and team spirit.

2. Definitions

2.1 **Long-term absence** - Any period of absence from work because of ill health lasting more than four weeks will be deemed as long-term sickness absence. This includes: long-term absence because of a single illness or disability and repeated periods of absence arising from a single illness or disability.

2.2 **Frequent short-term absences** - Frequent short-term absence involves patterns of absence due to minor illnesses that are usually not connected. Such patterns could vary from a relatively large number of single days of absence, to fewer occasions of absence involving a loss of up to a week or more, or a mixture of individual days and longer periods of absence. High levels of this type of absence may indicate problems, which need to be explored and resolved.

2.3 **Occasional short-term absence** - Occasional short-term absences are typically three or fewer occasions totalling no more than 14 days of sickness absence in a rolling year.

2.4 **Trigger points** - The points at which it is appropriate for managers to review the sickness absence of an individual member of staff and take action as necessary and appropriate.

2.5 **Patterns of absence** - Trends that should be monitored to evaluate underlying causes for sickness absence, e.g. taking Monday/Friday off.

2.6 **Return to work interview** - This interview, conducted by the line manager, should take place within 48 hours of the employee returning to work from any period of sickness absence, including short-term sickness of one day only. The purpose of the interview is to assure both the employee and manager that the employee is indeed fit to return to work, ensure managers are aware of any ongoing health concerns and provide an opportunity for staff to raise any wider concerns they may have. It should be informal and needn't take more than a matter of minutes; however the nature or severity of the illness will often dictate how long the interview needs to be.

2.7 **Phased return** – A gradual return to full duties following a period of sickness absence. Options may include varying days or hours usually worked for a short period of time. The Occupational Health Team will provide advice on this where appropriate.

3. Sickness Reporting Procedure

3.1 On the first day of sickness absence employees should notify their immediate line manager or designated deputy that they will not be attending work. Contact should be made before work is due to commence or within one hour of this start time, and should be made personally by

telephone. Only in exceptional circumstances should contact be made by somebody else. Departments may make alternative arrangements for reporting absences.

3.2 Where individual departments establish an alternative procedure for reporting absence, it is essential that all staff are made aware of the operation of this procedure. Considerations may need to be made, for example, for an employee who lives alone or does not have access to a telephone.

3.3 It is the responsibility of the employee to keep their manager informed of the reason for absence, possible length of absence and likely return date, and any medical advice they have been given. Individuals who report their absence must provide this information and either give an expected date of return or information on when they will be able to call again with further information. If an employee is unsure of the possible length of absence then it is their responsibility to contact their manager at least every three days or as agreed and submit the relevant certificates as soon as possible.

3.4 Failure to follow the reporting procedures without good reason or absence that constitutes misconduct (e.g. unauthorised absence) should be dealt with under the relevant disciplinary policy and procedure.

4. Documentation/Certification

4.1 Once notified of an absence, the Manager or a nominated representative should inform all relevant parties and complete the Sickness Absence Notification/Self Certificate form. On return to work an employee will be asked to sign the form. The form should be sent to the Pay Office and a copy kept within the department.

4.2 It is important that the Pay Office hold accurate and up-to-date records of sickness absence, therefore, if the absence extends beyond seven days, an incomplete Sickness Absence Notification/Self Certificate, containing the start date of absence and all other known details, should be sent to the Pay Office. When the individual does return to work, the return date and employee signature should be entered and the form forwarded to the Pay Office as above.

4.3 If the sickness continues beyond seven days (including non-working days and weekends) a medical certificate must be submitted by the employee as soon as reasonably practicable. Further medical certificates must be submitted thereafter to cover the complete period of absence.

4.4 In certain circumstances, employees may be requested to provide first day doctor certification, where there is reason to believe that the policy is being used improperly or where a persistent pattern of sickness can be identified.

4.5 If a first day GP certification has been requested, the employee will be expected to produce a medical certificate for each individual period of absence. The cost will be fully reimbursed by the Company on production of an official receipt from the issuing medical practitioner.

