

# Procedure for Managing Sickness Absence

**Note: This Policy is still subject to further amendment to take account of typographical etc. errors.**

## 1 Introduction and Purpose

It is the Council's policy to balance maximum service delivery, the equitable treatment of all employees and payroll costs through the effective management of sickness absence, whilst at all times acting as a fair and reasonable employer. The Council fully and positively accepts its obligation to ensure the health, safety and welfare of all employees, and effective sickness absence management is viewed in this context.

The Council has a number of policies, procedures and initiatives to promote health, safety and welfare at work which should also be referred to when applying this procedure. The Council will investigate and consider positive solutions to attendance problems when appropriate. Affected employees will be given the opportunity to put forward any possible solutions for consideration.

This procedure has been devised to outline how frequent and long-term sickness absence is managed in Havering and to provide a fair, consistent and sensitive framework which will enable managers to adopt a positive approach. At the same time, it will ensure that employees continue to enjoy their employment rights and entitlements, and, that they are properly supported throughout the process.-

Managers will be given appropriate training to enable them to effectively implement this procedure.

The majority of sickness absence is genuine and will need to be dealt with sympathetically but any abuse of the sick pay scheme should be dealt with in accordance with the Council's disciplinary procedures.

Guideline letters have been included as appendices with this procedure. It is expected that the suggested format should be used however Directorate personnel managers will advise on any necessary amendments required to allow for individual circumstances.

## 2 Notification of Sickness Absence

All employees have a duty to notify their manager if they are unable to attend work due to sickness absence as outlined below.

- a) Notification to the manager or appropriate supervisor as soon as possible and on the first day of the sickness absence, at the latest within one hour of the normal starting time. At this stage the employee should indicate where possible:
  - (i) the nature of the illness or injury and whether they perceive it at this stage to be a work related injury;
  - (ii) how long he/she is likely to be absent;
  - (iii) whether he/she intends to consult a GP.
- b) If unable to return to work on the fourth day of absence, the employee must notify his/her manager as soon as possible of the continuing absence. At this stage also,

an indication should be given where possible of the nature of the sickness, the anticipated date of return and whether a doctor has been visited.

- c) If an employee is absent for 4-7 consecutive days, on returning to work he/she should complete and submit the self-certification form (**Appendix 1**).
- d) If a sickness absence continues for 8 consecutive days or more, the employee will be required to provide a doctor's medical certificate to cover any continuing period of absence due to sickness irrespective of the length of time involved.
- e) If an employee falls sick during annual leave he/she will be expected to inform his/her manager on the first day of sickness and submit medical certificates in accordance with (c) and (d) above;
- f) Following a period of long sickness absence (depending on the circumstances of the particular case) or if any employee has had a serious or contagious illness, a medical certificate will be required indicating fitness to return to work and, if appropriate, confirmation of fitness from the Council's Occupational Health Physician/Nursing Advisor. If there is a conflict between the opinion of the individual's medical adviser and the Occupational Health Physician/Nursing Advisor, then the Council will appoint an independent medical adviser whose decision will be final.

### **3 Contact**

It is important that employees should not feel they have been forgotten or excluded when they are ill particularly if they are absent for a long period of time. It may be appropriate for managers to make contact by telephone in order to ask about progress and keep the employee informed of news regarding the workplace. Any contact, either by letter or telephone must be sensitive and take account of the individual circumstances so that it cannot be perceived by the employee as harassment. Employees should be encouraged to maintain regular contact with their managers as well.

### **4 Returning to Work**

All employees should be interviewed by their line managers on their return to work following a period of sickness absence.

The purpose of this interview is to create an opportunity for the Manager to:-

- Welcome the employee back.
- Confirm the reason for the absence.
- Ask how the employee is feeling following the period of absence.
- Ensure that the employee is fit to return to normal work or whether some support is needed for a period of time e.g. working reduced hours on the advice of the Occupational Health Physician/Nursing Advisor.
- Bring the employee up to date on the work and any changes which may have occurred.

- Inform the employee that should there be a need they can contact Occupational Health (01708 432597).
- To offer support/assistance on any issues raised which may affect their sickness absence.
- Inform the employee what the trigger levels are under the frequent absence procedure.
- Inform the employee that all sickness will be monitored in line with Corporate procedures.
- Complete the return to work interview record and ensure a copy is given to the employee. The original record should be sent to the Directorate Personnel Unit.

The above areas should be covered with sensitivity as there may be circumstances when it would not be appropriate to cover all the issues listed.

If the absence is caused by a gender specific sickness or issue the employee should be made aware that the interview can be conducted sensitively by a senior employee of the same sex agreed between the parties who would then report back to the line manager.

Any concerns arising from this interview should be raised immediately by the Manager with the Directorate Personnel Manager or Occupational Health for advice and further action.

Guidelines for conducting the interviews and the return to work interview form are attached as **Appendix 2 and 3**. Managers must adhere to these guidelines at all times.

## **5 Disability Discrimination Act 1995 (Sickness absence /time off related to disability)**

Managers need to differentiate between an employee who is absent owing to a disability or one who is absent owing to sickness. There is not always a clear line between the two and each case needs to be looked at on its own merits and in the spirit of a positive approach to equal opportunities.

The Code of Practice issued with the Act specifically states that it might be a reasonable adjustment to allow an employee greater flexibility in terms of absence from work, for rehabilitation, assessment or treatment.

The extent of time off allowable for reasons related to a person's disability cannot be specified. Managers need to strike a balance between their duty to make a reasonable adjustment in the form of allowing time off and the efficient functioning of the service Directorate. Different sections of the Council may have different capacities to provide certain adjustments. But managers have an essential duty to give due consideration to the possibility of reasonable adjustment. Managers should always consult the Directorate personnel team for advice when considering these issues. Directorate personnel teams may wish to seek advice from external agencies such as the Employment Service.

## **6 Types of Sickness Absence**

Nearly all employees will be absent due to minor illness from time to time and if this is infrequent and no areas of concern become apparent, no formal action beyond the return to work interview will take place.

The times that more formal measures are generally adopted are where there are instances of frequent (short term) sickness absence or where sickness absence lasts for a long period of time. As there are numerous types of sickness absence, it is appropriate to investigate the cause and effect on such occasions. The procedures for dealing with frequent and long-term sickness absence are detailed below.

## **7 Frequent (Short Term) Sickness Absence**

### **7.1 Sickness Trigger**

The short term sickness absence procedure deals with periods of short term frequent absence and irregular odd days with no underlying chronic or acute medical condition(s).

This procedure outlines the steps to be taken when absences reach one or more of the following:

- 4 sickness absences within a 12 month rolling period;
- 3 or more short term absences within a 6 month rolling period amounting to at least 5 working days absence;
- where there appears to be a pattern or type of absence which causes concern, for example where there is a pattern of absences on either side of the weekend, or on particular days where there are particular shifts or peak workloads.

### **7.2 First Formal Review**

Where the level of absence is considered to be unsatisfactory the appropriate action to be taken will depend on the individual circumstances of the case, including:

- a) The frequency and duration of absence
- b) The reasons for absence
- c) The total amount of absence
- d) The nature of the duties undertaken
- e) The effects on service provision
- f) The outcome of any previous reviews which may have been conducted under this Procedure and which are still on record.

When the trigger level is reached, the manager should consider the reasons for absence discussed at the return to work interviews. If the manager is satisfied that there are no genuine areas of concern then no further action will be taken. If the manager has further areas of concern, he/she should write to the employee asking them to attend a review meeting giving at least 5 working days notice. The employee will be provided with a copy of their sickness absence record and Return to Work Interview Record(s), together with any letters confirming the outcome of previous reviews which are still on the record and/or any other evidence relating to their sickness absence that may be relied on at the meeting.

The employee will be notified that they are entitled to be accompanied by a trade union representative or a work colleague if he/she wishes (see letter at Appendix 4).

If it has been confirmed by the Occupational Health Physician/Nursing Advisor that the absence(s) is disability related (as defined within the Disability Discrimination Act), it may still be appropriate to carry out a formal review meeting in order to establish if any reasonable adjustments can be made.

The meeting should be conducted by the manager/supervisor with due regard to the sensitive nature of employees' personal health issues. A personnel representative should also be present. The meeting will have the following objectives:

- a) to review the attendance record of the employee;
- b) to ensure that the information on the sickness absence record is up-to-date and accurate and that the employee agrees with the facts;
- c) to give the employee the opportunity to discuss the reasons for the periods of absence;
- d) where appropriate, to review any previous efforts to assist the employee and to discuss any further assistance that may help to reduce the absence level;
- e) where appropriate, to explain to the employee the effect of absence on colleagues and on the service provided.

After considering the information provided the manager should:

(i) **Either** Inform the employee if he/she is satisfied that there is no need for further action;

(ii) **Or** Take the following action as outlined in a - e below.

- a) Inform the employee that an improvement is required, that further monitoring will take place every 3 months for a specified period according to the circumstances; that a further formal interview will be arranged if absence levels continue to be of concern and that continued unsatisfactory attendance may ultimately result in dismissal.
- b) Consider what steps may assist the employee in reducing absence levels e.g. reviewing duties undertaken, changing the working environment, assistance from colleagues, referral for counselling, or a reduction in working hours. Where this reduction represents a permanent change to the employee's contracted working week, then the employee shall receive the appropriate pro-rata'd payment for those hours. Where, however, the change is part of a planned rehabilitation process to assist the employee to remain in work, then any such reduction in hours will be set against the employee's sick pay entitlement and payment will be reviewed if and when the employee's sick pay entitlement is reduced or exhausted.
- c) Consider referring the employee to the Occupational Health service especially in cases where the employee suggests that there is an underlying medical problem.

