

Ealing Council

**Managing Sickness Absence
Guidance for Managers**

21st June 2007

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1 Introduction

This guidance document supports Ealing Council's Managing Sickness Absence Policy. It contains guidelines to help managers deal with sickness absence and provides links to contractual Local and National Terms and Conditions of Service.

The overall aim of the guidance is to ensure consistency and fairness in dealing with sickness absence, with the ultimate objective to minimising sickness absence levels. The nature of sickness absence is such that employees must be treated sensitively and objectively and full consideration is given as appropriate to individual circumstances.

The guidance document is not a definitive statement on managing sickness absence and must be read alongside relevant Local and National Terms and Conditions of Service and other provisions, including the Good Management Guide on the Employment of Disabled People and the Health and Safety Policy and handbook. A number of supporting annexes are referred to throughout the guidance, which can be obtained from the Intranet or Human Resources department, on request.

This document has been developed in consultation with managers and Ealing Council's recognised trade union representatives. The Director of Human Resources will approve changes required by new legislation and consult regarding changes involving best practice recommendations and key performance indicators.

Further advice and support on managing sickness absence is available from your HR contact.

2 Role and Responsibilities in Management of Sickness Absence

2.1 Line Manager Responsibilities

2.1.1 All managers are responsible and accountable for managing and monitoring sickness absence. In respect of any employees they manage, all managers are responsible for:

- Using the guidance to ensure consistency and fairness, as well as to highlight any potential sickness absence problems at the earliest stage, ensuring that problems are not allowed to drift.
- Reading and making sure they understand the Council's managing sickness absence policy and guidance, prior to initiating any action relating to an employee's sickness absence.
- Ensuring that employees are treated sensitively and objectively and that full consideration is given as appropriate to the individual circumstances of each case and any work, personal or domestic related issues that may be related to their sickness absence.
- Recording the employee's attendance and ensuring that sickness absence is correctly notified to the Payroll section, to ensure the timely process of sick pay where eligible and for the information to be used for monitoring sickness absence rates internally and externally.
- Maintaining regular contact with an absent employee to see how they are, determine the reason for sickness absence and the likely date of return to work, if known.
- Conducting return to work discussions, as appropriate, when an employee returns to work from all sickness absences.
- Taking or initiating action, in consultation with the Human Resources department, if the employee's level of sickness absence is of concern and following the process through.
- Ensuring that the employee understands and is fully aware where the procedure on managing sickness absence is being applied, especially if the employee's employment is at risk.
- Making a confidential record of meetings where sickness absence is discussed.

2.2 Employee Responsibilities

2.2.1 High attendance levels form an essential part of Ealing Council's contract of employment with all its employees. All employees covered by the scope of the managing sickness absence policy are responsible for:

- Complying with the managing sickness absence policy and guidance, seeking advice or clarification from their manager on any aspects of which they are not clear.
- Notifying their manager of any work related issues that are affecting their health.
- Ensuring as appropriate, that their manager is aware of any personal or domestic issues that may be affecting their health and consulting them on what the Ealing Council may be able to do to assist attendance.
- Notifying their manager when they are sick and submitting the appropriate written confirmation in accordance with the sickness absence reporting procedures.

- Keeping their manager informed of the nature of the illness, progress and likely return to work date, if known, by maintaining regular contact.
- Attending any meetings as required by their manager to discuss their welfare and sickness absence.
- Participating in any necessary medical examinations as required by their manager, subject to the provisions of the Access to Medical Reports Act 1988.
- Not abusing the provisions for sick pay and leave, ensuring that where provisions for leave are provided for reasons other than the employee's ill health, (for example, special leave, parental leave, family emergencies) those provisions are utilised as appropriate.

2.2.2 In all cases of sickness or injury that necessitates taking time off work, it is expected that the employee will do their utmost to facilitate a speedy return to fitness and to work. An employee who is absent from work due to injury or sickness, is expected not to: -

- Undertake any work or other employment, whether paid or unpaid.
- Participate in activities that could aggravate the illness or injury, or delay recovery.
- Attend college or a course of study unless this has been agreed with their manager.

Abuse of the sickness scheme will be dealt with under the disciplinary procedure.

2.3 Role of Human Resources department

2.3.1 The responsibilities of the Human Resources department are to:

- Ensure, in conjunction with managers, that the guidance is correctly applied.
- Receive self-certificates and doctor's statements from managers, process sick pay where eligible and generate sickness absence monitoring information.
- Provide advice to managers on the handling of any sickness related matter as requested.
- Advise on the appropriateness of initiating the Medical Capability Review procedure (including attending and advising the chair person at meetings and checking letters/documentation).
- File formal actions taken on the employee's personal file.
- Review the operation of the managing sickness absence policy and guidance on a regular basis.

2.4 Role of the Occupational Health Unit

2.4.1 It is the role of the Occupational Health Unit to:

- Give medical advice on the health and fitness of prospective candidates and employees in accordance with the Access to Medical Reports Act 1988.
- Undertake medical examinations where appropriate when there are concerns about an employee's health.
- Advise on long term effectiveness of individuals suffering serious conditions or recurring illness or employees with poor sickness records.
- Recommend reasonable adjustments, support for employees on long term sick leave and the appropriateness of medical redeployment.

- Give advice when ill health retirement is being considered and issue permanent ill health retirement certificates required by the Local Government Pension Scheme regulations.

2.5 Support and Resources for Employees

2.5.1 Ealing Council provides advice and guidance on health, safety and welfare issues through the corporate and departmental Health and Safety teams and full-time Employee Well being Officer. It is the role of health advisors to advise on health and safety issues, including how to conduct risk assessments, advising on investigating accidents at work and providing advice and a range of initiatives on healthy lifestyles. Further details are available from the Council's Intranet, by clicking on Working in Ealing, Health and Safety, or by telephone or appointment.

2.5.2 The Council provides a 24-hour employee helpline. An independent company called Care First Counselling and Information currently provides this. Employees and their immediate family members can ring the employee helpline on telephone: 0800 174 319 for professional, confidential counselling, help and information services for work or personal issues 24 hours a day.

2.6 Right to Representation

2.6.1 Employees have increasing rights to representation throughout the management of sickness absence, either by a colleague or Trade Union representative as set out below: -

- An employee is not normally entitled to be represented and/or accompanied to Return to Work discussions.
- Employees may choose to be represented and/or accompanied at an initial meeting or sickness absence review meetings with their manager where concerns about their level of sickness absence are discussed (See Section 12.2).
- If a second review meeting is required, it is good practice for the employee to be represented and/or accompanied where the likely outcome of the meeting leads to the Medical Capability Review procedure being initiated.
- Employees have a statutory right to be represented and/or accompanied at all stages of the Medical Capability Review procedure.

