

Sickness Policy and Procedure

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1. Policy

- 1.1. The pupils at all schools within SECAT deserve the best possible education. To this end, pupils are best served by a healthy and productive work force. We aim to achieve this by providing a safe and healthy working environment and by implementing procedures that will maintain a contact with absent employees and assist them in returning to work.

2. Staff Absences

- 2.1. Apart from having the direct effect on the quality of education provided, staff absences represent a significant cost to the management of the Trust. These resources could otherwise be used to improve school and education services.
- 2.2. The management of SECAT as a good employer, does not want its employees to attend work when they are too ill to do so. However, it does expect them to account for their absences and to meet their contractual obligations to work.
- 2.3. As an Equal Opportunities employer, it is essential that management treat each case on its merits by taking into account all the circumstances. The Trust's Equal Opportunities Policy states that employees will not be discriminated against on any grounds.
- 2.4. Every effort will be made by management to ensure that good and fair practices are specified in this procedure and are carried out.

3. Procedure

3.1 *Scope of this Procedure*

This procedure applies to all employees of SECAT.

- 3.1.1 Support staff who are following the Probationary procedures or those who are employed on a casual or temporary basis will be expected to operate within the same ground rules e.g. the sickness reporting procedure and adherence to good practice. However, continuance of their contract will be reviewed in the light of their actual attendance.

3.2 *General Principles*

- 3.2.1 The following are general principles that the Trustees expect the CEO/Headteachers, managers and employees to follow in order to manage sickness absence fairly and effectively.
 - promote the health, safety and wellbeing of all employees, including the use of risk assessments to identify and manage hazards impacting on health in the workplace
 - achieve high levels of attendance through the reduction of sickness absence

- implement procedures to support and manage employee absences, whilst dealing with unacceptable and/or high levels of sickness absence
- employees will be treated fairly, consistently and in a non-discriminatory manner
- The Trust's approach will be positive and preventative rather than punitive
- open, honest and effective communication between managers and employees will be encouraged
- good attendance is valued and should be acknowledged and recognised
- employees' sickness will be managed with respect for confidentiality and in accordance with the requirements of the Data Protection Act, Access to Medical Reports Act, Equality Act 2010 and employment legislation
- The Trust will be sensitive and supportive to employees experiencing ill health or impairment

4. Headteacher's Responsibility

- 4.1 It is the Headteacher's role, within each school, to monitor sickness absence and to take action in accordance with this sickness procedure. This will require the maintenance of sickness absence records and to be responsible for absence policy, including any absence as a result of an accident at work. Managing absence means being fully informed about the absence, identifying problems, and taking prompt action on the basis of this information.

5. Employees responsibility

- 5.1 Employees are responsible for following the sickness absence reporting procedure and for maintaining contact with their relevant school/base whilst absent.

Employees also have a responsibility to:

- be at work unless unfit to do so (or on authorised leave of absence)
- not engage in any activity or conduct that could hinder their recovery and return to work
- use the sick pay scheme only when they are not medically fit to attend or stay at work. (Abuse of the scheme may result in sick pay being suspended and/or disciplinary action being taken. If time off work is needed for urgent, unexpected caring or domestic responsibilities, employees must inform their line manager and discuss the options available e.g. alternative working, family crisis/compassionate leave)
- co-operate with the Occupational Health Service if their manager refers them to, or seeks advice from, the Service
- inform their manager about any impairment or work-related sickness/medical condition which may be having an effect on how they carry out their duties.
- provide the necessary doctor's statements as required throughout any period of absence and discuss with their manager any advice given by their doctor in a 'Statement of Fitness to Work'.

- attend meetings including Return to Work Meetings, Absence Review, Contractual Reviews and Appeals (where medically able) or nominate a representative to attend on their behalf.

6. Occupational Health Service

The Occupational Health Service will:

- provide advice to managers on the health of employees and how this affects their ability to undertake their role
- provide advice to managers where there are concerns about a GPs proposal regarding fitness to work as set out in the Statement of Fitness for work
- fulfil the role of 'Independent' Occupational Health Physician in consideration of ill-health retirements

7. Human Resources

7.1 Human Resources can be consulted where there are any issues regarding sickness absence and will provide the following advice and guidance:

- advice to managers on managing both short- and long-term sickness.
- assist managers and employees to resolve disability issues
- assist managers and employees to consider the recommendations provided in the Statement of Fitness for Work
- advice regarding Occupational Health Referrals and the consideration of any reasonable adjustments.
- advise and support at Contractual Reviews

8. Return to work interview

8.1 Return to work interviews should normally be carried out by the employee's immediate supervisor, manager or designated Office Manager. A checklist to help managers carry out these meetings can be found within **appendix 1**.

8.2 The interview explores the cause of the absence and provides an opportunity to explore any particular problems the employee may have. They indicate to employees that their absence was noticed and that they were missed. Above all, they demonstrate that absence is a high priority for the Trust and that policies are being put into practice.

8.3 The designated manager should conduct a return to work meeting with the employee after every instance of absence, without exception, ideally during the first day back or at least within three days.

8.4 Possible Outcomes of a Return to Work Interview

- An Absence Review Meeting is arranged where a trigger has been reached.

