



# **Halewood Town Council**

## **Sickness Absence Management Policy**

| <b>Contents</b>                                       | <b>Page</b> |
|---|-------------|
| 1 Policy Statement                                    | 3           |
| 2 Purpose   | 3           |
| 3 Responsibilities                                    |             |
| 3.1 Line Manager Responsibilities                     | 3           |
| 3.2 Employee Responsibilities                         | 3           |
| 4 Policy  |             |
| 4.1 Procedure for Reporting Absences                  | 4           |
| 4.2 Absence Definitions                               | 5           |
| 4.2.1 Frequent Absences                               | 5-7         |
| 4.2.2 Long Term Absences                              | 7-9         |
| 5 Mental Health Related Absences                      | 9           |
| 6 Disability Related Absences                         | 9-10        |
| 7 Emergency Action                                    | 10          |
| 8 Sensitive Issues                                    | 10          |
| 9 Return to Work                                      | 10          |
| 10 Right to Representation                            | 11          |
| 11 Failure to Follow Procedure or Misconduct          | 11          |
| 12 Unauthorised Absences                              | 11          |
| 14 Sick Pay   | 11          |
| 15 Holidays During Sickness Absence                   | 12          |
| 16 Annual Leave Carry Over Following Sickness Absence | 12          |
| 17 Ill Health Retirement                              | 12-13       |

**See List of Appendices below**

| <b>No</b> | <b>Page No.</b> | <b>Title</b>  | <b>No</b> | <b>Page No.</b> | <b>Title</b>   |
|-----------|-----------------|---|-----------|-----------------|--|
| 1         | 14              | Return to Work Meeting Form (formally Sickness Absence Notification Form) | 2         | 15-16           | Frequent Absence & Long Term Absence Medical Incapability Hearing Procedure. |

**SUBJECT:      Sickness Absence Management Policy**

**APPLICABLE:   All Town Council Employees**

**APPROVED BY HALEWOOD TOWN COUNCIL :- April 2015**

## **1.      POLICY STATEMENT**

The Town Council continually strives to reduce the levels of employee sickness absence by the introduction and maintenance of positive policies to improve working conditions and increase employees' motivation. The Council aims to maintain absence levels at the lowest reasonably achievable in order to ensure that it continues to provide high quality services and improved customer service levels.

The Town Council's agreed attendance target is an average of 8.5 days/shifts per employee per year and will be reviewed at a minimum annually, in line with actual sickness absence data.

High and frequent levels of absence seriously affect productivity and the Town Council's ability to provide an efficient, high quality service. Additionally, high absence levels have the effect of increasing the workload for colleagues and cause disruption to the operation of services. Although some absence is outside of management control, levels of attendance can be improved by the implementation of positive policies and procedures.

## **2.      PURPOSE**

This Policy contains a number of procedures to deal with the various aspects of sickness absence and ensures that acceptable standards of attendance are maintained. It will also assist in the early identification of situations in which individuals may be facing personal difficulty in which they may need support, or where they are experiencing problems within the working environment.

The Policy will support procedures to identify reasons for attendance difficulties and to seek ways of supporting and ensuring improved attendance including those employees with medical conditions covered by the Equality Act 2010.

## **3.      RESPONSIBILITIES**

### **Line Manager's Responsibilities**

Line Manager's should be fully aware of all relevant policy content relating to any time off work and provide employees with regular updates of any changes.

### **Employee Responsibilities**

Employees applying for any of these benefits should comply at all times with the content of this policy.

## **4. POLICY**

### **4.1 Procedure for Reporting Absence**

You must personally report your absence to your Line Manager as soon as possible and ordinarily no later than 9.30am.

If working outside of normal office hours (09:00hrs to 17:00hrs) you must personally report your absence to your Line Manager at least 3 hours in advance of your shift.

You must give a clear reason for your absence.

If the employee returns to work before day 4, the Line Manager must hold a Return To Work Meeting with the employee and complete a Return to Work Meeting Form (RTWMF). Once completed, the RTWMF must be passed to the Town Council's administration staff via the Town Manager. A copy of the RTWMF is attached at appendix 1.

If an employee remains absent on day 4, they must personally advise their continued sickness absence to their Line Manager by 9.30am or if working outside of normal office hours (09:00hrs to 17:00hrs) at least 3 hours in advance of your shift, confirming the reason for their continued absence. The Line Manager will confirm the anticipated length of the absence.

If the employee returns to work before day 8, they must hold a Return To Work Meeting with the employee and complete a RTWMF which, once completed must be passed to the Town Council's administration staff via the Town Manager.

If the employee returns to work before day 8, they must hold a Return To Work Meeting with the employee complete a RTWMF which, once completed must be passed to the Town Council's administration staff via the Town Manager.

If an employee remains absent on day 8, they must personally advise their continued sickness absence to their Line Manager by 9.30am or if working outside of normal office hours (09:00hrs to 17:00hrs) at least 3 hours in advance of your shift, and submit an initial doctors note confirming the reason for the staff member's continued absence. The Line Manager will confirm the anticipated length of the absence.

Should a members of staff remain absent for more than 8 days they must maintain contact with their Line Manager on a regular basis i.e. at least once a week and also continue to supply Doctor's Certificates in a timely manner.

On return to work the staff member's Line Manager must hold a return to work Meeting with the employee and complete a RTWMF which, once completed must be passed to the Town Council's administration staff via the Town Manager.

## **4.2 Absence Definitions**

### **4.2.1 Frequent Absence**

Frequent absence can be identified as an attendance record that meets one or more of the following indicators: -

- A recurring reason for absence;
- A consistent pattern of absence;
- Frequency of absence, e.g. 3 absences in any rolling 6 month period;
- An absence level above the Town Council's yearly sickness absence target.

Most employees will be absent occasionally due to minor ailments. However, concern arises when the frequency of such absence is considered to have become excessive, or where a pattern of absences becomes apparent.

Such cases will be addressed in accordance with the Council's Frequent Absence Medical Incapability Procedure, which is outlined in the Frequent Absence Procedure.

The sickness absence record of all Town Council employees will be monitored.

Managers have the responsibility for monitoring the sickness absence records of their employees. Any employee absence that gives cause for concern will be addressed in accordance with this Procedure.

Reference to sickness absence relating to disability, pregnancy and maternity/or gender reassignment as defined in the Equality act 2010 will be recorded but not included in an employee's total sickness record and will not be disclosed in any requests for a reference. When a trigger is hit, a manager should hold a meeting to review attendance, reasons for absence, effect on service etc. The review meeting should be seen as a supportive meeting and any additional support/ reasonable adjustments should be discussed with the employee.

The issue of a warning or moving to the next stage of the procedure will only happen if the overall circumstances mean that it is reasonable to do so, i.e if there are other absences that are not related to the disability, pregnancy and maternity/or gender reassignment.

### **4.2.2 Frequent Absence (Procedure)**

If an employee reaches one of the indicators listed above, the Town Manager will review the staff members' absence record to decide if further action is required.

If the Town Manager considers that further action is necessary, the staff Member will be invited to a review meeting referring the staff member to the Town Council's Occupational Health Advisors beforehand if, in the opinion of the Town Manager, this is necessary.

The employee must be advised that they are entitled to be represented by a trade union representative or colleague; this does not include a solicitor or other legal qualified individual.

There are a number of outcomes available to the Town Manager following a first review depending on the number of indicators that have been 'hit' including the following 'sanctions':

- One trigger – a six-month review
- Two triggers – a verbal warning
- Three triggers – a written warning
- Four triggers – a final written warning

Sanctions will start from the date of the review meeting or 4 weeks from the date of return to work whichever is the soonest.

Alternatively, the Town Manager can decide not to take any further action based on the employee's responses.

If during the period of a 'sanction' a staff member 'hits' a further trigger, the Town Manager will hold another review meeting with the employee the outcome of which may include the next level of sanction.

If during the period of a final written warning an employee hits another trigger they will be invited to attend a Frequent Absence Medical Incapability Hearing and attend an appointment with the Town Council's Occupational Health Advisors.

### **Frequent Absence Medical Incapability Hearing**

If as a result of the management of a staff member's sickness absence it is necessary to arrange a Frequent Absence Medical Incapability Hearing the Town Manager must refer the employee to the Town Council's Occupational Health Advisors.

Employees will be given 7 days day's written notice to attend and advised that they are entitled to be represented by a trade union or colleague; this does not include a solicitor or other legal qualified individual.

The appointment of an Officer to chair the Frequent Absence Medical Incapability Hearing will be at the absolute discretion of the Town Council.

The procedure for the Frequent Absence Medical Incapability Hearing is attached at appendix 2

If, following the Hearing, the outcome is confirmed as the employee being able to fulfil their contractual obligations, their employment will continue.

If, following the Hearing, the outcome is confirmed as the employee being unable to fulfil their contractual obligations, their employment will be terminated with immediate effect.

The Hearing Officer must write to the employee to convey the decision. The letter should also include details of any notice pay that the employee is entitled to and also any outstanding leave that they should be paid for. If however, the employee has overtaken leave they should also be advised that this will be deducted from any final payment that they receive.

The employee has the right of appeal against the dismissal decision. This must be submitted to the Leader of the Town Council within 10 working days of the decision - these appeals will be heard by a Committee of the Town Council.

#### **4.2.2 Long Term Absence**

Long term absence can be identified as an absence of over 4 weeks, or 20 working days. In such cases, there will be a clear need for Line Managers to balance their responsibility to support the employee with the requirement to deliver an effective service.

