



**ABSENCE & SICKNESS MANAGEMENT POLICY & PROCEDURE 2021**

|  |  |
| --- | --- |
| **Document Reference** | **FSUHR010** |

|  |  |
| --- | --- |
| **POLICY DOCUMENT – VERSION CONTROL SHEET** | |
| **Document Title** | Absence & Sickness Management Policy & Procedure 2021 |
| **Document reference** | FSUHR010 |
| **Supersedes** | N/A |
| **Originator/Author** | HR Policy Forum |
| **Ratified by Federation Boards** | 29th January 2021 |
| **Circulated** | 17th May 2021 (To come into effect 1st June 2021) |
| **Review date** | June 2022 |

**GP Federation**

**ABSENCE AND SICKNESS MANAGEMENT POLICY AND PROCEDURE**

**Contents**

[1. Introduction and key aims 5](#_Toc70419434)

[1.1 Introduction 5](#_Toc70419435)

[1.2 Purpose 5](#_Toc70419436)

[1.3 Key aims 5](#_Toc70419437)

[2. Roles and Responsibilities 6](#_Toc70419438)

[2.1 Managers’ Responsibilities 6](#_Toc70419439)

[2.2 Employees’ Responsibilities 7](#_Toc70419440)

[3. Definitions of Absence 8](#_Toc70419441)

[3.1 Long Term Absence 8](#_Toc70419442)

[3.2 Short Term Absence 8](#_Toc70419443)

[3.3 Unauthorised Absence 8](#_Toc70419444)

[3.4 Persistent/Prolonged absence 8](#_Toc70419445)

[4. Sickness Days and Medical Appointments 8](#_Toc70419446)

[4.1 Approach to recording absence when there has been some attempt to 8](#_Toc70419447)

[attend work 8](#_Toc70419448)

[4.2 Guidance on time off for Medical Appointments 9](#_Toc70419449)

[4.3 Medical Suspension 9](#_Toc70419450)

[4.4 Arrangements for Medical Exclusion following Infectious / Notifiable Disease 10](#_Toc70419451)

[5. Federation Occupational Sick Pay Scheme 10](#_Toc70419452)

[6. Management of Short-Term Absence 10](#_Toc70419453)

[6.1 Return to Work Interviews 10](#_Toc70419454)

[6.2 Identification of absence trigger points and how they will be used to manage 11](#_Toc70419455)

[Short term absence 11](#_Toc70419456)

[6.3 Informal Discussion considering mitigating circumstances and commitment 12](#_Toc70419457)

[to ongoing review 12](#_Toc70419458)

[6.4 Referral to Occupational Health 12](#_Toc70419459)

[Evidence of a medical condition or health issue 12](#_Toc70419460)

[6.5 Reminding staff of their obligations in line with the Attendance Policy prior 13](#_Toc70419461)

[to proceeding with action under the Federation’s Disciplinary procedure 13](#_Toc70419462)

[7. Referring to Occupational Health and Medical Examinations 13](#_Toc70419463)

[8. Disability Discrimination Act (DDA) 1995 15](#_Toc70419464)

[9. Phased Return Recommended by Occupational Health 15](#_Toc70419465)

[10. Request for Phased Return 16](#_Toc70419466)

[11. Approach to annual leave during periods of absence and long-term absence 17](#_Toc70419467)

[11.1 Sickness during period of annual leave 17](#_Toc70419468)

[11.2 Going on holiday during sickness absence 17](#_Toc70419469)

[11.3 Annual Leave and long-term Sickness 17](#_Toc70419470)

[12. Managing Long Term Absence 18](#_Toc70419471)

[12.1 Stress and Mental Health 18](#_Toc70419472)

[12.2 Terminal Illness 18](#_Toc70419473)

[12.3 Procedure on Managing Long Term Sickness Absence 18](#_Toc70419474)

[12.4 Communication and Maintaining Contact 19](#_Toc70419475)

[12.5 Long Term Sickness Meetings 19](#_Toc70419476)

[Appendix A 20](#_Toc70419477)

[Appendix B 23](#_Toc70419478)

[Appendix C 24](#_Toc70419479)

[13. Other help while you are sick 25](#_Toc70419480)

[14. Penalties 25](#_Toc70419481)

**ABSENCE AND SICKNESS MANAGEMENT POLICY AND PROCEDURE**

# Introduction and key aims

## Introduction

The GP Federation / FSU recognises that the health and wellbeing of the workforce is critical to the effective functioning of the organisation. It is set in the context of best practice for managing attendance, compliance with employment legislation including the Disability Discrimination Act, and the relevant Federation terms and conditions.

In developing this policy and procedure, the GP Federation / FSU recognises that it has a duty to support staff when they become ill, facilitating staff in so far as possible to safely return to work as early as they can. The GP Federation / FSU has a responsibility to actively encourage a culture of health and well-being within the workforce while equally expecting employees to take personal responsibility for their own health and well-being. The GP Federation / FSU recognises that staff sickness exacerbates service delivery problems and places additional pressure on other staff, as well as carrying a significant financial cost.

Good communication between the employee and GP Federation helps reduce the employee’s anxiety whilst away from the workplace and enables the GP Federation to respond to the employee with the appropriate support in relation to the illness.

## Purpose

The purpose of this policy is to set out how absence will be dealt with in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism. This policy and procedure will also focus on supporting Managers and employees during periods of absence by providing a clear framework for progress, whilst highlighting the roles and responsibilities of key stakeholders. This policy applies to all staff.

Staff working within GP Practices should recognise that there may be occasional operational differences within a particular Practice in terms of the absence notification procedure as set out in this document e.g., the time you are asked to notify an absence to your Practice may differ. Staff should follow Practice guidance in these instances and share any such guidance with their Line Manager.