- Where a trigger is being approached, the employee is advised of the Triggers and that future absences may result in a more formal approach being taken, i.e. Absence Review Meeting.
- A return to work 'action plan' which might include referral to Occupational Health, or Access to Work, a phased return to work or period of adjustment, reduced or more flexible working, training, etc.
- Adjustments to the workplace (Equality Act 2010/Health & Safety issues)
- Temporary rescheduling of work to ease employee back to full duties

9. Sickness Absence Triggers

9.1 Short Term Absence Triggers

Short term absence is defined as sickness absence made up of odd days or short periods, for minor unconnected ailments and where there may appear to be no underlying medical reason. There is a general inability to attend work regularly.

The short-term absence trigger for the School is

- 3 episodes of absence in any rolling 6-month period, or,
- 8 days sickness absence in any rolling 12-month period*, or,
- Unacceptable and recognisable patterns of absence that cause concern, e.g. frequent absence on a Friday or Monday or days linked to bank holidays etc.

*Part-time staff or staff working compressed hours should have the trigger pro-rata'd according to the ready reckoner shown below.

Average days worked per week	Short-term Trigger
5 days	8 days
4 days	7 days
3 days	5 days
2 days	3 days
1 day or less	2 days

9.2 Long Term Absence Triggers

Long-term absence can be defined as either:

- intermittent absences due to the same identified cause - or
- one period of absence which extends over a period of 20 working days* or more with or without an identified return date. (*This refers to full time employees. For

part time employees the equivalent measure of 4 calendar weeks should be applied).

The underlying principle when deciding when to take action in cases of long term sickness is to balance the Trust's needs against the circumstances of the employee concerned, and each case will need to be dealt with on an individual basis.

- 9.3 The above are only guidelines. Managers should always monitor absence and take appropriate action as soon as they believe there is a problem.

10. Absence Review Meetings (Short or Long Term Sickness)

- 10.1 Whether short-term or long-term sickness, once a trigger has been reached, the employee's situation will be managed through a series of Absence Review Meetings. A checklist to help managers prepare for, carry out and follow up after these meetings can be found within **appendix 2**.
- 10.2 Only in the most exceptional circumstances, will a decision be made not to progress to an absence review meeting once a trigger has been reached.
- 10.3 Unless the case is viewed as an exception as outlined above, an Absence Review meeting must take place where an employee's sickness record gives cause for concern, or, where SECAT's short term or long term sickness trigger has been reached, or, when an employee has been referred to Occupational Health and a review meeting is arranged to discuss the outcome. An Absence Review meeting may also be held if there is a change in an employee's condition that may require further action such as referral to Occupational Health, or review of adjustments currently in place.
- 10.4 One of the most difficult problems experienced by management is where an employee is absent for a long period of time due to ill health. Although long-term absence should be treated sensitively, it should also be subject to this procedure.
- 10.5 The manager should give the employee at least 5 working days written notice of the Absence Review meeting. A copy of the employee's absence record for at least the previous 12 months should be attached to the letter.
- 10.6 The employee will need to indicate whether they are to attend the meeting, or in cases of long-term absence, if they would prefer it to take place in their home or alternatively they could arrange for their Trade Union or work colleague to attend on their behalf.
- 10.7 The Absence Review Meeting may take place in the employee's absence, but this will only be appropriate where the employee has indicated that they are unable to attend. When the employee indicates that they would wish to attend the meeting in person but are unable to do so e.g. because they have a hospital appointment, the meeting should be rearranged. The Trust does however have the right to conduct the meeting in the employee's absence depending on the circumstances.

10.8 All Absence Review invite and outcome letters should be held on the employee's personnel file. The employee should be advised of their right to be accompanied by a work colleague or trade union representative in the invitation to the meeting letter.

10.9 The purpose of the Absence Review Meeting is to:

- (a) Discuss the sickness absence and reasons for it.
- (b) Identify any reason for the lack of improvement.
- (c) Refer the employee to Occupational Health if fitness does emerge as the main issue or, when an employee has been referred to Occupational Health to discuss the outcome.
- (d) Advise the employee of the implications of their absence.
- (e) To check the potential for re-deployment (although the appropriateness of this is likely to be minimal in short term persistent sickness cases)
- (f) Warn the employee that if there is not a substantial and sustained improvement a Contractual Review will take place and to inform them that it is possible that this could lead to their employment being terminated.
- (g) Inform the employee that their attendance will be closely monitored over an agreed time and period.

10.10 When dealing with long-term absence the absence review meeting is meant to determine:

- (a) The treatment of the employee and the prognosis of the recovery within a reasonable length of time.
- (b) The likely length of continuing or repeated absence.
- (c) The level of need for the post holders work to be covered.
- (d) Whether in all the circumstances the employer can be expected to wait for the employee to return to work.

10.11 The Absence Review Meeting will need to obtain answers to the questions given above as well as explain the medical referral process to the employee. The Line Manager must at all times treat the employee with sensitivity but at the same time explain their concern about implications for education delivery.

10.12 The possible outcome of the Absence Review Meeting are:

- No further action required but the situation to be monitored informally by the line manager
- A requirement to improve attendance, within a set monitoring period (3 months is normally a reasonable period) after which a further Absence Review Meeting will take place
- A referral to Occupational Health
- Undertake risk assessments
- Employee may choose to refer themselves to Access to Work
- Other support mechanisms identified and implemented such as additional training and development
- Reasonable adjustments such as adaptations, changes to workload, practices or work pattern or possibility of redeployment may be identified in consultation with Occupational Health

- Decision to progress to contractual review due to incapability due to ill health
- Consideration of ill health retirement

