

Principles of Managing Absence and Attendance

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Introduction

The health & wellbeing of the workforce is a key priority for the Council and whilst the Council aims to encourage all its employees to maximise their attendance at work, it recognises that our staff will, from time to time, be unable to work because of ill-health. For this reason, the Council provides a range of interventions to support staff. A full list of the support currently available can be found later in this document.

The purpose of the Principles of Managing Absence and Attendance is to improve employee attendance by effectively managing absence and providing support to the employee. The majority of Council departments rely on the direct provision of services being made by members of staff. Employee attendance is key to ensuring that services are run effectively and have the capacity to fulfil the demands of residents, service users and customers.

The Principles of Managing Absence and Attendance aim to provide a clear framework within which absences can be managed and employees can be supported in a fair and consistent way. The Principles provide line managers with guidance about actions that they are expected to take to ensure staff attend work on a regular basis in order to provide Council services.

1. Prevention and Early Intervention

There are a number of steps that managers should take to prevent or reduce sickness absence including:

- **Risk assessments** need to be carried out routinely for new employees, as well as existing staff. For example, following office moves, for pregnant employees and when an employee returns from maternity leave or from long-term absence. Local Health & Safety Advisors will be able to advise in situations where an employee claims that sickness absence is due to issues with their workstation or office environment.
- **Training:** where relevant, this should be arranged, for example manual handling, strain injuries (such as upper limb disorder) etc. Local Health & Safety Advisors can provide assistance or the Occupational Health Service can advise on this.
- **Understanding the effects of an employee's ill-health or disability:** for example, sometimes this can be accommodated by making reasonable adjustments to working hours, equipment or tasks etc. See Section 17, [Managing Disability Related Sickness Absence](#) below. Advice and guidance is also available from the local Health and Safety Advisors.
- **Communication/Individual performance management:** understanding personal objectives and expectations via the Council's PDR process and receiving regular feedback on progress and performance can assist in relieving stress at work.
- **Work/life balance initiatives;** Enfield's [Flexible Working](#) arrangements and [Family Friendly Policies](#) outlines different ways in which all employees can request to work more flexibly.
- **Ensure annual leave is taken at regular intervals;** Enfield employees have a generous annual leave allowance, but it is important that they are encouraged to manage their workloads and take time off throughout the year.

2. Responsibilities and Key Principles

Whom	Responsibilities
Manager	<p>Ensure that all staff are aware of the procedure for reporting absences to you.</p> <p>Ensure that a “return to work discussion” is conducted with the employee on the day of their return to work or at least within 5 days following each period of absence. The documentation must be completed and retained</p> <p>Ensure that appropriate action is taken where a member of staff fails to follow the reporting procedures or to provide the required Statement of Fitness for Work. Depending on the circumstances, this may include disciplinary action.</p> <p>Ensure that referrals to Occupational Health are made at the appropriate time and where relevant to support the member of staff to return to work at the earliest opportunity.</p> <p>Consider advice and recommendations and implement reasonable adjustments where relevant and practicable. If required, seek further clarification from Occupational Health and/or Human Resources regarding reasonable adjustments and their implementation.</p> <p>Undertake formal Absence and Attendance Meetings in accordance with these Principles.</p> <p>Maintain regular contact with employees during their absence. Confirm your expectations in terms of frequency and form of contact with the employee, particularly in cases where the absence is likely to be long term.</p> <p>Ensure that accurate and current records of all sickness absences and dates of RTW discussions and formal Absence and Attendance meetings are promptly logged on MI Portal. This is required for monitoring and reporting and may be subject to audit.</p> <p>Monitor your team’s absence information on MI Portal and take prompt action as appropriate to reduce sickness absence levels.</p> <p>Ensure that you are enabling the Council to meet its objective of providing an efficient customer focussed service.</p> <p>Ensure that all information regarding an employee’s absence is treated in confidence.</p> <p>Where it is believed that an employee has wilfully abused the sickness absence scheme or is absent without authorisation, treat this as a disciplinary issue.</p> <p>All work place lost time accidents should be recorded on MI Portal and workplace incidents/accidents are reported on the corporate Health and Safety reporting system (ANT).</p> <p>If you think an employee may be experiencing stress you should speak to them about your observations and offer support as necessary. See Stress Management - Manager's Guidance for further information.</p> <p>Advise Human Resources immediately where a sponsored employee is absent without authorisation as the Council has a duty to inform the UK Border Agency within strict timescales. Failure to meet these timescales could affect the Council’s sponsorship status.</p>
Human Resources	<p>Advise managers about the application of the Principles as required, taking all factors into consideration to ensure a fair, reasonable and consistent approach.</p>

Employee	Report all absences to your line manager from the first day of absence and in accordance with departmental procedures. Maintain regular contact with your line manager where sickness absence continues over a prolonged period.
	Provide the appropriate statements from a medical practitioner to cover your sickness absence.
	Co-operate with the Occupational Health process following a referral
	Engage in all aspects of the Absence and Attendance process in accordance with these Principles.
Occupational Health	Obtain the relevant information required from the manager, member of staff and, where appropriate, their General Practitioner/Consultant.
	Provide helpful advice about the member of staff's health and capability in relation to their area of work to their Line Manager and HR.

3. Sickness Absence Trigger Points

The line manager should invite employees to attend an Absence and Attendance meeting if they have reached one of the trigger points listed below (unless the trigger notification is received during a pre-agreed [phased return](#) to work period), irrespective of whether they are still off sick.

The line manager should also invite employees to attend an Absence and Attendance Meeting at any time where the line manager has serious concerns about their sickness absence, i.e. where there is a pattern of absence (e.g. Mondays and Fridays) or there are concerns about the potential causation of the absence (e.g. alcohol consumption at the weekend). Further advice can be sought from Human Resources and OH if the line manager has concerns of this nature.