4.6 First day certification may be required in circumstances where sickness occurs on a day or days where a request for leave has been refused.

4.7 Failure to provide appropriate certificates may result in pay being withheld.

4.8 All medical certificates should be submitted to the Pay Office, and copied to HR.

5. Recording and Monitoring

5.1 Departments should keep comprehensive records of employee attendance. Records should be monitored regularly to spot any patterns or trigger points being reached.

5.2 Factors to be considered include:

- do the employee's absences form a regular pattern?
- do the absences follow or precede annual leave?

- what is the average length of the absences?
- what are the reasons given for absences – are they varied/is there a pattern?

6. Recording of Part-day Sickness Absence

6.1 Where an employee arrives at work and subsequently goes home sick during the day, this should be recorded as follows:

- where the employee is at work for less than an hour, a full sick day should be recorded
- where the employee is at work for more than one hour, up to half a day, this should be recorded as a half-day's sick leave
- where the employee has worked more than half a day, this should not be recorded as sick leave; however departmental records should be kept in order that patterns and trends can be monitored.

6.2 Where an employee goes home sick at the suggestion of his/her manager, this should be recorded as sick leave in line with the above guidelines.

6.3 A 'day' for the above purposes is the hours due to be worked on a particular shift, whether this be part-time or full-time.

7. Return to Work Interview

7.1 Managers should meet with their employees, in private, following all periods of sickness absence to discuss their absence and any relevant issues arising from it. The purpose of this meeting is to establish the reason for the absence and identify any contributing problems e.g. domestic/personal/work that may exist, offering help and advice where appropriate in a sensitive and diplomatic manner.

7.2 The return to work interview is a supportive meeting and does not form part of any formal proceedings. This informal meeting may only take a matter of minutes; however a brief note of the meeting should be kept.

7.3 It is important that proper preparation is made and that the interview is conducted fairly and consistently and includes the following:

7.3.1 *Current Health* - the line manager or supervisor has a duty of care to ensure that employees are fit to work and should gently explore the reason for absence, respecting the employee's right to privacy and whether the absence is work related. (It should be recognised that sickness absence can sometimes be a disguise for other things e.g. unhappy in job, harassment, personal difficulties.) Identify what steps the individual has taken to investigate the cause and, if necessary, what preventative measures he/she is taking to ensure that it does not recur. It is particularly important to show care and concern during this exploratory stage of the interview and assurance should be provided as necessary.

7.3.2 *Attendance Record* - If there are concerns regarding an individual's attendance record it may be appropriate to bring to the individual's attention the facts regarding his/her attendance in the last six or 12 months, including any apparent patterns of absence. If there is sufficient cause for concern it may be necessary to explore the possibility of obtaining medical evidence, via Occupational Health, in order to establish an individual's wellbeing and capability. The appropriate supervisor should use this opportunity to explore ways in which they can help the employee to improve their attendance.

8. Sick Pay

All staff are entitled to paid leave of absence in line with their Terms and Conditions of employment, when they are unable to attend work due to illness. For details of the sick pay entitlements, please see the appropriate terms and conditions. Sick pay entitlement for all staff is provided on a rolling 12 month period.

9. Trigger Points

9.1 Action to address sickness absence may be advisable when an employee's sickness absence reaches one of the following trigger points; a variety of trigger points have been identified in order that account is taken of the number of occasions of absence as well as the cumulative number of days of absence.

The trigger points are as follows:

- three or more absences in any three-month period
- six or more absences in any 12-month period
- 14 working days absence in any 12-month period.

9.2 This is intended as guide and managers should take into account the individual circumstances of each case. A manager may also consider taking action to address sickness absence if they have identified a pattern in absence or the overall attendance record is not satisfactory.

10. HR Advisory Team

10.1 Human Resources have a key role in supporting Heads of Schools/Departments in implementing policies and procedures at departmental level. It is advisable to involve HR as soon as an absence problem is identified.