- d) Consider whether a doctor's medical certificate should be required for all future sickness absences for a specified period. The Council will refund the cost of any private medical certificates.
- e) Consider whether a referral under any other Council's policy e.g. the drugs and alcohol abuse policy or other would be more appropriate.

A letter should be sent to the employee (**Appendix 5**) with a copy to the representative and for the personal file confirming the outcome of the meeting, the action to be taken and that the level of sickness absence will be monitored and reviewed.

### **7.3 First Monitoring Period**

During the period of monitoring the manager/supervisor should discuss all sickness absence with the employee. At the end of the specified period the manager/supervisor should again interview the employee and consider the attendance in the review period.

Where there has been a clear improvement the employee should be advised of this in writing and told that as long as the improvement is maintained there will be no need for a further formal review. Subject to formal reviews, failure to maintain a satisfactory level of attendance in the following 12 months will normally result in a second formal interview being arranged immediately.

Where there has not been a satisfactory improvement in attendance, or if there has been a significant deterioration before the end of the review period, the employee's attendance record should be reported to the appropriate manager (3<sup>rd</sup> tier or higher).

This manager will consider the report of the supervisor and consider whether to extend the review period if there has been a clear reason why an improvement in attendance has not been possible or where there is other good reason. Otherwise, arrangements should be made to set up a second formal meeting.

### **7.4 Second Formal Review**

Prior to setting up a second formal review, the employee should be referred to the Occupational Health Physician/Nursing Advisor using the form at Appendix 11 (if no recent medical advice has been obtained) so that a current medical opinion will be available. When referring an employee, a copy of the sickness absence record should also be forwarded with as much information as is possible to enable the Physician to give an accurate opinion/advice. The employee will be given at least 10 working day's notice of the meeting (**Appendix 6**) and advised that he/she may be accompanied by a trade union representative or work colleague. The employee will be provided with a copy of their sickness absence record and Return to Work Interview Record(s), together with any letters confirming the outcome of previous reviews which are still on the record and/or any other evidence relating to their sickness absence that may be relied on at the meeting.

The manager will conduct the meeting accompanied by a HR representative. The following points should be covered:

- a) to review the attendance record of the employee;

- b) to ensure that the information on the sickness absence record is up-to-date and accurate and that the employee agrees with the facts;
- c) to give the employee the opportunity to discuss the reasons for the periods of absence and the failure to improve attendance;
- d) to review any previous efforts to assist the employee and discuss whether any further assistance should be offered;
- e) if appropriate, to reiterate the effect of absences on colleagues and the service;
- f) to discuss the availability of counselling services.

If after considering the information provided the manager considers the level of absence is unsatisfactory the employee should be advised of the following:

- a) a significant and substantial improvement is required with immediate effect;
- b) any proposed assistance to the employee to try to reduce absence levels;
- c) that the absence level will continue to be monitored (management will determine the appropriate timescale) and that continued unacceptable absence levels will lead to a third sickness review to be conducted by the Executive Director or Head of Service which may result in the employee's dismissal.

A letter should be sent to the employee (**Appendix 7**) with a copy to the representative and for the personal file. This will confirm the outcome of the meeting, the action to be taken, that the level of sickness absence will continue to be monitored and reviewed and that continued unsatisfactory levels of sickness absence may lead to dismissal.

## **7.5 Second Monitoring Period**

During the period of monitoring the manager/supervisor should discuss all sickness absence with the employee. At the end of the specified period the appropriate manager (3<sup>rd</sup> tier or higher) should again interview the employee and consider the attendance in the review period.

Where there has been a clear improvement the employee should be advised of this in writing and told that as long as the improvement is maintained there will be no need for a further formal review. Failure to maintain a satisfactory level of attendance in the following 12 months will normally result in a third sickness review to be conducted by the Executive Director or Head of Service being arranged immediately. This review could lead to dismissal.

Where a satisfactory improvement in attendance has not taken place, or if there has been a significant deterioration before the end of the review period, the employee's attendance record should be reported to the Executive Director or Head of Service.

## **7.6 Third Sickness Review Meeting Chaired by the Executive Director or Head of Service**

The employee will be given at least 10 working day's notice of the third sickness review (**Appendix 8**) and advised that he/she may be accompanied by a trade union representative or a work colleague. The employee will be provided with a copy of their sickness absence record and Return to Work Interview Record(s), together with any letters confirming the outcome of previous reviews which are still on the record and/or any other evidence relating to their sickness absence that may be relied on at the meeting.

The Chair will conduct the review accompanied by a HR representative.

At the review the manager will present the evidence about the levels of sickness absence, the support offered, whether suitable alternative work/reasonable adjustments in line with the Disability Discrimination Act has been sought/made and the report(s) from Occupational Health.

The employee and representative will be given the opportunity to answer the points raised and to present evidence about the sickness absences.

The Chair should consider all the evidence presented. If it is considered that there has been an unacceptable level of sickness absence, that the employee has been given the opportunity to address the problems and that there are no overriding mitigating circumstances, the employee may be dismissed giving appropriate contractual notice (**Appendix 9**). The employee must be advised of the right of appeal as outlined in section 9 below.

## **8 Long Term Sickness**

### **8.1 Background**

The long term procedure is designed to deal with sickness absence due to an underlying medical condition of an acute or chronic nature. This may be serious, continuing, worsening illness/disease or serious injury usually of a long term nature but may also result in short, frequent periods of absence.

This procedure enables managers to manage long term sickness, particularly where the nature of the illness is such that the Council's Occupational Health Physician/Nursing Advisor is unable to recommend ill health retirement because an employee is not permanently incapable of discharging his or her current job or any other comparable employment with his or her employing authority and there is no firm date for a return to work. In any event it is anticipated that long term sickness cases will be resolved within a period of 12 months from the first day of the sickness absence.

The procedure need not be fully implemented if it is not appropriate because of :

- the nature of the illness or disability;
- the prospects of an early return to work;
- where the employee will make a full recovery and return to work within a reasonable time period;
- the special circumstances of the case.



Examples of the above could be that the manager already knows when the employee will be returning to work, or, that he/she might be about to have, or has just had a serious operation, or the employee may be suffering from a gender related condition or a degenerative disease.

Instances include situations where employees are recovering from a car crash, open-heart surgery, hysterectomy, or suffering from HIV/AIDS, motor-neurone disease or a terminal illness. This list is not exhaustive, and managers should have access to medical information and consult with the Directorate's HR Manager before determining the course of action to be taken.

## **8.2 General Principles**

- long term sickness is almost always genuine and for this reason this specific procedure has been devised which is distinct from both the poor work performance and disciplinary procedures;
- consultation with the employee is very important but must be done in a reasonable, sympathetic and sensitive manner;
- sick employees should never be harassed;
- sickness absence monitoring is crucial and is carried out for the benefit of the employer and employee in order that a planned and appropriate course of action can be taken;
- medical advice should be sought from the Occupational Health Service at the appropriate stages of the procedure. This advice will take into account any medical evidence provided by the employee's GP;
- managers should not make hasty decisions or act without considering all the evidence which is reasonably available;
- managers should provide support and alert the employee to the Council's support mechanisms and keep the employee informed at every stage of the process.

Where an employee is absent for a long period of time due to ill health, there are a number of factors to be considered in determining the course of action which the manager should take. These include:

- the length of absence and likelihood of a return to work;
- the difficulty in continuing with any temporary cover arrangements - (a reasonable period of time should be used to determine this);
- the employee's age and length of service;
- the nature of the illness;

- the work problems caused by the employee's absence, including the serious impact on service delivery and the effect on the morale of other employees.

In the final analysis, and without becoming unsympathetic, the need to consider the operation of the service will override the need to provide long term security of employment. So, although it will not be the aim of the procedure, one outcome of it will be that an employee can be dismissed. The basic questions which have to be determined in every case is whether in all the circumstances, the employee will again provide regular and efficient service and, is it reasonable for the manager to wait any longer for the employee to return to work, and, if so, how much longer?

### **8.3 Contact After 4 Weeks**

When an employee has been absent due to sickness for 4 weeks continuously, the manager will write to the employee to establish the state of health, and a likely date of return to work (**Appendix 10**). The letter will reflect a reasonable, sympathetic and sensitive tone.

### **8.4 Medical Advice**

At the same stage (after 4 weeks) from the first day of continuous sickness, or before if the need for medical advice becomes apparent earlier, the line manager will contact the Occupational Health Service asking them to investigate the employee's medical position. The request for occupational health advice will include details of the employee's job and working conditions. A corporate pro forma will be used for the referral process (**Appendix 11**).

The Occupational Health Service will write to the employee saying that they have been advised of the employee's sickness absence and give details of the arrangements that have been made for the employee to be seen by the Occupational Health Physician/Nursing Advisor or nurse. Employees will be expected to attend for occupational health appointments unless there are accepted extenuating circumstances.

Following on from the medical appointment and having taken account of any medical evidence submitted by the employee's GP, the Occupational Health Physician/Nursing Advisor will produce a medical report which should provide the manager with information on:

- the nature of the illness where appropriate;
- the likely impact on employment of any underlying medical condition and treatment;
- whether a date for return to work can be anticipated or whether further appointments need to be made before an assessment can be made;
- whether a phased return to work is more appropriate and what the physician would recommend in order for the manager to discuss and agree with the employee;
- whether the illness may be covered under the Disability Discrimination Act;

- if it might be appropriate to seek to find alternative work/temporary alternative work for the employee or make reasonable adjustments to the employee's job. This may be particularly important where the employee is suffering from a work-related condition. For example, the employee may be allergic to a product used in the workplace, or perhaps is unable to undertake lifting for a temporary period of time;
- whether the employee is permanently incapable of discharging his or her current job or any other comparable employment, in which case the ill health retirement procedure will be initiated.