- 10.13 The outcome of the Absence Review Meeting should be confirmed by the Line Manager to the employee and their representative in writing within five working days of the meeting.
- 10.14 After an Absence Review Meeting the employee's sickness absence record should be monitored and any actions agreed at the meetings should be implemented. A review should take place at the end of an agreed monitoring to determine the next course of action, which could be a further Absence Review Monitoring.
- 10.15 There is no set number of Absence Review Meetings that should be held. This will be determined by individual circumstances. However, if after a suitable period of time it is shown that the employee is unable to attend work or maintain a satisfactory level of attendance, and Occupational Health Advice has been sought, the employee may be referred to a Contractual Review where their continued employment with the Trust will be considered which could result in their contract being terminated.
- 10.16 When it is established that absence has been a result of a condition which has now cleared up and the sickness record is otherwise good, no further action is needed. This should be properly recorded as such.
- 10.17 Where it is discovered that the employees' absences are as a result of a medical condition likely to be ongoing it is usually appropriate to treat such individuals as having a long-term illness.

11. Managing Long Term Absence

- 11.1 It is vital in these cases that employees should be treated with sympathy and understanding with regard to individual circumstances. Further guidance can be found in **appendix 3**.
- 11.2 The relevant line manager within the School/Trust location, should keep in contact with the employee (by telephone or by home visit) at least once a month from the first stage of the absence. However, the employee should not be harassed. Home visits should only take place by prior arrangement with the employee and by a manager acceptable to the member of staff.
- 11.3 Efforts to maintain contact with the employee will largely be determined by the individual circumstances and particularly the nature of the illness. A sensitive approach should be applied, especially when attempting to contact employees with serious illnesses. Advice and possible assistance can be sought from Occupational Health in such cases.
- 11.4 When it seems clear that the employee is going to be off for a long period or where a long-term illness has been diagnosed, the Line Manager will need to assess the situation in conjunction with advice from HR. If there is a clear prognosis of recovery within a reasonable time span, no further action will be necessary apart from maintaining a level of contact or a referral to Occupational Health.

- 11.5 If the prognosis is uncertain the Line Manager or CEO/Headteacher will write calling the employee to an absence review meeting giving a minimum of 5 working days' notice. The employee should be advised of their right to be represented by a Professional Association, Trade Union or work colleague and sickness records should be sent to them.
- 11.6 The Teachers Pay and Conditions Document states that a teacher's sickness entitlement for long term absence amounts to a maximum of 100 days full pay and 100 days half pay. There may be an exceptional circumstance whereby the Headteacher wishes to extend this entitlement and this will require the Headteacher to seek the approval of the CEO, before implementation.
- 11.7 In exceptional circumstances whereby the Headteacher wishes to extend sick pay for support staff, this will require the Headteacher to seek the approval of the CEO, before implementation.
- 11.8 Each extension of sick pay case should be considered in light of individual circumstances. Occupational Health should be consulted before an extension is granted to determine the possible length of the sickness absence.

12. Medical Advice Following the Absence Review Meeting

- 12.1 If it is agreed at the Absence Review Meeting that medical advice is to be sought this action should be taken immediately. The meeting should be adjourned for this part of the process to be completed. The meeting should be reconvened within five working days of receipt of the medical advice.
- 12.2 Where it emerges that the employees' absence is as a result of a medical condition and likely to be ongoing then it is appropriate to treat such individuals as having a long-term illness. Where fitness to continue in the same job is in doubt, a re-deployment option should be investigated according to any guidance which may have been received from Occupational Health. Where redeployment is not possible or acceptable to the employee then the Manager or Headteacher should proceed with the Contractual Review which will be conducted by the CEO/Headteacher or, if they have acted as the Manager in the case, by a panel of Trustees.

13. Contractual Review Hearing

- 13.1 By this stage, the employee would have been given every opportunity to improve their attendance to a sustainable level. If all efforts have failed, the employer has a duty to consider termination of the contract of employment on the grounds that the employee is unable to meet their contractual obligation to work.
- 13.2 The Manager or CEO/Headteacher will show that the employee has been given a reasonable chance to improve their attendance by allowing a reasonable time between the first formal review and the contractual review.

- 13.3 Decisions about whether to terminate the employees' contract for poor attendance are based on medical evidence, the impact of the absence on education delivery, workloads, effect on other staff, effect on cost etc.

14. Contractual Review Process to be followed

- 14.1 A Contractual Review Hearing will be conducted by the Headteacher/CEO or, if they have acted as the Manager in the case, by a panel of Trustees where relevant, and the employee will be informed in writing (with ten working days' notice) of arrangements for the meeting.
- 14.2 The letter convening the Contractual Review Hearing should outline the employee's sickness record to date and should inform them that as a result of the review a decision may be made by the CEO/Headteacher or Trustees to bring the contract of employment to an end.
- 14.3 A HR Officer should be present at the contractual review to ensure fairness and consistency.
- 14.4 The purpose of the meeting is to: -
- (a) Explain the medical advice received.
 - (b) Where the advice is not encouraging to explain the implications for the employees' colleagues and on the service.
 - (c) To determine the likely duration of the absence or continuation of the condition.
 - (d) Check the potential for re-deployment within the school or job re-design.
 - (e) Check the appropriateness of ill health retirement.
- 14.5 Where a full return is expected but not within the near future or where the prognosis is indeterminable or where there is a medical condition causing persistent short term sickness the CEO/Headteacher/Trust Board must assess whether in all the circumstances the employees continued absence is tolerable.
- 14.6 How long management can wait until taking action will depend on many factors e.g. the nature of the employee's job and impact upon education delivery, costs of using a temporary replacement, the likelihood of the employee ever returning to work in the foreseeable future, length of service etc.
- 14.7 A decision regarding the contractual review should take account of: -
- (a) Length of service.
 - (b) The impact on the School/Trust
 - (c) The need for the work to be covered.
 - (d) The effect of the absence on other members of staff.
 - (e) Past incidences of sickness if relevant.
 - (f) The skills and value (e.g. in terms of relevant experience) of the employee.