#### **4.2.3 Long Term Absence (Procedure)**

If an employee has been off for four weeks or Doctor's note indicates that the employee will be absent for four weeks or more, the Line Manager must arrange a welfare visit and should confirm the date and time of the meeting in writing to the employee. The employee must be advised that they are entitled to be represented by a trade union or colleague; this does not include a solicitor or other legal qualified individual. The visit will be recorded.

Staff members absent 'long term' must be referred to the Town Council's Occupational Health Advisors. The outcome of this referral may be:

The employee is fit to return to contracted hours in which case the Town Manager will contact the employee to arrange a planned return to work.

If an employee returns to work on reduced hours or on a phased return it is recommended that the employee would return on full pay with appropriate arrangements applied to ensure that the return to work plan (phased return to work) is restricted to the shortest applicable time-scale, recognising of course, the need to avoid associated harm to the employee's health.

If there is no foreseeable return to work in the future or the employee is unable to fulfil contract due to continuing absence the Long Term Medical Incapability Process will commence.

If the employee is unfit at present further welfare visits and reviews by the Town Council's Occupational Health Advisors must continue as appropriate.

If the staff member is deemed permanently incapable of discharging their duties the Town Manager will arrange a visit to the employee to discuss the matter taking advice from the Town Council's HR Advisors.

If advised that the employee requires medical redeployment refer to the At Risk Policy – Redundancy and Redeployment.

If it is recommended that the employee requires job redesign the Town Manager will seek advice from the Town Council's HR Advisors.

### **Long Term Absence Medical Incapability Hearing**

If as a result of the management of a staff member's sickness absence it is necessary to arrange a Long Term Absence Medical Incapability Hearing the Town Manager must refer the employee to the Town Council's Occupational Health Advisors.

Employees will be given 7 days day's written notice to attend and advised that they are entitled to be represented by a trade union or colleague; this does not include a solicitor or other legal qualified individual.

The appointment of an Officer to chair the Long Term Absence Medical Incapability Hearing will be at the absolute discretion of the Town Council.

The procedure for the Long Term Absence Medical Incapability Hearing is attached at appendix 2.

If, following the Hearing, the outcome is confirmed as the employee being able to fulfil their contractual obligations, their employment will continue. Where the employee is capable to continue in their employment but the manager has significant concerns about their attendance, consideration should be given as to the appropriateness of a sanction being issued.

If, following the Hearing, the outcome is confirmed as the employee being unable to fulfil their contractual obligations, their employment will be terminated with immediate effect.

The Hearing Officer must write to the employee to convey the decision. The letter should also include details of any notice pay that the employee is entitled to and also any outstanding leave that they should be paid for. If however, the employee has overtaken leave they should also be advised that this will be deducted from any final payment that they receive.

The employee has the right of appeal against the dismissal decision. This must be submitted to the Leader of the Town Council within 10 working days of the decision - these appeals will be heard by a Committee of the Town Council.

If permanent incapability is confirmed by the Town Council's Occupational Health Advisors and the employee accepts the decision, the employee's employment is terminated on the grounds that the employee is permanently incapable of discharging their duties, informed through a further meeting with the Town Manager and in writing.

The employee has the right of appeal against the dismissal decision. This must be submitted to the Leader of the Town Council within 10 working days of the decision - these appeals will be heard by a Committee of the Town Council.



The employee must submit medical report from GP/Consultant advising that they are not permanently unfit to carry out the duties of their post.

If after considering the submitted medical reports, the Appeal Committee determines that the staff member's Employment is not permanently unfit to carry out the duties of their post their employment continues.

If the appeal committee determines that the employee is permanently unfit to carry out the duties of their post, their employment is terminated on the grounds that the employee is permanently incapable of discharging their duties.

## **5. MENTAL HEALTH RELATED ABSENCE**

Mental Health Related Absences generally relate to stress related illness, e.g. anxiety, depression, nervous debility.

If an employee or a Doctor's certificate indicates that an employees absence may be due to a stress related condition i.e. stress, anxiety, depression or nervous debility, the Town Manager will arrange an appointment and venue for an immediate welfare visit. A referral to the Town Council's Occupational Health Advisors will also be made, with future actions taken in accordance with their recommendations.

## **6. DISABILITY RELATED ABSENCE**

If an employee has a disability that meets the requirements of the Equality Act 2010, sickness absences for these purposes will still be considered to be sickness absence for the purposes of this procedure but will be recorded as Disability Related Leave, with appropriate sickness benefit (i.e. SSP and OSP) payments as defined in the National Conditions of Service being payable. In cases where the absence does not relate to the employee's disability, he/she will be treated consistently with other employees. Should circumstances arise in which these instances of absence are becoming unmanageable and are impacting on service delivery, advice will be taken from the Town Council's HR Advisors and the appropriate procedure implemented in accordance with the Frequent or Long Term Absence procedures, as appropriate.

The Equality Act 2010 obliges employers to give consideration to making 'reasonable adjustments' for employees who have a physical or mental impairment that will have a substantial, long term, adverse effect upon their ability to carry out normal day to day activities. Each case must be dealt with according to its own particular circumstances at the time. This does not, however, place an obligation on the organisation to establish a new post at a cost to the Town Council.

Reasonable adjustments may include alterations to premises, reallocation of duties, provision of specialist equipment, and allowing the employee to have a temporary change in working hours or be absent during working hours for rehabilitation, assessment or treatment. Such adjustments should be considered in all cases where the employee's incapability results from an underlying medical condition.

If redesigning the employee's job is not a practical possibility, consideration must be given to the availability of alternative employment for the employee within the Authority. In these circumstances, the Council's At Risk Policy – Redundancy and Redeployment will be implemented. If successfully redeployed, the employee's pay will be protected in accordance with the current corporate policy on pay protection.

If an employee or a Doctor's certificate indicates that an employee's absence may be due to a Disability-related condition, the employee must follow the procedure for reporting absence and must attend an appointment with the Town Council's Occupational Health Advisors. The employee also has the responsibility for accessing the 'Access to Work' Scheme a government funded scheme run by Jobcentre Plus and provides financial assistance towards the extra costs of employing someone with a disability

The Town Manager must support the employee throughout his/her absence and will take the appropriate action following receipt of the Occupational Health report, taking advice as required from the Town Council's HR Advisors.

## **7. EMERGENCY ACTION**

An employee's Line Manager may take emergency action where he/she believes that an employee's health and wellbeing are at risk and that the employee may be unfit to carry out his/her duties, or that his/her welfare and the welfare of other employees or service users may be put at risk by the employee's condition.

In such circumstances an employee's Line Manager will seek advice from the Town Council's Occupational Health or HR Advisors and act in accordance with advice given. Out of hours contact may be made with NHS Choices (telephone number 111) Direct or the local hospital.

## **8. SENSITIVE ISSUES**

Circumstances may arise from time to time where the reasons for an employee's absence are of a sensitive nature, e.g. bereavement, terminal illness, etc. It is important that discretion is exercised in such circumstances and that the employee is treated with sensitivity and compassion.

## **9. RETURNING TO WORK**

A Return to Work Meeting must take place after each occasion of sickness absence, including those incidents of absence that are covered by the Equality Act 2010. Normally, the Line Manager will review the absence with the employee on the day upon which the employee returns to work after absence, or as soon as is reasonably practicable for those employees who work shifts or unusual hours.

## **10. RIGHT TO REPRESENTATION**

Employees have the right to be represented at the Welfare, Managers Review and Hearing Stages of the process, either by a Trade Union representative or colleague.

This right does not include the right to be accompanied/represented by a Solicitor or other legally qualified representative.

## **11. FAILURE TO FOLLOW PROCEDURE OR MISCONDUCT**

Misconduct can occur where the employee:

- Fails to follow the correct procedure for reporting sickness absence;
- Falsely claims sick pay;
- Falsifies any sickness documentation;
- Abuses the Council's sickness scheme;
- Takes unauthorised absence.

In such circumstances, the Town Council may invoke its Disciplinary procedure.

## **12. UNAUTHORISED ABSENCES**

Where an employee has failed to follow the procedure for notification of absence, she/he will be considered to be absent without permission. In such circumstances the Town manager will, if he/she is unable to make contact with the employee, write to them advising that the staff member is deemed to be on unauthorised leave, that request that pay be stopped (pay can be re-instated in line with justifiable reasons) and disciplinary action may follow.

## **13. SICK PAY**

Sick Pay, in line with the National Schemes of Conditions of Service, is provided to help employees provide for themselves and their dependants at times of sickness absence. The Town Council expects that the minimum sickness absence will be taken and that employees will make every effort to prevent sickness absence and, during such absence, to restrict its length and to make every effort towards a speedy recovery. Sick pay will be stopped if the employee participates in any activities that prolong their absence from the workplace.

Employees must be aware that the Authority will only provide Occupational Sick Pay if all stages of the Sickness Absence Management Procedure have been met. The Authority reserves the right to stop an employee's pay where the employee unreasonably fails to comply with any part of the Procedure, or where the absence is prolonged due to deliberate conduct by the employee that is prejudicial to recovery. Where appropriate, the Authority may also pursue disciplinary action in such cases.

If an employee is dismissed on medical grounds, their Sick Pay will end from the date of their termination.