Trigger Points:

- 3 occasions of absence in any 3-month rolling period
- More than 5 days (pro rata for part timers) absence or more in any 6-month rolling period
- 20 days/4 weeks continuous absence (Long term absence)

Additional guidance on how to manage short term absence is shown in the link below:

[Guide to Managing Short Term and Recurrent Absence](#)

4. Notification of Absence

Employees unable to attend work should contact their line manager on the first day of absence. The line manager should outline their expectations of how often the employee should keep in touch during the period of sickness absence.

Consider whether a referral to Occupational Health would be beneficial at this stage taking into account the particular circumstances of the case and what advice the line manager would be seeking. If in doubt the line manager may benefit from contacting Human Resources to seek guidance.

- The line manager should record the absence details on MI Portal from the first day of absence. If the line manager does not have access to MI Portal they should record absence details using the [SW8 Absence Form](#) and ensure it is submitted to payroll for processing on a monthly basis.

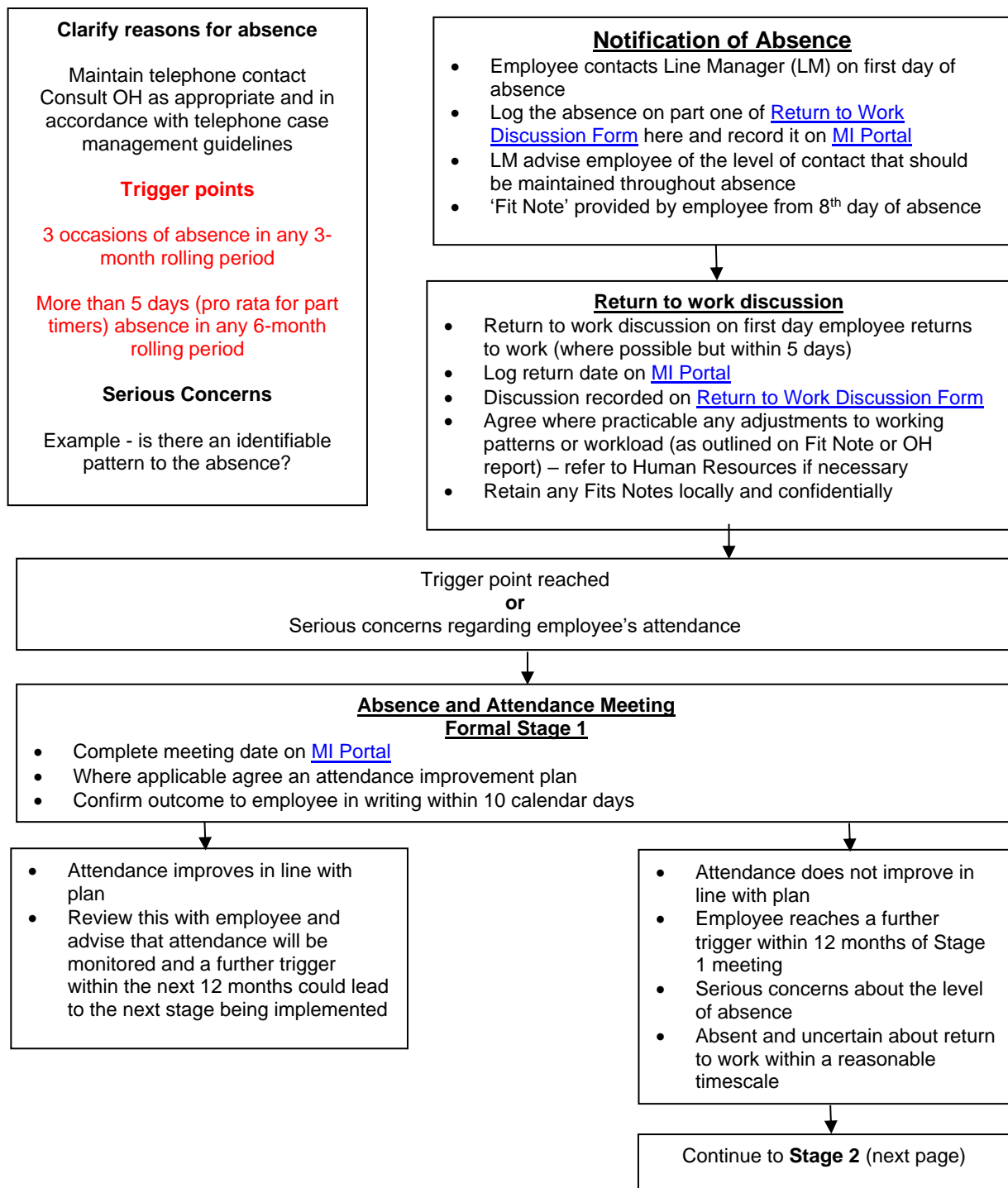
5. Reporting Absence

Employee absences should be recorded on [MI Portal](#) at the time of commencement. The line manager should not wait until the date of return to work to record the employee's absence on the system. MI Portal can generate management reports that should be used regularly – at least on a monthly basis to show the absence rates within the line manager's team/service.