2.6.2 There is no right to legal representation. Where an employee wishes to be represented or accompanied by someone other than a work colleague or Trade Union representative, managers must seek advice from HR. For example, in exceptional circumstances, an external advocate such as a mental health worker may be allowed at the discretion of the manager.

2.7 Confidentiality

Sickness absence and medical records are confidential and must be retained in accordance with the requirements of the Data Protection Act 1995. Managers are responsible for holding any records in the strictest confidence. To maintain confidentiality, all related documents must be in sealed envelopes marked private and confidential when transmitted between departments. Information retained for local records must stored securely and electronic records password protected. Information

regarding an employee's sickness absence must be kept confidential, and colleagues within teams must be notified on a need to know basis only. For example, if a member of a team is on sick leave, the team may be notified of the employee being absent due to ill health and the likely length of the absence, if known. However, the reasons for the absence would not necessarily be communicated other than to relevant managers and the Human Resources department.

2.8 Record Keeping

Managers must retain individual records for each employee including all types of absence from work and sickness reasons. Accurate record keeping will enable the manager to know of an employee's situation at any given time and ensure all employees are managed fairly and consistently. This includes any records made available to managers by employees, through the Occupational Health Unit or former employers during the recruitment process. Human Resources will maintain records of sickness absence dates and reasons classified on the Sickness Absence Notification Form (PD26) and any correspondence on an employee's personal file.

3 Appointment, Induction and Probation

3.1 Appointment

- 3.1.1 Offers of employment with Ealing Council are subject to completion of a pre-employment medical questionnaire, fit to work statement from the Occupational Health Unit and satisfactory receipt of references; which asks about the number of days lost through sickness absence in the previous two years.
- 3.1.2 Where a reference shows a high level of sickness absence, consistent with any one or more of the trigger points described in Section 8.2, the recruiting manager in conjunction with the Recruitment Advisor must seek information from the applicant about their reported sickness absence levels. Managers must handle questions relating to health and attendance sensitively to avoid any claims of discrimination. For example, on the grounds of gender by discounting revelations of pregnancy, or disability related absences that may breach discrimination legislation.
- 3.1.3 Managers must take care in using pre-employment screening information to reject a prospective candidate without enquiring into the reasons underlying any absences reported. Further guidance on the recruitment process is available on the Council's Intranet or from the Human Resources department.

3.2 Induction and Probation

- 3.2.1 All new employees 'probationer(s)' serve a minimum probationary period of six months following their appointment and all internal appointments 'inductees' are subject to a six month performance review period, except for assimilations, redeployments and medical redeployments, which are covered by other arrangements. Managers must explain to all probationers and inductees the following:
- At the earliest opportunity in the first week of induction explain the sickness absence reporting procedures.
 - Inform them of any specific arrangements that apply in their units or sections with regards to sickness absence reporting, for example, who to contact and report sickness absence to in their absence.
 - Explain that attendance levels are closely monitored during the probationary or performance review period and are a criterion in determining whether they can be confirmed in post.
 - Check after the first eight weeks of the probationary/performance review period and after three months that employees understand their contractual obligations.
- 3.2.2 If there have been any periods of absence through any reason in the first six months of probation or following action under the probationary staff work review procedure, the manager may extend the probation period, before the end of the six month period (up to a maximum of twelve months in total). Detailed procedures on Appointment and Probation are contained in the Local Terms and Conditions of Service, Part 2 and 3, paragraph 2.0. Managers must give due regard to the requirements of the Disability Discrimination Act 1995, where appropriate (See Section 9 for general guidance).

4 Reporting Sickness Absence

4.1 Reasons for Reporting Sickness Absence

4.1.1 All sickness absence of one day or more must be reported to the Payroll Section of the Human Resources department. It is the responsibility of managers to ensure that their employees follow the correct notification procedures and that sickness is reported promptly.

4.1.2 It is important that accurate sickness absence is reported so that:

- The Payroll Section can record all sickness absences on the payroll system within one month of it being reported, before the closedown of the payroll system for that month (usually around the middle of the month).
- Employees' entitlements to sick pay can be correctly calculated and statutory sick pay offset as appropriate.
- Decisions on action regarding individuals' levels of sickness absence can be made promptly, based on accurate information.
- The operational impact of sickness absence can be monitored and action taken as appropriate
- Any legal obligations on the Council can be properly and promptly fulfilled i.e. under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1985 (RIDDOR).

4.1.3 The sickness absence information is used to:

- Provide periodic reports to management teams responsible for monitoring sickness absence levels across the Council, at individual and team level as appropriate.
- Analyse sickness absence rates, reasons and the cost of sickness absence.
- Enable comparative analysis internally and externally with other organisations and departments.
- Set and monitor targets for improvement.
- Take appropriate action as necessary.

4.2 General Rules:

- Sickness absences of seven calendar days or less must be certified by the employee and the manager the Sickness Absence Notification Form (PD26).
- Sickness absences of eight calendar days or more must be supported by one or more doctor's certificates.
- Where the circumstances warrant it, the manager may insist on a doctor's certificate for sickness absences of less than eight calendar days (See 4.6 for guidance on First Day Certification).
- All part day sickness absences should be recorded on the monitoring forms used within the section. This will then enable the manager to identify any local/departmental pattern of part day sickness absences. However, part days' sickness absences are not currently counted in the Council wide monitoring statistics. The Sickness Absence Notification Forms should only be used for recording whole day sickness absence.
- Sickness absences that start and finish either side of non-work days (weekends, public and privilege holidays and, in the case of employees working part-time, other non-work days) are assumed to include those non-work days. For example:

- Someone who is ill on a Friday and Monday must report on the Sickness Absence Notification Form that they were ill for four calendar days.
- Someone who works part-time Monday to Wednesday is ill on Wednesday and on the following Monday. They must report on the Sickness Absence Notification Form that they were ill for six calendar days.
- Someone who works part-time Monday to Wednesday is ill on Wednesday and on the following Monday to Wednesday. They must have a doctor's certificate to support a sick absence of eight days.