## **15. HOLIDAYS DURING SICKNESS ABSENCE**

At least 5 working days before any holiday is due to be taken, employees must contact their Manager to inform them of when they intend to travel/commence their holiday. The employee will be required to provide a Doctor's Certificate from their

Doctor/Medical Practitioner to cover their absence during any holiday period. If the Fit note confirms that the holiday is to aid the employee's recuperation, the time off will be classed as sickness. However, if the holiday was pre-booked or not confirmed on the Fit note as necessary for the purposes of recuperation, the time off will be classed as holiday and holiday allowance will be reduced accordingly.

## **16. ANNUAL LEAVE CARRY OVER FOLLOWING LONG TERM ABSENCE**

An employee will not lose any statutory annual leave if they have been prevented from using their annual leave because of sickness absence. If the employee is absent from work at the point that their annual leave year commences, any statutory leave untaken, pro rata if appropriate, because of their sickness absence, can be carried over.

If an employee returns from a period of sickness absence prior to the end of their annual leave year, and is able to take their statutory annual leave on their return, before their annual leave year expires, they should do so. If they choose not to do so the statutory annual leave cannot be carried over and will be lost. If, however, there is insufficient time to enable them to take their statutory leave or on return to work, work commitments prevent them from taking the statutory annual leave, this leave can then be carried over into the new annual leave year.

Employees can also take their statutory annual leave during sickness absence. Arrangements would still need to be confirmed with their Line Manager.

Employees should be encouraged to use the carried over statutory annual leave prior to returning to work following sickness absence.

In line with national conditions, where an employee is receiving sick pay under the scheme, sick pay should continue if a public or extra statutory holiday falls during such sickness absence. However, no substitute public or extra statutory holiday should be given.

The Town Council reserves the right to consider individual cases on their own merits.

## **17. ILL HEALTH RETIREMENT**

Once advised that an employee is permanently incapable of discharging his/her duties and is not able to undertake any alternative employment within the Authority, the employee will be classified as suitable for ill-health retirement.

The qualifying criteria falls into three tiers:

**Tier 1** = An employee is deemed to have no reasonable prospect of obtaining any gainful employment before normal retirement age.

**Tier 2** = An employee is deemed unable to obtain gainful employment within three years of leaving employment but likely to do so before normal retirement age.

**Tier 3** = An employee is deemed to have a reasonable future prospect of obtaining gainful employment within three years after leaving employment

The Town Manager will seek and act upon guidance from the Town Council's Occupational Health and HR Advisors in managing such cases.

|                         |                                |
|-------------------------|--------------------------------|
| <b>Last Review Date</b> | November 2025                  |
| <b>Next Review Date</b> | May 2027                       |
| <b>Date Approved</b>    | 20 <sup>th</sup> November 2025 |

## Appendix 1

### SICKNESS ABSENCE - Return to work meeting

|   |  |                                  |  |
|---|--|----------------------------------|--|
| Employee No.  |  |                                  |  |
| Forename  |  |                                  |  |
| Surname   |  |                                  |  |
| Job title   |  |                                  |  |
| First date of sickness  |  | Last date of sickness            |  |
| Date returned to work   |  | Date return to work meeting held |  |
| Name of manager conducting meeting  |  |                                  |  |
| Manager's job title   |  |                                  |  |
| Notes of the discussion and actions agreed at the meeting including recommendations made by GP on 'fit notes' |  |                                  |  |
|   |  |                                  |  |

|  |  |
|--|--|
| Does this period of sickness absence result in a trigger being hit? If YES, you should now commence the Managers Review process. |  |
| Is the absence related to an accident at work? If YES, ensure an Accident at Work form has been completed.                       |  |
| Is the absence related to stress? If YES, ensure a welfare meeting has been completed.   |  |
| Is the employee claiming that the absence at work is work related stress?  |  |

**Note to manager:** Please provide the employee with a copy of this completed form

**Note to employee:** If you feel that the information contained on this form is not a true reflection of the meeting, you are advised to contact your manager immediately.

Signed \_\_\_\_\_  
Manager

\_\_\_\_\_  
Employee

## **Appendix 2**

### **Equality Act 2010: Protected Characteristics and Work**

#### **Disability**

1. A person (P) has a disability if;
  - i) P has a physical or mental impairment, and
  - ii) The impairment has a substantial and long-term adverse effect on P's ability to carry out normal day-to-day activities.

#### **Discrimination arising from disability**

1. A person (A) discriminates against a disabled person (B) if;
  - i) A treats B unfavourably because of something arising in consequence of B's disability, and
  - ii) A cannot show that the treatment is a proportionate means of achieving a legitimate aim.
2. Subsection (1) does not apply if A shows that A did not know, and could not reasonably have been expected to know, that B had the disability.

#### **Gender reassignment**

1. A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.
2. A reference to a transsexual person is a reference to a person who has the protected characteristic of gender reassignment.
3. In relation to the protected characteristic of gender reassignment;
  - i) A reference to a person who has a particular protected characteristic is a reference to a transsexual person;
  - ii) A reference to persons who share a protected characteristic is a reference to transsexual persons.

#### **Gender reassignment discrimination: cases of absence from work**

1. This section has effect for the purposes of the application of Part 5 (work) to the protected characteristic of gender reassignment.
2. A person (A) discriminates against a transsexual person (B) if, in relation to an absence of B's that is because of gender reassignment, A treats B less favourably than A would treat B if;
  - i) B's absence was because of sickness or injury, or

- ii) B's absence was for some other reason and it is not reasonable for B to be treated less favourably.
- 3. A person's absence is because of gender reassignment if it is because the person is proposing to undergo, is undergoing or has undergone the process (or part of the process) mentioned in above.

**Pregnancy and maternity discrimination: work cases**

- 1. This section has effect for the purposes of the application of Part 5 (work) to the protected characteristic of pregnancy and maternity.
- 2. A person (A) discriminates against a woman if, in the protected period in relation to a pregnancy of hers, A treats her unfavourably;
  - i) Because of the pregnancy, or
  - ii) Because of illness suffered by her as a result of it.



## Appendix 3

### PRIVATE AND CONFIDENTIAL

*Name and Address of Employee*

*Date*

Dear *insert name*

#### Review of Absence Record

Following a review of your sickness absence record your attendance at work is giving cause for concern for the following reason(s) *(delete as appropriate)*

- a recurring reason for absence;
- a consistent pattern of absence;
- frequency of absence e.g. 3 absences in any rolling 6 month period;
- an absence level above the Council's yearly sickness absence target of 8.5 days;

*(Only to be used where no further action is necessary)*

In line with the revised Sickness Absence Management Procedure, **Frequent Absence Medical Incapability Procedure**, as you do not appear to have any previous history/pattern of attendance problems/pregnancy related condition *(delete as appropriate)*, I am happy that no further action should be taken.

*(Only to be used where further action is necessary and if this is the first managers review and there is an underlying medical condition or if this is the second or more review )*

In line with the revised Sickness Absence Management Procedure, **Frequent Absence Medical Incapability Procedure**, you will now be required to attend an Occupational Health Review – the date of which will be forwarded to you, in writing, directly from the Occupational Health Unit.

Following receipt of a report from the Occupational Health Unit you will be required to attend a Managers Review Meeting.

*(Only to be used if this is the first manager's review and there is no underlying medical condition)*

In line with the revised Sickness Absence Management Procedure, **Frequent Absence Medical Incapability Procedure** you will now be required to attend a Managers Review Meeting.

The details of this meeting are as following:

**DATE:**

**TIME:**

**VENUE:**

*(To be used in all letters)*

This meeting will seek to: -

- clearly establish all of the facts;
- give you the opportunity to provide an explanation for your absence record; and to
- identify any mitigating circumstances

You are entitled to be represented at this meeting by your Trade Union Representative, or other (though not legal) representative.

There are three potential outcomes of this meeting, which are: -

- A 6 month review period, with a view to no further indicators (Recurring reason; Consistent Pattern; 3 in 6; Above 8.5 days) being hit during the review period. If you fail to achieve this target your case will be reconsidered under this stage of the process; or
- A sanction will be issued as follows (the sanction will be effective from the date of the review meeting or 4 weeks from the date of return to work, whichever is the soonest):-
  - verbal warning – hits further indicator following Manager Review or hits 2 indicators
  - Written warning – hits further indicator following verbal warning or hits 3 indicators
  - Final Warning – hits further indicator following written warning or hits 4 indicators.
- It is decided that no further action is deemed necessary.

There is a process of appeal to your Director within 10 days of the decision.

I will therefore be contacting you, in due course, to arrange a Manager Review Meeting and would advise that you provide a copy of this letter to your Trade Union Representative, if appropriate.