If the employee does not accept the Occupational Health Physician/Nursing Advisor's medical opinion to end employment on the grounds of ill health, he/she will be entitled to seek a second medical opinion. A request to seek a second opinion should be made within 2 weeks of the notification of the original medical opinion. Where the second opinion conflicts irreconcilably with that received from the Occupational Health Physician/Nursing Advisor, the matter shall, at the request of the employee, or the Council be submitted to an independent medical referee chosen jointly by the Council and the employee. Referral will be paid for by the Council. All the parties will accept the referee's medical opinion.

It may be that owing to the nature of the underlying medical condition, the Occupational Health Physician/Nursing Advisor is unable to give an informed opinion as to future employment implications at that time. It may be possible that at a later stage of the illness (or its treatment), the Occupational Health Physician/Nursing Advisor will be able to give this information, together with the likely time period involved. For example, the medical advice may be that the employee is likely to recover from the illness in a number of months or years so that medical retirement is inappropriate. It will then be the manager's decision to consider how to proceed.

If the circumstances of a case are not straightforward it may be appropriate to arrange a case conference between the manager, a representative from the occupational health service and a personnel representative to determine a course of action. Case conferences can be arranged at any time in processing a case, as appropriate.

## **8.5 Formal Long - Term Sickness Review Process**

### **8.5.1 First Formal Review Meeting**

Where there is no clear indication of an early return to work and the manager becomes concerned about the circumstances of the case (**this should take place within 2 months of the commencement of the period of sickness absence**) a First Formal Review Meeting should be conducted by the appropriate manager accompanied by a personnel representative.

The employee should be given at least 5 working days notice of the meeting and given the opportunity to be accompanied by a trade union representative or work colleague (**Appendix 12**).

If the employee is unable to attend the meeting because of the nature of their illness, they can nominate a friend or relative to attend on their behalf. The employee may request a postponement of the meeting, for example, if it clashes with a hospital appointment. Every

effort should be made by all parties to attend the meeting and normally it should not be postponed more than once by either party.

At the employee's request, the meeting may take place at the employee's home or another agreed venue.

The objectives of the interview will be:

- (a) to review the attendance record and to consider any available medical information including advice obtained from the Occupational Health Service;
- (b) to ensure that the information on the sickness absence record is up-to-date and accurate and that the employee agrees with the facts;
- (c) to allow the employee to explain the circumstances of his/her case;
- (d) to consider, with the employee, alternative duties or working arrangements, including redeployment, which may assist him/her in returning to work;
- (e) to consider any welfare-related action that may be possible to assist the employee and to discuss any further assistance that may be possible to help the employee to return to work;
- (f) to review any previous efforts to assist the employee and to discuss any further assistance that may be possible to help the employee to return to work;
- (g) to explain to the employee, if deemed appropriate, the difficulty for colleagues and for management arising from the employee's absence in providing services.

After taking all the facts and circumstances of the case into account the manager may:

- (a) advise the employee that a further review will take place after a period specified in accordance with the circumstances of the case (**usually not exceeding 2 months**);
- (b) refer the employee to the Occupational Health Service again if there is a need for further advice or information.
- (c) to seek possible redeployment for the employee if appropriate and agreed by the employee.
- (d) to consider whether a phased return to work or a period working reduced hours would be appropriate.
- (e) consider whether a referral under any other Council's policy e.g. the drugs and alcohol abuse policy or other would be more appropriate.

The outcome should be given to the employee in writing (**Appendix 13**) with a copy to any representative and a copy for the personal file.

### **8.5.2 Review Period**

The purpose of the review period is to allow time to assess whether or not the employee will be able to return to work. Regular contact should be made and efforts made to offer reasonable assistance. Any offers of assistance should be confirmed in writing.

Where there has not been a return to work or there is no clear indication of an early return to work, a second formal interview should be arranged.

### **8.5.3 Second Formal Review Meeting**

The employee should be given 5 working days written notice of the Second Formal Review Meeting, advised of its purpose and of her/his right to be accompanied by a Trade Union representative or colleague (at the employee's request the interview may take place at her/his home or any other mutually agreed venue) (**Appendix 14**). The manager (3<sup>rd</sup> tier or higher) will conduct the meeting accompanied a personnel representative. Where no up to date medical advice exists the employee should be referred to the Occupational Health Physician/Nursing Advisor.

If the employee is unable to attend the meeting because of the nature of their illness, they can nominate a friend or relative to attend on their behalf. The employee may request a postponement of the meeting, for example, if it clashes with a hospital appointment. Every effort should be made by all parties to attend the meeting and normally it should not be postponed more than once by either party.

### **8.5.4 The Objectives of the Meeting will be:**

- a) to review the attendance record and to consider the report(s) of the Occupational Health Physician/Nursing Advisor whether and if the sickness may be covered by the Disability Discrimination Act;
- b) to ensure that the information on the sickness absence record is up to date and accurate and that the employee agrees with the facts;
- c) to allow the employee to further explain the circumstances of her/his case;
- d) to consider, with the employee, alternative duties or working arrangements, including redeployment, which may assist her/him in returning to work;
- e) to consider any welfare related action that may be possible to assist the employee, including the availability of counselling services;
- f) to review any previous efforts to assist the employee;
- g) to explain to the employee the difficulties for colleagues and for management arising from the employee's absence in providing services.

After taking all the facts and circumstances of the case into account the Manager may:

- a) advise the employee that a further review will take place after a period specified in accordance with the circumstances of the case **as a guideline the review period should not exceed a period of 2 months;**
- b) seek further advice from the Occupational Health Physician/Nursing Advisor;

- c) advise the employee, verbally and in writing, that a third formal review meeting will take place in accordance with paragraph 8.5.6 which could lead to her/his employment with the Council being terminated;
- d) refer the employee to the Occupational Health Physician/Nursing Advisor, e.g. if the Manager has particular concerns about the employee's health, or they believe that there may be grounds for retirement (permanent ill-health);
- (e) consider whether a referral under any other Council's policy e.g. the drugs and alcohol abuse policy or other would be more appropriate.

The outcome should be confirmed to the employee in writing (**Appendix 15**) with a copy to any representative and a copy for the personal file.

### **8.5.5 Review Period**

One of the principal aims of the review period is to allow sufficient time for the employee to demonstrate her/his ability/inability to return to work. During the review period the manager/supervisor should maintain contact with the employee (either by telephone or by home visit) at least once a month. Wherever possible assistance should be offered to enable the employee to return to work; where such assistance is offered it should be confirmed in writing to the employee.

The outcome of the review should be given in writing to the employee, including any measures offered/to be taken to assist them in returning to work, with a copy placed on the employee's personal file. Where it is decided to go to a Third Formal Review Meeting the employee should be informed of this verbally and in writing, advised that it could lead to her/his employment being terminated. A copy should also be sent to the employee's Trade Union representative or colleague if she/he has previously agreed to this.

### **8.5.6 Third Formal Review Meeting (With Executive Director or Head of Service)**

The third formal review meeting is not a disciplinary hearing but a meeting of all parties to assess the full facts of the case and the implications of the absence on the capability of the employee. The employee, who may be accompanied by a trade union representative or work colleague will be invited to attend the meeting and will be given a minimum of five working days notice of the date for the meeting (**Appendix 16**).

If the employee is unable to attend the meeting because of the nature of their illness, they can nominate a friend or relative to attend on their behalf. The employee may request a postponement of the meeting, for example, if it clashes with a hospital appointment. Every effort should be made by all parties to attend the meeting and normally it should not be postponed more than once by either party.

As a general rule the manager of the employee who is sick will investigate the case and present it at a review meeting. The Chair of the Review Meeting should not be below the level of Head of Service. The Chair will be accompanied by a HR representative.

In reaching a decision the Chair will consider a reasoned assessment of all the relevant factors including any representations made by the employee or their representative followed by recommendations from the line manager.

Some of the options for the Chair of the review meeting to consider are:

- to review the case after getting more information;
- to keep the job open until the employee recovers from the illness;
- to keep the situation under review for the time being and accept the level of sickness;
- to consider a comprehensive search for alternative employment if this has not already been explored and in that context to consider whether retraining will be required for the employee to perform effectively in the new role;
- terminate the employment with notice and give the employee the right of appeal. Termination will not take effect until entitlement to occupational sick pay has been exhausted unless there is mutual agreement to terminate employment earlier. If earlier termination is being considered, consultation should take place with Corporate Human Resources.
- If the Chair of the Review Meeting decides to terminate the services of an employee who has a disability, the Chair will need to demonstrate that every consideration was given to the employee's rights under the Disability Discrimination Act and that the decision is justifiable. The decision will not be justifiable where a reasonable adjustment could have been made.

In the event of a decision to terminate employment following a Review Meeting, the reason given will be capability. There is a guidance letter at **Appendix 17** which should be followed unless exceptional circumstances dictate otherwise. Your Directorate HR Manager will give advice when appropriate.