4.3 Core Conditions and Procedures for Sickness Absence Reporting

- 4.3.1 The core **conditions of service for sickness absence reporting** are contained in the Local Terms and Conditions of Service, Part 2, 12.2, which state:
- *If unfit for work, employees must report their absence as early as possible to their designated manager. Employees are expected to state that they are unable to work, the reason why and the expected date of return to work on the first morning of sickness within one hour of their normal start time.*
 - *Employees who for reasons of medical confidentiality do not wish to contact their manager must adhere to the reporting procedure but may make the report to the Occupational Health Unit who will pass on sufficient detail to enable the manager to deal with the absence situation and any other implications. All information relating to an individual employee's sickness absence is strictly confidential and may only be accessed and/or used by authorised staff for legitimate management purposes.*
 - *Employees who do not follow the procedures for sickness absence reporting will lose their right to contractual sick pay and may lose their right to SSP (Statutory Sick Pay).*
- 4.3.2 The **detailed procedures for sickness absence reporting** are contained in the Local Terms and Conditions of Service, Part 3, Paragraph 12.1, which state:
- *All employees who are unfit for work must follow the sickness absence procedure as outlined below.*
 - *Employees who are unfit for work must telephone (or otherwise contact) their designated manager on the first day of their absence normally before 10:00 am and state: the first day they became ill; the nature of the illness and; the expected date of return;*
 - *Employees must then telephone (or otherwise make contact) again on or before the fourth day if they are still unfit for work;*
 - *These notification times may be varied for employees who work non-standard hours. The designated manager must notify all employees of the specific arrangements which apply in their units or sections.*
 - *Employees who for reasons of medical confidentiality do not wish to contact their manager must adhere to the reporting procedure but may make the report to the Occupational Health Unit who will pass on sufficient detail to enable the manager to deal with the absence situation and any other implications.*
 - *Employees must try to make the telephone call themselves unless they are genuinely unable to do so, in which case someone can telephone on their behalf. Whoever does this must be able to provide the information as requested on the PD26 form. Doctor's certificates must be sent to the designated manager to cover all periods of absence of eight days or more.*

- *Employees must report to their designated manager immediately on the day they return to work and complete the appropriate section of the notification of self-certification form (PD26) providing all the information requested on the form. Employees who are not the designated manager of the person reporting sick should note the details and notify the employee's designated manager as soon as possible. Notification of sickness absence forms should be sent to the Payroll Section (Perceval House, 4th Floor, North West, Orange area) as set out in the table below:*
- *Table of sickness absence reporting:*

Day of absence	Form to be completed	To be completed by
<i>First</i>	<i>White</i>	<i>Designated manager, or other person receiving the phone call.</i>
<i>Fourth</i>	<i>Pink</i>	<i>Designated manager, or other person receiving the phone call.</i>
<i>On return to work</i>	<i>Blue</i>	<i>Designated manager for absence of 3 days or less. Employee for absences of 4 -7 days, or first 7 days of longer absences.</i>

- *Medical certificates must be recorded on the back of the blue copy and sent to the Payroll section immediately.*

4.3.3 The **Local Government National Conditions of Service**, Part 2, paragraph 10 and Part 3, paragraph 4 (the Green Book) also contains details of the Sickness Scheme. This requires employees to submit a final doctor's statement to the manager, as to fitness to resume duties, if the first doctor's certificate covers a period exceeding 14 calendar days or where more than one certificate is necessary, before returning to work. The full extracts are reproduced for reference and appended in **Appendix 1**.

4.4 Additional Guidance for Employees on Sickness Absence Reporting

4.4.1 The employee, if they need to take sickness absence must:

- Make every reasonable attempt to speak to the manager when reporting that they will be absent due to sickness. If the manager is not there they must leave a message for the manager to contact them. If the manager is absent for the day, the employee must telephone the manager's manager or a nominated alternative as per local arrangements, which apply in the unit or section.
- Arrange for a friend or relative to make contact where it is not possible to speak to the manager directly.
- In the case of medical appointments, every effort must be made to arrange these outside of core/normal working hours. Where this is not possible, arrangements must be agreed in advance with the manager.
- When sickness absence is reported, remember to make an appointment with the doctor in advance of the eighth calendar day if the sickness absence is likely to continue, to ensure the doctor's certificate is received before or by the eighth day, whichever is earlier.
- Ensure the manager is aware if the sickness is considered the result of an accident at work or whether a third party was involved.

- During any prolonged period of sickness absence, keep in regular contact with the designated manager to keep him or her up to date of the position regarding the sickness absence and to plan the return to work.
- Report any accident at work if it is considered to relate to the sickness absence immediately (See Section 5 on Accident Reporting and Injuries).

4.5 Additional Guidance for Managers on Recording and Reporting Sickness Absence

4.5.1 On the first day:

- Enquire sympathetically into the nature of illness.
- Note the time, date, reason and likely duration.
- Ascertain any work the employee will miss and make appropriate arrangements to cover work.
- Establish the steps that the employee is taking to mitigate effects of illness.
- Note contact details if employee is staying elsewhere during illness.
- Complete Part One of the Sickness Absence Notification Form (white sheet).
- Update local attendance record sheet in preparation for completion of the monthly Staff Return sheet for Payroll purposes.

NB: Where the manager did not take the telephone call when the employee reported in sick, s/he may ring the employee to express concern and offer support (this call must not be used to pressure the employee into returning, it is for support only). The contact should be focused on the employee's health, well-being and return to work date. This is to ensure the employee is not isolated and will also allow the manager to keep up to date with the employee's state of health and progress and his or her perspective on the likelihood of a return to work and to organise and maintain temporary cover more effectively.

On or before the fourth day:

- Enquire sympathetically into nature of illness, probable duration and expected date of return to work.
- Complete Part Two of the PD26 Sickness Absence Notification form (pink sheet).
- Update local attendance record sheet in preparation for completion of the monthly Staff Return sheet for Payroll purposes.

On the eighth day:

- Record receipt of doctor's statement on the back of the PD26 Sickness Absence Notification form.
- Make a confidential copy for local records.
- Forward the doctor's statement to Payroll Section immediately.

For continued sickness absence:

- Continue to forward any subsequent doctor's statements to the Payroll department.
- Update local attendance record sheet and monthly Staff Return sheet for Payroll purposes.

On return to work:

- Conduct a Return to Work discussion (See section 7)
- Ensure Part Three of the Sickness Absence Notification Form (PD26) is completed

4.6 First Day Certification

Managers may consider the requirement for an employee to supply doctors certificates from day one of all future sickness absences in cases of **continued frequent short term sickness absences (not covered by a doctor's certificate) or in cases of persistent failure (on two or more occasions) to comply with the Sickness Absence Reporting Procedures.** First day certification normally applies where sickness absences are described as sporadic, minor and unconnected ailments. Managers must give due regard to the requirements of the Disability Discrimination Act 1995, where appropriate (See Section 9 for general guidance) and take care in cases of pregnancy related sickness absence (See Section 10 for general guidance).