Yours sincerely

*Insert Manager Name and contact details*

## Appendix 4



Knowsley Council

# OCCUPATIONAL HEALTH REFERRAL FORM

**Please ensure that your employee is made fully aware of this referral to the Occupational Health Unit, before it is submitted.**

**\*Indicates that a mandatory field needs to be completed**

| 1. PLEASE INDICATE CIRCUMSTANCES OF REFERRAL* (MARK WITH AN X AS APPROPRIATE)   |                   |                    |      |                  |     |
|---|-------------------|--------------------|------|------------------|-----|
| Frequent absence  |                   | Long term sickness |      |                  |     |
| Fitness for duty  |                   | Health concerns    |      |                  |     |
| Pension entitlement   |                   | OH Surveillance    |      |                  |     |
| Other – please provide details  |                   |                    |      |                  |     |
| Is the employee in a front line service?  | Yes               |                    | No   |                  |     |
| If yes, what are the most appropriate days / times for any medical appointments? Alternatively, please ring the OHU to discuss on 443 5780. | Mon               | Tue                | Weds | Thurs            | Fri |
|   | Early am (8-9 am) | am                 | pm   | Late pm (4-5 pm) |     |

| 2. EMPLOYEE'S PERSONAL DETAILS      |      |                        |  |
|-------------------------------------|------|------------------------|--|
| Surname*                            |      |                        |  |
| Forename*                           |      |                        |  |
| Date of Birth*                      |      | Pay Number*            |  |
| Date of commencement of employment* |      |                        |  |
| Gender*                             | Male | Female                 |  |
| Home address / Tel no.*             |      | Name and address of GP |  |
|                                     |      |                        |  |
|                                     |      |                        |  |
|                                     |      |                        |  |

| 3. JOB DETAILS   |        |                        |            |
|--|--------|------------------------|------------|
| Job Title*   |        |                        |            |
| Service / School*  |        |                        |            |
| Organisation (if not KMBC)   |        |                        |            |
| Division / Team (for KMBC only)*                                       |        | Home or mobile number* |            |
| Location of Work i.e. Home worker or Building Name / Location*         |        |                        |            |
| Grade of Post*   |        | Hours worked*          |            |
| Contract status*   | Casual | Permanent              | Fixed term |
|  |        |                        | Temporary  |
| Does the employee consider themselves to have a disability?*           |        |                        |            |
| Has this employee previously attended the Occupational Health Unit?*   |        |                        |            |
| Please provide details of any additional post(s) held by the employee: |        |                        |            |

| The job will or may involve (please ✓ as appropriate)*  | Yes | No |
|---|-----|----|
| 1. Driving (except commuting to and from place of work)   |     |    |
| 2. Driving Non LGV / PCV (where driving is an integral part of the job, e.g. involves transporting clients or driving a company vehicle)  |     |    |
| 3. Driving LGV / PCV / FLT  |     |    |
| 4. Food Handling / Preparation  |     |    |
| 5. Manual Handling  |     |    |
| 6. Personal Care  |     |    |
| 7. Caring for / working with those with learning difficulties   |     |    |
| 8. Caring for / working with the homeless   |     |    |
| 9. Caring for / working with drug abusers   |     |    |
| 10. Working with those who are at risk of blood borne infections e.g. HIV, Hepatitis B or Hepatitis C   |     |    |
| 11. Exposure to respiratory sensitizers e.g. chemicals, dust, drugs, gasses, etc. (please specify below)  |     |    |
| 12. Working at heights  |     |    |
| 13. Working in isolation  |     |    |
| 14. Exposure to skin sensitizers (please specify below)   |     |    |
| 15. Exposure to noise (above 80dB(A))   |     |    |
| 16. Working with vibrating tools (in accordance with HSE guidelines)  |     |    |
| 17. Working with electrical wiring (in accordance with HSE guidelines)  |     |    |
| 18. Working in confined spaces (in accordance with HSE guidelines)  |     |    |
| 19. Working night shifts (as per the Working Time Regulations 1998)   |     |    |
| 20. Working as a regular display screen equipment user (a user is defined as one who habitually uses display screen equipment as a significant part of their normal work, or uses it more or less daily or have to transfer information quickly to and from display screen equipment) |     |    |
| 21. Any other occupational hazards (please specify below)   |     |    |
| Please insert details here:   |     |    |

| 4. ABSENCE MANAGEMENT DETAILS  |     |  |    |  |
|--|-----|--|----|--|
| <b>For absence referrals only (please answer all of the following) :</b>               |     |  |    |  |
| Is the employee currently absent due to sickness?*                                     | Yes |  | No |  |
| If so, from what date?*  |     |  |    |  |
| Does the employee have a current GP's fit note?*                                       | Yes |  | No |  |
| If so, please state the start and expiry date of the note*                             |     |  |    |  |
| Reason for absence given by employee and/or GP note*                                   |     |  |    |  |
| Is this absence due to an industrial injury?*  | Yes |  | No |  |
| Sickness category (See end of this form for the possible Sickness Absence categories)* |     |  |    |  |

|   |     |  |    |  |
|---|-----|--|----|--|
| Has a welfare visit taken place or been arranged to take place?*  | Yes |  | No |  |
| For frequent absence referrals, please detail the dates and reasons declared for all periods of absence within the "trigger" period.*         |     |  |    |  |
|   |     |  |    |  |
| Please detail the dates and reason declared for any other periods of sickness absence not declared above, within the previous 2 year period.* |     |  |    |  |
|   |     |  |    |  |

| 5. PENSION DETAILS (please ✓ as appropriate)* |                         |      |            |
|---|-------------------------|------|------------|
| Teachers Pension                              | Merseyside Pension Fund | None | Don't know |
|   |                         |      |            |

| 6. ADDITIONAL INFORMATION   |
|---|
| In order for the OHU to have a complete picture of the employee, as well as the impact of their health on the service/school/organisation, you should provide relevant information as follows:  |
| Details of how the absence is affecting the performance of the Service Area - <i>(i.e. is the post being covered by an agency temp or additional hours)</i>   |
|   |
| Are there any other issues to bring to the attention of the OHU?*- <i>(Consider any questions you want to be asked or management issues that may need to be taken into account by the OHU – on page 4 are examples of issues OHU will consider in all cases - but you may wish to add to the list here)</i> |
|   |
| Any Other Relevant Factors - e.g. counselling / physiotherapy offered, other relevant circumstances – Please attach copies of any letters or information relating to the employee's health / absence  |
|   |

|   |  |
|---|--|
|   |  |
| <b>7. SPECIFIC ISSUES</b>   |  |
| Please indicate by ticking the appropriate boxes the issues for which you require specific feedback to be included in the OH Medical Report, which will follow this referral. |  |
| <b>FREQUENT ABSENCE: (please ✓ as appropriate)</b>  |  |
|   | Please advise if there are any underlying health problems, which may account for the instances of non-attendance over the time period specified.   |
|   | Please advise if there are any work-related factors which may be contributing to this individual's non-attendance.   |
|   | Please advise whether this individual is currently fit to undertake the full range of his/her duties. If not, please confirm whether this individual can undertake part of their duties.         |
|   | Please advise if the employee is absent due to stress that could be work related. If so, confirm all details.  |
| <b>LONG TERM SICKNESS: (please ✓ as appropriate)</b>  |  |
|   | Please confirm the likely duration of this individual's absence from work as a result of their present medical condition?  |
|   | Confirm the prognosis of this individual being able to return to work in the foreseeable future to perform their <u>full</u> range of duties? Timescale?   |
|   | Confirm the prognosis of this individual being able to sustain acceptable levels of attendance in the foreseeable future.  |
|   | Are there any specific duties performed by this individual, or working conditions, which may exacerbate their condition if they were to work in the near future or upon their return to work?    |
|   | Would this individual be able to return to work in the near future if his/her duties or work place environment were adjusted or modified in some way? If so, what changes would need to be made. |
|   | Would this individual be able to return to work if a phased return or restricted duties were available?  |
|   | Please advise if the employee is absent due to stress that could be work related. If so, confirm details.  |

|   |                                       |
|---|---------------------------------------|
| <b>MANAGER'S / HEADTEACHER'S NAME: *</b>  | <b>JOB TITLE: *</b>                   |
| <b>SERVICE / SCHOOL / ORGANISATION: *</b> | <b>CONTACT TEL NO: *</b>              |
| <b>DATE: *</b>                            | <b>ES CONTACT OFFICER (if known):</b> |

Once completed please return by e-mail, to:  
dcroccupationalhealthunit@knowsley.gov.uk

**\* Please note that incomplete forms will be returned to the Manager for correct completion prior to any appointment being made and this may result in a delay to the referral process.**

**\*\*Please remember to contact the OHU if the employee is in a front-line service and you need to discuss the timing of any medical appointments and referrals.**



*Knowsley Council*

## **SICKNESS ABSENCE CATEGORIES**

Please choose from one of the categories listed below and insert the 'letter' only to which the referral relates (or latest absence in the case of Frequent Short-Term absence) into Section 4 of the Occupational Health Referral Form:

Sickness absence categories:

- A** – Viral bacterial infections, e.g. cold / flu, infections, etc.
- B** – Stomach, Liver, kidney and digestion, e.g. diarrhoea, vomiting, ulcers, stomach bug, etc.
- C** – Genito-urinary, e.g. urinary tract, menstrual, cystitis, etc.
- D** – Disability related
- E** – Other muscle / joint / bone problems including sports injuries, etc.
- F** – Heart related, e.g. angina, heart-attack, blood pressure, etc.
- Ga** – Work related mental health, e.g. stress, anxiety, depression, drug / alcohol, etc.
- Gb** – Non-work related mental health, e.g. stress, anxiety, depression, drug / alcohol, etc.
- H** – Pregnancy related
- I** – Back / neck problems
- J** – Cancer
- K** – Neurological, e.g. headache / migraine
- L** – Eye, ear, nose and mouth / dental, including sinusitis
- M** – Chest and respiratory, including chest infections
- N** – Diabetes

Return to Section 4 of the Occupational Health Referral Form

## Appendix 5

### PRIVATE AND CONFIDENTIAL

*Name and Address of Employee*

*Date*

Dear *insert name*

#### Details of Managers Attendance Review Meeting

I write further to our Return to Work Meeting on (Date) and letter of (Date) at which you were advised of the Council's Sickness Absence Management Procedure. I am now in receipt of the Occupational Health Report (copy enclosed), and would therefore request you to attend a Managers Attendance Review Meeting to discuss this further.