10.2 HR Advisers can provide advice and support to managers in dealing with individual staff and ensure that the Policy is being fully and correctly implemented and applied.

11. Occupational Health

11.1 The Company's Occupational Health Service provides advice to individuals and managers on work related health problems and health problems that can affect work. Occupational Health is a distinct branch of preventative health care, which specialises in the relationship between work and health.

11.2 Referrals to Occupational Health are advisable in the following situations:

- where an employee has been absent or is expected to be absent for a period of four weeks or more
- where an employee is deemed to be suffering from 'work related stress' or similar complaint
- where a grievance or disciplinary issue exists
- where frequent absence is believed to be related to a medical condition or disability
- prior to any surgery, or 2-4 weeks after surgery.

11.3 The reason for the referral and the process should be fully discussed with the employee before the referral is made.

11.4 Managers should complete the Management Referral Form; the information contained in this form will provide the Occupational Health Service with the information that they require to take the request forward.

11.5 Employees will be asked to attend the Occupational Health Service for a medical assessment and must not unreasonably refuse to do so. The Occupational Health Service may seek information from the employee's GP or Medical Specialist in accordance with The Access to Medical Reports Act 1988.

11.6 Where an employee refuses to co-operate in providing medical evidence or to undergo an Occupational Health medical examination, the manager should explore the reasons for the refusal. Where appropriate, the employee should be informed in writing that a decision will be taken on the information available to the manager. Formal action should proceed in accordance with the Managing sickness absence procedures.

12. Managing Short-Term Absence

12.1 The fact that somebody who is frequently absent with short-term illness is genuinely unwell does not mean the Company can allow the situation to continue indefinitely. Frequent, short-term absences are a particular problem for the Company as it is difficult to plan for their impact. The impact may therefore be substantial and can frequently disrupt the normal operation of a department, having a negative effect on work colleagues, students and other service users.

12.2 It is important to deal with sickness absence within a department in a consistent and fair manner. The following procedures should therefore be followed in the case of frequent, short-term absence:

12.2.1 A member of staff will have the right to be accompanied by a trade union representative or work colleague at any meeting held under the formal stages of these procedures.

12.2.2 Advice should be sought from Human Resources and Occupational Health at the earliest possible stage.

12.2.3 Informal Stage

Early concerns about the level of an individual's absence should be raised at a Return to Work Interview. Where problems continue the manager should discuss the matter informally with the member of staff, and inform them that their level of absence is causing concern. They should enquire whether there are any factors affecting the health of the individual that can be addressed by the organisation. It is important to let the member of staff know that if the level of absence continues unchanged a more formal approach to the management of the issue is likely to be adopted. Managers should make a note of dates on which informal discussion of this sort have occurred. A referral to Occupational Health may be necessary.

12.2.4 Formal Stage

Where levels of frequent, short-term absence have failed to reduce following informal management of the case the appropriate manager will follow the arrangements laid down in the relevant Disciplinary and Dismissal Agreement.

13. Managing Long-Term Absence

13.1 Regular contact should be maintained with an employee during prolonged periods of sickness absence. This contact should however not be intrusive. It would be sensible to clarify with the employee what contact is expected and what form this will take.

13.2 Where the nature of the illness, as well as the duration and outcome of the treatment is fully known, both parties can plan the return to work as well as focusing on the member of staff's welfare while away from work. Where the diagnosis is unknown and/or the period of long-term illness uncertain, more difficulties are likely to arise in the management of the situation. Reports from the Occupational Health Service and other specialists will be important in enabling managers and other senior staff to best manage the situation and any difficult decisions that may be involved.

13.3 The outcome of a long-term sickness absence will be determined by the Company on the basis of medical and other specialist advice and in consultation with the member of staff. The member of staff will have the right to be accompanied by a trade union representative or a work colleague at any meeting he/she attends within this part of the procedure. If the member of staff is unable to act on her or his own behalf, the Company will consult with the person(s) authorised to act for them. Guidance and advice on dealing with long-term illness cases will be sought from the HR Advisory Team.