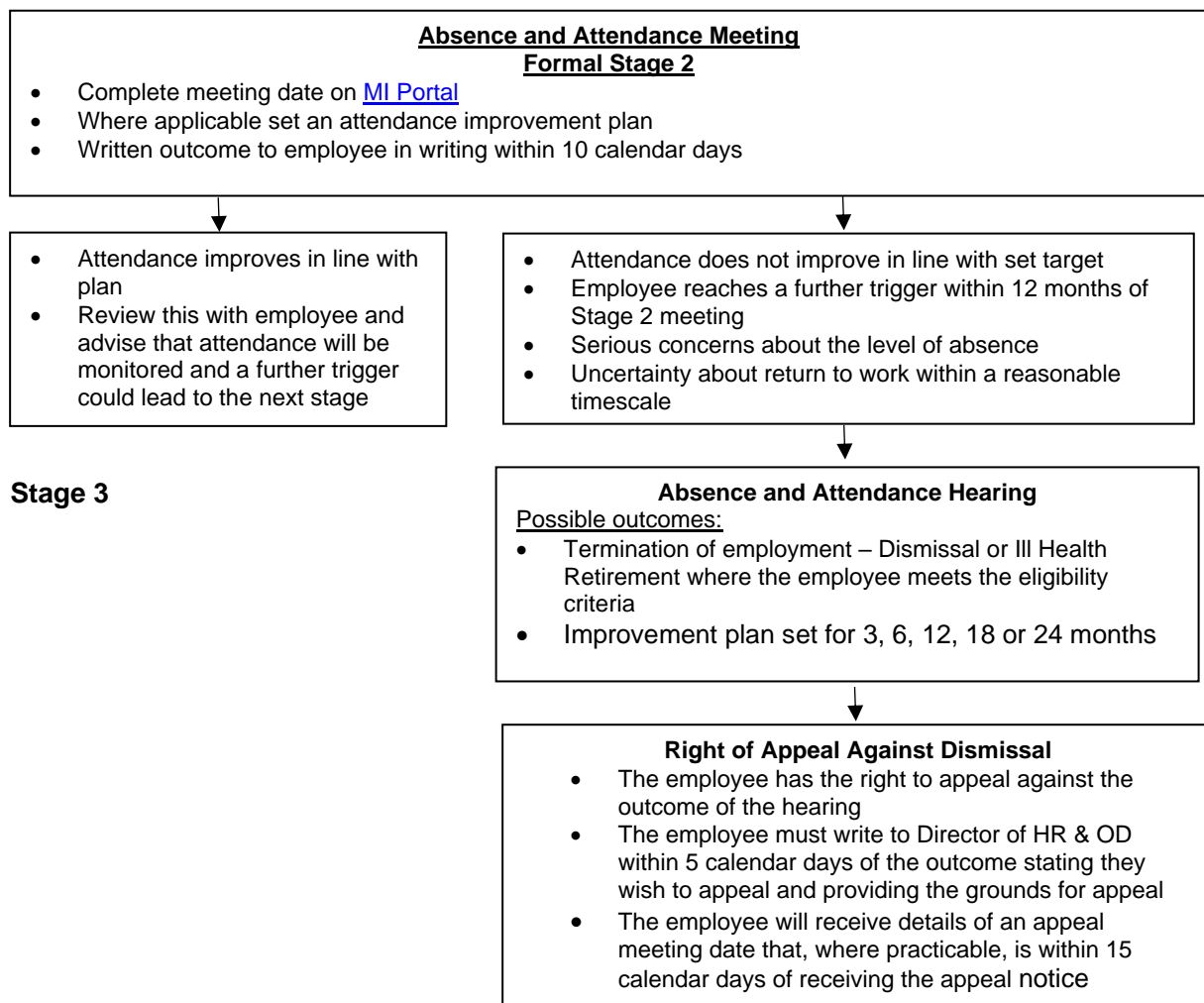
The line manager should use the information in these management reports to assist the line manager in improving the attendance levels of employees within the line manager's team. The line manager may be required to participate in the absence monitoring process, i.e. attend Sickness Review Boards where these are held by Senior Officers in their respective service.

6. Managing Short Term Absence and Frequent Short-Term Absence

Stage 1



Stage 2 onwards



7. Absence and Attendance Meetings

All formal Absence and Attendance Meetings need to be conducted in a confidential manner. The employee has a right to be accompanied by a work colleague or Trade Union representative, so it is good practice to give at least 5 working days' notice in writing of the meeting date. Once completed, the date of the meeting should be recorded on [MI Portal](#).

Guidance of how to conduct an Absence and Attendance Meeting at Stage 1 and Stage 2 are outlined in the documents via the links below:

[Purpose of a Stage 1 and Stage 2 Absence & Attendance Meeting](#)

[Conducting an Absence and Attendance Meeting](#)

Entering the formal absence management process can be daunting for employees. In some cases, i.e. where the employee has experienced a good level of attendance historically and then meets trigger levels due to unavoidable absence, this can lead to feelings that the process is unfair. Managers should approach the Stage 1 meeting as an explorative and supportive meeting to gain a full understanding of the employee's absence, the causation, and reasonable measures of support to enable the employee, where possible, to improve their attendance in accordance with the manager's expectations.

Following the meeting the line manager will need to write to the employee and highlight the content of the discussion held and confirm the outcome of the meeting, the line manager should do so as soon as possible and within 10 days of the meeting so the employee has a clear record of what was agreed. If an Improvement Plan is set during the meeting the line manager should include a copy with the outcome letter.

Where an employee is invited to attend a Stage 1 Meeting and subsequently does not attend due to further sickness absence, there are several options the line manager can take depending on the circumstances, such as:

- Rearrange the stage 1 meeting within 2 weeks of the original date unless there are exceptional circumstances to justify a longer delay.
- Write to the employee outlining the key issues that would have been discussed at that meeting, then invite the employee to a Stage 1 meeting.
- Proceed to a Stage 2 Meeting if appropriate (HR guidance should be sought in this case).

Where the employee's attendance improves at Stage 1 within the agreed targets, but within 12 months becomes unsatisfactory and causes the manager concern, where appropriate, the sickness absence Principles may be re-instigated at Stage 2. Again, the line manager may benefit from seeking HR guidance before instigating the Principles at this stage.

The following templates should be used:

[Model – Invite to Attend Stage 1 or 2 Absence and Attendance Meeting – Letter](#)

[Model – Outcome of Absence and Attendance Meeting – Letter](#)

[Attendance Improvement Plan](#)

8. Absence and Attendance Hearing

In the event that there is no improvement within the timescales set at the Stage 2 meeting, where appropriate an Absence Hearing should be convened. As an outcome of an Absence Hearing could be dismissal, a Senior Officer duly authorised by the Executive Director, or Director, who shall have full power to deal with the matter on behalf of the Council, will chair the Absence Hearing.

Managers should note that, in most cases, a recent medical or occupational health report (obtained within the previous 3 months leading up to the hearing date) will be required for consideration at the hearing.