# 1.3 Key aims

The key aims of the policy are to:

* Deal with absenteeism in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism for all Managers and staff.
* Assist in the management of the cost to and the impact of absence on the organisation.
* Enable staff to take personal responsibility for achieving and maintaining good attendance and fulfilment of their contract of employment by making clear their obligations and the importance of good attendance.
* Enable staff to return to work as soon as possible.
* Ensure effective maintenance of the employment relationship by encouraging managers and employees to discuss issues and solutions as quickly as possible in an open and honest manner, therefore supporting the concept of employee engagement.
* Improve the health and well-being of all staff by facilitating and supporting initiatives, where appropriate, which enable staff to return to or remain in work.
* Clarify roles and responsibilities in relation to the management of attendance.
* Prevent and deal with instances of abuse of Federation Sick Pay provisions.

# Roles and Responsibilities

All employees have a fundamental role to play in the management of attendance and it is expected that all staff will undertake their roles and responsibilities, in accordance with the Absence & Sickness Management Policy and Procedure.

## Managers’ Responsibilities

* To manage absence in accordance with this policy by recording, monitoring and investigating the absence levels of all employees for whom she or he is responsible and by taking appropriate and timely action when required to ensure that all staff are aware of their obligations under the policy and the importance of good management attendance.
* To respect the confidentiality of any information provided to them through the operation of this policy.
* To ensure that all employees are aware of their obligations within the Absence and Sickness Management policy including the correct notification procedures when reporting sick for work and in particular to whom they should report.
* To maintain regular and effective contact with employees who are on sick leave. The frequency of which will depend upon the circumstances of the absence and normally agreed with the employee.
* To maintain accurate absence records which includes timely recording of absence, conducting return to work interviews and processing the appropriate medical certification.
* To seek specialist advice from Human Resources (HR) and Occupational Health (OH) when appropriate
* To ensure completion of Incident Forms when an employee has suffered an injury or other condition associated with their employment. Line managers should inform their Operational Manager and HR when a serious incident occurs in the workplace resulting in sickness or injury to an employee to ensure all appropriate reporting requirements are met.
* Where necessary, initiate action in accordance with Disciplinary procedures to deal with poor attendance and/or failure to comply with the Absence and Sickness Management Policy.
* To reassure staff, where appropriate, that where possible reasonable adjustments will be made to facilitate their ongoing employment in line with clinical guidance and ensuring that requirements under the Disability Discrimination Act (DDA) are supported.
* To ensure that the relevant documentation e.g., Statement of Fitness to Work and Return to Work Forms are completed and forwarded to the Human Resources Department and also uploaded to Cascade.

Occasionally there may be circumstances when an employee does not always feel comfortable discussing their medical problems with their Manager and therefore sensitivity may be required to explore alternative arrangements where appropriate e.g. discussing problems with someone of the same sex.

Managers should note the importance of accurate and timely recording to Human Resources and Payroll as this enables the GP Federation / FSU team to produce statistical analysis on both short and long-term sickness absence within the GP Federation / FSU. The information will also ensure employees are paid appropriately during their period of absence. Managers will be accountable for any recording failures or anomalies. Failure to complete this may result in disciplinary proceedings.

## Employees’ Responsibilities

* To ensure regular attendance at work in accordance with their contractual obligations and take reasonable care of their Health and Safety at work for themselves and others.
* Notify their Line Manager of absence in accordance with notification procedures. For staff within GP Practices, staff must notify the host practice in the 1st instance with the reason for non-attendance and then contact their line Manager immediately afterward. Contact must be by telephone within the first 30 minutes of their usual scheduled start time. Contact by text or email is not acceptable, nor is someone to contact on your behalf except in very exceptional circumstances e.g. hospitalisation.
* To keep their Line Manager and where agreed their Host Practice informed on a continuing basis of the reasons for preventing him/her from attending work and the anticipated date of return to work.
* Agree a timetable for regular appropriate contact with their line Manager during the period of absence. Until contact arrangements are agreed the employee must continue to call daily. For long term absence weekly contact is usual within the first 4 weeks, thereafter this frequency maybe agreed appropriate to the circumstances.
* To ensure that any absence up to 7 days is covered by a self-certification form (Appendix C) which should be sent to the Manager for forwarding to Human Resources. For periods of 7 days or more an original statement of fitness for work from the employee’s GP must be obtained, submitted to the Manager and forwarded to Human Resources by the Manager until work is resumed.
* ensure they are aware of and meet their obligations under the attendance at work policy and recognise the consequences of poor attendance at work.
* Ensure that relevant fitness for work certificates and medical reports are forwarded without delay to their Line Manager for appropriate action, and that they cover the whole period of absence. GP Federation / FSU payroll cannot pay Occupational Sick Pay without the appropriate certification.
* Participate, when requested in meetings relating to their absence and cooperate in the development of return to work and rehabilitation plans with Managers.
* Refrain from any activity (social or sporting) which may be prejudicial to recovery or be likely to bring into question the reason for continuing absence. Be responsible for making efforts to aid own recovery.
* Not work elsewhere in paid or **unpaid employment** whilst on sick leave unless prior permission is received from their Line Manager. Staff who are found to be working elsewhere and have not complied with the above requirements may be subject to disciplinary proceedings.
* Understand that sick pay is for absence due to ill health and not for other purposes such as carrying out caring responsibilities which are covered by other policies.
* On a strictly confidential basis to make their Managers aware of any issue which may interfere with their normal attendance at work.

# Definitions of Absence

## Long Term Absence

Long term absence is considered as any absence greater than 4 continuous weeks and a communication plan should be established with the employee at an early stage of the absence.

## Short Term Absence

Short term absence is any absence up to 4 working weeks.

Frequent short-term absence refers to when an employee is frequently absent from work for short periods of time due to ill-health. This type of absence can be particularly difficult for both employers and employees as they are usually without notice and it is difficult to plan for their impact. Whilst the Federation understands that employees may have some short-term sickness absence, it is essential that frequent short-term absence is dealt with promptly and consistently, with appropriate support, to ensure the smooth running of the Federation.

## **Unauthorised Absence**

Any periods of absence that are not covered by the relevant evidence of incapacity will be classed as unauthorised and may result in disciplinary action.

If an employee fails to call in to explain their absence this will be classed as unauthorised. If an employee does not make contact, then the Manager should try to call the employee. If no contact is made for a 2nd day, the Manager should advise Human Resources.

## Persistent/Prolonged absence

Where absence is persistent the matter will be discussed with the employee concerned and in the event of continuing persistent absence may consider action under the Disciplinary procedure.