The details of this meeting are as following:

**DATE:**

**TIME:**

**VENUE:**

The meeting will seek to:

- clearly establish all of the facts;
- give you the opportunity to provide an explanation for your absence record; and to
- identify any mitigating circumstances

You are entitled to be represented at this meeting by your Trade Union Representative, or other (though not legal) representative.

There are three potential outcomes of this meeting, which are: -

- A 6 month review period, with a view to no further indicators (Recurring reason; Consistent Pattern; 3 in 6; Above 8.5 days) being hit during the review period. If you fail to achieve this target your case will be reconsidered under this stage of the process; or
- A sanction will be issued as follows (the sanction will be effective from the date of the review meeting or 4 weeks from the date of return to work, whichever is the soonest):-
  - verbal warning – hits further indicator following Manager Review or hits 2 indicators
  - Written warning – hits further indicator following verbal warning or hits 3 indicators
  - Final Warning – hits further indicator following written warning or hits 4 indicators.
- It is decided that no further action is deemed necessary.

There is a process of appeal to your Director within 10 days of the decision.



I must advise that if you do not attend this Managers Attendance Review Meeting, consideration will be taken to continue in your absence and you will be forwarded the outcome in writing.

Please contact me if you have any queries.

Yours sincerely

*Insert Manager Name and contact details*

## Appendix 6

### KNOWSLEY METROPOLITAN BOROUGH COUNCIL

#### REVIEW OF SICKNESS ABSENCE – TO BE COMPLETED FOR ALL FREQUENT ABSENCE INDICATORS

*This form is to be completed during the meeting held with the manager and employee to review the employee's sickness absence as a result of an 'indicator' being hit as outlined in the council's sickness absence management policy.*

|  |  |
|--|--|
| Name of employee                       |  |
| Service/School                         |  |
| Team                                   |  |
| Job title                              |  |
| Name of supervisor/manager             |  |
| Date of meeting                        |  |
| Names of other personnel in attendance |  |

Details of sickness absence under review (alternatively attach a copy of individual sickness absence record available from Employee Services)

| Date from | Date to | Duration | Reason |
|-----------|---------|----------|--------|
|           |         |          |        |

Underlying causes/contributory factors identified following discussion (if work-related stress, please state)

|  |
|--|
|  |
|--|

|  |                                  |  |  |
|--|----------------------------------|--|--|
| Live frequent absence warnings on file                                 | Verbal/Written/<br>Final Written | No further action to be taken                            |  |
| Monitor Absence (state review date[s] )                                |                                  | Verbal warning issued (send copy of letter to ES)        |  |
| Written warning issued (send copy of letter of ES)                     |                                  | Final written warning issued (send copy of letter to ES) |  |
| Proceed to a Frequent Absence Medical Incapability Hearing (inform ES) |                                  |  |  |

|  |  |
|--|--|
| Additional comments/action to be taken |  |
|--|--|

|  |                           |
|--|---------------------------|
| Employee has been informed that their current rate of sickness absence is unsatisfactory   | Yes / No / Not applicable |
| Employee has been informed that failure to improve their sickness absence rate and then to sustain the improvement may result in further action being taken against them | Yes / No / Not Applicable |

|                      |  |      |  |
|----------------------|--|------|--|
| Manager's signature  |  | Date |  |
| Employee's signature |  | Date |  |

**PLEASE SEND A COPY OF THIS FORM TO EMPLOYEE SERVICES, COMPUTER CENTRE, WESTMORLAND ROAD, HUYTON, L36 9GL – THANK YOU**

## Appendix 7

### PRIVATE AND CONFIDENTIAL

*Name and Address of Employee*

*Date*

Dear *Name of Employee*

#### **Outcome of Manager's Review held under Frequent Absence Medical Incapability Procedure**

I am writing following the Managers Review meeting in relation to the above on *Date*. At the meeting your absence record was considered.

At the meeting a discussion with regard to your sickness absence in that you have reached the following indicators *[delete where appropriate]*

1. A recurring reason for absence
2. Three absences in a six month period
3. Absence of more than 8.5 days in a year
4. A consistent pattern of absence

Having fully considered the all the information presented to me at the meeting including comments made by you I have decided to: *[delete where appropriate]*

- Take no further action.
- Issue a six month review period. Your absence will therefore be monitored for a six month period until *end date*. It is expected that you will have no further sickness absence within this six month period. Any failure to improve will result in a further Managers Review Meeting will be held in line with the Frequent Absence Medical Incapability Procedure.
- Issue you with a verbal warning. This warning has been entered in your employment record and remains on your file for medical incapability purposes for 6 months, during which time it may be taken into account if further action is taken against you in relation to sickness absence. If your attendance improves during the 6-month period the warning will be removed from your record. However, if you hit a further indicator during this warning a further Manager's Review will be held in line with the Frequent Absence Medical Incapability Procedure.
- Issue you with a written warning. This warning has been entered in your employment record and remains on your file for medical incapability purposes for 12 months, during which time it may be taken into account if further action is taken against you in relation to sickness absence. If your attendance improves during the 12-month period the warning will be removed from your record. However, if you hit a further indicator during this warning a further

Manager's Review will be held in line with the Frequent Absence Medical Incapability Procedure.

- Issue you with a Final Written Warning. This warning has been entered in your employment record and remains on your file for medical incapability purposes for 24 months, during which time it may be taken into account if further action is taken against you in relation to sickness absence. . If your attendance improves during the 24-month period the warning will be removed from your record. However, if you hit a further indicator during this warning a further Manager's Review will be held in line with the Frequent Absence Medical Incapability Procedure.

[only to be included when a verbal / written / final written warning has been issued] I also confirm that you have the right to appeal against this decision and should you wish to exercise this right you should do so in writing addressed to your Director. c/o the above address within ten working days of your receipt of this letter. Within your letter you should briefly set out the reasons of your appeal which will be heard by the Director or a nominated Officer of the Service where you may be accompanied by your Trade Union or other representative, as per the Council's policy.

If you require any further information contact *ES Support Officer Name and telephone number*.

Yours sincerely

Manager's Name  
Manager's Telephone Number

## Appendix 8

### **PRIVATE AND CONFIDENTIAL**

*Name and Address*

*Date*

Dear

#### **Review of Absence Record**

As you are aware, you are currently in receipt of a Final Written Warning with regard to frequent absence under the Sickness Absence Management procedure.

In my previous letter to you dated xxxxx, you were informed that if you hit a further indicator during this warning period, you would progress to a Frequent Absence Medical Incapability Hearing, the first stage of which is to attend an Occupational Health Review.

As you have now hit a further indicator, you are now required to attend an Occupational Health Review – the date of which will be forwarded to you, in writing, directly from the Occupational Health Unit.

Following receipt of a report from the Occupational Health Unit you will be required to attend a Frequent Absence Medical Incapability Hearing. The purpose of the hearing will be to consider your long-term ability to discharge the terms of your contract of employment with the Council, taking into consideration your absence from work as follows:

- the length of time you have been absent from work due to sickness being *Insert length of absence*
- the recent medical report from the Council's Occupational Health Physician advising that you were unfit at present and the prognosis of a return to work in the near future is unclear
- your comments regarding your current medical health
- the effect on the service of your continuing absence.

You are entitled to be represented at this hearing by your Trade Union Representative, or other (though not legal) representative.

If you require any further information please contact *ES Support Officer Name and telephone number*.

Yours sincerely

Manager's Name  
Managers Telephone Number

## Appendix 9

# Invite to Medical Incapability Hearing

*(To be used in cases of Frequent Absence or Long Term Absence)*

## PRIVATE AND CONFIDENTIAL

Name and address

Date

Dear

You are invited to attend a medical incapability hearing on *insert date of hearing*. The hearing will be held in *insert venue* at *insert time*. On arrival please report to Reception and you will be advised where to wait.

The purpose of the hearing will be to consider your long-term ability to discharge the terms of your contract of employment with the council, taking into consideration your absence from work as follows:

- the length of time you have been absent from work due to sickness being *insert length of absence*
- the recent medical report from the Council's Occupational Health Physician advising that you were unfit at present and the prognosis of a return to work in the near future is unclear
- your comments regarding your current medical health
- the effect on the service of your continuing absence.

The hearing will be conducted by *insert officer name and job title*, and the facts of the case will be put forward by *insert manager's name*. I enclose copies of documentation, which will be referred to. You are entitled if you so wish, to be accompanied by a colleague or trade union representative.

I should advise you that, if you are deemed to be incapable of fulfilling your contract of employment with the Council, then you may be dismissed from the Council's service on the grounds of medical incapability.

I would be grateful if you could indicate if you will be attending, or providing any documents/and or witnesses, or exercising your right to representation.

Should you chose not to be represented the hearing will go ahead as scheduled and the outcome will be confirmed to you in writing.

Yours sincerely

ES Officer  
ES Officer Job Title  
ES Officer Phone Number

Encs.

Copies to:      «Hearing\_Officer»  
                     «Managers\_Name»  
                     «Representative»



## Appendix 10

### Letter 3 to be drafted with Employee Services

#### PRIVATE AND CONFIDENTIAL

Name and address

Date:

Dear xxxxxx

The purpose of this letter is to confirm my decision following the hearing held under the Council's Sickness Absence Management Procedure on xxxxxxxxxxxxxx.