- 14.8 Any new information given at the meeting regarding ill health or a change in the nature of sickness may need to be reassessed by Occupational Health. In this case an adjournment may be appropriate.
- 14.9 Should the Contractual Review identify a possible solution for improved attendance the CEO/Headteacher or in the case of the CEO, Chair of Trust Board, may defer any decision to terminate the contract. If attendance improves and no further action has been necessary within one year of the contractual review, the CEO/Headteacher or Chair of Trustees will write to the employee confirming that there will be no further action under the sickness procedure. Any later absences will trigger the process of fresh starting again with the absence review. Where there has been no improvement the CEO/Headteacher or Chair of Trustees will write to the employee to confirm the decision to terminate employment.

15. Termination of Contract

- 15.1 Where a decision to terminate the contract is made by the CEO/Headteacher or panel of Trustees, this will be made on the grounds of their incapability to attend work regularly due to ill health. The Trust will follow the agreed managing sickness procedures. A formal letter confirming this decision must be sent to the employee within five working days of the hearing.
- 15.2 The letter will set out details of notice pay to which the employee is entitled.
- 15.3 The letter will also advise the employee of the right of appeal against the decision. Appeals will be heard by a panel of Trustees where relevant, in accordance with the rules and procedure laid down for appealing against dismissal in accordance with the dismissal procedure, as for Appeals against dismissal for persistent short term sickness absence.

16. Right of Appeal

- 16.1 The employee will be advised that any appeal against the decision must be registered within 10 working days of receipt of the letter. Appeals will be heard by the appropriate panel in accordance with the rules and procedure laid down for appealing against dismissal in accordance with the dismissal procedure. The employee will be given 15 working days' notice of the meeting.

17. Occupational Health Referrals

- 17.1 Employees may be referred to Occupational Health in the following situations:
- Long term or continuing sickness absence whether or not there is a clear indication of a likely date for return to work
 - Persistent or recurrent short term absence
 - Where stress (either personal or work related) or muscular skeletal problems are identified as the cause of absence a referral should take place at the earliest opportunity. Research shows the earlier the Occupational Health intervention, the quicker the recovery time

- Prior to pre-planned surgery Occupational Health will provide advice about the standard recovery times and expected week of return. This allows a clear plan of action to be in place before the employee goes off to have their operation.
- Where there is concern that the employee may have work related health problems or that existing health problems are being aggravated by the duties of the post
- Where health may be an underlying factor or contributory factor in performance or disciplinary issues
- If the employee or managers wishes to consider redeployment, dismissal or retirement because of health reasons

17.2 Employees may also request to be referred to Occupational Health for advice through their line manager.

17.3 Occupational Health should be consulted for specific advice regarding potential return to work arrangements. These could include:

- Carefully monitored part time work
- Simple adjustment of working hours, including reduced hours
- Job modifications (light duties)
- Reorganisation of work station

17.4 A period of adjustment to work will normally be for a maximum of 6 weeks and it may be advisable to stage the return to normal working hours and the full range of duties and responsibilities.

17.5 The Occupational Health service does not make decisions about an employee's continuing employment, or redeployment. These decisions are made by managers and will take into account the advice of the Occupational Health advisers but they will also be based on other factors such as work demand, risk assessment of health and safety considerations, financial constraints and opportunities for redeployment.

17.6 The Trust's Occupational Health Physician may be asked to provide an opinion about whether or not an individual meets the criteria for ill-health retirement under the Local Government Pension Scheme.

17.7 Further guidance on referring to Occupational Health advice can be found in **appendix 4**

18. Occupational Health Reports

18.1 The purpose of the Occupational Health report is to:

- (a) Establish the nature of the illness
- (b) To determine if the employee is fit to return
- (c) To determine how soon the employee might be fit to work again
- (d) To clarify what future treatment is envisaged

(e) Recommend any appropriate specific arrangements e.g. light duties for a period of time, alternative work or a phased return to full duties

18.2 In preparing the report Occupational Health will take account of the views of the employees GP or specialist. The Equality Act 2010 (Disability) Regulations 2010 places a requirement upon employers to consider making reasonable adjustments to their employment arrangements or premises if these substantially disadvantage a disabled person.

18.3 Where the Occupational Health professional considers it useful to receive a report from the employee's GP or Consultant, the Occupational Health professional will obtain the appropriate consent from the employee. The employee will be provided with a consent form from the Occupational Health Service which gives details of the employee's rights under the Access to Medical Reports Act 1988.

19. Medical Certification

19.1 Employees are required to provide a Statement of Fitness for Work for all sickness absences in excess of seven calendar days. If the absence continues, further certificates should be provided to cover the absence without gaps.

19.2 Failure to provide a certificate when required may mean that sick pay will be withheld and the absence counted as unauthorised absence.

19.3 While Statement of Fitness to Work will normally be accepted as evidence of incapacity for work, they are not conclusive evidence that the employee cannot undertake any reasonable duties as may be identified by Occupational Health.

19.4 Where a GP has shown on the statement that the employee maybe fit for some work and it is not possible for the manager to provide the support to enable the employee to return to work, the statement should be used as if the GP had advised 'not fit for work'.