Managers are required to treat all cases of staff absence due to illness in a fair and consistent manner and it is the Manager’s responsibility to monitor and track the attendance record of all the staff in their team. See Identification of absence trigger points and how they will be used for further information.

# Sickness Days and Medical Appointments

## Approach to recording absence when there has been some attempt to

## attend work

A sickness day is when an employee becomes unwell and has been unable to undertake their full daily hours of work / session. Where an employee has become unwell and unable to complete the day / session, this day will not count as a sickness day as far as sick pay is concerned. It must, however, be recorded as part of the Return to Work Meeting and may be considered when considering any accumulated pattern of sickness.

## Guidance on time off for Medical Appointments

The Federation recognises that employees will need to make occasional visits to a dentist, GP or other health professional or may be required to attend a hospital or clinic for investigation and/or treatment. Wherever it is possible to do so, employees (both full and part time) must endeavour to arrange such appointments at a time that they are not scheduled to work or, if this is not possible, as near to the beginning or end of the working period as possible so as to minimise the absence from work and disruption to the service. All appointments should be booked through Cascade.

Employees should not be refused permission to attend a pre-arranged appointment if reasonable notice has been given. The manager must keep a record of any such appointments and may ask to see documentary confirmation of the appointment where this is available.

Where employees need to attend routine appointments (with GPs, Dentists, blood tests or hospital) during work time, up to a maximum of 2 hours may be paid. Any time in excess of 2 hours, they will be required to make up the time taken at the earliest opportunity. Employees must discuss and agree with their manager how this will be achieved. The following are options that can be agreed:

• Arriving earlier or leaving later the day of the appointment

• A temporary increase in hours over a short period

• Unpaid leave

• Annual leave

•Time in lieu

• Any other arrangement agreed with the manager.

Where a medical appointment involves treatment, which results in an employee being unfit for work afterwards, the period of absence will be recorded as sick as per 4.1. Where such appointments form part of an ongoing treatment programme for a serious health condition, or are related to a disability or long term health condition, or are for a work related disease or injury, the manager must discuss such appointments with the employee to plan any necessary support to be offered. Reasonable time off to attend such appointments as part of their programme of care and support will be given full consideration.

## Medical Suspension

Medical suspension is a supportive action which applies where there is a health-related concern that may mean that the employee is a risk to themselves or others. This can relate to physical or mental health issues. Suspension should be for the shortest period possible to allow a medical assessment to be undertaken. The employee will be entitled to payment as if at work during this period.

Medical suspension will not count towards sickness absence triggers until a medical opinion confirms the employee should be absent from work for health reasons.

Managers should contact HR when considering medical suspension and to arrange any Occupational Health support required.

## 4.4 Arrangements for Medical Exclusion following Infectious / Notifiable Disease

While an employee is experiencing symptoms of an Infectious / Notifiable Disease this should be recorded as sickness absence.

Where control of infection advice requires an employee to remain off work for a period after symptoms subside, this period will be regarded as medical exclusion. The employee will be entitled to payment as if at work during this period. Medical exclusion will not count towards sickness absence triggers.

# Federation Occupational Sick Pay Scheme

Employees absent from work owing to illness will be entitled to receive sick pay in accordance with the provisions on reckonable service. These arrangements are intended to supplement statutory sick pay to provide additional payment during absence due to illness, injury or other disability. Scale of allowances are:

* During the first year of service – one month’s full pay and two months’ half pay;
* During the second year of service – two months’ full pay and two months’ half pay;
* During the third year of service – four months’ full pay and four months’ half pay;
* During the fourth and fifth years of service – five months’ full pay and five months’ half pay;
* After completing five years of service – six months’ full pay and six months’ half pay.

This does not automatically allow employees to remain in the employment of the organisation until the occupational sick pay is exhausted. In the event of employment coming to an end, entitlement to sick pay ceases from the last day of employment.

Full pay needs to be inclusive of any statutory benefits (so as not to make sick pay greater than normal working pay). The combined addition of statutory sick pay to half pay must not exceed full pay.

If an episode of sickness occurs payroll should review the twelve-month period preceding the first day of that specific absence. The period during which sick pay should be paid and the rate of sick pay for any period of absence is calculated, by deducting from the employee’s entitlement on the first day of sickness, the aggregate periods of paid sickness absence during the 12 months immediately preceding that day.

Employees will not be entitled to an additional day off if sick on a statutory holiday.

Sick pay paid to an employee under this scheme when added to any statutory sickness, injuries or compensation benefits, including any allowances for adult or child dependants, must not exceed full pay.

# Management of Short-Term Absence

## Return to Work Interviews

Following any period of sickness absence an employee should report directly to their Manager who will arrange to carry out a return-to-work meeting, this may take the form of a telephone or remote discussion or be undertaken in person. This meeting will cover and address several key points:

* Welcoming the employee back and checking they are well enough to return to be at work
* Identify reasons for absence and identifying if any absence triggers have been met
* Establish if whether the absence is likely to re-occur and if there is an issue that is likely to cause persistent absence. This should be addressed directly with the employee and a plan agreed that will lead to acceptable attendance levels.
* Explore whether the employee may have a disability and whether reasonable adjustments are required

The Manager should complete a Return-to-Work form (Appendix 1) and make a record on Cascade as applicable and pass to Human Resources for storing on employee’s personal file.

## Identification of absence trigger points and how they will be used to manage

## Short term absence

**Absence Trigger Points**

As defined earlier in Section 3, Short-term absence is a single period of absence lasting less than 4 working weeks

The Federation has established triggers for the management of short-term absence which should give rise to consideration for further action. The triggers are: -

1. Three episodes of absence within a 12-month rolling period.

**or**

1. Two episodes of absence totaling 10 working days or two calendar weeks within a 12-month rolling period.

**or**

1. One episode of 10 days within a twelve-month rolling period.

**or**

1. Any recognisable pattern of absence.

After all periods of absence, a return to work interview should be carried out to discuss the circumstances of the absence, identify if any triggers have been met and to enable appropriate monitoring and action to be taken.