The decision I have made is that you shall be dismissed due to your incapability to fulfil your contractual obligation to the Council due to the frequency of sickness absence. Your dismissal is with notice of xxx and therefore your last day of service will be [xxxxx].

In reaching my decision, I listened to all the evidence put to me at the hearing including evidence from yourself and xxxx.

In summary I heard that during the past xxx years you have had xxxx occasions of sickness absence, totalling xxx days. I heard that your sickness absences had been addressed under the Sickness Absence Management Procedure and that you had received formal warnings, most latterly a final written warning on xxxxxx and yet there was no improvement in your attendance. In fact, since the final written warning was issued, you have had a further xxx periods of absence totalling xxx days.

I accepted that, in the main, the reasons for your absences were due to xxxxx illnesses and I noted that you had been offered counselling support through the Council's Occupational Health Service.

In response you detailed some of the issues that have led to your absences but gave no indication that any improvement in your attendance would be maintained.

I carefully considered your response alongside information provided relating to the costs to the Service Area of your absence in terms of the need to provide cover for your duties as xxxxxxxxxxxxxxxxxxxx within the xxxxxxxxxxxxxxxx service and I concluded that in terms of lost productivity and unbudgeted expenditure the position was unsustainable.

On that basis, it is with regret that I believe that you should be dismissed from your employment with the Council.

I can confirm that you have the right to appeal against this decision and, should you wish to exercise this right, you should do so in writing addressed to **xxxxxxxxxx**, Director c/o the address at the foot of this letter within ten working days of your receipt of this letter. Within your letter, you should briefly set out the reasons of your appeal which will be heard by the Council's Employee Services Appeals Committee where you may be accompanied by your Trade Union or other representative in accordance with the Council's Policy.

Yours sincerely

**Name of hearing officer**

## Appendix 11

### PRIVATE AND CONFIDENTIAL

*Name and Address*

*Date*

Dear

Further to our conversation regarding your absence, I would like to arrange for your manager, *Managers Name* and I to visit you to discuss your progress.

The purpose of this meeting is to gather some information regarding your absence, and to offer any support to you which you may find beneficial in assisting your return to work.

During the meeting, you may be asked questions around medication, doctor's notes, hospital appointments etc. It would be helpful if you could have this information to hand for this meeting.

We will call to see you at your home on *Date of Welfare*. If this is not convenient please contact me on the number below.

Can I stress that this is a welfare visit, but if you feel more comfortable having a member of your family, colleague or trade union representative with you, please make the necessary arrangements.

I look forward to seeing you.

Yours sincerely

*Name of Sender*

*Job Title of Sender*

*Phone Number of Sender*

## Appendix 12

### Record of Welfare Visit

|                 |  |
|-----------------|--|
| Employee's name |  |
| Service Area    |  |
| Date of meeting |  |
| Location        |  |
| Others present  |  |

|   |  |
|---|--|
| 1 | Confirm reason for absence – (if absence is due to stress, establish the cause of this stress and state if work related) |
|   |  |
| 2 | Confirm the date this period of absence commenced?   |
|   |  |
| 3 | Confirm if employee has visited a doctor during the period of absence and if so what did they advise?                    |
|   |  |
| 4 | Confirm if taking any form of medication (list medication)   |
|   |  |
| 5 | Confirm how the employee is feeling  |
|   |  |
| 6 | Does the employee have an expected date to return to work?   |
|   |  |
| 7 | If not, what date does the employee's current doctor's note expire?  |
|   |  |
| 8 | Does the employee have any other employment?   |

|    |  |
|----|--|
|    |  |
| 9  | If yes, provide employer 's details and the nature of the job in addition to the reason why the employee is/is not taking sick leave with the other employer.  |
|    |  |
| 10 | Advise the employee to make contact when they visit their doctor again and confirm the outcome of that appointment (ie has the doctor's note been extended or do they have a return to work date?)   |
|    |  |
| 11 | Is there any other assistance that can be offered to the employee during their absence?  |
|    |  |
| 12 | As part of the Council's Sickness Absence Management procedure the employee will be referred to the Occupational Health Unit. They will contact the employee directly with an appointment date and time. Are there any particular dates that they would not be able to attend over the next couple of weeks? (ie due to hospital appointments, etc). |
|    |  |
| 13 | Agreed date of next welfare visit.   |
|    |  |
| 14 | Comments by employee to include any other issues which may be affecting their health/return to work.   |
|    |  |

|                                |  |                        |  |
|--------------------------------|--|------------------------|--|
| Manager's name<br>(block caps) |  | Manager's job<br>title |  |
| Manager's<br>signature         |  | Date                   |  |

|                                 |  |                         |  |
|---------------------------------|--|-------------------------|--|
| Employee's name<br>(block caps) |  | Employee's job<br>title |  |
| Employee's<br>signature         |  | Date                    |  |

Please note that you are signing to confirm that these matters have been discussed with you. By signing you are NOT withdrawing any rights you may have under any appeals procedure

### Discussion of Welfare Sheet – follow up visit

|                 |  |
|-----------------|--|
| Employee's name |  |
| Service Area    |  |
| Date of meeting |  |
| Location        |  |
| Others present  |  |

|   |   |
|---|---|
| 1 | Confirm how they feel they are progressing since the last visit   |
|   |   |
| 2 | Discuss the outcome of the employee's last visit to Occupational Health   |
|   |   |
| 3 | Confirm whether the employee has visited their doctor again and the outcome of the visit(s)                         |
|   |   |
| 4 | If the employee is absent from work with stress, establish the cause of stress and state whether it is work related |
|   |   |
| 5 | Confirm if the medication is the same or if it has changed  |
|   |   |

|    |   |
|----|---|
| 6  | Confirm when the employee expects to return to work   |
|    |   |
| 7  | Confirm the date the current medical certificate expires  |
|    |   |
| 8  | Confirm that the employee will contact the line manager (you) again after their next visit to their doctor to discuss the outcome eg whether the medical certificate has been extended or whether there is a return to work date. |
|    |   |
| 9  | Confirm whether the employee requires any further assistance during their absence eg reasonable adjustments to workplace, phased return to work, working hours etc  |
|    |   |
| 10 | Record any further comments the employee wishes to make   |
|    |   |

|                                |  |                        |  |
|--------------------------------|--|------------------------|--|
| Manager's name<br>(block caps) |  | Manager's job<br>title |  |
| Manager's<br>signature         |  | Date                   |  |

|   |  |                         |  |
|---|--|-------------------------|--|
| Employee's name<br>(block caps)   |  | Employee's job<br>title |  |
| Employee's<br>signature   |  | Date                    |  |
| Please note that you are signing to confirm that these matters have been discussed with you. By signing you are NOT withdrawing any rights you may have under any appeals procedure |  |                         |  |

## Appendix 13

### PRIVATE AND CONFIDENTIAL

Name and address

Date:

Dear xxxxxx

The purpose of this letter is to confirm my decision following the hearing held under the Council's Sickness Absence Management Procedure on xxxxxxxxxxxxxx.

The decision I have made is that you shall be dismissed due to your incapability to fulfil your contractual obligation to the Council, as it has been determined that you are permanently incapacitated. Your dismissal is with notice of xxx and therefore your last day of service will be [xxxxx].

In reaching my decision, I listened to all the evidence put to me at the hearing including evidence from yourself and xxxx.

In summary I heard that during the past xxx years you have had xxxx occasions/days of sickness absence. I heard that your sickness absences had been addressed under the Sickness Absence Management Procedure and that you had received support from the Occupational Health Unit and Employee Services in trying to find you suitable alternative employment.

I accepted that, in the main, the reasons for your absences were due to xxxxx illnesses and I noted that you had been offered counselling support through the Council's Occupational Health Service.

In response you detailed some of the issues that have led to your absences but gave no indication that any improvement in your attendance would be maintained.

I carefully considered your response alongside information provided relating to the costs to the Service Area of your absence in terms of the need to provide cover for your duties as xxxxxxxxxxxxxxxxxxxx within the xxxxxxxxxxxxxxxx service and I concluded that in terms of lost productivity and unbudgeted expenditure the position was unsustainable.

On that basis, it is with regret that your employment will be terminated with the Council on Date.

I can confirm that you have the right to appeal against this decision and, should you wish to exercise this right, you should do so in writing addressed to xxxxxxxxx, Director c/o the address at the foot of this letter within ten working days of your receipt of this letter. Within your letter, you should briefly set out the reasons of your appeal which will be heard by the Council's Employee Services Appeals Committee



where you may be accompanied by your Trade Union or other representative in accordance with the Council's Policy.

I would like to take this opportunity of thanking you for your service with this Authority and for your personal contribution to the Service Area. Please accept our best wishes for the future and for a continued improvement in your health.

Yours sincerely

Name of hearing officer

## Appendix 14

### PRIVATE AND CONFIDENTIAL

(Insert Name)  
(Insert Address)

Date:- (Insert Date)

Dear (First Name)

I am writing to you regarding your current absence from work dating from (Insert Date).

You are reminded that any request for leave of absence, whether paid or unpaid, must be authorised by an employee's line manager. In that respect I am advised that since (Insert Date) you have not notified your line manager of any reason for your absence and therefore your absence must now be considered as unauthorised.