All of the relevant factors and Occupational Health and Human Resources advice should be considered, and the decision to dismiss or otherwise should be made on this basis. Details of how to conduct an Absence and Attendance Hearing is outlined in the following link:

[Conducting an Absence and Attendance Hearing](#)

The outcome of an Absence and Attendance Hearing can be:

- Dismissal with notice pay (including Ill-Health Retirement where the employee meets the eligibility criteria)
- A further improvement plan which will remain in place for 3, 6, 12, 18 or 24 months
- The Council reserving the right to hold another hearing (no review meetings) should the employee reach an absence trigger level within 3, 6, 12, 18 or 24 months

Employees have a right to appeal against the decision to dismiss them from the Council's employment. See section 11 for further information.

A template letter to invite an employee to an Absence and Attendance hearing is shown in the link below:

[Model – Invite to Absence and Attendance Hearing Letter](#)

A template model outcome letters is shown in the link below:

[Model - Outcome of Absence Hearing Letter](#)

If the decision is to dismiss the employee, the following model letter can be used:

[Model – Dismissal Letter](#)

9. Managing Long Term Absence

Definition Long term absence is **20 days/4 weeks continuous absence** or more

Notification of Absence

- Employee contacts Line Manager on **first day** of absence. Input on [MI Portal](#)
- Consider if an early referral to [OH](#) is required (see Section 14)
- Contact with employee is maintained throughout absence, including home visits. Where absence is planned, contact may instead be made by the employee following a planned treatment (e.g. operation)
- 'Fit Note' provided by employee from 8th day of absence



Occupational Health Referral

- Managers should review the absence every **2 weeks** (telephone discussions or home visits if appropriate)
- Managers should consider whether a referral to OH might provide useful information at this stage
- Upon receipt of medical guidance, review Occupational Health advice and consider recommendations for a phased return, or adjustments to facilitate the employee's return to work
- Disability considerations as part of the Equality Act (2010) should be taken into account if the condition falls within this definition



Stage 1 – Absence & Attendance Supportive Meeting

- In most cases, the line manager should conduct a Stage 1 meeting within **4 – 6 weeks**.
- [Conducting an Absence and Attendance Meeting](#)
- Consider whether it would be helpful to consult OH to provide advice on any adjustments and the likelihood of a return to work
- Where relevant, an improvement plan should be put in place.
- Confirm outcome in writing to employee within 10 calendar days of the meeting



Stage 2 – Absence & Attendance Meeting

- In most cases the line manager should conduct a Stage 2 meeting within **2– 4 months**.
- Consider whether Occupational Health should be consulted to provide advice on any adjustments and the likelihood of a return to work
- Where relevant, an Improvement Plan should be put in place.
- Confirm outcome in writing to employee within 10 calendar days of meeting



Stage 3 – Absence & Attendance HearingError! Reference source not found.

- In most cases the line manager should hold an Absence and Attendance hearing within **6 - 8 months**. Occupational Health should be consulted ahead of an Absence & Attendance hearing
- The Chair must confirm the outcome in writing to the employee within 10 calendar days of the hearing.



Right of Appeal

- The employee has the right to appeal against the decision to dismiss
- The employee must write to the Director of HR & OD within 5 calendar days of the outcome stating they wish to appeal including the grounds for appeal
- The employee will receive details of an appeal meeting date that, where practicable, is within 15 calendar days of the appeal notice

Employees absent from work for a consecutive period of **20 days/4 weeks or more** are regarded as having a long-term absence. Managers should clarify whether a referral to Occupational Health will be helpful and appropriate at this stage. It may be that the employee is under the care of a Specialist/ Consultant and undergoing treatment for an extended period, so a referral at this stage could offer little clarity in terms of helpful guidance or support. Additional advice can be found at [Managing Long Term Absence – General Guidance](#)

Where a referral has been made to occupational health and has suggested adjustments or redeployment that is not practicable in terms of the nature of the job or service delivery, the line manager should contact OH and discuss the recommendations with the doctor or nurse as appropriate. The line manager may also find it useful to discuss this with their Human Resources representative.

It is recognised that in some instances of long term sickness, it will not be possible to resolve the situation through improvement plans and support and that ill health retirement (where the employee meets the eligibility criteria) or termination of contract may have to be considered. However, it is important that the Principles of good practice are applied to ensure the situation is handled sensitively in a fair, consistent and compassionate way.

10. Reviewing Long Term Absence

The line manager should aim to review long term absence on a regular basis whilst the employee is off, keeping in contact to discuss progress and offering appropriate support to assist the employee to return to work as soon as feasible, or considering other options if necessary.

A similar framework to managing short term absence will be used with respect to staged meetings and review meetings, however, due to the nature and causes of long-term absences, the content/actions and outcomes of the absence meetings will vary.

The following provides some general guidance for each stage, but the manager should use discretion as appropriate for each individual case.

a. Stage 1 – Absence & Attendance Supportive Meeting

- A Stage 1 meeting should be held after **4 to 6 weeks** continuous absence.
- Where appropriate agree a plan to support the employee back to work based on guidance from Occupational Health. If a return is not imminent, seek clarity and understanding around when new medical information will be available. Consider support measures for the employee and confirm expectations in terms of maintaining contact.
- Consider any issues relating to disability as part of the Equalities 2010 Act.
- Where possible, agree an improvement plan and a date of return to work.
- Where it is not possible to confirm a date of return, the line manager should advise that they will continue to monitor and review the absence and will be maintaining regular contact with the employee to discuss their progress and consider any support to enable them to return to work and when they will be progressed to the next Stage (as appropriate to the case or on receipt of a medical report or occupational health referral).
- Confirm the outcome of the Stage 1 meeting in writing to the employee.
- Following the meeting the manager must continue to maintain regular contact with the employee as described above. Where the employee has not returned to work or their attendance has not improved, they should meet the employee (either in person or via telephone or Teams, depending on individual circumstances) to explain they will be progressing the case to the next stage.

b. Stage 2 – Absence & Attendance Meeting

- A Stage 2 meeting should be held within **2 to 4 months** continuous absence as appropriate to the case.
- Consider any further advice from OH as appropriate (they may have feedback from the employee's GP or medical consultants at this stage).
- Consider any issues relating to disability as part of the Equalities 2010 Act and any advice on reasonable adjustments.
- Where possible, agree an improvement plan and set a date of return to work.
- Where no likely date of return is available and is unlikely due to their condition and the requirements of their role, discuss/consider whether it would be appropriate to explore opportunities for redeployment.
- Consider possibility of applying for ill health retirement if the employee meets the criteria and is in the pension scheme.
- Ensure that the employee understands the process and that if they are unable to return to work within the foreseeable future it may be necessary to consider their continuing employment or potential dismissal from the Council on the grounds of their inability to attend work. Give an idea of the next proposed review date.
- Confirm the outcome of the meeting/discussion in writing to the employee.
- Following the meeting the manager must continue to maintain regular contact with the employee as described above. Where the employee has not returned to work or their attendance has not improved, they should meet the employee (either in person or via telephone or Teams, depending on individual circumstances) to explain they will be progressing the case to the next stage.