## **9 Appeals Against Dismissal On Sickness Capability Grounds**

### **9.1 Appeal Rights**

Whether the employee has been dismissed because of frequent absence or after long term sickness absence, the employee will have a right of appeal. This appeal will be heard by an Appeals Panel comprising a member of the Council's Strategic Management Team, who will be from a different service from that where the employee works, and the Independent Person. The employee must lodge the appeal within ten working days of the date of the decision letter by writing to the Assistant Chief Executive (Human Resources) specifying the grounds of appeal.

The reasons for the appeal must be clear and specific and can be on one or more of the following grounds:

- the employee may consider that the chair of the review meeting wrongly assessed;

- the record and pattern of absence throughout the employment;
- whether the employee has an underlying medical condition;
- the likelihood of a change in the employee's attendance;
- the work problems caused by the employee's absence.

Also the employee may contend that:

- the sickness absence procedure was not properly followed;
- the evidence presented at the review meeting did not support the conclusion of the Chair of the review meeting;
- the decision to terminate the employment was too severe in the circumstances;
- new medical evidence has come to light.

## **9.2 Appeal Process**

The Appeals Panel, advised by the Assistant Chief Executive (Human Resources) or delegated representative, will hear any appeal against a decision to terminate the employment on sickness capability grounds. The appeal hearing will be convened as soon as is practicably possible. The employee and management will be given at least 5 working days notice of the date for the appeal hearing (**Appendix 18**). Both sides can produce documents relevant to the appeal. The decision of the Appeals Panel shall be final and there shall be no further internal right of appeal.

## **9.3 Appeal Hearing**

The purpose of the appeal is to examine the grounds of appeal that the employee may raise, to decide if termination of employment was reasonable in the circumstances and to take the opportunity to remedy any procedural defects.

The employee or their representative will state their grounds of appeal and make representations to the Appeals Panel based on the relevant factors.

The management representative will then respond to the grounds of appeal and outline the reasons for the decision normally based on the same criteria.

The Appeals Panel may ask questions to clarify any issues.

Both parties will be asked to withdraw.

Some of the options for the Appeals Panel will be to:

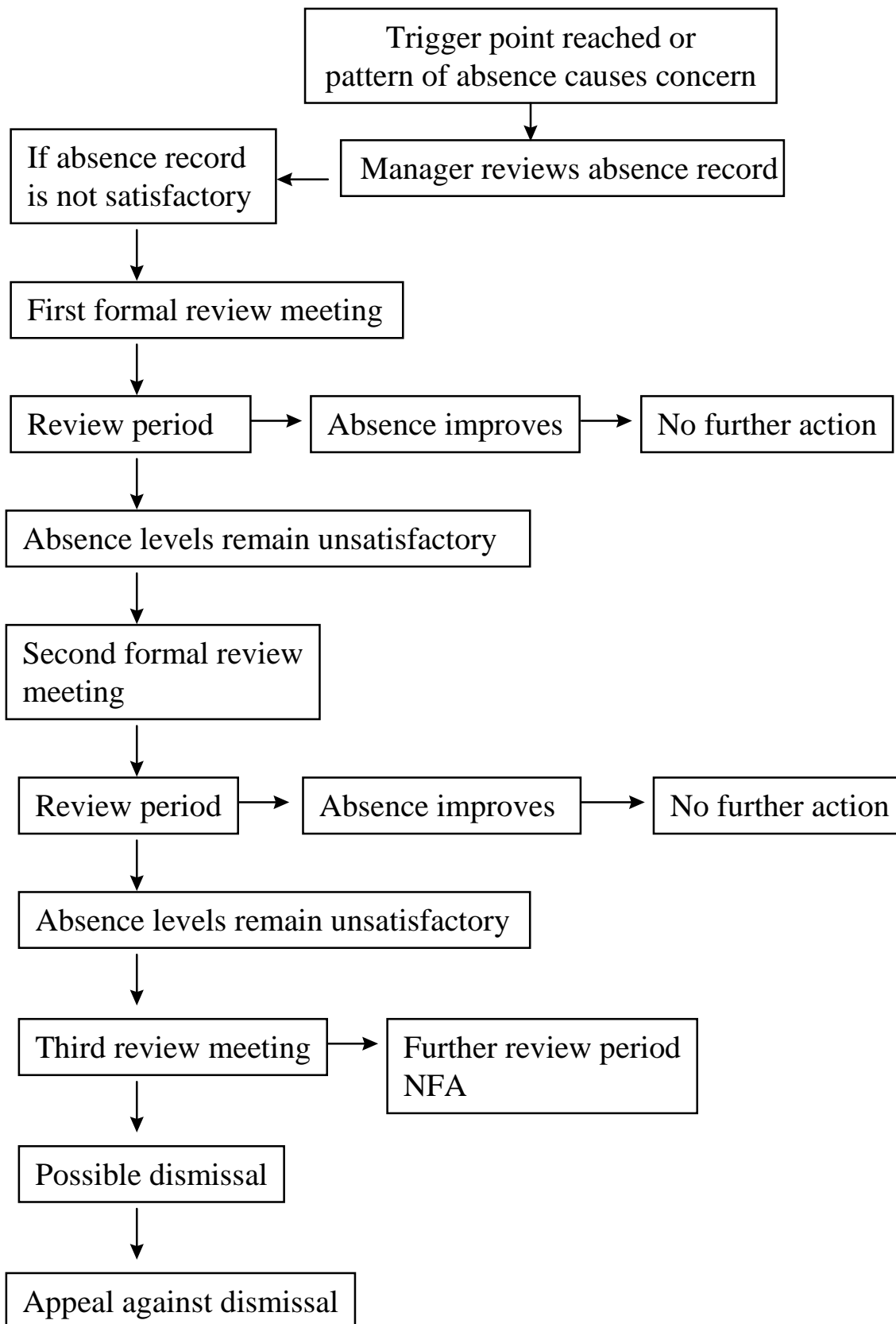
- confirm the termination of employment;
- adjourn the case in order to obtain more information



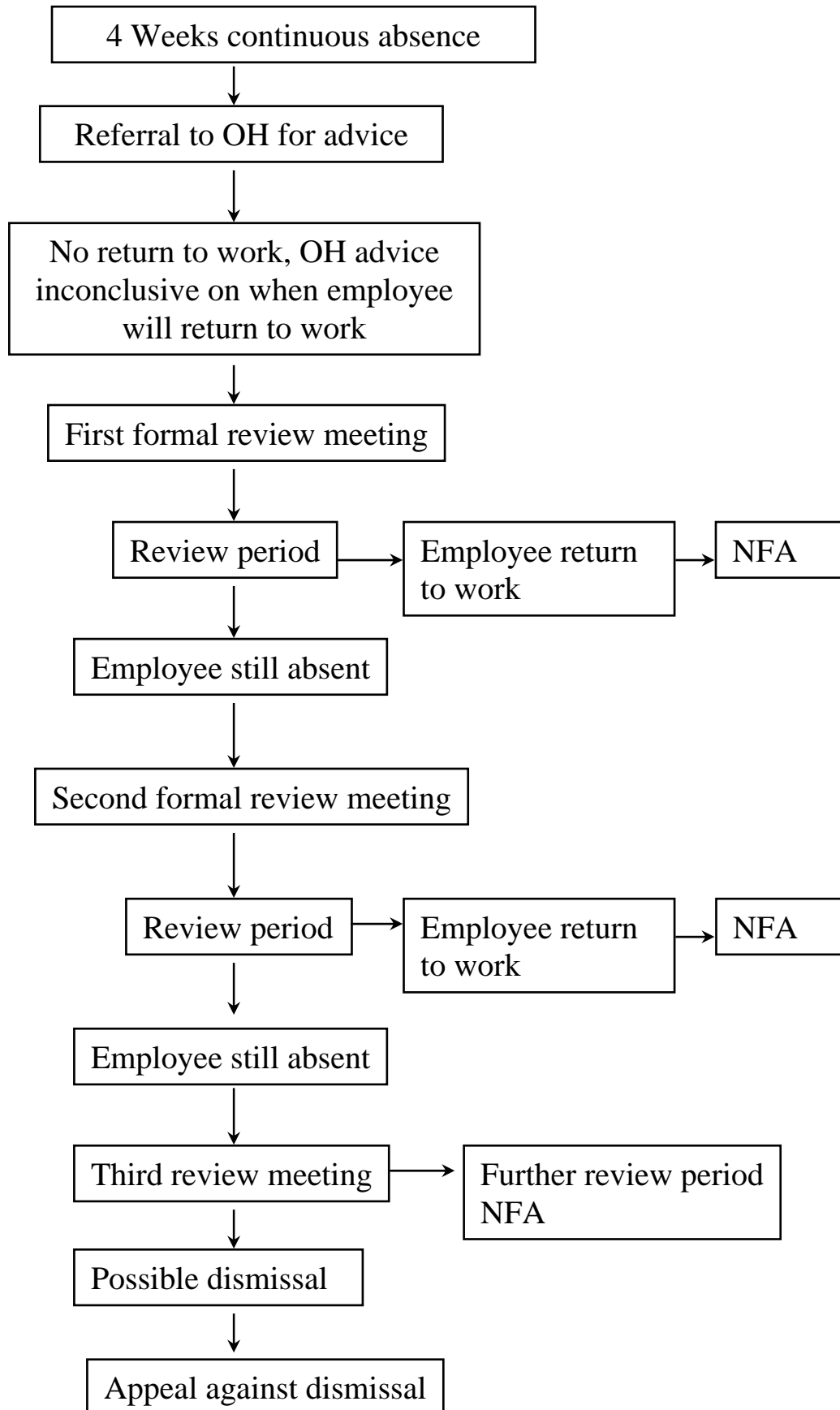
- adjourn the case to enable management to further investigate whether suitable alternative employment is available. If this option is decided on, then, the Appeals Panel should state the time period for seeking alternative employment and set a date to reconvene to consider whether Management have been able to achieve this;
- grant the appeal and reinstate the employee subject to any conditions regarding the employee's attendance.