20. Equality Act 2010 and Sickness Absence

20.1 Disabled employees are protected by the Equality Act 2010. The Equality Act 2010 require employers to make reasonable adjustments to disable employee's working arrangements or conditions to ensure that they are not treated less favourably than other employees.

20.2 Definition of disability under the Equality Act 2010:

The Equality Act 2010 defines a disabled person as a person with:

"A physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day to day activities".

20.3 The definition is intended to cover all forms of physical and mental disability, including sensory impairment, learning disability and mental illness (that are clinically well-recognised conditions). It includes people who have a disability where the

condition is likely to last longer than 12 months or is likely to recur. Progressive conditions such as multiple sclerosis, cancer or HIV will be covered by the Equality Act 2010 from the point of diagnosis.

- 20.4 Disabilities are not always obvious – conditions that can be covered by the Equality Act 2010 include asthma, diabetes, mental illness and epilepsy and it is important that employees are given the opportunity to discuss a disability that may affect their health.
- 20.5 Certain conditions that are excluded from the Equality Act 2010 include addictions (except where they originally resulted from medically prescribed drugs or treatment), some mental health conditions such as a tendency to set fires, steal or physically or sexually abuse others, a compulsion towards exhibitionism or voyeurism, hay fever (unless it aggravates another condition), and tattoos and body piercings are not seen as severe disfigurements affecting a person's ability to undertake their day to day activities.

21. Reasonable adjustments

21.1 The employment provisions of the Equality Act 2010 require employers to identify “obstacles to employment” and to implement reasonable adjustments necessary to overcome these. Open discussion with the disabled employee and a workplace assessment should help to identify ways to enable them to carry out their work.

21.2 Managers need to differentiate between absences due to the employee's impairment and sickness absence, which may or may not be related to their impairment(s). Managers are advised to identify on the return to work form where sickness absence is or may be impairment-related to ensure that the employee's absence is managed appropriately.

21.3 Reasonable adjustments can include:

- allowing a phased return to work
- changing the employee's working hours
- recognising that certain conditions may result in a slightly higher level of sickness absence.
- allowing an employee to be absent from work for rehabilitation treatment
- making alterations to premises
- providing new or modifying existing equipment and tools
- modifying or supplying more suitable work furniture
- providing additional training
- modifying instructions or reference manuals
- modifying work patterns and management systems
- providing a buddy or mentor
- reallocating work within the employee's team

22. Unauthorised Absence

- 22.1 Where an employee fails to report for work it is important that the situation is investigated and the employee given an opportunity to explain. On the first day of absence the manager should make enquiries of colleagues. If no reason is established, contact should be attempted with the employee to ask for an explanation for their non-attendance.
- 22.2 If the employee remains absent and fails to make contact as required or fails to provide a Statement of Fitness the manager should contact the employee again informing them that they are absence without authorisation and that their pay will be suspended.
- 22.3 The employee must be advised that failing to comply with the sickness absence reporting procedure and taking unauthorised absence is a disciplinary matter. If the employee is unable to provide a satisfactory explanation for their nonattendance, they should be advised that formal disciplinary action will be considered. Advice should be sought from the HR Service Provider.

23. Variations

- 23.1 There will occasionally be cases, which are not straight forward when it comes to applying the sickness procedure. The management of such cases must be considered first and foremost on an individual basis taking into account all circumstances.
- 23.2 Whilst the recommendation is for flexibility to allow scope for a range of situations it is important that the Line Manager or CEO/Headteacher endeavour to maintain the school guidelines as laid down in this procedure. This includes trying to maintain a level of consistency across the Trust. In reality, the occasions that such variations arise should be minimal, but it is important that the ground rules for applying the procedure are observed.

Scope

- The Policy applies to all employees of the Trust
- In educational establishments with fully delegated budgets, it is for the relevant Trust Board to decide whether or not it is appropriate to apply this policy. Where it is decided that it is not appropriate, the Trust Board is reminded of its obligation as an employer to nevertheless satisfy the requirements of the law and, where appropriate, the requirements of specific conditions of service.

Delegation

See relevant paragraphs.

Amendments

This policy has been updated with regard to the levels of absence, which may trigger actions.



STRICTLY CONFIDENTIAL: RETURN TO WORK ABSENCE INTERVIEW FORM

This form should be completed and signed by both the member of staff and their line manager and returned to the School Office or HR Department. A copy will be held on the member of staff’s personal file.

Employee Details

Name: Job Title:

Department:

Absence Details

Table with 3 columns: From, To, Reason for Absence (please see list overleaf)

Interview

Date: Line Manager conducting interview:

Table with 3 columns for interview questions and YES/NO responses. Includes questions about medical advice, medication, and support requirements.

Was the absence due to an accident or injury at work? <i>(If yes please answer the questions below)</i>		
Has an accident form been completed and sent to designated officer?		
Has the accident been investigated to identify the cause(s) and additional control measures or changes put in place as required?		