The definition of the rolling period is the 12-month period counted back from the first day of the episode of sickness being looked at. E.g. absence 1 November 2020 to 20 November 2020, the rolling period is 1 November 2019 to 1 November 2020.

**What happens when a trigger point is reached?**

On reaching a trigger point, a discussion should take place at the return to work interview between the manager and the employee and one of the below 3 actions taken.

* No further action beyond the informal discussion and commitment to ongoing review
* Referral to Occupational Health;
* Reminding of obligations prior to proceeding with action under the Federation’s Disciplinary procedure.

In deciding what action is appropriate, the manager should consider the circumstances of the case. Discretion should be used in every case depending upon the individual circumstances.

Particular care must be taken when dealing with staff who have a disability, caring responsibilities for people who have a disability or pregnancy related absences and advice from HR must be requested.

## Informal Discussion considering mitigating circumstances and commitment

## to ongoing review

To ensure a consistent and equal approach to all employees, managers should hold a return to work interview and have a discussion with the employee when a trigger has been met. Through the discussion the manager should investigate and consider the individual circumstances of each case such as extenuating personal circumstances, previous history and / or job-related factors which may be contributing to the absence level. Taking consideration of the mitigating circumstances of the absence does not preclude the manager requesting an improvement in attendance however action at point 3 or action under the disciplinary procedure may not be considered appropriate at this stage.

Managers should still emphasise through discussion the need for improvement in the employee’s level of attendance. It may be relevant to discuss with the employee possible options under the Flexible Working Policy such as consideration of different working arrangements, for example reduced hours or deferred start and finishing times which would help improve attendance. The employee should be reminded that it is expected that they will demonstrate and sustain an improvement in attendance.

Following the informal discussion at the return to work interview if the manager is satisfied that no further action is required at this point, the manager will take no further action other than to continue to review absence and address any further absence and identify any further triggers.

If a further absence or trigger arises within the rolling 12-month period, the line manager will hold another return to work meeting with the employee and discussion and following this may consider a referral to occupational health as per action 2 or remind the employee of their obligations under action 3.

## Referral to Occupational Health

## Evidence of a medical condition or health issue

If the return to work discussion identifies a common reason for short term absences or where the employee indicates at the return to work interview that they have a medical condition which is contributing to their absence levels, a referral should be made to Occupational Health via HR to determine if there is an underlying health problem. If established that periods of short term absence are caused by an underlying health condition, or disability, adjustments should always be considered and implemented by management when it is reasonable to do so, to enable the employee to stay in work.

Adjustments may include changes to the employees working pattern, work tasks or work environment and in most cases will be required for a temporary period only, however, longer term, permanent adjustments may be necessary.

It is important to remind the employee that they are responsible for their own attendance and as such they must contribute to finding solutions which will enable them to provide regular service. Again, the confirmation of a medical condition/illness does not preclude action being taken and the employee should be advised that it is expected that attendance improves.

Any agreed adjustment(s) should be issued to the employee in writing, outlining agreed time periods if appropriate and the requirement for monitoring. This information should also be shared with HR.

Should there continue to be an unacceptable level of short-term absence, discussion at the return to work interview should include reference to previous meetings and action that has been taken to assist the employee.

Further advice should be sought from OH if appropriate and if there are no further adjustments that could reasonably be made the employee should be advised that consideration may have to be given to re-deployment (if possible) or termination on the grounds of ill health.

Where there is no improvement in attendance but the reasons for absence are unrelated to the health issue, consideration may be given to formal action under the disciplinary policy which may result in the contract being terminated in accordance with relevant procedures.

## Reminding staff of their obligations in line with the Attendance Policy prior

## to proceeding with action under the Federation’s Disciplinary procedure

Where a manager is satisfied after discussion with the employee that the short term absences are unrelated and there is little or no mitigating circumstances including work related issues, then an employee should be advised that in accordance with their obligations in line with this Policy that a further period of absence may lead to a formal warning under the Federation’s Disciplinary Procedure.

The action taken at this trigger point is to warn the employee that an improvement in attendance is expected and that a formal warning under the disciplinary procedure will be considered if there is a further period of absence. A copy of this policy should be given to the employee and this should be recorded in the return to work interview documentation.

Should there be a further period of absence and after investigation of the circumstances at the return to work interview the manager should refer to the previous discussions and advise that a formal warning is now being considered. The manager should seek advice from HR at this stage.

The employee will then be issued with a letter inviting them to a separate meeting and given the opportunity to bring a representative in accordance with the Disciplinary Procedure. See Federation Disciplinary policy and procedure for further detail.

# Referring to Occupational Health and Medical Examinations

There is no set time when to refer to Occupational Health. The optimum time to refer will depend on the manager knowing their employee and their individual circumstances. A manager does not have to wait until the employee goes off sick before making a referral to Occupational Health for advice and not every episode of sickness will require a referral. It is, however, essential that when termination of employment is being considered on health grounds, up to date Occupational Health advice has been obtained.

A referral may also be considered in the following circumstances:

* where there are concerns that the work being undertaken may be impacting on a health condition (even where the employee is not absent) N.B. this includes scenarios such as musculoskeletal issues / skin problems within a clinical role, symptoms of stress being demonstrated but as yet no sickness absence has occurred
* where there are general concerns regarding attendance
* when guidance is required as to whether there is an underlying health condition impacting on frequent short-term sickness absence
* where a trigger point has been reached and it is deemed that an OH referral is appropriate as per Section 6
* after an employee has been, or is likely to be, absent for 4 continuous weeks where there is no clear return to work date
* where sensitive cases exist that are likely to be off long term, early referral should still be considered to access appropriate support and advice e.g. employees with cancer / long term condition
* when further detail is required about a long-term prognosis
* where advice is required on reasonable / tailored adjustments not already in place, that can be implemented to reduce / remove the risk of aggravating an underlying health condition
* if health issues are impacting performance
* if there are concerns following medical suspension, injury, violence and aggression and ability to undertake elements of role
* when Human Resources feel they need additional information to support an employee in more complex health and work situations such as ill health termination.