The decision of the Appeals Panel will be confirmed in writing (**Appendix 19**).

# SHORT TERM/FREQUENT ABSENCE



# LONG TERM ABSENCE



CLASSIFICATION OF SICKNESS

You should complete this form if you are unable to return to work on the **FOURTH** day of sickness. If the absence continues beyond **SIX days\*** you will also need to obtain a medical statement from your doctor.

Once completed this form should be returned to your Directorate personnel unit as soon as possible.

**\*(For this purpose Monday to Saturday must be counted, whether or not regularly worked; Sunday should also be counted if it would have been worked).**

Surname	
Forenames	
Home Address	

Service Area	
Job Title	
Place of Employment	
Personnel number (if applicable)	

Date you last worked	
Date you became unfit for work	
Date you became fit for work (if known)	
If you became unfit whilst at work please state time you finished work	
Is your absence due to an industrial injury or an industrial disease? (Yes/No)	
Have you had any other sickness absence in the previous two weeks? (Yes/No)	
Please state briefly why you are unfit for work	

I certify that the information above is accurate and I understand that knowingly to give false or misleading information on this document is a serious disciplinary offence.	
Signed .....	Date .....

**LONDON BOROUGH OF HAVERING**  
**Guidance on Conducting Return to Work Interviews**

All employees will be interviewed by their Manager on return to work irrespective of the duration of the absence.

The purpose of this interview is to create an opportunity for the Manager to:-

- Welcome the employee back.
- Confirm the reason for the absence.
- Ask how the employee is feeling following the period of absence.
- Ensure that the employee is fit to return to normal work or whether some support is needed for a period of time e.g. working reduced hours on the advice of the Occupational Health Physician/Nursing Advisor/Nursing Advisor.
- Bring the employee up to date on the work and any changes which may have occurred.
- Inform the employee that should there be a need they can contact Occupational Health (01708 432597).
- To offer support/assistance on any issues raised which may affect their sickness absence.
- Inform the employee what the trigger levels are under the frequent absence procedure.
- Inform the employee that all sickness will be monitored in line with Corporate procedures.
- Complete the return to work interview record and ensure a copy is given to the employee. The original record should be sent to the Directorate Personnel Unit.

The above areas should be covered with sensitivity as there may be circumstances when it would not be appropriate to cover all the issues listed.

If the absence is caused by a gender specific sickness or issue the employee should be made aware that the interview can be conducted sensitively by a senior employee of the same sex agreed between the parties who would then report back to the line manager.

Any concerns arising from this interview should be raised immediately by the Manager with the Directorate Personnel Manager or Occupational Health for advice and further action.

**Appendix 3**

**STRICTLY CONFIDENTIAL**  
**LONDON BOROUGH OF HAVERING**

## RETURN TO WORK INTERVIEW & SELF-CERTIFICATION RECORD

Name: \_\_\_\_\_ Post Held: \_\_\_\_\_

Service Directorate and Section: \_\_\_\_\_

Manager's Name and Designation: \_\_\_\_\_

Date first absent	
Return to work date	
Number of working days absent	
If you became unfit while at work please state time you finished work	
Could your absence be classified as an industrial injury or an industrial disease? <b>Yes/No</b>	If Yes have you completed an Accident/Incident report form <b>Yes/No</b>
Reason for Absence	Does this require medical diagnosis <b>Yes/No</b> (see * below)
Is absence 4 to 7 calendar days (including weekends)	Yes/No (separate self-cert not required)
If absence more than 7 calendar days (including weekends) has a medical certificate been provided?	Yes/No
If absence over 14 days or, more than one GP certificate have you been signed off as fit to return to work?	Yes/No

This is a record of a meeting held on \_\_\_\_\_ to discuss your sickness absence.  
 Details of sickness absences in previous 12 month \_\_\_\_\_

At the meeting we discussed the following:

- How you were feeling following your period of sickness absence. \*(Further discussion required if answer is Yes)
- Any work related changes/developments.
- The option for you to contact Occupational Health on 01708 432597.
- My offer of support/assistance on any issues raised (either work related or personal) which may have affected your sickness absence.
- What the trigger levels are under the frequent absence procedure. (*4 sickness absences within a 12 month rolling period; 3 or more short term absences within a 6 month rolling period amounting to at least 5 working days absence; a pattern or type of absence which causes concern*)
- That all sickness will be monitored in line with corporate procedures.

Notes on above issues:
Any further action to be taken:

I certify that the information above is accurate and I understand that knowingly to give false or misleading information on this document is a serious disciplinary offence.

Employee's  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Form completed as the result of telephone conversation/discussion – Yes/No)

Thank you for attending this meeting/having this discussion (delete whichever not applicable).

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**When completed, a copy of this report is to be given to the employee and a copy to be retained by the Manager. The original should be e-mailed to [absence-returns@havering.gov.uk](mailto:absence-returns@havering.gov.uk) or be sent to Organisational Performance Team, Human Resources (fax no. 01708 433154)** Appendix 4  
**FIRST FORMAL REVIEW MEETING GUIDANCE LETTER**



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private & Confidential**

Date:

Dear (Name),

**Procedure for managing sickness absence - First formal review meeting**

Your level of sickness has now reached a trigger point under section 7.1 of Havering's procedure for managing sickness absence, a copy of which I enclose for your information. I am therefore, arranging to see you for a First Formal Review Meeting under section 7.2 of the Policy. At the meeting we will address the following:

- a) review your attendance record;
- b) ensure that the information on the sickness absence record is up-to-date and accurate and that you agree with the facts;
- c) discuss the reasons for the periods of absence;
- d) review any previous efforts to assist you and to discuss any further assistance that may help to reduce your absence levels;
- e) discuss the effect of your absence on colleagues and on the service provided.

The First Formal Review Meeting will be held on the (Date), at (Time and Venue). You may, if you wish, be accompanied by a trade union representative or work colleague.

Both you and your representative will be given the opportunity to participate in the meeting.

Should you wish to discuss this matter, or any related issues, further, please contact me.

I should be grateful if you would confirm that you are able to attend the meeting.

Yours sincerely

Manager  
cc: Directorate Personnel Team

**OUTCOME OF THE FIRST FORMAL REVIEW MEETING GUIDANCE  
LETTER (IF APPROPRIATE)**

Appendix 5



*(Name)*  
*(Address)*

Please ask for:  
Telephone direct on: **(01708) 43**  
Fax: **(01708) 43**  
Switchboard: **(01708) 434343**  
email:

**Private & Confidential**

**Date:**

Dear *(Name)*,

**Procedure for managing sickness absence - Outcome of the first formal review meeting**

I refer to the first formal review meeting which was held on *(Date)* at *(Time/Venue)*. You did not wish to be represented/Your Trade Union representative *(Name)* was also present.

We discussed your attendance record during the last twelve months. I advised you that during this period you had been absent from work through sickness as detailed on the attached sheet. You agreed/disagreed with the accuracy of this information.

During the meeting, I asked you to advise me of any reasons there were for such a high level of absence. You advised me (complete details). We then discussed any assistance I may be able to offer you and agreed of the following action plan (complete details).

During the interview, I advised you of the services of the Occupational Health. They can be contacted on 01708 432597.

[You were informed that for all future occasions of sickness absence it will be necessary to provide a medical certificate from the first day of absence. The costs of any private medical certificates will be refunded by the Council] (if applicable).

Either :

Having taken into account the information provided by you at the meeting, I can advise you that there will be no further action at this stage. Your sickness absence will however continue to be monitored in line with the Council's procedure for managing sickness absence.

Or :

I advised you that your record was not satisfactory and a substantial and sustained improvement in your attendance was required. I informed you that there would be a monitoring period of (complete details) and at the end of this period I would arrange to discuss the matter with you again. If at the end of the review period there has been no significant improvement, it may be necessary to move to the next stage of the Procedure, which is a second formal review meeting. This is the first stage of the procedure. I must



advise you that should this matter proceed to the third stage, your employment with the London Borough of Havering could be terminated.

I will advise you a week in advance of the monitoring review date meeting.

Yours sincerely,

Manager

cc: Directorate Personnel Team, trade union representatives

**SECOND FORMAL REVIEW MEETING GUIDANCE LETTER**

(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private & Confidential**

Date:

Dear ,

**Procedure for managing sickness absence - Notification of Second formal review meeting**

I refer to the first sickness review meeting which was held on (*Date*), the outcome of which I detailed to you in a letter dated \_\_\_\_\_. It was agreed at this meeting that your sickness absence would be monitored for the period (*Period Dates*) by your manager/supervisor. At the end of this monitoring period you were again interviewed by your manager/supervisor on (*Date*) and it was made clear to you that you had failed to maintain a satisfactory level of attendance during the monitoring period.

Your level of sickness has remained at an unsatisfactory level. I am therefore, arranging to see you for a Second Formal Review Meeting under section 7.4 of the procedure. At the meeting we will address the following:

- a) review your attendance record;
- b) ensure that the information on the sickness absence record is up-to-date and accurate and that you agree with the facts;
- c) discuss the reasons for your periods of absence;
- d) review any previous efforts to assist you and discuss whether any further assistance should be offered;
- e) reiterate the effect of absences on colleagues and the service;
- f) discuss the availability of counselling services.
- g) agree remedies to address levels of absence.