I would also remind you that if your absence is related to sickness then again you must contact your line manager to notify them of the reasons for your non attendance at work as stated in the Council's Sickness Absence Reporting Procedure. In the first instance you must make contact with your Line Manager on the first and fourth day of your absence. In addition if you must provide a GP's medical certificate to cover you from your 8<sup>th</sup> day of absence. You must comply with this procedure in order to receive payment under the Council's sickness absence scheme.

Given that you have not provided any explanation for your absence, I can confirm that your pay has been suspended and this has been backdated to (Insert Date). In addition your absence has been recorded as unauthorised. I must also inform you disciplinary action in relation to your continued absence may be considered.

I would strongly urge you to contact your Manager, (Insert Line Manager's Name), to discuss this matter and would ask that you do this immediately. Alternatively, you may wish to contact me directly on the number below.

Yours sincerely

(Employee Services Officer Name)  
Employee Services Officer  
Employee Services  
(0151) 443 (Insert Tel. No.)

## **Appendix 15**

### **GUIDANCE FOR MANAGERS ON SICKNESS ABSENCE MANAGEMENT AND FREQUENTLY ASKED QUESTIONS**

#### **Introduction**

This guidance has been designed to support the Sickness Absence Management Policy and assist staff with managerial and supervisory responsibilities to manage the sickness absence of employees. This guidance can be used to:

- Underpin Knowsley's existing Sickness Absence Management Procedure;
- Provide information and sources of further support;
- Offer practical tips on key areas of good practice in Human Resource Management.

It is not intended to replace or substitute the Sickness Absence Management Procedure, or advice from Employee Services but will act as a source of information and guidance on many of the day to day issues you as a manager will face when managing sickness absence. The guide is an evolving document and as such if there are issues/concerns you are dealing with on a regular basis and which are not covered, please contact Employee Services so that the guide can be expanded and the knowledge and experience shared with other managers/supervisors.

#### **Why managing sickness absence is important for those in supervisory /management roles?**

Absence management is recognised by the Council as one of the many managerial roles of staff with supervisory responsibilities. The time associated with managing sickness absence on a daily basis is minimal in relation to the time and cost associated with managing a staff member through the relevant Council's procedures and potential Tribunal procedures. If sickness absence is seen to be managed effectively then staff are more aware of their responsibilities within the process, and staff who are often left covering the absence(s) feel confident that the sickness is genuine and are therefore more content to undertake the additional duties required to cover sickness absence.

Managing sickness absence is therefore about creating a climate of confidence to ensure that staff are aware of the issues caused by their absence, of their responsibilities in this process and the ramifications of a failure to comply with the relevant procedures. Staff should also feel able to take the time necessary to recuperate when there is a genuine illness.

It is recognised that managing sickness absence is a more straightforward process for some categories of staff than others. This is often as a result of the standardisation of their work pattern and the nature of their work. It is important, however that a consistent approach is adopted across all categories of staff. Managers must adopt a consistent and balanced approach which places the emphasis on securing the prompt return to work of staff whilst recognising individual circumstances and improving attendance will be the ultimate aim of all managers.

Consistency is key and protects you, as a manager, against potential claims of unfair treatment from staff.

### **What are the benefits of managing sickness absence?**

When sickness absence is recorded and managed effectively the following benefits have been identified for your team, service and the Council:

- A reduction in the number of staff taking unnecessary sick days which will assist you in maintaining service provision and minimising disruption;
- A reduction in unnecessary overheads e.g. savings on lost salaries and sick pay costs;
- The early identification of trends and patterns of staff absence which allows you to take the necessary action to rectify the situation at an early stage;
- Provide you with the necessary information to help support staff to recuperate who are genuinely ill;
- The easy collation of the information required to inform any subsequent procedures which may be enacted including Occupational Health referrals, disciplinary procedures etc.
- Valued staff are retained avoiding unnecessary recruitment and training costs, through the prevention of other staff being continuously overburdened with additional duties whilst colleagues are absent;
- Compliance with relevant employment legislation;
- A healthy and safe workforce.

### **Managing Absences**

**What are the absence levels or triggers which fall below the Council's recognised management standards and therefore give cause for concern?**

- Recurring reason for absence
- Consistent pattern of absence
- 3 absences in 6 months
- Over 8.5 days absence (pro-rated for part-time employees). Future targets are reviewed in accordance with the Council's Policy and sickness absence data.

When calculating the pro-rated target of 8.5 for part-time employees, please use the sliding scale table, which will enable you to determine what the pro rata amount is based on part time hours. For any part time hours that are not contained within the sliding scale, there is a calculator contained within this document which will automatically calculate the part-time annual sickness target.

**What are the absence patterns/trends that I need to be aware of?**

There are a number of general patterns and trends that staff with management /supervisory responsibilities should be aware of:

- Absences on a Monday and Friday or the days immediately preceding/following the staff member's normal working week;
- Days preceding/following bank holidays/closure days/annual leave;
- The same days each time;
- The same number of days each month;
- Links to work/social activities;
- Groups of staff absence on set days/times;
- A member of staff always returning from absence prior to the need for a medical certificate;
- A member of staff consistently needing to go home from work as a result of sickness;
- An increase in absence levels during school holidays, sporting events, periods of warm weather etc.
- Any absences which occur immediately after a monitoring period has ended or a sanction lapsed.
- Absences ending abruptly when pay changes.

It is essential that the standards/patterns are consistently and fairly applied.

## **Reporting Sickness**

### **1. What information should an employee provide when they are reporting sick?**

Employees should provide you with the details of the nature of their illness, the date or day the illness began (including Saturday and Sunday), the possible duration of the absence i.e. when they expect to return to work and details of any outstanding work and diary commitments. You should also use this opportunity to clarify any further contact arrangements and the Council's certification procedures in respect of absence. In addition to the standardised information that will always be required there may be additional information specific to the area/role which is needed.

The employee may have been taken ill suddenly and therefore may not have had all the information to hand; in such cases, the manager can gain access to their email, diary etc.

You may need to contact the employee again if information cannot be accessed/found. Such contact should be kept to a minimum and should be conducted sensitively and wherever possible, agreed with the employee.

### **2. Why does an employee need to inform their manager if they are ill during a weekend/day that they are not scheduled to work?**

Both Statutory Sick Pay (SSP) and Occupational Sick Pay (OSP) are based on a seven day week.

### **3. How often should an employee contact their line manager?**

For the first eight days you should remind the member of staff to keep in touch with you on working day one, working day four and working day eight during the period of absence. You should agree arrangements and set a time when this is most suitable. This will provide you with an opportunity to find out how the member of staff is recuperating, how likely they are to return to work on the date they originally anticipated and identify and discuss any issues that have arisen i.e. the location of documents etc. However, if the employee informs you that they are likely to be fit for work sooner than the 8 days, you should ask them to make contact with you on the day they expect to return to work, if they no longer feel able to return on the anticipated day.

After eight working days, the normal expectation would be weekly contact but this should be wherever possible agreed with the member of staff. The exception to this is where a member of staff has been medically certified for a prolonged period and it is understood that they will not be returning imminently.

The Council has a Duty of Care to all its employees and whether an employee is absent for a short or long period of time, managers are expected to maintain regular contact with employees.

**4. The employee will not tell me why they are off sick. What should I do?**

If the employee refuses to tell you the reason for their absence, you must inform them that they are obliged to confirm this. If they are still not comfortable disclosing the nature of their illness to the line manager due to the illness being of a particularly sensitive nature then you should advise them of the confidentiality arrangements and the requirements of the Council's Sickness Absence Procedure. If the absence continues beyond 7 days and you are still unaware of the nature of the illness, refer them immediately to Occupational Health for an emergency appointment.

**5. A member of my staff is always telephoning in and not speaking to the right person or providing the right information, what should I do?**

Initially you should contact the employee and advise them that they must make contact with you or a nominated officer. Upon their return you should arrange to meet with them to ascertain the reasons for their behaviour. You should inform them of the absence notification procedure and their obligations to inform you, in your absence, another nominated member of staff, of their absence and the appropriate timeframe when this should be done.

You should inform them of the disruption caused to colleagues when this is not done and ask them to confirm that they understand their obligations and that this will not happen again. You should inform them that if they do not improve in this area you will need to seek advice from Employee Services and consider taking disciplinary action through the appropriate Council procedure.

**6. If a member of staff texts or emails me to inform me they are off sick, what should I do?**

As in Question 5 above, you should make contact with the employee and advise that they must make contact with you or a nominated officer personally by telephone and not by text or email. The Council has a Duty of Care to all its employees and whether an employee is absent for a short or long period of time, both employees and managers are expected to maintain regular contact in order to ascertain what support, if any, is necessary to aid the employees' recovery and subsequent return to work. Upon the employee's return to work you should arrange to meet with them and explain why texting or emailing is not suitable.

**7. A member of staff sends in a fit note late. What can I do?**

You should write formally to the member of staff informing them of their responsibilities for sending GP notes as soon as practicably possible. You should also inform them when their next fit note is expected in the office and that failure to comply with Council procedure could result in deduction of pay. You should also make it clear that the Council does not accept backdated fit notes for the purposes of pay.

**8. If an employee does not submit fit notes on time, can I stop their pay?**

If an employee submits a late fit note and has not previously informed you that their note will be late, then you should inform them of their responsibilities for providing timely notes and that the Council does not accept backdated notes for the purposes of pay. If the employee is unreasonable and returns a further fit note late and has not previously informed you that they are having difficulty in obtaining an appointment with their GP, you should treat this as unauthorised absence and inform them that their pay will be stopped. You will then need to complete the appropriate documentation for payroll to authorise deduction.