Has the employee reached a trigger? <i>(If yes please indicate the trigger that has been hit from the options below)</i>		
(a) 3 episodes of sickness absence in any rolling 6 month period		
(b) 8 days sickness absence in any rolling 12 month period		
(c) Regular patterns of sickness absence giving rise for concern		
(d) 4 weeks or more continued absence		
If a 'trigger' has been reached, has an Absence Review Meeting been arranged? <i>(Contact HR for advice and review Sickness Policy)</i>		
If Yes, please advise date of meeting?		
If the employee has not reached a 'trigger' but has more than 6 days absence in the past 365 days, confirm whether you have advised the employee of the 8 day trigger?		
Is any help or support required? <i>(e.g., as shown below)</i>		
(a) Employee Assistance Programme <i>(contact HR or school office for details)</i>		
(b) Workload adjustments/phased return		
(c) Occupational Health <i>(contact HR or school office for details)</i>		

<p>Conclusions arising from the interview and any further action to be taken</p>
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Signatures:

Signed: Date:
Member of staff

Signed: Date:
Line Manager

The Equality Act 2010 (Disability) Regulations 2010

The Equality Act 2010 (Disability) Regulations 2010 defines a disabled person as a person with: “a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day to day activities”.

Disabilities are not always obvious – conditions that can be covered by the Equality Act 2010 (Disability) Regulations 2010 include Asthma, Diabetes, Mental Illness and Epilepsy and it is important that employees are given the opportunity to discuss a disability that may affect their health.

The Return to Work discussions should sensitively and discreetly identify whether any absence is linked or has been caused by an impairment that is covered by the Equality Act 2010 (Disability) Regulations 2010. You should consider:

- Does the employee have an impairment?
- Is it expected to last for more than 12 months?
- Does it have a substantial, adverse effect on the ability to carry out normal day to-day activities? This may include reaching, carrying, walking or lifting, using a computer, sitting/standing for long periods or needing frequent breaks.
- Are there any reasonable adjustments that can be made to accommodate a disability and/or assist in supporting the employee?

There is a legal obligation to support employees with disabilities and it is therefore important to identify when the Equality Act 2010 (Disability) Regulations 2010 applies. Human Resources can help with this and our Occupational Health Service can provide further information and advice. Please contact the Workplace Health, Safety & Wellbeing Team for further information on 215103.

Reasons for Sickness Absence Categories:

SICKNESS CODE	SICKNESS CATEGORY	EXAMPLE
C	Cancer	
DD	Digestive disorder	Diarrhea, IBS, gallstones, chrohn’s disease
E	Endocrines	Thyroid, diabetes, glands
G	Gynecology	Hvsterectomy, painful periods, cervical
HD	Heart disease	Hypertension, congenital heart disease
I	Infections	Influenza, respiratory infection
MH	Mental Health	Depression, anxiety, stress related illness.
MAI	Minor ailments/illness	Coughs, colds, headaches, toothache
MJB	Muscles, joints & bones	Broken bones, back pain, carpal tunnel
PSR	Post-surgery recovery	
PRI	Pregnancy related illness	
IW	Injury at work	
O	Other – please specify	

Managers' Checklist – Absence Review Meetings

	Action – Before the Meeting	Tick when completed
1	Check that a 'trigger' has been reached	
2.	Arrange a mutually agreeable time to meet with the employee and HR	
3.	Provide the employee with written notice of the meeting and their right to be represented, giving at least 5 working days' notice. The employee's absence record for at least the previous 12 months should be attached.	
4.	Familiarise yourself with guidance about carrying out Absence Review Meetings	

	Action – The Meeting itself	Tick when completed
1.	Outline the purpose of the meeting	
2.	Emphasise that the meeting is held in accordance with the School's Managing Sickness Policy. The policy is designed to ensure employees within the school are treated fairly and consistently. Emphasise that this is to be a positive meeting, the aim of which is help the school work with the employee to improve their attendance levels	
3.	Review sickness levels and explain the 'Triggers', and that the employee has reached either a short term or long term trigger	
4.	Help the employee understand their absence levels impact on school, education of pupils and their colleagues	
5.	Review the outcome of any previous Absence Review Meetings	
6.	Explore the reasons for absence using open and probing questions and encourage the employee to discuss problems affecting their attendance. Raise any patterns of absence that are evident	
7	Identify practical steps that might be taken to reduce absence levels which may include reasonable temporary adjustments to workload or pattern, phased or gradual return to work	
8.	Consider whether a referral to Occupational Health should occur	

9.	Consider a stress risk assessment where appropriate	
10	Consider whether a monitoring period should be put into place	
11	Advise staff of School's Employee Assistance Programme (if applicable)	
12.	Where appropriate, advise staff that a sustained and significant improvement in attendance levels is required and that a failure to improve attendance levels could ultimately lead to a Contractual Review Hearing, when their continued employment with the School is considered: one outcome of which could be termination of their employment NB In sensitive or long-term cases, discretion should be used in delivering this advice. Advice should be sought by HR Service provider	
13.	Takes notes especially around any action points/next steps that are discussed or agreed	
14	At the end of the meeting, summarise the issues that have been discussed and what will happen next	

	Action – After the Meeting; Follow up	
1.	Provide an outcome letter to the employee confirming the discussion and the outcome of the Absence Review Meeting within 5 working days.	
2.	Implement any actions that were agreed with the employee at the Absence Review meeting	
3.	Continue to monitor the employee's attendance levels	
4.	Diarise a review of attendance levels to occur at the end of the agreed monitoring period, or significant event, agreed to determine the next course of action, which could be another absence review meeting or another action	
6.	Retain any notes and copy of outcome letter confidentially	

Guidance on Employees Returning to Work after Long term Illness or Injury

1. Introduction

- 1.1 The majority of employees who return to work after a period of illness or injury will return to their original employment and cope effectively with the full range of duties and responsibilities. However, some will require a period of readjustment, particularly in cases where work stresses may have contributed to the illness.
- 1.2 This need for a phased return will normally, be recommended either by the employees GP, or Consultant, and confirmed by the Trust's Occupational Health service.