13.4 The outcome is likely to be one of the following:

13.4.1 Phased return to work and/or altering duties

A return to work within a reasonable period may be agreed, possibly on a phased basis or altering duties to accommodate employees, particularly for those with a disability. All reasonable adjustments should be considered in order to facilitate the employee's return to work. The details of these arrangements will need to be agreed on an individual basis between the parties concerned.

13.4.2 The Occupational Health Service may be able to suggest adjustments to the work or workplace. The Company would positively endeavour to accommodate any adjustments in accordance with the Disability Discrimination Act.

13.4.3 Alternative employment

If the Occupational Health report indicates that the employee is incapable of carrying out the duties of their current post but may be able to perform other duties, the company will make every reasonable effort to find such alternative employment. The individual's qualifications and skills as well as their own preferences in terms of type of work should be taken into account when trying to identify alternative employment. This process would be managed under the arrangements for redeployment.

13.4.4 Ill health retirement

If an employee is permanently unfit for work, they may be eligible for ill health retirement. This would be dependent upon the employee meeting the criteria set by the relevant superannuation scheme. Further advice can be obtained from the Pensions Office.

13.4.5 Termination of employment

Termination of the employment contract on the grounds of incapability may be considered in the event that the Occupational Health advice recommends that the employee is incapable of returning to work in the foreseeable future, or alternative employment cannot be found. A meeting will be arranged between the manager and employee to discuss the medical report and its implications.

The employee has the right to be represented and will be advised of the likelihood of the termination of his/her employment.

13.4.6 Termination of employment due to capability must be conducted in line with the relevant dismissal procedure, i.e. Dismissal Procedure for staff in grades 1-6 or Statute (Ordinance XXIV).

14. Counselling Service

The Company provides a Counselling Service available to all staff.

Managers should make their own staff aware of this at any stage of sickness where they think it is appropriate. Advice to managers regarding this can be obtained from the Counselling Service.

Managing Sickness Absence Policy

1. Policy Statement

The purpose of the Managing Sickness Absence Policy is to formalise arrangements for managing sickness absence, in a manner that recognises the need to minimise the impact of the absence on both the individual and the operation of services.

This policy provides managers with a flexible framework which promotes good employment practice, embodies the main principles of employment legislation, and adopts a proactive approach to equality and diversity issues whilst fully supporting the Company's core business.

2. Scope of the Policy

The policy establishes guidelines for managers and staff in relation to sickness absence and relates to all categories of staff including academic and non-academic, permanent and fixed-term appointments, part-time and full-time staff.

It sets the lead responsibility for the management of all absence and ill health issues with line managers, who will be supported by HR and Occupational Health.

Procedural guidelines, which form the basis for the implementation of this policy, are also provided. The Managing Sickness Absence Procedure has been designed to maximise flexibility to meet the needs of all areas and fulfill the Company's legal obligations. Any significant variations should be discussed with the HR team.

Professional advice and support is available at all stages from the HR team. Managers are encouraged to discuss issues with HR at the earliest opportunity.

3. Objectives

The objectives of the Managing Sickness Absence policy are to:

- ensure that sickness absence is managed in a fair, sensitive and consistent manner with due regard to individual circumstances;
- balance the interests of the individual and the operational needs of the institution;
- promote a proactive and positive approach to managing sickness absence, in order to minimise levels of absence;
- address organisational factors that may lead to sickness absence;
- encourage early indication of occupational health issues and illness which could result in long term incapacity;
- define the responsibilities of all Company staff and their designated managers in relation to implementing the policy.

4. Definitions

Long-term absence - Any period of absence from work because of ill health lasting more than four weeks will be deemed as long-term sickness absence. This includes long-term absence due to a single illness or disability and repeated periods of absence arising from a single illness or disability.