Managers must hold an initial meeting with an employee to express concern about the level of frequent short term sickness absence (See Section 12.1) to establish there are no specific underlying medical causes. The manager must indicate to the employee that if there is no improvement in attendance levels or persistent failure to comply with Sickness Absence Reporting Procedures, the requirement to supply doctors' certificates from day one of all future sickness absences will be considered. The manager must ensure any necessary supportive action is taken as appropriate before the first day certification requirement is put in place. The employee should be informed that close monitoring of attendance will continue on an ongoing basis and reviewed in three months.

After the review period, the manager must arrange to meet with the employee again. If there has been no adequate improvement, the manager must inform the employee their continued level of sickness absence is still not acceptable and a doctors' statement is now required from day one of all future sickness absences. A reasonable time frame must be set to review the requirement for first day certification up to a maximum of twelve months. Any action taken must be confirmed in writing to the employee. Where an employee is required to provide doctors statements for any periods of sickness absence of less than eight days, the manager must inform the employee that any costs, (for which a receipt must be obtained), will be reimbursed through the Staff Expenses claim form (which can be downloaded from the Council's Intranet or by contacting the Payroll Section). The manager must inform the employee that they will not be paid for any day not covered by a doctor's statement and payment will not be made retrospectively unless there are extenuating circumstances. The manager must advise the employee to contact them if there are any difficulties in complying with these requirements

5 Accident Reporting and Injuries

5.1 Accident Reporting

- 5.1 Employees must notify their manager of all details of any accident, incident, assaults; near misses and dangerous occurrences at work immediately or at the earliest opportunity. All accidents arising out of or in the course of work must be reported on an Accident Report Form F2508.
- 5.2 The Core Conditions and Detailed Procedures on Accident Reporting are contained in the Local Terms and Conditions of Service, which have been reproduced and appended in **Appendix 2**.
- 5.3 In relation to sickness absence, employees are responsible for ensuring any sickness absence arising from an accident is notified on the first day and recorded on the Sickness Absence Notification Form (PD26).
- 5.4 The manager is responsible for completing the Accident Report Form, obtaining the employee's countersignature and notifying the Health and Safety section of the Human Resources department. The manager must then undertake an investigation, in conjunction with Health and Safety Advisors. If the accident or injury is serious, the Corporate Health and Safety team must be contacted by the quickest means and an advisor will help the manager undertake the investigation, which may involve preserving the scene of the accident for the Health and Safety Executive Inspectors or Police authority and advice on the next steps.
- 5.5 The Health and Safety Advisor will be able to advise the manager regarding reporting the information as required to the Health and Safety Executive, using the official RIDDOR form 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995'. For further guidance on reporting and investigating accidents, see the Council's Intranet, Working in Ealing, Health and Safety section or contact them in person/by telephone.
- 5.6 If appropriate, guidance on Reporting Racist Incidents and a form is available on the Council's Intranet or on request from the Human Resources department.

5.2 Injuries

- 5.1 Managers must report to the employing Service Director the cases where there appears to be an industrial injury.
- 5.2 The Service Director must report all cases to the Director of Human Resources, who has delegated powers to decide whether to make discretionary payments, in respect of industrial injuries. (See Intranet for Work related injury/illness policy and process).
- 5.3 The Director of Human Resources is responsible for providing periodic reports of all industrial injury cases to the Executive Director of Corporate Resources.

6 Sickness Payment Scheme

6.1 Sick Pay

- 6.1.1 Ealing Council applies the Local Government National Conditions of Service (the Green Book) Sickness Scheme, Part 2, paragraph 10. (Full details are provided in **Appendix 1**) The basic entitlements are also contained in the Local Terms and Conditions of Service, Part 2, paragraph 12.3.1 and Part 3, paragraph 12.2.1. The table of entitlements is reproduced below for ease of reference.

During 1 st year of service	1 month's full pay and (after completing 4 month's service) 2 months half pay
During 2 nd year of service	2 months full pay and 2 months half pay
During 3 rd year of service	4 months full pay and 4 months half pay
During 4 th and 5 th 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

- 6.1.2 Any requests to extend the period of sick pay in exceptional circumstances, must be referred to the Director of Human Resources, who is responsible of the extension of entitlement to sick pay in accordance with the Council's Constitution, part 8, paragraph 6.3 2.
- 6.1.3 Sick pay is only paid where the sickness absence reporting rules are followed. Managers must ensure that all doctors' statements are processed promptly. If a certificate is submitted late or only covers a proportion of the total sickness absence, then sick pay may only be paid from the date the certificate is received and only for the remaining period covered by the certificate. In each case, the manager must examine the reason(s) for the late submission, i.e. delay in the post, unable to get a doctor's appointment etc and s/he should exercise discretion. If sick pay has been withheld then the employee must be informed in writing.

7 Return to Work discussions

Managers must conduct a Return to Work discussion every time an employee returns from a period of sickness absence. The Return to Work meeting is an essential part of managing sickness absence and one of the most effective methods in managing sickness absence. The meeting provides for an early opportunity to show concern for the employee, highlight the importance of regular attendance at work and if tackled quickly, can save time and avoid the need to progress to formal meetings. The Return to Work meeting demonstrates the manager is aware of the absence, cares about the employee and reinforces the importance of regular attendance at work.

7.1 Conducting the Return to Work discussion

In all circumstances the Return to Work discussion must take place in private and be handled sensitively and supportively. In normal circumstances and wherever possible, the Return to Work discussion must be conducted by the employee's manager. There maybe circumstances where, at management discretion, the discussion may take place with a peer of the manager. This will be at management's discretion and would normally occur where the manager is not available or where the employee, due to the nature of their illness requests that the discussion take place with someone of their own gender. In all circumstances, a note of the meeting should be made and advice sought from HR prior to and or after the meeting as appropriate. A sample Return to Work form is appended in **Appendix 3**.

The Return to Work discussion may vary from a five minute chat after a short period to a more substantial meeting for someone returning from a longer period of absence. Where there are concerns about the employee's absence, which may lead to formal action in the future (e.g. due to the length/frequency of the sickness absence) a note of the discussion, must be made.

Where it is not possible for the meeting to take place on the day the employee returns to work, the manager must arrange an alternative time/date to hold the meeting as early as possible.