If absence is due to stress or musculoskeletal issues an automatic referral to Occupational Health may not be required if the employee is able to access appropriate support and the manager is able to support the employee in the workplace. Routine planned operations do not always require an assessment, but this may be appropriate if for example there are complications or concerns about the employee’s ability to return to work.

The manager should complete an OH management referral form via HR. The employee will be asked to consent to the OH referral.

This report will enable the GP Federation to make decisions to take appropriate actions based on the information supplied. The employee has the right to see any documents received from Occupational Health.

The information requested will allow the Manager to:

* Further understand the reason for absence
* Identify any work-related causes
* Identify if anything can be adjusted within the workplace to assist the employee in their return to work
* Plan around extended periods of absence
* Provide advice to managers on employee fitness for work for those who have health or attendance issues which may be affecting attendance, performance or behaviour in the workplace particularly for those staff covered by Disability Discrimination legislation.

All documents will be kept confidential.

If an employee refuses to give their consent to allow the Federation to request a medical report and/or assessment, then decisions relating to their employment will be made on the information provided.

# Disability Discrimination Act (DDA) 1995

The Disability Discrimination Act 1995 defines disability as a physical or mental impairment that has a substantial and long-term adverse effect on someone’s ability to carry out normal daily activities. The definition includes people with hidden disabilities (such as diabetes, epilepsy, mental health), in particular because when considering the impact of someone’s impairment you have to disregard the effect of any treatment, and progressive and recurring conditions. It also covers past disabilities. People with cancer, HIV and MS are automatically covered by the Act.

In accordance with the legislation the FSU has a legal requirement to make reasonable adjustments which would enable an employee with a disability to remain in work and provide reliable and effective service. Serious consideration must be given to making temporary or permanent adjustments to working practices or premises and in all cases advice and guidance should be sought from Occupational Health and HR.

Examples of reasonable adjustments may include:

* Allowing absence during working hours for assessment or treatment.
* Allocation of some duties to others.
* Making adjustments to premises.
* Acquiring or modifying equipment.
* Change of hours or work patterns and availing of work-life balance policies.

Adjustments made for the purposes of retaining staff will require managers to make a judgement as to whether or not the adjustment is reasonable. Factors which may have some bearing can include:

• Disruption to service and other colleagues.

• How effective the adjustments are in preventing the disadvantage.

• How practical it is.

• Its financial and other costs.

# Phased Return Recommended by Occupational Health

In exceptional circumstances, especially where there has been a lengthy period of absence, Occupational Health may recommend a phased return to work. An employee returning from long term sickness absence on a rehabilitation programme with a phased return, recommended by OH (and agreed with management) will receive no loss of normal pay during the rehabilitation period.

The employee will return to work on an agreed phased rehabilitation programme for a period not exceeding six weeks. The phased return will generally include reduced working hours and may also include some adjustment to tasks. This should be clarified and agreed with OH and the member of staff prior to the return to work. It should also be clear how working hours will increase throughout the phased return so that by the end of the agreed period the employee is ready to commence normal working (this should be agreed between the Manager and the employee). During the phased return period the employee will receive normal pay. It is important to note that a phased return may be recommended for a period less than 6 weeks.

It is important that during the phased return that the manager monitors the arrangement. Before the end of the phased return the Manager should meet with the employee to review progress and confirm the return to normal working arrangements.

If it is clear that the employee requires more time, this should be discussed, and a further time limited period agreed. It should be made clear to the employee that this further period does not attract full pay (if it is beyond 6 weeks) and will be paid either at the reduced hours or using accrued annual leave.

The employee should be reminded that it is expected that there will be a return to full duties and working hours. If at the end of the agreed extension the employee feels that they would like to continue working reduced hours, the Manager must decide if this can be granted on a permanent basis and should confirm any decision in writing. Where an employee indicates that they cannot carry out the full range of duties associated with their post, the Manager should contact OH for further guidance.

# Request for Phased Return

Where a phased return has not been recommended by OH but has been requested by the employee or on the fit note issued by a GP, consideration should be given to granting this request as it may enable the employee to return to work earlier.

Any adjustments to working patterns, hours or alternative duties, should be discussed, agreed and confirmed in writing. In cases, where a phased return to work was not recommended by OH, yet agreed between the Manager and employee, staff can use accrued annual leave to reduce hours or should be paid according to the reduced hours.

Managers should also consider if re-training is required and should be guided by the employee and their rate of progress when they return to work. It should be noted that training includes “on the job” training and will not always mean formal training programmes.

It may be useful to enable the employee to shadow / spend time with colleagues rather than expect them to commence work immediately.

The extent and length of reintegration will depend upon the needs of the employee balanced with the requirements of the service.

In all cases Managers are responsible for monitoring arrangements and again employees should be reminded that this is for a temporary period only and it is expected that they will return to normal working, subject to reasonable adjustments.

# Approach to annual leave during periods of absence and long-term absence

## Sickness during period of annual leave

Where an employee has booked a period of annual leave and either becomes sick before or during the period of annual leave, they will be required to report that illness in line with normal notification procedures. They must produce a Fit Note covering the period from the first day of sickness to allow annual leave to be reclassified as sick leave. Where an employee’s sickness absence falls on a Bank Holiday, there is no entitlement for the day to be reclassified as sick leave and to receive an additional day off in lieu.

## Going on holiday during sickness absence

During a period of long term sickness absence employees are expected to be available to attend meetings /appointments in relation to their absence and consequently if they wish to go away on holiday (either abroad or in the UK/Ireland) they will be expected to discuss this in advance with their line manager and request annual leave.

**Accrual / carry-over of annual leave**

During an employee’s sickness absence, annual leave continues to accrue. All employees are expected to take their annual leave entitlement during the leave year and should not normally carry over more than a maximum of one working week of annual leave into the next annual leave year. Any annual leave accrued at the time of the return to work may also be taken, by agreement with the manager to allow the employee a more gradual return to work.

If an employee chooses not to take accrued annual leave where they are able to do so, it will be lost and cannot be carried over.

Where staff are returning from long term sickness absence and are unable to take their outstanding leave that holiday year due to insufficient time and as agreed with their manager, they may be allowed to carry forward a portion of this leave into the new leave year i.e. any untaken amount of their 20-day (Working Time Regulation) entitlement. HR advice should be sought to clarify this entitlement.