[Purpose of a Stage 1 and Stage 2 Absence & Attendance Meeting](#)

[Conducting an Absence and Attendance Meeting](#)

[Model – Invite to Attend Stage 1 or 2 Absence and Attendance Meeting – Letter](#)

[Model – Outcome of Absence and Attendance Meeting – Letter](#)

c. Stage 3 – Absence & Attendance Hearing

If there is still no indication of a return to work after the period agreed at the Stage 2 meeting, the manager should hold a Stage 2 review meeting and discuss with the employee the need to refer to a Stage 3 Absence and Attendance Hearing to consider their continuing employment. An Absence and Attendance Hearing should be held between **6 to 8 months** of continuous absence, depending on the circumstances of the illness.

It is the responsibility of the line manager to arrange for a hearing to be convened and chaired by an appropriate senior officer and HR representative. They will need to set the dates and prepare all of the evidence relevant to the employee's absence, e.g. OH advice and notes from absence meetings, options explored, etc so that this can be considered by the Chair of the hearing and to assist in the decision making process.

[Conducting an Absence and Attendance Hearing](#)

Each case has to be considered carefully and proportionately on its merits taking into account all the relevant medical information available to the business.

The outcome of an Absence and Attendance Hearing can be:

- Dismissal with notice pay (including Ill-Health Retirement where the employee meets the eligibility criteria)
- A further improvement plan which will remain in place for 3, 6, 12, 18 or 24 months
- The Council reserving the right to hold another hearing (no review meetings) should the employee reach an absence trigger level within 3, 6, 12, 18 or 24 months
- Redeployment if the employee has a disability or has developed a medical condition preventing them from undertaking their substantive role (this option should have been explored by the manager and employee ahead of a stage 3 absence hearing)

A model letter is shown in the link below:

[Model – Invite to Absence and Attendance Hearing Letter](#)

The following model letter can be tailored to fit other circumstances:

[Model - Outcome of Absence Hearing Letter](#)

If the decision is to dismiss the employee, the following model letter can be used:

[Model – Dismissal Letter](#)

In the case of ill health retirement (tier 3) the following model letter can be used:

[Model – Dismissal Letter Tier 3](#)

11. Right of Appeal

Employees have the right to appeal against the decision taken following an absence and attendance hearing. If an employee appeals they should have valid reasons for doing so and be able to provide evidence that substantiates the grounds for the appeal, which may include whether the appeal is against any findings of fact and/or the nature/severity of the decision or failure to follow the correct process.

The appeal letter should be submitted to the Director of HR & OD within 7 calendar days of receiving the written decision.

Details of how to conduct an Absence and Attendance Appeal Meeting are shown in the link:

[Conducting an Absence and Attendance Appeal Meeting](#)

[Model – Invite to an Absence and Attendance Appeal Meeting Letter](#)

Where practicable, appeals will be heard by either a Director or Executive Director from another service or department; and a Senior Human Resources representative. The Chair of the appeals panel will confirm the decision in writing, ideally within 7 calendar days of the conclusion of the Appeal Meeting. The decision following the appeal meeting is final. Further details of the appeal process are set out in [Appeal Meeting](#).

12. Return to Work Discussion

When the employee returns to work following any period of absence the line manager should hold a return to work discussion with them ideally **on the day they return to work, or within five working days of the employee returning.**

During this discussion the line manager should complete the [Return to Work Discussion Form](#) which should be signed by both the line manager and the employee. The employee's return to work date and the date of the return to work discussion should also be recorded on [MI Portal](#) or if the employee does not have access to MI portal then the line manager should record absence details using the [SW8 Absence Form](#).

It is important to note that a [Return to Work Discussion Form](#) should be completed for **each** period of absence, including absences of one day.

A copy of the Return to Work Form and any Statement of Fitness for Work should be retained locally in a confidential place and should be readily available for internal audit purposes.

For further details on how to conduct a return to work discussion please refer to [Conducting a Return to Work Discussion](#)

13. Considerations Prior to Return to Work After Long-Term Absence

For employees in roles which require the use of laptops and access to Council systems, if they are absent for more than 4 weeks, for security and maintenance reasons, Digital Services will automatically disable the account. In cases where the absence is longer than 60 days, the laptop will be disabled and will need to be returned to Digital Services. To facilitate the return to work process, managers should make arrangements with Digital Services for the employee to have access to a laptop and relevant systems, ideally from their first day back at work. It can take a week or so for access to be restored, so once the return to work date has been confirmed with the employee, managers should complete the online form. The link to the Digital Services Intranet page and further guidance can be found below. Please note that the new laptop will need to be collected by the returning employee, any previous devices can be returned at the same time.

The manager should click on the [Raise a Request](#) tile, then select Employee Services followed by Amend User/Mover tab before completing the online form. Any queries about how to complete the request should be directed to the DS Service Desk on 020 8379 4357.

14. Occupational Health

The role of the Occupational Health Service (OHS) is to provide the line manager with advice on an employee's health and their ability to work. The guidance should include helpful information regarding an employee's health, well-being and support needs. This may include advice and recommendations around reasonable adjustments to support the employee to make a return to the workplace, or with the view of supporting them to remain in work. Further details can be found [here](#).