7.2 Purpose of the Return to Work discussion

In general, the purpose of the Return to Work discussion is to:

- Let the employee know that they have been missed.
- Check that the employee is fit to return to work and to offer any help (Employee Assistance leaflet, referral to Occupational Health) that maybe appropriate.
- Establish the reason for the sickness absence.
- Determine whether any underlying work, domestic or welfare problems related to the sickness absence.
- Identify any problems that might cause a recurrence of further sickness absence.
- Update the employee on developments during the sickness absence.
- Review the employee's sickness absence record to see if further action maybe appropriate, (in which case notify the employee a separate meeting must be arranged at a later date to discuss the matter (See Section 8 on Monitoring and Reviewing Sickness Absence).

- Complete the Sickness Absence Notification form (PD26) and ensure that the sickness absence is correctly notified to the Payroll Section.

Where employees are returning to work following a long term period of sickness absence (i.e. more than two calendar weeks), depending on the length and reason for the absence additional consideration should be given to:

- Arrangements for inducting the employee back into the work place
- Any additional support that may be required to assist the employees return
- Whether, depending on the circumstances of the case, there is a need for temporary adjustments to working conditions in order to facilitate the employee's return (See Section 9 on the Disability Discrimination Act 1995 and Sickness Absence and Section 14 on Phased Return to Work).

There may be occasions when, following the Return to Work discussion there is no evidence to suggest that the Sickness Absence is related to ill health. In these circumstances it may be appropriate, in consultation with Human Resources, to conduct further investigation e.g. disciplinary, to determine whether or not any action may be appropriate. If misconduct is suspected, inform the employee that the meeting needs to be discontinued and a separate meeting will be convened if appropriate after seeking advice from Human Resources.

8 Monitoring Sickness Absence

8.1 General Considerations

Managers must regularly monitor the levels of sickness absence within their section and identify sickness absence problems as soon as they occur. To manage sickness absence effectively, trigger points for frequent short term and long term sickness absence are specified below. Where sickness absence reaches any of the trigger points, managers must review individual attendance records and consider whether or not action is required as set out in the remainder of the guidance document.

Advice should always be sought at an early stage from Human Resources and the Occupational Health Unit (See Section 11) when managing individual cases of sickness absence. In all cases where the manager is fully aware of the particular circumstances of the sickness absence and satisfied that no action should be taken, a record of this should be made on the local attendance record sheet.

There are circumstances where a manager may disregard a level of sickness absence when considering whether any action needs to be taken. For example, this may include instances of: -

- Disability related sickness absence (See Section 9 for general guidance)
- Hospitalisation
- A pregnancy related illness (See Section 10 for general guidance)

Employees who are diagnosed as having a terminal illness should be exempt from the guidance and specific advice on all cases must be obtained from Human Resources.

8.2 Trigger points

The trigger points for frequent / short term sickness absence are: -

- Absence for a whole day or more on three or more occasions in a three month period.
- Continuous absence for more than seven working days.
- Seven working days absence within a rolling year.
- Pattern of absences, for example, part days or regular absences linked to periods of annual leave, public holidays or particular day(s) in the week or period(s) in the year.

Refer to Section 12 for dealing with frequent / short term sickness absence

The trigger point for long term sickness absence is: -(See Section 13)

- Ten continuous working days or more

Refer to Section 13 for dealing with long term sickness absence

9 The Disability Discrimination Act 1995 (DDA) and Sickness Absence

- 9.1 The Managing Sickness Absence Guidance applies to all employees. When it comes to disabled employees, managers must discharge their responsibilities in respect of the Disability Discrimination Act 1995 (DDA). The DDA requires managers to consider and make reasonable adjustments to disabled employees' working arrangements or conditions to make sure they are not at a substantial disadvantage to other non disabled employees and or treated less favourably than those other employees. The guidance to follow provides an outline of the key issues managers must consider in discharging their responsibilities under the DDA. Managers must consult the full guidance, which is contained in the Council's Good Management Guide on the Employment of Disabled People, which is available on the Intranet, or from the Human Resources department on request.
- 9.2 For the purposes of the DDA, a person has a disability if they have a 'physical' or mental impairment, which has a substantial and long term adverse effect on their ability to carry out normal day to day activities'. The effect of impairment is long-term if it has lasted, or is likely to last for at least a year or for the rest of the life of the person affected. The employee's ability to carry out normal day to day activities can be adversely affected in one or more of the following ways: mobility; manual dexterity; physical co-ordination; continence; ability to lift, carry or otherwise move everyday objects; speech; hearing or eyesight; memory or ability to concentrate, learn or understand; or perception of the risk of physical danger. If the impairment ceases to have a substantial adverse effect on the person's ability to carry out normal day-to-day activities, it is nevertheless treated as continuing to have that effect if the effect is likely to recur, for example, back injuries, multiple sclerosis. Some examples of conditions that have been held to constitute a disability for the purposes of the DDA include chronic fatigue syndrome, schizophrenia, rheumatoid, arthritis, diabetes, epilepsy, visual impairments, impaired hearing and dyslexia. The DDA 1995 (Amendment) Regulations 2003, which came into force in October 2004, extended the definition to cover progressive conditions such as HIV, multiple sclerosis, cancer and mental illness even if it is not clinically recognised.
- 9.3 Before a manager takes any action regarding an employee's sickness absence, all reasonable attempts should be made to determine whether the employee has a disability. In any circumstance where the employee believes that they may have a disability, they are encouraged to alert either their manager, the Human Resources department, the Council's Equalities Advisor or their work colleague or Trade Union representative, whom they may wish to raise the matter on their behalf, as they feel appropriate, even if they are not sure.
- 9.4 Where it is determined that an employee has a relevant disability, reasonable adjustments to working conditions of patterns may be necessary and additional consideration may be given, and exceptions made, in the application of dealing with frequent/short term and long term absence. This is to ensure that the Council fulfils its legal obligations as well as its commitment to achieve equality of opportunity for all employees regardless of disability. The manager has a duty to take the initiative in order to establish what adjustments might be possible and practical, seeking a proper assessment of the employee's condition and prognosis, the effects of the condition on the employee's ability to perform. Any adjustments must be agreed with the employee. Managers need to consider cases on an individual basis and be able to demonstrate

reasonable adjustments have been considered. Managers need to consider those sickness absences due to general ill health and those, which are directly related to an employee's disability. For example, this may involve seeking advice from the Occupational Health Unit on what level of sickness absence can be expected and any increase in the reference points for triggering a sickness review meeting where a long term condition or disability has been identified.