2. Benefits of a phased return to work

- 2.1 Potentially these arrangements may reduce the duration of sick leave, and achieve some output by the employee who otherwise would remain absent from work.
- 2.2 A phased return aims to restore the employee's confidence in their ability to do their job and will benefit both the School and the employee.
- 2.3 This procedure gives a defined period of time, normally a **maximum** of up to 6 weeks, where full pay will be paid to an employee on phased return.
- 2.4 It therefore gives the Manager, and the employee, a clear timetable to achieve a successful return to work, and a reasonable length of time where full pay can be sustained, even if the medical advice for a phased return extends beyond the initial 6 week period.

3. Arrangements during the phased return

- 3.1 Long term sickness cases or complex sickness issues are referred to Occupational Health under the Sickness Policy.
- 3.2 Requests for a phased return may come from the employee's GP or Consultant, or from discussions arising between the employee and their Manager.
- 3.3 The Manager will seek specific advice from Occupational Health regarding potential return to work arrangements. Types of arrangements that need to be considered can include:
 - Carefully monitored part time work
 - Simple adjustment of working hours, including reduced hours
 - Job modifications ('light duties')
 - Re-organisation of workstation

- 3.4 The recommendation must be supported by the employee's GP or Consultant, and the GP must provide the employee with a certificate stating they are fit for work, on a phased return basis.
- 3.5 A phased return to work will normally be a maximum of 6 weeks, and it may be advisable to adopt a staged approach to both working hours and range of duties and responsibilities.
- 3.6 There should be no modification to the employee's pay during the initial 6 week period. However Occupational Health may recommend a longer period of phased return. The CEO/ Headteacher will need to decide:
- whether to continue paying full pay for the rest of the phased return period,
 - whether to reduce pay to what the employee is actually working
 - whether to agree with the employee to offset accrued annual leave, to offset the time when the employee is not at work.
- 3.7 It is expected that an extension of full pay will be limited and only for extenuating circumstances. Any extension must be agreed in consultation with the Headteacher or CEO.
- 3.8 In reaching that decision the Headteacher or CEO need to consider the revised period of phased return, whether funding is available to pay for that period, the individual employee's personal circumstances, and the effect that extending the period of full pay has on morale of close colleagues.
- 3.9 A phased return is intended to facilitate the employee's return to their substantive post. However, in exceptional circumstances, there may be agreement for the employee to return on a phased basis to a lower graded post. If this is the case then salary/pay will be that of the lower graded post from their date of return to work on a phased basis.
- 3.10 Occupational Health will review the employee at the end of the phased period of return and advise whether the employee is fit to return to their full duties. If so, the employee may then return to their normal working arrangements.

4. Obligations of the Manager

- 4.1 Prior to the employee's return, the Manager should invite the employee for a visit. This is likely to 'break the ice', and reduce any anxiety the employee may experience following a lengthy absence
- 4.2 The Manager or Headteacher needs to advise employees in writing of the details of the phased return that should include the warning that full pay may be withdrawn after the 6-week period.
- 4.3 During the phased return period, the Manager or Headteacher/CEO shall meet with the employee at least every fortnight to review how the arrangements are working, and whether further adjustments/review is necessary. These meetings should be documented so that the Manager or Headteacher/CEO and employee have a clear record of their discussions.

4.4 Normally Occupational Health will arrange at least one interim review with the employee during the phased period, but the Manager or Headteacher/CEO or employee may initiate a further review with Occupational Health if any concerns arise.

5. Issues that may arise

Annual Leave

5.1 Annual leave accrues during the period that the employee is off sick. How this applies will depend on whether the employee is a member of support staff working on a full year contract (52 weeks per year), or is a member of support staff working on a less than full year contract (usually 'term time'), or is a teacher. The annual leave year for support staff commences 1st April, for Teachers 1st September.

5.2 Support staff working on a full year contract (52 weeks per year) on long term sick leave are allowed to take their annual leave during their sick leave and should be made aware of this. However, an employee must request their leave, but when they do so will **not** be able to claim sick pay as well as annual leave. An employee does **not** have to provide signing off/on certificates and therefore the Trust will set up clear processes with Payroll to ensure they are kept informed and the employee receives their correct pay and entitlements.

5.3 If support staff working on a full year contract (52 weeks per year) who are on long-term sick leave have annual leave still outstanding at the end of the leave year, in accordance with the Trust's Annual leave policy, up to 5 days annual leave may be carried over if the employee's ill health spans two leave years.

5.4 On their return from sick leave, support staff working on a full year contract (52 weeks per year) would be entitled to their full leave entitlement for the current year at full pay, irrespective of the hours that the employee may be working. However, if the phased return extends beyond the initial 6 week period, annual leave may be offset to make up time when the employee is not at work.

5.5 Support staff working on a less than full year contract (usually 'term time') are deemed to take their annual leave in periods of school closure and are paid an equal amount of their annual leave allowance each month with their salary. They will continue to receive this annual leave allowance payment whilst on full contractual sick pay.

5.6 On their return from long term sick leave, support staff working on a less than full year contract (usually 'term time') will be entitled to any annual leave accrued during sick leave but not paid fully because they were in receipt of half or no contractual sick pay. In these circumstances, the Trust will arrange payment in lieu or agree time off during school opening time. If at the end of long term sick leave they leave employment due to ill health retirement, or dismissal on the grounds of incapacity due to ill health, then any annual leave accrued during sick leave but not paid fully because they were in receipt of half or no contractual sick pay, will be paid in lieu at the time of termination of employment.