## Annual Leave and long-term Sickness

Employees on long term sickness absence may also be given the opportunity to take annual leave during their sickness absence period. The employee does not need to be signed fit to work during this period. Their records will continue to show as a continuous period of sickness absence and will be treated as one episode.

Managers must notify HR of an employee’s intention to take annual leave during a period of sickness absence. Where employees are in receipt of a reduced level of occupational sick pay and / or Statutory Sick Pay, the salary will be ‘topped up’ to the value of the contractual occupational full pay during periods of annual leave.

An employee is likely to request and be granted paid annual leave at the same time as sickness absence if:

• the employee has been on sickness absence for a considerable period and sick pay has reduced

• the employee has been on long term sickness absence and sick pay has ceased. At no point, can any combination of annual leave pay, occupational sick pay and statutory sick pay exceed the normal full pay entitlement.

Managers should seek HR advice regarding any queries relating to annual leave requests and sickness absence.

# Managing Long Term Absence

Long term absence is considered as any absence greater than 4 continuous weeks and a communication plan should be established with the employee at an early stage of any long-term absence.

## Stress and Mental Health

Stress and mental health issues are common causes of long-term sickness.

If at any point an employee feels they are suffering from stress or mental health issues they should inform their Manager as soon as possible so that any support or assistance can be provided.

Managers are required to treat all cases of stress and mental health with care and understanding and seek HR advice.

## Terminal Illness

Should a Manager become aware they are dealing with an employee whose absence is due to a terminal illness, they should speak to Human Resources.

Each case needs to be dealt with on an individual basis, depending on the medical prognosis.

If an employee wishes, the GP Federation will make every effort to facilitate the employee working for as long as possible either on a full time or part time basis with a flexible approach to periods of absence.

## Procedure on Managing Long Term Sickness Absence

The key purpose of this procedure is to support staff attendance at work and ensure any health conditions are effectively managed. The manager should look at options and practical ways to support absent staff to return to work, giving due consideration to both the wellbeing of the employee and the provision of service. Staff absent due to long term sickness, will need help and support during their recovery and their return to work. Help and advice regarding the procedure should be sought from Human Resources.

Managers should at the earliest opportunity proactively and positively manage long term sickness, with the primary aim of supporting the employee and facilitating a return to work as soon as possible. The manager has the discretion that when reviewing their health and wellbeing following an episode of sickness absence, they will consider as to whether the employee progresses through the procedure. The decision will be determined, and rationale recorded as part of the return to work / informal / formal stage meetings.

Throughout this process consideration needs to be given to any recommended reasonable / tailored adjustments that may facilitate the employee returning to work. Before any management intervention, the manager must consider whether the employee’s attendance record is directly attributable to a disability.

## Communication and Maintaining Contact

Regular contact allows the manager to keep track of the employee’s recovery and progress and will also provide an important connection for the employee back to the world of work. The aim of regular contact is to support the employee whilst they are absent and to facilitate the employee’s return to work. Regular contact will also allow the manager to manage the employee’s workload in their absence. Managers should keep in touch and agree with the employee when and how frequent telephone or face-to-face catch ups should be and in what format. Arrangements for such contact should be agreed when the sickness is first reported and kept under review. Weekly contact is usual within the first 4 calendar weeks, thereafter this frequency may change dependent on consideration of the circumstances i.e. when a Fit Note is extended or when interventions have taken place that could lead to improvement or a return to work.

It is expected that this contact will be two-way and that the employee will keep in touch to ensure that the manager is regularly updated on their condition / progress.

It is recognised that, for some employees, returning to work after a prolonged period of absence can be difficult. It is expected that managers will proactively and positively manage long term sickness to be able to offer appropriate help and support. There may be circumstances where it may be detrimental and difficult for the manager to attempt to contact the employee. In such cases advice should be sought from Human Resources.

## Long Term Sickness Meetings

During the employee’s long-term sickness absence, it will be necessary to arrange long-term sickness review meetings in addition to the normal agreed keeping in touch phone calls and informal meetings with the line manager.

The first review meeting is an opportunity for the manager and employee to explore the circumstances of the employee’s sickness absence record. It is an important opportunity for the employee to raise any matters which they feel may be causing or exacerbating their sickness whether this is work related or not. The first review meeting should normally be held no later than after 4 working weeks of absence.

Timescales for holding subsequent long-term sickness review meetings, and the number of meetings required, will depend on individual circumstances and some sickness absence issues may be dealt with over a longer or shorter period than others.

The employee should also be advised at review meetings that whilst the aim is to help and support them back to work whenever possible their continued absence may lead ultimately to dismissal.

However, termination of employment may only be considered and agreed after following the relevant procedure and taking advice from HR.

The main points discussed at the long-term sickness meeting, including any further action to be taken, must be noted. The manager should confirm to the employee in writing these points and the outcome of the long-term sickness meetings. **Please see Appendix A for full details of full procedure including procedure re termination of employment.**

# Appendix A

**Long-term absence management procedure including termination of employment**

**Employee attendance**

Employees must attend long term sickness review meetings as requested by their line manager Lead. A minimum of seven calendar days’ notice in writing will be given for attendance at a formal long term sickness review meetings. If the employee is not able to attend the scheduled date, the manager will arrange one further meeting considering the reason for the non-attendance. Following this, if the employee fails to attend the rearranged meeting without good reason the manager may hold the meeting in their absence (taking due consideration to all circumstances) and make a decision about the situation based on the evidence they have at hand, which may result in further action being instigated under the policy.

Right to be accompanied

Employees requested to attend a long-term sickness review meeting will have the right to be accompanied by an official of a recognised Trade Union or a work colleague if they so wish. In certain circumstances, employees will be able to request in advance a manager of a preferred gender to carry out meetings under the procedure and this will be respected wherever it is practicable.

Meeting content

The discussion may cover the following issues (as appropriate to the particular case):

• any relevant work updates that have occurred in the employee’s absence

• the nature and cause of the employee’s sickness absence

• progress towards their recovery

• the prospect of a return to work in the foreseeable future

• the outcome of any previous sickness meetings during this period of absence

• any updated medical advice provided to the employee (or need for further advice)

• whether there is a diagnosis of an underlying medical condition

• the expiry of the employee’s current / last Fit Note

• referral to Occupational Health.