Before making a referral to the OHS the line manager should be very clear about the information they are seeking. This may include; expected length of absence, any recommendations as to actions that either the employee or their manager might take to assist their return, reasonable adjustments to the role or working pattern that may be considered in order to support the return to work, and whether the employee has a disability recognised under the Equality Act. Guidance on how to make a good referral to OH to maximise the benefit of this service can be found on the intranet here. Please note OHS will share the content of the referral with the employee.

The line manager is not expected to make a referral if an employee is off with flu, colds and coughs unless there is an underlying condition and persistent absenteeism has triggered the short-term absence management procedure.

The line manager can also consider making a referral to Occupational Health in cases where an employee exhibits symptoms or conditions such as: repetitive strain injury, memory problems, alcohol misuse, drug misuse, unusual behaviour and work-related accidents. This list is not exhaustive. If in doubt the line manager can discuss this ahead of making a referral with Occupational Health or Human Resources.

Use judgement when deciding whether to make a referral for medical advice and guidance. For example, if an employee has been diagnosed with cancer and is undergoing a course of treatment over a specified period, there may be little value in making a referral until the treatment has been completed and further information is available from their Consultant/Specialist about a prognosis and guidance around the likely timescale for a return to work.

However, in some cases an employee may be undergoing treatment but wishes to remain in work where this is possible. A referral to Occupational Health could be useful in this case to help the manager understand how this can best be facilitated and to provide guidance around the measures available to support the employee to remain in work.

Occupational Health Customer Service

If the line manager needs assistance or require further information about an occupational health service, please contact Customer Service:

Email: medigoldcs5@medigold-health.com

Phone: 0845 127 8888 option 7

Telephone Case Management - Early Intervention

Telephone case management focuses on early intervention to support an early return to work strategy, where this is appropriate. The referral is triaged to ascertain whether;

- a) a call should be made by a nurse to ascertain the support needed to return to work or
- b) if a face to face appointment with the on-site Occupational Health Advisor (Nurse) is required, or
- c) if it is appropriate, for a face to face appointment with the on-site Occupational Health Physician (Doctor) if the condition is more complex or serious.

15. Stress Related Absence

If the cause of the absence is or could be related to stress, anxiety, depression etc. additional steps to consider depending on the circumstances, are:

- Giving the employee the contact details for the free and confidential [Employee Assistance Programme](#) which is available on a 24/7 basis. The number is 0800 328 1437. The employee will be assessed by an advisor before they agree on the most appropriate method of support, i.e. telephone based or face to face counselling. This service is confidential.
- There is also an [Employees' Stress Awareness](#) Guide on the Staff Intranet in the Health & Wellbeing Section, which covers ways of coping better with work, family and domestic demands and sources of further information and advice.
- The [Stress Risk Assessment](#) can be found on the Staff Intranet. This is in line with the HSE Management Standards assessment but has been amended to be more user friendly and helpful to both managers and employees. It is suggested that employees may benefit from completing the form prior to meeting with their

manager in order to help identify sources of stress which can be discussed together with agreed actions that may be put into effect as appropriate.

- Encourage the employee to look on [iLearn](#) where they will find numerous training courses available that they may find helpful, i.e. Building Resilience, Emotional Awareness, Managing Mental Health in The Workplace and Wellbeing etc. Relevant training courses can be identified as a supportive measure as part of the Stress Risk Assessment or Attendance Improvement Plan.

16. Terminal Diagnosis

The Council will take all reasonable measures, as advised by Occupational Health, to aid an employee with a terminal diagnosis to remain in work.

At some stage it may be beneficial for an employee who is a member of the Local Government Pension Scheme, subject to meeting the criteria, to opt for Ill-Health Retirement. Where this is not the case, the Council has made a commitment to support the 'Dying to Work' charter and will not dismiss an employee with a terminal diagnosis because of the terminal condition.

17. Managing Disability Related Sickness Absence

Whilst disability related absence needs to be managed in accordance with these Principles treating disabled employees who have sickness absence in exactly the same way as non-disabled employees can potentially lead to unfair discrimination. It is important that the line manager takes guidance from Human Resources and use Occupational Health advice on an individual basis as necessary.

It is unlawful to discriminate against workers because of a physical or mental disability or to fail to make reasonable adjustments to accommodate a worker with a disability.

The Equality Act (2010) places a duty on employers to ensure that disabled people are not discriminated against, on any grounds related to their disability.

To make sure the line manager is not discriminating against an employee who is absent from work due to sickness, because of their disability, they must:

- Confirm with the employee the reasons behind their absence.
- Where practicable, and on the advice of OH, put in place reasonable adjustments to help them get back to work and improve their attendance, this may include extending trigger-points or the timescales of different stages set out in these Principles. If the line manager is unsure of how they can support the employee refer them to Occupational Health and seek advice from Human Resources where appropriate. Any adjustments must be based on Occupational Health advice that is relevant to the employee's condition,
- Consider any other disability-related needs they may have on an individual basis, seeking advice from Human Resources where necessary. For example, regular hospital appointments or specialist equipment.

Where absence is disability related, it should still be recorded as sick leave in the usual manner on MI Portal. However, in accordance with these Principles the line manager will need to take into consideration the fact that the absence is disability related when managing attendance. The line manager should keep a separate record of when absence is disability related for future reference.

For further guidance please see the [Disability Policy](#) and [Reasonable Adjustment Guidance](#).

18. Absence and Attendance Meetings and Improvement Plans

The line manager will still need to hold Absence and Attendance meetings when an employee has disability related sickness absence and reaches a trigger point or when the line manager has concerns about their levels of absence, but they should take this into account in the decision making process.

The line manager may decide to have additional Absence and Attendance meetings with the employee to ensure that any individual needs that can be accommodated are explored. This will allow for the time needed to receive any advice that may be required from Occupational Health or from the employee's Specialist or GP. These additional meetings can also allow for any time needed to ascertain the effectiveness of any reasonable adjustments being made or considered.