The Second Formal Review Meeting will be held on the (*Date*), at (*Time and Venue*). You may, if you wish, be accompanied by a Trade Union representative or work colleague.

Both you and your representative will be given the opportunity to participate in the meeting.

Should you wish to discuss this matter or any related issues further please contact me.

I should be grateful if you would confirm that you are able to attend the meeting.

Yours sincerely,

Manager cc: Directorate Personnel Team



**Private & Confidential**

**Name)**  
**(Address)**

**Please ask for:**  
**Telephone direct on: (01708) 43**  
**Fax: (01708) 43**  
**Switchboard: (01708) 434343**  
**email:**

**Date:**

Dear ,

**Procedure for managing sickness absence - Outcome of the second formal review meeting**

I refer to the second formal review meeting which was held on (*Date*) at (*Time/Venue*). You did not wish to be represented/Your Trade Union representative (*Name*) was also present.

We discussed your attendance record during the last twelve months. I advised you that during this period you had been absent from work through sickness as detailed on the attached sheet. You agreed I disagreed with the accuracy of this information.

During the meeting, I asked you to advise me of what reasons there were for such a high level of absence. You advised me (complete details). We then discussed any assistance I may be able to offer you and agreed on the following action plan (complete details).

During the interview, I advised you of the services of the Occupational Health. They can be contacted on 01708 432597.

Either :

Having taken into account the information provided by you at the meeting, I can advise you that there will be no further action at this stage. Your sickness absence will however continue to be monitored in line with the Council's procedure for managing sickness absence.

Or :

I advised you that your record continued to be unsatisfactory and a substantial and sustained improvement in your attendance was required. I informed you that there would be a further monitoring period of (*usually 3 months*), and at the end of this period I would arrange to discuss the matter with you again.

I also advised you that you need to maintain a satisfactory level of attendance during the next 12 months following the review period, otherwise I shall proceed to the Final stage of the Procedure, a third review meeting. At this stage your employment with the London Borough of Havering could be terminated.

I will advise you a week in advance of the monitoring review date meeting.

Yours sincerely,

Manager

cc: Directorate Personnel Team  
Trade Union representatives



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private and Confidential**

Date:

Dear ,

**Procedure for managing sickness absence - Notification of Third sickness review meeting**

I refer to the second sickness review meeting which was held on (*Date*), the outcome of which I detailed to you in a letter dated (*Date*). It was agreed at this meeting that your sickness absence would be monitored for the period (*Period Dates*) by your manager/supervisor. At the end of this monitoring period you were again interviewed by your manager/supervisor on (*Date*) and it was made clear to you that you had failed to maintain a satisfactory level of attendance during the monitoring period.

In the circumstances, I have arranged a third formal review meeting with the Executive Director/ Head of Service (*Name*) of Directorate (*Name*), under section 7.6 of Havering's Procedure for managing sickness absence. At this meeting the Executive Director/ Head of Service (Chair of the meeting) will consider a reasoned assessment of all the relevant factors including any representations made by you or your representative followed by recommendations from myself.

Some of the options for the Chair to consider at the meeting will be:

- to review your case after gathering more information;
- to keep the situation under review for the time being and accept your level of sickness;
- to consider a comprehensive search for alternative employment if this has not already been explored and in that context to consider whether you will require retraining to enable you to perform effectively in the new role;
- terminate your employment and give you the right of appeal.

The third Sickness Review Meeting will be held on the (*Date*), at (*Time and Venue*). You may, if you wish, be accompanied by a Trade Union representative or work colleague.

Both you and your representative will be given the opportunity to answer points raised and to present evidence about your sickness absence at the meeting.

Should you wish to discuss this matter further or any related issues, please do not hesitate to contact me.

I would be grateful if you could confirm that you are able to attend the meeting.

Yours sincerely

Manager

cc: Directorate Personnel Team

## OUTCOME OF SICKNESS REVIEW MEETING LETTER

Appendix 9



**Private & Confidential**

(Name)  
(Address)

Please ask for:  
Telephone direct on: (01708) 43  
Fax: (01708) 43  
Switchboard: (01708) 434343  
email:

Date:

Dear ,

### **Procedure for managing sickness absence - Outcome of sickness review meeting**

I am writing with reference to the sickness review meeting held on (*Date*) to assess the full facts of your sickness absence and its implications in terms of your employment. At the meeting I was advised by/accompanied by (*Name*) and you were represented by (*Name*)

After giving careful consideration to the management recommendations, and your own representations and responses, my decision is that (*insert the appropriate decision*)

1. I will review your case following receipt of a further medical report from the Council's Occupational Health Physician/Nursing Advisor.
2. In the circumstances, I have decided to keep your job open until you recover your health.
3. I will keep your case under review, and for the moment, accept your level of sickness as (*insert reason provided*).
4. I will consider whether suitable alternative employment is available for you and reconvene on (*Date*) to let you know the outcome of the process.
5. I will terminate your employment with the Council.

(*In the event of a decision to terminate employment insert the following*):

I have decided that, given your frequent sickness absence and the medical advice submitted by the Council's Occupational Health Physician/Nursing Advisor, in my opinion the service can no longer accept this level of absence. I have considered the impact of your continued sickness on the service, and the mitigation in terms of \_\_\_\_\_ put forward by your representative. Having done so I have concluded that the Council can no longer keep your job open.

Regrettably I have decided to terminate your services from the Council due to your frequent sickness absence. You are entitled to \_\_\_\_\_ notice. Therefore your last day of service will be\_\_\_\_\_.

You have the right to appeal against this decision. If you wish to exercise this right, you should lodge your appeal to the Assistant Chief Executive Human Resources in writing within ten working days of the date of this letter. Your grounds of appeal must be clear and specific and can be raised on one or more of the following grounds:

You may have considered that I wrongly assessed:



- the record and pattern of your absence throughout your employment

You may feel I did not take account of, or, did not take adequate account of:

- any underlying medical condition you may have
- the likelihood of a change in your attendance at work
- the extent of the problems caused by your absence from work

You may contend that::

- the Council's sickness procedure was not properly followed
- the evidence presented at the Review Meeting did not support my conclusion
- the decision to terminate the employment was too severe in the circumstances
- new evidence has come to light

You must give full details of your reasons for appealing. It is not sufficient to list the grounds of appeal. The Appeal Hearing Officer will consider your grounds of appeal, and whether my decision was reasonable in the light of all the circumstances of the case.

Yours sincerely

Chair of the Review Meeting

cc: Directorate Personnel Team  
Trade Union representative

**LONG TERM SICKNESS INITIAL CONTACT LETTER**  
**LONDON BOROUGH of HAVERING**  
**OCCUPATIONAL HEALTH SERVICE**  
**MANAGEMENT REFERRAL FORM**



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private and Confidential**

**Date:**

Dear ,

I am sorry to hear that you have been absent due to sickness since (*Date*).

I and the rest of your work colleagues hope you are now feeling better and are well on your way to recovery.

It would be good to hear from you so I can keep up to date with your progress and ascertain when you feel you will be well enough to return to work. Of course, if, due to the nature of your illness, it is not appropriate for you to contact me personally, you may arrange for a family member or friend to contact me on your behalf.

A member of the Council's Occupational Health Service will write to you shortly inviting you to be medically examined by the Council's Occupational Health Physician/Nursing Advisor. This will have the mutual benefit of providing both of us with further information and the estimated time it may take for you to return to full working fitness.

Furthermore, as you may know, the Council uses the service of an independent support service who will be able to offer you confidential help, advice and support in overcoming or working with work related problems. If you wish to make use of this service, please contact Occupational Health on 01708 432597.

I enclose a copy of the Council's procedure for managing sickness absence for your information.

With best wishes for your speedy recovery.

Yours Sincerely,

Manager

cc: Directorate Personnel Team

**STRICTLY CONFIDENTIAL**  
**EMPLOYEE DETAILS**

NAME: (in full)		DATE OF BIRTH:	
<b>EMPLOYEE NUMBER</b>		<b><u>FIS CODE - (1 Letter 9 digits)</u></b> <b><u>Must be completed.</u></b>	
ADDRESS: (in full)			
DIRECTORATE/SECTION		LOCATION	
JOB TITLE			

**REASON FOR REFERRAL:**

**(A): Short term absences:**

Any pattern of absence?  
 \_\_\_\_\_

Absence this month: \_\_\_\_\_ days.                      Last three months: \_\_\_\_\_ days.

Last 12 months: \_\_\_\_\_ days.

Reasons for absences:  
 \_\_\_\_\_  
 \_\_\_\_\_

**(B): Long term absences:**

Reasons for absence:  
 \_\_\_\_\_

When did the absence commence? \_\_\_\_\_

When is the employee due to return? (if known) \_\_\_\_\_

**(C): Work related or potentially work related injury or illness:**

Please tick.

**(D): Other medical condition affected by/affecting work:**

Please tick.