• any phased return, reasonable / tailored adjustments and or redeployment, that have been considered and / or could be introduced that may facilitate a return to work, including any barriers to these

• if there is a need for any other support or assistance

• consideration to Premature Retirement on Ill Health Grounds (Occupational Health or HR advice required)

• annual leave

• impact of absence on service continuity and delivery

• the frequency and arrangements for regular contact (including any concerns)

• agree future long-term sickness review meetings

• the employee should also be advised that their continued absence may lead ultimately to dismissal

**Occupational Health**

The absent employee may benefit from a referral to Occupational Health for an assessment of the effects of the illness or condition, the likely duration of the absence and whether or not there are any steps that the manager could take to facilitate the employee’s return to work. An employee does not need to be referred to Occupational Health before they can return to work. However, for more complex cases, the manager may wish to obtain advice to discuss the need for a phased return to work, varied duties / hours, redeployment or any other reasonable / tailored adjustments. An Occupational Health referral must be obtained, before considering termination of employment (unless the employee has refused or failed to attend the Occupational Health appointment)

**Termination of Employment**

Termination of Employment will only be considered when all options have been explored:

• a return to work in any capacity is unlikely within a reasonable timescale in light of the medical evidence

• a return to work is not forth coming despite medical advice that a return is possible

• there are no reasonable / tailored adjustments that would facilitate a return to work

• there is no prospect of suitable alternative work becoming available.

The case will be referred to a senior manager with the authority to dismiss so they can make a decision on the employee’s continued employment. In this circumstance, it is essential that the following factors be fully considered in reaching this decision:

• the overall attendance record

• all communication and contact with and by the employee during their absence

• the content and outcome of any formal or informal meetings

• medical opinion (unless this is not available due to the lack of cooperation of the employee)

• the likelihood of returning to work (with or without reasonable adjustments)

• reasonable / tailored adjustments to the original post

• redeployment to an alternative post (where possible)

• redesign or modification of duties (where possible)

• if the employee is permanently incapable of a return to this post, Premature Retirement on Ill Health Grounds

• any other relevant issues raised by the employee and/or their representative

• the needs of the service and for the work to be done.

Where termination of employment is being considered normally a number of review meetings will have already taken place and a final review meeting with an appropriate member of HR in attendance will be held.

A written summary of the position to date must be given to the employee, seven calendar days’ in advance of the meeting, setting out the reasons why dismissal is being considered. It should be clear that much of this will have been addressed much earlier in the procedure at previous review meetings and if the employee has reached this stage, it is only after a full and thorough review of all these matters have been undertaken.

Termination of employment cannot be considered unless the employee has been informed in writing that their absence may lead to termination of employment.

A decision to terminate employment will not be taken without up to date medical advice (normally within previous three months), unless the lack of such advice is caused by failure to attend appointments or failure on the part of the employee to allow access to relevant medical reports.

The employee should, in these circumstances, have been advised that failure to attend or allow access to their medical records may be to their detriment, and result in less information being made available to the manager to make their decision.

Where following full consideration of the circumstances, the manager decides that termination of employment is not appropriate, the manager may decide to put in place a further review period.

Where a decision to terminate employment is considered appropriate it will be confirmed in writing and shall be on the grounds of capability. This shall be the responsibility of the manager with the authority to terminate the employment of the employee concerned. Any decision to terminate employment should not be based on sick pay entitlement and may occur prior to expiry of such pay in appropriate circumstances.

Equally, where sick pay entitlement has expired, this will not automatically lead to termination of employment, as this will depend on the circumstances of the particular case.

Notice of termination of employment shall be given in accordance contractual provisions, paid notice or payment in lieu of notice, whichever is the more appropriate.

If termination of employee is on the grounds of ill health, the employee must receive payment for accrued but untaken annual leave for the current leave year plus any previously accrued but untaken statutory annual leave.

**Authority to dismiss**

The decision to terminate will be made by the manager with the authority to terminate the employee’s employment, usually the employee’s line manager/Lead, in accordance with the line of authority set out in the Disciplinary Policy.

**Appeals Process**

Appeals against dismissal under the policy should be directed to appropriate authority within 14 calendar days of the confirmation of dismissal being received. The notification of intention to appeal should set out the grounds on which the appeal is based. The appeal should be heard, whenever practicable, within 28 calendar days of receipt of the notification.

The Appeal Officer will be a senior manager and must not have been involved in the sickness review procedure at an earlier point. A manager from another Federation, FSU or a Board member may be asked to undertake this role as required.

A member of Human Resources will be in attendance to support and give advice to the Appeal Officer. The manager who made the decision to dismiss will be in attendance to present their decision at the Appeal Hearing. The Appeal Hearing will consider whether the decision to dismiss was fair and reasonable at the time that the action was taken. The Appeal Hearing will:

• give the employee, or their representative, an opportunity to expand the details contained within their appeal letter

• give the Appeal Officer an opportunity to ask questions of those present to clarify the nature of the appeal

• if present, give the manager who made the decision to dismiss the opportunity to make a statement about their decision and the process adopted, and be questioned about it as necessary

• give the employee, or their representative, an opportunity to sum up the grounds for the appeal.

When a decision is reached by the Appeal Officer, the decision must be confirmed in writing within seven calendar days. This exhausts all procedures within the organisation.