The line manager will need to ensure that any Attendance Improvement Plan is realistic and appropriate, based on Occupational Health / Specialist advice and determined on an individual basis. There will be instances where the absence which made the employee hit the trigger point was disability related, and the individual's disability means that it would be likely that they would have further absences in the near future. The line manager needs to be mindful of this when setting any improvement plans.

The purpose of the Attendance Improvement Plan is to focus on any reasonable adjustments and take any Occupational Health advice into consideration. The aim of which is to assist the employee in making a sustained improvement in their attendance.

19. Reasonable Adjustments and Occupational Health

Occupational Health can provide guidance as to whether an employee's medical condition is defined as a disability within the [Equality Act \(2010\) and Disability](#)

Occupational Health can also provide guidance around future levels of absence.

Advice about the reasonable adjustments which should be considered to assist the employee back into work or to reduce their level of absence can be provided by Occupational Health.

Reasonable adjustments recommended may include:

- Specialist equipment
- A temporary change to working hours or pattern
- A temporary change to work location – e.g. home working where appropriate and the job role can accommodate this
- Additional paid time off to attend medical appointments as agreed with management

On receipt of the Occupational Health advice, the line manager needs to decide on the practicality of implementing the adjustment i.e. – is the proposed change sustainable and is the cost reasonable in the circumstances? It is important to remember that Occupational Health are there to provide advice but it is the manager's responsibility to decide what elements of this advice can be accommodated as they will understand the requirements of the role and service needs. There should be meaningful consideration of the Occupational Health advice and where any elements of their advice cannot be implemented the manager should record objective rationale to explain their decision. Additional advice can be sought from Human Resources where necessary if the line manager wishes to discuss any recommendations made by Occupational Health.

If a member of staff has a disability or a physical or mental health condition that makes it hard for them to do their job, it may be possible to get extra help from **Access to Work**. A referral to Access to Work must come directly from the employee. For details, including eligibility and how to apply for support, please see link below.

<https://www.gov.uk/access-to-work>

20. Access to Other Staff Support Services

Physiotherapy Service

Managers can authorise access to **Physiotherapy** services for their staff where this will be helpful to them with a view to assisting them to remain in work or to support their return to work if they are absent for a related reason. The employee does not need to be seen by OH before access to physio can be agreed, the manager should determine whether a referral would be beneficial at that stage based on the information provided by the employee.

To make arrangements for a staff member to access physio, please click [here](#).

There is an additional cost for this service that is charged to the employing service. When making a referral a Purchase Order number is required in order to proceed. Details on how to raise a PO number can be found [here](#).

Financial Support

The [Benefits page](#) on the Intranet is full of information regarding financial support and advice should employees financial security be effected during periods of absence.

Ergonomic and Workstation Assessments

Having undertaken a DSE assessment with a team member, if a Work Station Assessment by Occupational Health is required, please log onto [Medigold](#) and use the password LBenfield.

Please note a copy of the completed DSE self-assessment form must be attached to the referral form ([DSE form](#)).

Mental Health First Aiders

Mental Health First Aiders are available to support colleagues who may be struggling with their mental health or experiencing emotional distress and are there to:

- Recognise signs that a colleague may be experiencing mental ill health and offer initial help
- Be a non-judgmental person to talk to
- Listen and signpost to sources for professional help
- Encourage the person to talk to family, colleagues, their manager or to see their GP

The mental health first aiders are available for an informal and confidential chat if you need to reach out to someone. They are not mental health professionals but are there to provide support and to signpost you to sources for professional help.

The mental health first aiders can be contacted direct or by email to champions@enfield.gov.uk.

21. Statutory, Legal and Corporate Requirements

It is the line manager's responsibility to ensure that all of the following requirements are met:

Statement of Fitness for Work – all employees are required to provide the line manager with a Statement of Fitness for Work starting from the 8th calendar day to cover their period of absence.

Statement of Fitness for Work – Guidance

- If an employee provides the line manager with a Statement of Fitness to Work declaring that they are unfit to work for a period of 2 weeks or more, the line manager should consider whether it would be appropriate to make a referral to Occupational Health at this stage. An early referral can be a valuable tool in facilitating an early return to work depending on the nature of the absence.
- The line manager should retain Statements of Fitness to Work locally in a secure and confidential place.
- If an employee subsequently transfers from one department to another, the line manager should arrange to transfer all the absence records to the new line manager.

As a manager you should record all sickness on MI Portal or via the SW8 Absence Form if the employee does not have access to [MI Portal](#). However, when taking action the line manager should be mindful about the way that absence relating to disability is managed. The law provides a statutory right for disabled people not to be discriminated against, on grounds related to their disability (see section [17](#) above). The line manager should refer to the Council's [Disability Policy](#) and should seek advice from Human Resources where necessary.

- The Council's Occupational Health Service can advise whether individual cases fall within the definition of the Act: [The Equalities Act \(2010\) and Disability](#)

See section 17 – [Managing Disability Related Sickness Absence](#) for further information.

Reasonable Adjustments - The Equality Act (2010) places a duty on employers to make reasonable adjustments and assist disabled people in work. Advice on reasonable adjustments that could be made to assist an employee back into work or to effectively reduce their level of absence should be provided by Occupational Health and considered and where appropriate (subject to section [17](#) above) implemented. Guidance for the line managers consideration may also be provided by the employee's GP or Consultant.

Sickness and Annual Leave – an employee falling sick whilst on annual leave should only be regarded as being sick where a Statement of Fitness for Work or a duly authorised Medical certificate is supplied. Annual leave will be suspended from the date of that statement or certificate and the certified period of absence should be recorded as sickness.

- Employees who are absent from work for a period of long-term sickness will continue to accrue their contractual annual leave.
- An employee can request to take accrued annual leave during a period of sickness.

Bank and Statutory Holidays – employees are not permitted to claim back any time when they are sick on a Bank or Statutory Holiday. Where an employee is sick on a Bank or Statutory holiday, there is no need for them to contact the line manager unless they were scheduled to work on that date.

- Where an employee is absent from work due to sickness before and/or after Bank and extra-statutory holidays or days at college, these should also be counted as sickness

days unless the employee states, or a Statement of Fitness for Work confirms that they would have been fit for work on the day(s) in question.