**Advice Sought (please tick appropriate boxes)**

--	--	--

1.	What is the employee's current state of fitness for work?	
2.	What is the likely date of return to work?	
3.	What effect will the illness/injury have on the employee's ability to carry out his/her occupation?	
4.	Are there any particular duties the employee will be unable to carry out when he/she returns to work?	
5.	Are there any work modifications that would alleviate the condition or facilitate rehabilitation	
6.	Is the sickness as a result of an accident/illness/injury sustained at work and/or caused by a work activity?	
7.	Is the condition likely to recur to the detriment of future employment?	
8.	What are the long-term effects on the employee's continuing state of health and fitness for work?	
9.	Is the condition likely to constitute a 'disability' under the Disability Discrimination Act, 1995	
10.	Does the employees medical condition fall under the auspices of the DDA act?	✓
11.	Other advice sought:	

**The following information must be supplied with this referral letter, please tick boxes to verify inclusion.**

The individuals' sickness record with reasons for absence for the last two years.	<input type="checkbox"/>
An up to date Job Profile for the individual.	<input type="checkbox"/>

Additional information that may assist the Medical Practitioner should be included below. In some cases it may be preferable to supply a covering letter to ensure that the Medical practitioner has all the relevant information that will assist them. To this end, it may also be necessary to supply other documentation that you feel would be useful.

Please delete where appropriate. **(If this section is not completed then time will not be allocated for a telephone call.)**

**Do you the Referring Manager/HR Officer wish to speak to the Medical Practitioner before/ and or after the employees Occupational Health appointment.**

<b>YES /NO</b>

Please tick the box to confirm that the employee has been advised of the purpose of this referral.

**Referring Manager:** Name \_\_\_\_\_ Title \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Human Resources Officer:** \_\_\_\_\_

Telephone \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IDENTIFYING NON-PHYSICAL WORK DEMANDS**

	POTENTIAL SIGNIFICANCE					
	Low			High		
	1	2	3	4	5	6
<b>NON-PHYSICAL DEMANDS :</b>						
Managerial responsibilities (accountability/planning)						
Responsibility for resources - specify						
Work under pressure - of time of service delivery workload - constantly heavy - recent changes - regular peaks/troughs						
Increased/reduced responsibilities						
Decision making						
Work requiring deep concentration and/or concentration for long periods of time						
Responsibility for people - clients - customers - staff						
Communication - supervising - one-to-one - team meeting						
Organisational/structural changes						
Work with limited/restricted resources						
Nightwork						
On call/irregular hours/shift work						
Work in isolation - lone working - working away from base - working in clients' homes						
Level of supervision/contact received - close - minimal frequency - weekly - less frequently - more frequently						
Contact with customer/client group						
Contact with potentially violent/abusive clients or others						
Specialist knowledge/skills						
Mundane tasks						
Potential for poor results taking into account level of input/effort						
<b>OTHER :</b>						
Driving - specify vehicle type						
Use of mechanical equipment						

Use of display screen equipment							
---------------------------------	--	--	--	--	--	--	--

**IDENTIFYING PHYSICAL HARMFUL WORK DEMANDS**

	POTENTIAL SIGNIFICANCE					
	Low			High		
	1	2	3	4	5	6
<b>PHYSICAL REQUIREMENTS:</b>						
Exertion - <i>other than lifting</i>						
Manual handling - <i>*HSE guidance maximums</i>					*	
Repetitive movements – <i>state upper limb, lower limb etc:</i>						
Prolonged sitting, standing or static posture						
Bending, stooping, twisting or stretching						
Climbing stairs						
Use of ladders, scaffolding. Other equipment or tasks requiring good balance						
Use of respiratory protective equipment						
Precise co-ordination/dexterity						
<b>SENSORY REQUIREMENTS:</b>						
Sensory work with colours/requirement to distinguish perception of fine visual detail/good visual performance						
Auditory performance – <i>hearing</i>						
<b>CONTACTS/EXPOSURE:</b>						
Exposure to high noise levels - * 1 <sup>st</sup> Action Level; + 2 <sup>nd</sup> Action Level or peak Action Level				*	+	
Contact with body fluids/contaminated materials						
Contact with potentially infectious micro-organisms – <i>specify</i>						
Exposure to other hazardous substances including sensitisers – <i>specify the substance(s) and whether exposure is via inhalation, ingestion or skin contact</i> * <i>Occupational Exposure Limit (OEL)</i> + <i>maximum Exposure Limit (MEL)</i>				*	+	
Contact with vibrating surfaces/equipment						
<b>PHYSICAL CONDITIONS:</b>						
Work at height (above 2 metres)						
Work below ground						
Work under high/low air pressures						
Adverse weather/temperatures						
Work in confined spaces						

**LONG TERM SICKNESS FIRST FORMAL REVIEW MEETING**  
**GUIDANCE LETTER (IF APPROPRIATE)**

Appendix 12



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

Date:

Dear ,

**Procedure for managing sickness absence - First formal review meeting**

I and your colleagues hope you are feeling better and coping with your condition. I have kept in regular contact with you to update on your progress and to ascertain when you will be fit to return to work. In assisting with this process you recently attended a medical appointment with the Council's Occupational Health Service but there is no clear indication of when you will return to work. In the circumstances I am arranging to see you for a First Formal Review Meeting of your sickness absence under section 8.5 of the Council's procedure for managing sickness absence, a copy of which I enclose for your attention. At the meeting we will address the following:

- (a) review your attendance record and consider any available medical information including advice obtained from the Occupational Health Service;
- (b) ensure that the information on sickness absence record is up-to-date and accurate and that you agree with the facts;
- (c) allow you to explain the circumstances of your case;
- (d) consider, with you, alternative duties or working arrangements, including redeployment, which may assist you in returning to work;
- (e) review any previous efforts to assist you and to discuss any further assistance that may be possible to help you to return to work;

The First Formal Review Meeting will be held on the (*Date*), at (*Time and Venue*). You may prefer to hold the meeting at your home or other suitable venue. If this is your wish please contact me as soon as possible and I can make the necessary arrangements. You may, if you wish, be accompanied by a trade union representative or work colleague.

You and your representative will be given the opportunity to answer points raised and to present details about your sickness at the meeting.

Should you wish to discuss this matter further or any related issues, please contact me.

Please confirm that you are able to attend the meeting.

Yours sincerely

Manager  
cc: Directorate Personnel Team

Appendix 13

**LONG TERM SICKNESS - OUTCOME OF FIRST FORMAL REVIEW**  
**GUIDANCE LETTER (IF APPROPRIATE)**



(Name)  
(Address)

Please ask for:  
Telephone direct on: (01708) 43  
Fax: (01708) 43  
Switchboard: (01708) 434343  
email:

**Private and Confidential**

Date:

Dear ,

**Procedure for Managing Sickness Absence - Outcome of first formal review meeting**

Thank you for coming to the first formal review meeting which was held on (*Dated*).

You did not wish to be represented/your trade union representative (*Name*) was also present.

We discussed your sickness and the report of the Occupational Health Physician/Nursing Advisor who saw you on (*Date*), a copy of which is enclosed for your attention. I advised you that the Council's records show that during this period you had been absent from work through sickness as detailed on the attached sheet.

During this interview you confirmed that you were suffering from \_\_\_\_\_ which was the reason for your long term absence. We then discussed any assistance I may be able to offer you and agreed \_\_\_\_\_.

During this interview, I reminded you of the staff support service. They can be contacted through Occupational Health on 01708 432597. Furthermore, due to your current condition and the effect on the provision of the team's service the following course of action was agreed between us (insert as appropriate).

- (a) a further review to take place after a period of (specify in accordance with the circumstances of the case). (**Usually not exceeding 3 months**);
- (b) to refer you to the Occupational Health Service again as there is a need for further advice or information;
- (c) to seek possible redeployment opportunities for you;
- (d) to consider whether a phased return to work or a period working reduced hours would be appropriate for you;



(e) to consider whether a referral under any other Council policy e.g. the drugs and alcohol abuse policy, or other would be more appropriate for you.

If at the end of the review period there has been no significant improvement, it may be necessary to move to the next stage of the procedure, which is a second formal review meeting. Should it then be necessary to proceed to the third stage of the procedure, I must advise you that your employment with the London Borough of Havering could be terminated.

Yours sincerely,

Manager

cc: Directorate Personnel team, trade union representatives

**LONG TERM SICKNESS - SECOND FORMAL REVIEW GUIDANCE LETTER**  
**(IF APPROPRIATE)**



**Private and Confidential**

(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

Date:

Dear ,

**Procedure for managing sickness absence - Second formal review meeting**

I and your colleagues hope you are feeling better and coping with your condition. I refer to the first formal review meeting which was held on (*Dated*), the outcome of which I detailed to you in a letter dated \_\_\_\_\_, a copy of which I attach for your attention. Since the first formal review meeting (insert as appropriate):

- (a) the sickness review period has come to an end;
- (b) you attended an appointment with the Occupational Health Physician/Nursing Advisor on (*Date*); a report of which is attached for your attention;
- (c) the redeployment period has come to an end without a suitable position becoming available;

You have not to date returned to work and there is no clear indication of an early return to work due to your condition. I am therefore , arranging to see you for a second formal review meeting under section 8.5 of Havering's procedure for managing sickness absence, a copy of which I enclose for your information. At this meeting we will address the following:

- a) review your attendance record and to consider the report(s) of the Occupational Health Physician/Nursing Advisor;
- b) ensure that the information on the sickness absence record is up to date and accurate and that you agree with the facts;
- c) allow you to explain further the circumstances of your case;
- d) consider, with you, alternative duties or working arrangements, including redeployment, which may assist you in returning to work (if not already considered);
- e) consider any welfare related action that may be possible to assist you, including the availability of counselling services;
- f) review any previous efforts to assist you;

g) explain to you the impact of your absence on service delivery.

The second formal review meeting will be held on the (*Date*), at (*Time and Venue*). You may, if you wish, be accompanied by a trade union representative or work colleague.