# Appendix B

**RETURN TO WORK**

**NOTIFICATION FORM**

*This form should be provided to the FSU HR Officer on the first day of returning to work*

**Employee Details (Block Capitals)**

**Surname:**  **First Name:**

**Federation:**

**Employment Details**

|  |  |
| --- | --- |
| Job Title |  |
| Hours Per Week |  |
| No. of Days/Sessions Per Week |  |

**First Date of Absence:**

**Estimated duration of Absence (as notified by employee): ­­­­­­­­­­**

**Last date of Absence:**

**Reason for Absence:**

**Relevant Certification provided:**

**Other information**

**Please record discussion and any actions agreed** **especially where an absence Trigger point has been reached, continuing on a separate page if required.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Manager’s Name (Caps):**

**Signed:**

**Date:**

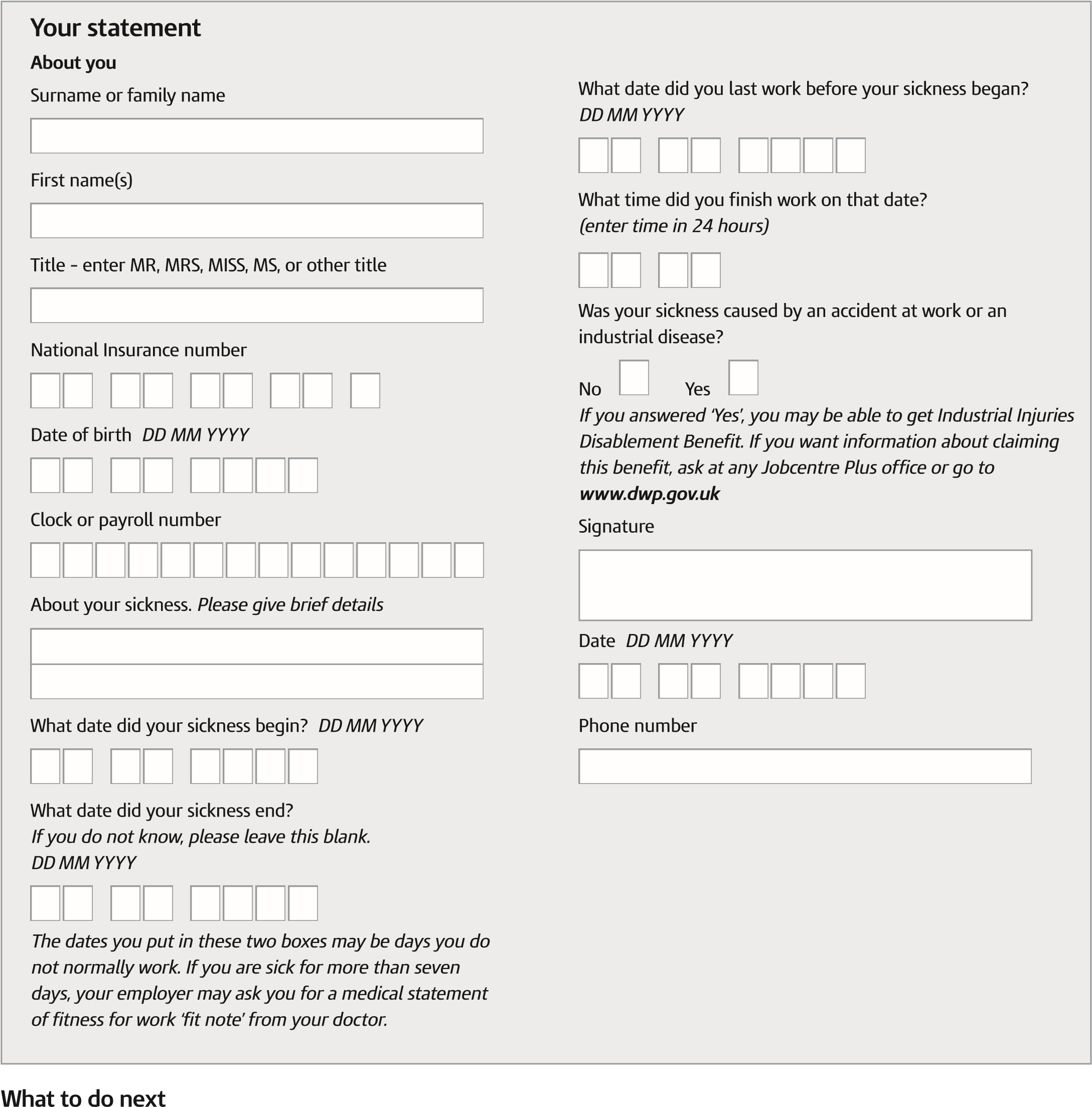
# Appendix C

**Statutory Sick Pay (SSP)**

**Employee’s statement of sickness**

**About this form**

Statutory Sick Pay (SSP) is money paid by employers to their employees who satisfy the conditions for payments when they are ill and unable to work.



Please:

* give your completed form to your employer. It will help them to decide if you can get SSP
* keep a copy for your own information.

If you can get SSP, your employer will pay you in the same way they usually pay your wages.

If you cannot get SSP, your employer must give you form SSP1 to tell you why. You can use form SSP1 to support a claim for Employment and Support Allowance.

|  |  |
| --- | --- |
| If you disagree with your employer’s decision and you have also looked at the further information on the HMRC website, you can ask HM Revenue & Customs for a decision about your entitlement. You must do this within six months of the first day that you are notified of your employer’s decision. Phone our Disputes Team on **0191 225 5221**. | Please turn over |
| SC2 Page 1 | HMRC 10/12 |
|  |  |

# Other help while you are sick

• You can get more information about other help while you are sick in leaflet DWP1026 *Help if you’re ill or disabled.*

You can get leaflet DWP1026 from:

* any Jobcentre Plus office
* most advice centres like the Citizens Advice Bureau, or
* any post office (except in Northern Ireland), or
* go to **www.dwp.gov.uk**

If you do not have much money coming in while you are sick, you may be able to get a Social Security benefit. You should contact any Jobcentre Plus office or, go to **www.dwp.gov.uk**

You can also phone the Benefit Enquiry Line for people with disabilities. The phone call is free.

The number is **0800 882 200** or in Northern Ireland **0800 220 674.**

If you have any problems with hearing or speaking and use a textphone, phone **0800 243 355**.

The phone call is free.

If you do not have your own textphone system, they are available to use at the Citizens Advice Bureau and main libraries.

If you want to know more about SSP go to [**www.gov.uk**](http://www.gov.uk)

# Penalties

We may charge penalties where a person, either fraudulently or negligently, gives incorrect information or makes a false statement or declaration for the purpose of claiming entitlement to Statutory Sick Pay.