- 9.5 Managers must take into account medical or specialist advice and consider what adjustments would be possible and practicable to enable a disabled employee to carry on working. The manager must consult the employee concerned about possible adjustments as s/he will know more about his or her condition and its effects, and will often be able to suggest adjustments that would be helpful. Adjustments may be agreed on a temporary or permanent basis.
- 9.6 The Council's Performance Management Appraisal Process provides a good mechanism to discuss and plan for the development of abilities, including documentation where any reasonable adjustments to work, which are discussed and agreed, can be recorded. Further guidance on the Performance Management Appraisal Process is available on the Intranet, or from Human Resources on request. The Health and Safety five step risk assessment is also a proactive mechanism to identify and assess any risks to a disabled employee's health and safety and to determine and put in place appropriate measures to prevent or reduce those risks. Guidelines on how to carry out risk assessments are available on the Intranet of Health and Safety section on request.
- 9.7 The DDA specifically identifies the provision of leave for "rehabilitation, assessment or treatment" for employees who have disabilities as reasonable adjustment. Reasonable time off should be provided to undertake any of the following:
- Rehabilitation for someone who is (for example) newly disabled or whose condition has changed significantly.
 - Routine assessment of hearing aids or other aids etc
 - Hospital or specialist check ups (including monitoring or related equipment or treatment)
 - Such reasonable time off will not be counted as sickness absence if it is supported by appropriate documentation/confirmation.

Other forms of reasonable adjustment may include:

Examples of adjustments to working arrangements:

- Allowing a phased return to work;
- Changing individual's working hours;
- Providing help with transport to and from work;
- Arranging home working, providing a safe environment can be maintained.

Examples of adjustments to premises:

- Moving tasks to more accessible areas;
- Making alterations to premises.

Examples of adjustments to a job:

- Providing or modifying existing equipment and tools;
- Modifying work furniture;
- Providing additional training;
- Modifying instructions or reference manuals;
- Modifying work patterns and management systems;
- Arranging telephone conferences to reduce travel;
- Providing a buddy or mentor;
- Providing supervision;
- Reallocating work within the employee's team;
- Providing alternative work.

NB: This is not an exhaustive list.

- 9.7 Specialist advice in respect of managing sickness absences directly relating to disability can be sought from the Council's Equalities Advisor or the Legal department. External advice on assessing disability and exploring possibilities for appropriate and practical adjustments can be obtained from the Disability Employment Advisor, contactable through the local Job Centre, who can advise on financial assistance available through the Access to Work Scheme or other national organisations such as the Disability Rights Commission.

10 Pregnancy Related Sickness Absence

- 10.1 Managers must take particular care when dealing with sickness absence arising from an employee's pregnancy. The managing sickness absence guidance should still be followed, but consideration must be made for sickness absences that are pregnancy related. Full details relating to the Maternity Leave scheme are contained within the Local Terms and Conditions of Service, Part 2, paragraph 11.6.
- 10.2 There are specific regulations that protect the health and safety of new and expectant mothers. This includes the need to undertake risk assessments at the point at which the employee notifies the manager that she is pregnant and as required throughout the remainder of the pregnancy. This is to identify and assess any risks to the employee's health and safety and to determine and put in place appropriate measures to prevent or reduce those risks. Guidelines on how to carry out risks assessments are available on the Intranet of Health and Safety section on request. Where unsure, or if there is a particular concern about sickness absence that is pregnancy related, managers may wish to seek the advice of the Occupational Health Unit.
- 10.3 Sickness absence that is pregnancy related is recorded separately from other sickness absence on the Sickness Absence Notification Form (PD26).
- 10.4 Maternity leave commences on the first day of any period of sickness absence related to the pregnancy, which occurs within the period starting at the fourth week before the expected week of confinement. If an employee who is pregnant becomes ill, during her pregnancy and the sickness absence is not pregnancy related this should be treated as standard sickness absence.
- 10.5 If an employee is unable to return to work from maternity leave on the expected day due to sickness, she must report the absence in accordance with the normal sickness absence reporting procedures. This will then be covered by the sickness scheme in the normal way.

11 Referral to Occupational Health

11.1 Management Referrals

Where there are concerns about an employee's level of short term/frequent or long term sickness absence, managers can refer the case to the Occupational Health Unit. Managers may refer an employee's case to the Occupational Health Unit at anytime, whenever an occupational health opinion would be helpful. For example, on matters related to the Disability Discrimination Act. Referral of a case does not preclude the steps in this guidance from being initiated. Managers must notify employees where their case is to be referred.

Managers must aim to refer cases to the Occupational Health Unit at the earliest opportunity where there are concerns about an employee's level of short term absence or where the employee has been on long term sick leave for more than two weeks and/or there is no indication of a likely date of return to work.

Primarily, the aim of referring the case to the Occupational Health Unit will include obtaining confirmation of: -

- The reasons for and the likely length of the sickness absence;
- Whether the sickness absence is any way related to the employee's work or if their work is impacting on their condition;
- Whether the employee is covered by the Disability Discrimination Act 1995; and if so, any reasonable adjustments that could be made;
- Whether there are any reasonable steps that the manager can take in support of the employee's condition to improve the level of sickness absence/facilitate a return to work. (Further guidance on Phased Return to Work, see Section 14 and for Medical Redeployment, see Section 15 of this guidance document).

There may be occasions where due to the nature of the health/medical condition the manager may consider ill health retirement appropriate, or the employee, following consultation with his or her own Doctor, wishes to apply for ill health retirement. In either event the case must be referred to the Occupational Health Unit for advice. Further information on ill health retirement is contained within Section 16 of this guidance document.

The OHU does not provide a definitive assessment or diagnosis of an employee's medical condition, as they do not have full access to an employee's medical history or records. However, they will support managers to assess whether a pattern of absence is likely to be consistent with a particular medical condition or whether the available evidence suggests some underlying factor that has not yet been identified.

Managers are responsible for making decisions based upon the information and evidence provided, alongside the requirements of the role and service, including judging whether it appears to justify the level or absence, whether any action can be taken to alleviate the problem or where it may lead to formal Medical Capability Review Procedure.

11.2 Conditions of Service Relating to Medical Examinations

The Local Terms and Conditions of Service, Part 2, paragraph 12.1 provides for the following contractual obligations in respect of medical examinations:

- Employees who drive any Council vehicle on Council business must be willing to undertake an appropriate medical examination, including those required by the DVLA and the Council.
- Designated managers can request the Occupational Health unit physician to carry out medical examinations on employees returning to work following an extended period of illness if they consider that the nature of the illness could have an adverse effect on the employee's ability to perform his or her normal duties.
- Employees are required to participate in any necessary medical examinations as required by the Council, including those in accordance with any sickness absence management procedures in place at the time.