You and your representative will be given the opportunity to answer points raised and to present evidence, about your sickness, at the meeting.

Should you wish to discuss this matter, or any related issues further, please contact me.

Please confirm that you are able to attend the meeting.

Yours sincerely,

Manager

cc: Directorate Personnel Team

**LONG TERM SICKNESS - OUTCOME OF FIRST FORMAL REVIEW  
GUIDANCE LETTER (IF APPROPRIATE)**



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private and Confidential**

Date:

Dear ,

**Procedure for managing sickness absence - outcome of first formal review meeting**

Thank you for attending the first formal review meeting which was held on (*Date*).

You did not wish to be represented/your trade union representative (*Name*) was also present.

We discussed your sickness and the report of the Occupational Health Physician/Nursing Advisor/Nursing Advisor, who saw you on (*Date*), a copy of which is enclosed for your attention. I advised you that during this period you had been absent from work through sickness as detailed on the attached sheet.

We then discussed any assistance I may be able to offer you.

Due to your current condition and the effect on the provision of the team's service the following course of action was agreed between us (insert as appropriate).

- (a) a further review to take place after a period specified in accordance with the circumstances of your case. (**Usually not exceeding 2 months**);
- (b) to refer you to the Occupational Health Service again as there is a need for further advice or information.
- (c) advise you, verbally and in writing, that a third formal review meeting will take place in accordance with paragraphs 8.35 - 8.37 which could lead to your employment with the Council being terminated;
- (d) consider whether a referral under any other Council's policy e.g. the drugs and alcohol abuse policy or other would be more appropriate for you.

If at the end of the review period or completion of the other options there has been no significant improvement, it may be necessary to move to the next stage of the Procedure, which is a third formal review meeting, the outcome of which may be that your contract is terminated.

Yours sincerely,

Manager

cc: Directorate Personnel Team  
Trade Union Representatives

**LONG TERM SICKNESS - THIRD FORMAL REVIEW OUTCOME LETTER****Private and Confidential**

(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

Date:

Dear ,

**Procedure for Managing Sickness Absence - Third formal review meeting**

I and your colleagues hope you are feeling better and coping with your condition. I refer to the second formal review meeting which was held on (*Date*), the outcome of which I detailed to you in a letter dated \_\_\_\_\_ , a copy of which I attach for your information. Since the second formal review meeting the following event has occurred (*delete as appropriate*):

- (a) the sickness review period has come to an end;
- (b) you had an appointment with the Occupational Health Physician/Nursing Advisor on (*Date*), I attach a copy of the report for your information;

You have not to date returned to work and there is no clear indication of an early return to work due to your condition. In the circumstances , I have arranged a third formal review meeting with the Executive Director/ Head of Service (*Name*) of (*Directorate Name*), under section 8.5 of Havering's procedure for managing sickness absence procedure, a copy of which I enclose for your attention. At this meeting the Executive Director/ Head of Service (Chair of the meeting) will consider a reasoned assessment of all the relevant factors including any representations made by you or your representative followed by my recommendations.

Some of the options for the Chair to consider at the meeting will be:

- to review your case after obtaining more information;
- to keep your job open until if and when you recover from your illness;
- to keep the situation under review for the time being and accept your level of sickness;
- to consider a comprehensive search for alternative employment if this has not already been explored and in that context to consider whether retraining will be required for you to perform effectively in the new role;
- terminate your employment;

The third formal review meeting will be held on (*Date*), at (*Time and Venue*). You may, if you wish, be accompanied by a trade union representative or work colleague.

You and your representative will be given the opportunity to answer points raised and to present evidence about your sickness at the meeting.

Should you wish to discuss this matter further or any related issues, please contact me.

Please confirm that you are able to attend the meeting.

Yours sincerely,

Manager

cc: Directorate Personnel Team

**LONG TERM SICKNESS - OUTCOME OF THIRD FORMAL REVIEW GUIDANCE  
LETTER**



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private and Confidential**

Date:

Dear ,

**Procedure for Managing Sickness Absence - Outcome of third formal review meeting**

I am writing with reference to the third formal review meeting held on (date) to assess the full facts of your sickness absence and its implications in terms of your capability in employment. At the meeting I was advised by/ accompanied by \_\_\_\_\_ and you were represented by \_\_\_\_\_.

After giving careful consideration to the management recommendations, and your own representations and responses, my decision is that (*insert the appropriate decision*)

1. I will review your case in (*insert time period*) following receipt of a further medical report from the Council's Occupational Health Physician/Nursing Advisor.
2. In the circumstances, I have decided to keep your job open until you recover your health.
3. I will keep your case under review, and for the moment, accept your level of sickness.
4. I will consider whether suitable alternative employment is available for you and reconvene on (*insert the date*) to let you know the outcome of that process.
5. I have decided that, given your long term sickness absence and the medical advice submitted by the Council's Occupational Health Physician/Nursing Advisor, in my opinion you will not provide regular and efficient service and you are not capable of fulfilling the terms of your employment contract. I have considered the impact of your continued sickness on the service, and the mitigation in terms of \_\_\_\_\_ put forward by your representative. Having done so I have concluded that the Council can no longer keep your job open.

Regrettably I have decided to terminate your services from the Council for reasons of lack of capability due to your continued long term sickness absence. You are entitled to \_\_\_\_\_ notice. Therefore your last day of service will be \_\_\_\_\_



You have the right of appeal against this decision. If you wish to exercise this right, you should lodge your appeal in writing to the Assistant Chief Executive Human Resources within 10 working days of the date of this letter. Your grounds of appeal must be clear and specific and can be raised on one or more of the following grounds.

You may have considered that I wrongly assessed:

- the record and pattern of your absence throughout your employment.

You may feel that I did not take account of, or did not take adequate account of:

- any underlying medical condition you may have
- the likelihood of a change in your attendance at work
- the extent of the problems caused by your absence from work

You may contend that:

- the long term sickness procedure was not properly followed
- the evidence presented at the Review Meeting did not support my conclusion
- the decision to terminate the employment was too severe in the circumstances
- new *medical* evidence has come to light

You must give full details of your reasons for appealing. It is not sufficient to list the grounds of appeal. The Hearing Officer will consider your grounds of appeal, and whether the decision of the Review Meeting was reasonable in the light of all the circumstances of the case.

Yours sincerely

Chair of the Review Meeting

cc: Directorate Personnel Team  
Trade Union representatives

**LONG TERM SICKNESS - APPEAL AGAINST DISMISSAL GUIDANCE LETTER**



(Name)  
(Address)

Please ask for:

Telephone direct on: (01708) 43

Fax: (01708) 43

Switchboard: (01708) 434343

email:

**Private and Confidential**

Date:

Dear ,

**Procedure for managing sickness absence - against dismissal**

I refer to the third sickness review meeting which was held on (*Date*), in which it was the decision of the chair of the sickness review meeting to terminate your service with the Council on the grounds of *your* lack of capability. This decision was detailed to you in a letter dated \_\_\_\_\_, a copy of which I attach for your attention.

You subsequently *on (Date)* lodged an appeal against the decision of the Chair under section 9.1 of Havering's procedure for managing sickness absence: (Copy enclosed for your information).

Your appeal will be heard by (*Insert name*) on (*Date*), at (*Time and Venue*). You may, if you wish, be accompanied by a trade union representative or work colleague.

Both you and your representative will be given the opportunity to answer points raised and to present evidence to the Appeal Hearing Officer. Please let me have a copy of any documentation you wish to submit at least one week before the date of the hearing.

Should you wish to discuss this matter further or any related issues, please do not hesitate to contact me.

I would be grateful if you could confirm that you are able to attend the appeal.

Yours sincerely,

Manager

cc. Directorate Personnel Team

Enc. Process

Appendix 19

**LONG TERM SICKNESS - OUTCOME OF APPEAL AGAINST DISMISSAL  
GUIDANCE LETTER**



(Name)  
(Address)

Please ask for:  
Telephone direct on: (01708) 43  
Fax: (01708) 43  
Switchboard: (01708) 434343  
email:

**Private and Confidential**

Date:

Dear ,

**Procedure for managing sickness absence - Outcome of appeal against dismissal**

I am writing to inform you of the decision of the Appeal Hearing Officer who considered your appeal on \_\_\_\_\_. The Appeal Hearing Officer considered your appeal against the decision of the Chair of the Review Meeting, to terminate your services on the grounds of (*lack of capability, - specify what the incapability is*) due to your long term sickness absence.

The Appeal Hearing Officer, advised by the Assistant Chief Executive Human Resources (or delegated representative) examined your grounds of appeal, and heard representations, made by you and your representative, followed by those of the Chair of the Review Meeting. Having given careful consideration to the oral and written submissions, the Appeal Hearing Officer decided:

(*insert the appropriate decision*)

1) to overturn the decision to terminate your employment, and to substitute their own decision as follows:

- to review your case on (insert the date)  
pending (insert appropriate decision)

**or**

- to reinstate you to the Council's employment, with immediate effect subject to the following conditions (*insert as appropriate*)

**or**

- to ask the Chair of the Review Meeting to further investigate whether alternative employment is available. The Appeal Hearing will be reconvened on (*insert the date*) to consider whether or not redeployment has been feasible and what further action to take.

**or**

2) that the decision made by the Chair of the Review Meeting to terminate your services was reasonable, and therefore correct in the circumstances. I confirm that your last day of service was (*Date*).

The decision of the Appeal Hearing Officer is final and there is no further internal right of appeal.

Assistant Chief Executive Human Resources

cc: Directorate Personnel Team  
Trade Union representative