5.7 Teachers do not have a contractual entitlement to paid annual leave. They are entitled to 28 days statutory annual leave (including public holidays) under the Working Time

Regulations but this is normally offset against any period of school closure in the year commencing 1st September. In accordance with advice from the Local Government Association (LGA) on related provisions, the relevant School will check that, on the Teachers return from long-term sick leave, there are sufficient school closure periods in that leave year, both before and after a period of long-term sick leave, to offset the statutory annual leave owed for the leave year. If there is insufficient school closure periods in that leave year then the relevant School will arrange payment in lieu or agree time off during school opening time.

- 5.8 The LGA formula for calculating Teachers part year annual leave entitlement is taken from the Working Time Regulations and provides $(A \times B) - C$, where A is the period of leave the worker is entitled to i.e. the statutory entitlement of 28 days, B is the proportion of the leave year which has expired by the termination date (proportion of days out of 365), and C is the period of leave taken by the worker between the start of the leave year and the termination date (school closure days which were available to be considered as leave days).
- 5.9 Where a Teacher's long term sick leave goes from one leave year to another then two separate 'part year' calculations may need to be made and any days owed from the first leave year which are not offset against the available school closure periods for that leave year, will be carried over and considered for offsetting against school closure periods, along with the entitlement for the second leave year.
- 5.10 For Teachers who leave employment due to ill health retirement, or dismissal on the grounds of incapacity due to ill health, the part year annual leave entitlement calculation may need to be used. Where there are days owed then the relevant School will arrange payment in lieu at the time of termination of employment.

Sickness during phased return period

- 5.11 If an employee is unwell during their phased return period, then normal sickness reporting and payments procedures will apply. If the sickness is of the same or similar nature to their long-term ill health, the Manager will notify Occupational Health requesting them to review the situation with the employee and report to them.

Disability arises

- 5.12 On the employee's return, it may be clear that the employee has a condition that is a disability as defined in the Equality Act 2010 (Disability) Regulations 2010. Under those provisions the School has a legal responsibility to make reasonable adjustments to meet the individual's needs. This may mean providing specialised equipment or permanent changes in the hours an employee works beyond a phased return. Every reasonable effort must be made to accommodate the employee's disability.

Advice and guidance may be obtained from HR Services.

Procedure for Referral for an Occupational Health Assessment

- 1.1 The reasons for referral should be discussed and agreed with the employee. Once the employee agrees, they should sign the form to show that they have given their consent to the assessment and to the disclosure of the subsequent report to their manager and HR Advisory Services Team.
- 1.2 The manager must input the details of the referral directly onto the Innovate (health & Wellbeing) Occupational Health portal:

<https://insight-portal.co.uk/Home/Index?ReturnUrl=%2fReferrer%2fHome>

If you do not have access to the portal, please consult with your School Office Team Leader/Manager in relation to making a referral or contact Central HR team for advice on hr@secat.co.uk

- 1.3 Should the employee not agree to an assessment by Occupational Health, the HR department should be consulted to discuss the way forward.
- 1.4 The employee should be made aware that they have a responsibility to attend an Occupational Health appointment. Employees should be advised that decisions about their employment will not be avoided by refusing to attend for an appointment, as decisions will still be made but without the advice of Occupational Health.
- 1.5 In order for the Occupational Health Physician or Nurse Advisor to provide a full opinion to managers, they should be fully informed of the background to each case including:
 - precise nature of duties including details of any hazards (e.g. copies of risk assessments) and a job profile
 - relevant employment details, length of service, nature of working environment, any disability, capability, disciplinary or industrial injury issues
 - main concerns and reasons for the referral
 - any comments made by the GP on the Statement of Fitness for Work
 - details of absence - of particular importance is a summary of absences, durations and reasons for absence so that the Occupational Health Physician or Nurse Advisor can discuss this with the individual
 - if termination of employment/medical retirement is being contemplated as a possible action this must be made clear in the referral so that a firm prognosis can be provided.

1.6 Following receipt of a referral an appointment will be arranged by the Occupational Health Service for the employee to be assessed by an Occupational Health professional.

1.7 Occupational Health will triage the referral form and will decide whether a telephone consultation is appropriate or whether it is necessary for the person to be seen in person. In exceptional circumstances, recommendations may be made on the basis of medical reports received from doctors responsible for the employee's general medical care.

2.0 **Early Intervention Occupational Health Referrals**

2.1 Early Intervention referrals enable a Manager to respond quickly and assess the most appropriate methods of supporting the individual. Early intervention pathways are in place for Stress, Muscular Skeletal, and Surgery related absences. The process involves a referral to Occupational Health after the first week of absence.

2.2 The Manager or Headteacher/CEO should refer the individual to Occupational Health as soon as they are notified of the potential absence. Once consent has been agreed with the employee, the manager should input the referral details directly onto Occupational Health on-line portal.

2.3 Once Occupational Health have received the referral details they make contact with the employee. Prior to surgery, Occupational Health will provide a report to the manager, HR and the employee confirming the standard recovery period and therefore expected week of return (where operation date is known). This allows a clear plan of action to be in place before the individual goes off to have their operation

2.4 The quality and clarity of advice provided by the Trust's Occupational Health Service depends largely upon the quality of the information given and questions asked on the referral form provided by the manager.

2.5 It is essential that the role and responsibility of the Occupational Health Service is clearly understood by those involved in the referral process and this must be explained by the referring manager to the employee each time a referral is made.