The Local Government National Conditions of Service, Part 3, paragraph 4 provides for the following contractual obligations in relation to medical examinations:

- An employee shall, if required by the authority at any time, submit to a medical examination by a medical practitioner nominated by the authority, subject to the provisions of the Access to Medical Reports Act 1988 where applicable. Any costs associated with the examination should be met by the employing authority. Where it is necessary to obtain a second medical opinion, it should be provided by an independent medical referee.

11.3 Making a Referral

Where there are concerns about an employee's health, the manager is responsible for advising the employee of the reason(s) for the referral and to make arrangements for him or her to be referred to the OHU. Managers can contact the OHU in advance for advice, for example, on any immediate (or emergency) measures they could be could consider taking, on the urgency of the appointment, and on the information which should be included in the referral form. The referral form must be specific about the reason(s) for the manager's concerns and the information/advice they are seeking. The OHU referral form can be obtained from the Council's Intranet or from the OHU on request. The manager must give the employee a copy of the referral form and advise them that further consideration will be given in the light of any advice received.

Where it is considered that it would be useful to obtain information from the employee's GP and/or specialist, informed consent will be obtained by OHU, as covered by the Assess to Medical Reports Act 1988. The employee has the right of access to the report before it is sent and can request factual alterations. It is not unusual for this process to take six weeks or longer. The OHU will arrange an appointment to consult and assess the employee and send a report with advice on the specific issues raised, to the manager, employee and Human Resources.

11.4 Circumstances in Which a Manager May Wish to Seek Medical Advice

There are a variety of circumstances where it is recommended a management referral be made without any delay:

- Pre-employment - If concerns arise during the recruitment stage about whether a person is fit to perform the duties of the job s/he has applied for.
- Health assessments - To review the health and fitness of employees who work in hazardous conditions or whose job requires a higher than usual standard of fitness.
- Reasonable adjustments - To assess what if any, adjustments would be appropriate for a prospective candidate or disabled employee to facilitate his or her appointment/employment, including cases where an employee develops a new disability or from an existing one or where one worsens.
- Notification of work related stress, accidents at work or musculoskeletal problems.
- Where an employee has taken excessive frequent short-term absences from work, to check if there is an underlying cause and where no improvement in attendance is sustained.
- As soon as a manager is notified of an employee who is going to be on long-term absence (2 weeks or more) and there is no clear date of return to work.
- Signs of mental health, alcohol or drugs related issues.
- Any serious or terminal illness, for example, heart attack, stroke or cancer.
- Assessment for ill health / early retirement.
- To assess whether an employee is well enough to attend a meeting, for example, a disciplinary interview or hearing.

11.5 Action Following the Referral Form

On receipt of the report from the OHU report and in line with the DDA, the manager must: -

- Consider the implications for the employee's work, or return to work, seeking further clarification from the OHU if appropriate.
- Arrange to discuss the report with the employee.
- Consult with Human Resources and/or seek further specialist advice, as appropriate. For example, from the Council's Equalities Advisor or Legal department.
- Formulate a plan of action with timescales.
- Advise the OHU of the outcomes and if necessary arrange a further review or monitoring.

11.6 Refusal to Cooperate in Providing Medical Evidence and/or Non-attendance at Occupational Health Appointments

If an employee refuses to co-operate in providing medical evidence or to undergo a medical examination, the Occupational Health Unit will notify the manager. The manager must contact the employee to establish the reasons for not co-operating in providing consent to apply to their Doctor for a medical report or why they failed to keep an Occupational Health Unit appointment. Subject to this, further consent may be obtained or an appointment made. The manager must notify the employee that they are required to attend the appointment in accordance with their contract of employment and that failure to do so without good reason will mean a decision about their sickness absence levels will be taken without the added benefit of any relevant medical information and on the basis of the available information. The manager must notify the employee that s/he is expected to make or attend a more convenient

appointment and failure to do so could result in action under the appropriate procedure. The manager must seek HR advice in all cases of continued failure or refusal or non attendance to consider the appropriateness of action under the disciplinary procedure.

12 Dealing with Frequent/Short Term Sickness Absence

12.1 Key Stages

The key stages in dealing with frequent/short term sickness absence involve the manager undertaking an initial review of an employee's attendance record where trigger point(s) are reached. The manager must examine the employee's attendance record to establish the frequency, duration of, and reasons for, absences and consider any other relevant information. Where the employee's attendance record is giving cause for concern, the manager must arrange an **Initial meeting** with the employee to discuss their health and any underlying concerns. As a result of the meeting, the manager may initiate a monitoring review period of 3 months and/or make a referral to the Occupational Health Unit. At the end of the monitoring review period, the manager must arrange a **Sickness Absence Review meeting** with the employee to review the level of attendance. The outcome of the meeting may lead to one of the following actions: -

- **If attendance levels improve within the 3 months**
End the monitoring process and manager informs employee if attendance levels deteriorate again within twelve months, advice will be sought from Human Resources on the appropriateness of initiating a 3 month monitoring review period or the Medical Capability procedure
- **Attendance not sufficiently improved**
Manager may consider initiating a second review period for 3 months and informs employee their job maybe at risk if attendance fails to improve at the end of the further review period.
- **If there is no improvement**
The manager must consult Human Resources on initiating the Medical Capability Review procedure, which is contained in Local Terms and Conditions of Service, Part 2 and 3, paragraph 12.6 (A copy of which is reproduced and appended in **Appendix 4**)

The requirements of the DDA must be discharged where appropriate.

12.2 The Initial Sickness Absence Review meeting

Where a sickness absence problem has been identified, the manager, with a Human Resources Advisor if necessary, must arrange an initial meeting with the employee to discuss their health and any underlying concerns about the employee's level of sickness absence. This meeting will be separate from the Return to Work meeting. The meeting should be notified to the employee in writing and they may bring a Trade Union representative or work colleague to the meeting. See **sample letter 1**. The purpose of the meeting is to provide an opportunity for the employee to respond to the manager's concerns about their level of sickness absence and to provide any information that may assist the manager in determining the appropriate course of action. A suggested format of issues to cover at the meeting is appended in **Appendix 6**.

Where there are concerns about the level of sickness absence and no underlying problems have been identified as a result of the meeting, the manager should, initiate a review period of three months. The employee should be notified close monitoring of

his/her sickness absence will take place and that an improvement in the level of sickness absence is expected during the monitoring period, particularly if there appears to be no specific health problem. A note of the details discussed and any arrangements made at the meeting should be given to the employee in writing. See **sample letter 2**.