22. Sickiness During Working Hours and Annual Leave

Sickness During Working Hours - where an employee becomes sick and leaves work before completing half of their normal or rostered hours for that day they should be recorded as being sick for half a day. Where an employee works for half a day, but less than a full day this will not be recorded as sickness absence. However, managers are advised to keep a note locally and to consider taking appropriate action should a pattern emerge.

Sickness Whilst Home Working or Training – if an employee is sick on a day when they are due to be working from home or on a training course the usual sickness reporting procedure applies.

Phased Returns To Work – Doctors often recommend that employers implement a phased return to work to help facilitate an employee's return after long-term sickness absence. Following Occupational Health or GP advice an employee can return to work on a phased return upon agreement with their line manager. A phased return is not a permanent reasonable adjustment, permanent reasonable adjustments can only be agreed by the line manager or at a hearing. A phased return is a temporary short-term arrangement based on working reduced hours, and potentially reduced duties, with payment.

Phased returns must be implemented as follows:

STEP ONE – The line manager and the employee must discuss the phased return prior to the return to work. The outcome of this discussion should be sent in writing to the employee. The discussion will include reviewing the GP or OH advice on the phased return; confirming the start and end date of the phased return; confirming the phased return will be paid at the normal rate of pay, for a **maximum of 4 weeks**; confirming the reduced hours and/or duties for the phased return period.

STEP TWO – Should the phased return **extend longer than 4 weeks to a maximum of 8 weeks**, this should be recorded and processed as sick pay on the days that the member of staff is not able to work (but would usually be working days). If all sick pay entitlement is exhausted (entitlement is based on a rolling 12 month period) where staff have built up accrued annual leave they can be encouraged to use their annual leave entitlement as an alternative to a reduction in pay. This can be booked on the days the member of staff is not able to work. The periods of annual leave should be recorded as normal annual leave on MI Portal.

Managers should make a clear note of sickness recordings during a phased return to work for future reference and when receiving trigger alerts. Managers are not expected to instigate formal absence and attendance meetings based on triggers received for sick days inputted to support the phased return to work period.

OH advice must be sought at this stage if it has not been already, an NHS fit note will not suffice.

Managers should also confirm the agreed extended phased return arrangements to the employee in writing.

STEP THREE – Should the phased return **extend longer than 8 weeks to a maximum of 12 weeks**, this should be managed as a temporary change of hours, processed by the Line Manager.

Managers should also confirm the agreed extended phased return arrangements to the employee in writing including confirmation that should the phased return extend beyond 12 weeks then an Absence and Attendance Hearing will be convened.

STEP FOUR – Should the phased return **extend beyond 12 weeks** then a hearing will be convened. The decision on how to manage the extended phased return and the employee's ability to fulfil the requirements of their role will be made at a hearing.

23. Fraudulent Reporting of Sickness Absence

Whilst a member of staff is off sick, they must take care not to participate in activities that may bring into question the genuine nature of their absence. This may include additional employment or leisure activities. Disciplinary action may be taken against staff where it can be shown that they have taken part in activities that could compromise their recovery whilst on sick leave, or bring the genuine nature of their absence into question.

24. Grievances and Capability During Absence Management

In situations where other formal processes are in progress during any of the absence management stages, the HR Representative will undertake an assessment whether the outcome of either the grievance or capability will impact on the action being taken.

Where it is considered the outcome of the grievance/capability will not be deemed to influence the A&A outcomes, the absence management actions will continue, and the grievance/capability managed concurrently in accordance with the relevant Principles.

If the grievance/capability has highlighted valid points which need to be considered before further absence management action is taken the grievance/capability should be managed in accordance with the relevant Principles before taking any further formal action. If a grievance relates to the manager, the next level of management and HR will also consider whether the grievance does or does not have an impact on the course of action being taken

25. Time Off for Medical Appointments

Reasonable paid time off for hospital appointments can be granted for up to 6 occasions in a 12-month period. Where the employee requests further time off or the manager has concerns, they should refer to Human Resources for further advice.

In cases where hospital or medical appointments relate to an employee's disability, reasonable paid time off for appointments for up to 12 occasions in a 12-month period can be granted (see section [17](#) above). This should be reviewed on a case by case basis should additional time be requested, as this may constitute a reasonable adjustment. Again, further guidance can be sought from Occupational Health or HR if in doubt.

- It should be noted that employees are not required to make up the time taken to attend these appointments.
- To minimise the impact on working hours the employee should, where feasible, arrange for hospital appointments to take place as early or late in the day as possible or on a non-working day. It may then be reasonably practicable, depending on the time,

location and likely duration of the appointment, for the employee to attend work before and/or after the appointment.

- Time off to attend GP or dental appointments will not be paid. Employees should be encouraged to make these appointments outside of working hours where possible. If the employee is unable to get an appointment outside of their working hours, the employee, in agreement with their line manager, will need to compensate for the working time lost by making up their hours, using flexi leave, annual leave, or unpaid leave.
- Time off to enable an employee to accompany a relative or dependant attending a hospital or other medical appointment should be taken in agreement with their line manager as annual, flexi or unpaid leave.

Further guidance on taking time off can be found in the [Leave Policy](#)

26. Absence due to Sports or Dangerous Activities

If dangerous activities or sports are undertaken frequently by an employee that results in repeated sickness absence, they may not receive Occupational Sick Pay. However, the employee will be entitled to receive statutory sick pay.

27. Sick Pay Entitlements

Employees are entitled to receive sick pay for the following periods **(in a rolling 12 month period)**:

- | | |
|--------------------------------------|--|
| • During 1st year of service | 1 month's full pay and, after completing 4 months' service, 2 months' half pay |
| • During 2nd year of service | 2 months' full pay and 2 months' half pay |
| • During 3rd year of service | 4 months' full pay and 4 months' half pay |
| • During 4th and 5th year of service | 5 months' full pay and 5 months' half pay |
| • After 5 years' service | 6 months' full pay and 6 months' half pay |

LBE has the discretion to extend the period of sick pay in exceptional cases.