Frequent short-term absences - Frequent short-term absence involves patterns of absence due to illnesses that may or may not be connected. Such patterns could vary from a relatively large number of single days of absence, to fewer occasions of absence involving a loss of up to a week or more, or a mixture of individual days and longer periods of absence. High levels of this type of absence may indicate problems, which need to be explored and resolved.

Occasional short-term absence - Occasional short-term absences are typically three or fewer occasions totalling no more than 14 days of sickness absence in any one rolling year.

Trigger points - The points at which it is appropriate for managers to review the sickness absence of an individual member of staff and identify any further measures that may be appropriate to support the employee in increasing their attendance rate.

Patterns of absence - Trends that should be monitored and may be indicative of underlying causes for sickness absence, e.g. taking Monday/Friday off.

Return to work interview - This interview, conducted by the line manager, should take place within 48 hours of the employee returning to work from any period of sickness absence, including short-term sickness of one day only. The purpose of the interview is to assure both the employee and manager that the employee is indeed fit to return to work, ensure managers are aware of any ongoing health concerns and provide an opportunity for staff to raise any wider concerns they may have. It should be informal and needn't take more than a matter of minutes; however the nature or severity of the illness will often dictate how long the interview needs to be.

Phased return – A gradual return to full duties following a period of sickness absence. Options may include varying days or hours usually worked for a short period of time. The Occupational Health Team will provide advice on this where appropriate.

5. Relevant Legislation and Institutional Obligations

This policy takes account of the following legislation in relation to managing sickness absence:

Employment Rights Act 1996

Employment Act 2002 (Dispute Regulations) 2004

Disability Discrimination Act (DDA) 1995

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Health and Safety at Work Act 1974

Data Protection Act 1998

Working Time Regulations 1999

Management of Health and Safety at Work Regulations 1999

Access to Medical Reports Act 1998

The following Institutional policies, processes and terms of employment will be adhered to in managing sickness absence:

Disciplinary and Dismissal Arrangements for all staff

Disability in Employment Policy

Dignity at Work and Study Policy

Health and Safety Policy

6. Responsibilities

Head of Department/School/Manager

Heads of Departments/Schools/Managers have a lead responsibility for ensuring that sickness absence is recorded and managed within their department in accordance with this policy. They have a particular responsibility to:

- ensure that all members of their department understand and follow the procedures for reporting sickness absence;
- ensure that accurate records relating to sickness absence are collected and forwarded to the Pay Office on a monthly basis;

- ensure that on their return to work following an absence because of illness or injury all staff have a return to work discussion with their line manager;
- following consultation with the HR team and other specialists such as Occupational Health, decide on how to manage staff who are absent because of long-term or frequent short-term ill health;
- ensure that in dealing with sickness absence cases the department is complying with the Disability Discrimination Act (1995) and the Company's wider policies on equal opportunities and dignity at work;
- ensure that all staff are treated fairly and sympathetically.

The Employee

Employees have a contractual responsibility to attend work. In the event of absence due to sickness/injury staff are required to comply with the following points:

- to follow the reporting arrangements as detailed in the Managing Sickness Absence Procedure;
- on returning to work following sickness absence to attend a return to work discussion with their line manager;
- to attend referrals to Occupational Health or other appropriate medical or other specialists the Company appoints to advise on an issue (via Occupational Health);
- to accept measures identified as reasonable adjustments that change working arrangements, practices and procedures in order to address issues relating to disease, illness or injury.

HR Department

The HR Department has a key role in supporting Heads of Departments in implementing policies and procedures at departmental level.

HR staff must:

- support the full and correct implementation and application of this policy;
- provide advice and support to Heads of Departments and senior members of departments in dealing with individual staff;
- work with Occupational Health and other appropriate agencies on case management;
- provide guidance and advice to individual staff on managing sickness absence;
- review and develop practices as appropriate to ensure accordance with new legislation and, where possible, examples of best practice.