**9. Is it acceptable if an employee's partner, or nominated person calls to report their absence when they have been ill?**

Unless there is a very good reason for the employee not contacting their manager or designated person directly, for example, the employee has been detained in hospital, asking a relative, friend or partner to report their absence is not acceptable. In any event, the employee must contact you as soon as they are able to and you must relay this to the family member who reports their initial absence. The requirement of the policy is for the employee to report their absence personally.

**10. If an employee becomes unwell during the working day and they need to leave work, who should they tell?**

Employees who fall ill during their working day must inform their line manager or the designated contact for the service.

**11. A member of my team has informed me that they will be having elective cosmetic surgery. What time off are they allowed?**

For cosmetic surgery all pre-operative appointments should be taken in the employee's own time, unless the surgery is for medical reasons and the member of staff does not have access to the flexi scheme. The day of the procedure will be classed as hospital and evidence of the appointment should be given to the line manager. Any time after this will be treated as sick and the relevant sickness absence procedure should be followed.

## **Issues relating to annual leave and sickness absence**

### **1. A member of staff wants to use their annual leave instead of sickness entitlement. What should they do?**

Members of staff are not under normal circumstances allowed to take annual leave instead of sickness absence when they are too ill to come to work. Nor should staff be allowed to work from home when they are too ill to come into the office.

### **2. What if a member of staff is absent due to sickness before they go on annual leave?**

If a member of staff phones in sick immediately prior to taking leave, they should inform you of their first and last day of sickness. If they are going abroad, and they report sick prior and during their annual leave period, they must obtain a note from their GP saying that they are fit to travel. (see FAQ 5 below)

### **3. A member of staff has just informed me that they were taken ill/injured during their annual leave. What should they do?**

If a member of staff becomes ill during the course of their annual leave, they need to obtain a fit note to cover the period of sickness. They must inform you as soon as possible that the sickness will or has interrupted their leave.

They will be entitled to take the balance of their leave entitlement at a later date after returning to work, normally this should be before the end of the leave year.

If a member of staff does not inform you that they are ill whilst on holiday or fails to provide a medical certificate they cannot reclaim the leave.

### **4. A member of staff has asked to be reimbursed for their bank holidays whilst they were off on long term sickness. Are they entitled to it?**

No. In line with national terms and conditions, Part 3, paragraph 4.4, where an employee is receiving sick pay under the scheme, sick pay should continue if a public or extra statutory holiday falls during such sickness absence. However, no substitute public or extra statutory holiday should be given.

### **5. I have a member of staff absent as a result of sickness but is going on holiday. What is their entitlement?**



At least 5 working days before any holiday is due to be taken, employees must contact their Manager to inform them of when they intend to travel/commence their holiday. The employee will be required to provide a fit note from their Doctor/Medical Practitioner to cover their absence during any holiday period. If the Fit note confirms that the holiday is to aid the employee's recuperation, then the time off will be classed as sickness. However, if the holiday was pre-booked or not confirmed on the Fit note as necessary for the purposes of recuperation, the time off will be classed as holiday and holiday allowance will be reduced accordingly.

If an employee returns from a period of sickness absence prior to the end of their annual leave year, and is able to take their annual leave on their return, before their annual leave year expires, they should do so.

#### **6. Can annual leave be used to facilitate phased returns?**

If the employee's GP or Council Occupational Doctor suggest a phased return, then the employee will not be required to use their annual leave for the first four weeks. However, if the employee themselves requests a further extension to their phased return beyond 4 weeks, then they would be required to use their own leave.

#### **7. If an employee returns on a phased return and requests leave during this period, can they take it?**

It is advised that if Occupational Health or the employee's GP have suggested a phased return, and the employee does not have any pre-booked leave during this period, that any requests for leave should be rejected. A phased return allows the manager time to assess the employee's fitness to return to normal duties. A break within this period does not support the employee or employer.

#### **8. If I return from sickness on a phased return, can I accrue any additional time e.g. flexi time, sleep ins, stand by etc.?**

If a phased return has been suggested by your GP or Occupational Health, you can only work the hours specified and cannot accrue any additional time. However, if the phased return is suggested by yourself and agreed with your line manager, through the use of annual leave, you can accrue additional time, provided it has been agreed with your line manager first.

### **Fit Notes**

#### **1. If an employee has a gap between fit notes, are they required to get the missing days covered?**

Yes, for the purposes of the employees' continued absence they would need to go back to their GP to request a fit note to cover any missing days, however the Council does not accept backdated notes for the purposes of pay. It is the employee's responsibility to know the date their fit note is due to expire and to arrange a further GP appointment in advance of the expiry date to ensure there are no gaps between the dates on fit notes.

**2. If an employee's GP has indicated that they 'may be fit for work', what should I do?**

The 'fit note' has been designed to give you the information needed to begin a discussion with an employee on whether they can return to work in spite of their illness or injury. You should consider the doctor's comments and discuss these with your employee. If a return to work is possible you should refer the employee back to OH in order to agree any temporary changes to their job or hours and what support you will provide to them and for how long. If you are unsure of things please contact Occupational Health or Employee Services. In order to help you identify changes which may be made following an employee's return to work, it is advisable to undertake a risk assessment.

In addition, Managers should update OH with the date of their return to work and the agreed adjustments in place if the employee is still under review with Occupational Health. If the employee subsequently goes off sick again the Manager should advise OH of this to ensure the employee's absence record is updated and a review appointment is arranged if necessary.

**3. What should I do if an employee wants to return to work before the end of a 'not fit for work' note?**

Sometimes your employee will be able to return to work before the end of the 'fit note' period where a doctor has previously advised that they are not fit for work. This may be because the employee has recovered faster than the doctor expected, or the doctor did not know of ways in which you could support your employee to return to work.

If the employee wishes to return to work before the end of their fit note, they may not require another referral to Occupational Health to assess their fitness, if you already have an OH report confirming they may be fit to return by a particular date or with adjustments. However, in the absence of an up to date OH report, it may be necessary to refer the employee back for a final assessment. The employee does not need a note saying they are fit for work. Unlike the sick note, the fit note does not have an option to say that they are fit for work. If the GP wants to assess the employee's fitness for work again, they will say this on the fit note.

**4. What is a risk assessment?**

A risk assessment is nothing more than a careful consideration of what, in your workplace, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm. More information can be found on BERTHA under Health and Safety.

**5. Can I request a medical statement advising that my employee is 'fit for work'?**

Unlike the 'sick note', the 'fit note' does not include the option for doctors to advise someone that they are fully fit for work. You do not need to be fully fit to return to work and it is a myth that an employee needs to be 'signed back' to work by a doctor. In some cases, there may be existing procedures to ensure someone is fit to carry out their role safely and these should be followed (e.g. DVLA rules for certain classes of drivers).

If there is an end date on the 'fit note' an employee is not required to revisit their GP. If you feel you need a medical opinion stating that your employee is fit for work, you should speak with Employee Services or OH who will advise you accordingly.

**6. What do I do if I feel an employee appears to be acting out of character in the workplace?**

Seek advice from Employee Services as soon as possible. On rare occasions it may be necessary to medically suspend an employee with an immediate referral to Occupational Health. This form of action would need to be discussed with Employee Services before any action is taken.

**Occupational Health**

**1. A member of staff has sent a fit note in stating work related stress. What should I do?**

You should conduct a welfare visit within the first two weeks of absence and refer the employee to Occupational Health immediately.

**2. A member of staff has informed me that they require a major operation and will be off work for some time to aid their recovery. Do I still need to conduct a welfare visit or refer them to Occupational Health, given that I know why they are absent and for how long?**

Yes, regardless of the reason for absence you should always conduct welfare visits, either in person or over the telephone, when an employee is absent. You should also refer them to Occupational Health. They may not be in a position to attend Occupational Health, but in the absence of a physical visit, employees can give their consent for Occupational Health to obtain their medical records. This is vital where their long term prognosis is not good, in order to support the employee in obtaining support and/or access to their pension.

**3. Can an employee refer themselves to Occupational Health or do they need their manager to refer them?**

An employee cannot self refer to Occupational Health. However, if you are feeling unwell and would like to arrange an appointment with Occupational Health, please discuss this with your line manager who can make the necessary arrangements.

**4. Can the employee see the Occupational Health report?**

Yes, they can request a copy of the report by contacting Occupational Health.

**5. If Occupational Health deems it necessary for an employee to attend counselling, physio or other alternative therapies, can they attend during works time?**

Yes, although they must consult with their line manager when the appointment can be made, particularly where the employees works in front line services, so that cover can be provided when necessary. Where possible, appointments should be made at the beginning or end of the working day, or within the first one and half hours of the employee's shift in line with the Time off Work Policy. If the employee wishes complete confidentiality, sessions can be arranged in their own time, but the manager will need to authorise treatment(s) as there is a cost to the organisation.

**Further information and guidance**

Department of Work and Pensions - <http://www.dwp.gov.uk/>

Citizens advice Bureau -

[http://www.adviceguide.org.uk/england/benefits\\_e/benefits\\_sick\\_or\\_disabled\\_people\\_and\\_carers\\_ew/benefits\\_for\\_people\\_who\\_are\\_sick\\_or\\_disabled.htm](http://www.adviceguide.org.uk/england/benefits_e/benefits_sick_or_disabled_people_and_carers_ew/benefits_for_people_who_are_sick_or_disabled.htm)