The manager may refer the employee to the Occupational Health Unit to ascertain whether the employee's health is affecting their work or vice versa. If the medical advice indicates a continuing health problem that affects the employee's work, or is affected by it, the manager must arrange a further meeting to consult the employee about the medical advice and to consider any appropriate recommendations, including appropriate and reasonable adjustments. Clearly the manager should use their discretion and be flexible when monitoring employees who do have a specific health problem as it may be appropriate to have a longer monitoring period in order to allow for more time for the employee's health to improve. Guidance on management referrals to the Occupational Health Unit is contained in Section 7.3.

12.3 Sickness Absence Review meeting

At the end of the monitoring period the manager in conjunction with Human Resources arrange a meeting with the employee to review the level of attendance. The meeting should be notified to the employee in writing and they may bring a Trade Union representative or work colleague to the meeting. See **sample letter 3**.

If at the end of the monitoring period the employee's attendance levels have improved, **the employee should be informed that if a sickness absence problem is identified again during the next twelve months, consideration will be given to the appropriateness of a further review period or to trigger the Medical Capability Review procedure.**

If the employee's attendance levels have not improved sufficiently, the manager may consider initiating a second monitoring review period of three months. At this stage the manager must inform the employee that their job may be at risk and that the Council cannot sustain frequent absences indefinitely due to the impact it may have on service delivery. The employee must also be informed that if at the end of the further review period the employee's attendance levels do not improve sufficiently and all possible and practical steps have been taken to assist them, the Medical Capability Review procedure will be triggered. If the employee's attendance levels have not improved and the manager does not consider a further monitoring review period an appropriate course of action, they must seek advice from Human Resources to trigger the Medical Capability Review procedure. A note of the discussion and any arrangements must be made and a copy given to the employee. See **sample letter 4**. See **sample letter 5** instructing an employee to attend a Medical Capability Review meeting and **appendix 6** for a suggested format for preparing the management position.

13 Dealing with Long Term Sickness Absence

13.1 Key Elements

The guidance for dealing with long term sickness absence will not normally be initiated until after an employee has been absent from work due to ill health for at least ten continuous working days. In all cases the appropriateness of initiating action must be discussed with Human Resources. The primary aim must be to facilitate the employee's return to work at the earliest reasonable point. At the same time, it is important to bear in mind that, in extreme cases, the employee may ultimately be unable to return to work and the option to consider the termination of the employee's contract on the grounds of long term incapacity may be required under the Medical Capability Review procedure. The key elements in managing long term sickness absence includes, consulting fully with the employee at all stages, maintaining contact, seeking appropriate medical advice, facilitating a Phased Return to Work where appropriate, and reviewing options for medical redeployment and reasonable adjustments, if appropriate. Where the employee appears unlikely to return to work within a reasonable timescale, the Medical Capability Review procedure must be followed.

13.2 Procedure on Support for Employees who have Long Term Illness

The Council's procedure on support for employees who have long term illness is contained in the Local Terms and Conditions of Employment, Part 3, paragraph 12.2.2, which is reproduced below for reference: -

Support for employees who have long-term illness (defined as sickness absence of ten continuous working days or more)

- The Council is committed to supporting all employees who have long term ill health problems and to providing a flexible working environment to enable employees to return to work when they are able, or to remain at work for as long as possible. Managers will need to: -
 - i) Balance the needs of the individual:
 - a. To be allowed time to make a proper recovery;
 - b. To be supported in making a recovery and return to work and;
 - ii) The business needs of the service:
 - a. To provide services to clients/customers at the frequency and quality specified;
 - b. To meet financial obligations.
- Employees who are experiencing periods of poor health may discuss problems with their designated manager who, having taken appropriate medical advice, may propose a change in duties or other alternatives. In the case of employees who have a disability (as defined by the DDA) consideration and implementation of appropriate reasonable adjustments is an absolute requirement. This may include the following options: -
 - i) A temporary reduction in workload;
 - ii) Temporary re-allocation and distribution of a sick employee's work to others during periods of absence through sickness;
 - iii) Allocation of less stressful work and a number of other arrangements which will allow employees to continue to work in their post while recovering from illness;
 - iv) Working reduced hours.

13.3 General Framework

The guidance to follow offers a general framework for managers to ensure the necessary steps are taken to address long term sickness absence in a positive and consistent way. It is important that long term sickness absence is dealt with in a sensitive manner and consideration is given to the nature of the illness before initiating any action. The manager must take a view on a case by case basis, particularly in dealing with serious illnesses.

There are a number of related procedures and guidance which must be consulted and/or followed, where appropriate, at any stage of dealing with long term sickness absence: -

- The Good Management Guide on the Employment of Disabled People, for guidance on how to make plan and undertake reasonable adjustments. (See Section 9 of this document for a summary on the definition of disability, examples of reasonable adjustments and how to consider making adjustments).
- Making a referral to the Council's Occupational Health Unit for employee's to be examined and a medical report obtained. (See Section 11 of this guidance document).
- Planning and undertaking a Phased Return to Work (See Section 14 of this guidance document).
- The redeployment of employees on medical grounds is contained in the Local Terms and Conditions of Service, Part 2, paragraph 12.4 and Part 3, paragraph 12.3 and must be followed, where appropriate, at any stage in dealing with long term sickness absence. (See Section 15 of this document for a summary).

13.3.1 Up to Two Weeks

The manager must keep in touch and maintain contact with employees at all stages of long term sickness absence. Each case needs to be treated individually. During the first week of sickness absence, the employee is required to notify sickness absence by telephone on the first day, on or before the fourth day and by the eighth day. Managers are advised to contact sick employees as early as possible and establish contact within two weeks through an initial discussion with the employee.

- ***First contact***

First contact will normally be made by telephone or in writing. The manager should use a sensitive and non intrusive approach and establish the following issues during the initial discussion: -

- Express concern about the cause of sickness absence
- Establish any mitigating factors (work, social or domestic related)
- How long the employee will be off work
- When the employee is likely to return to work, if known
- How the employee can be supported, including reminding them of the Employee Assistance programme
- To keep the employee informed as to any key developments in the organisation
- How and when further contact will be maintained to keep up to date with the employee's sickness absence, for example, this may be one or a combination of

the following, by telephone, in person at meetings arranged in the workplace if the employee is able to travel, by a home visit or in writing.

- **Home visits**

It may be helpful to try to make a home visit for welfare reasons, initially, then later on, at the right time, to help plan for the employee's return to work. Such visits must be carefully arranged, with the employee's agreement and in liaison with relatives or other appropriate persons, for example, the employee's representative, Human Resources or Occupational Health Unit. Visits must be arranged in advance at a time to suit the employee. The manager must keep a note of contacts made.

13.3.2 Week Two to Week Four

As soon as it becomes clear an employee's sickness absence will be long term and the decision has been taken in consultation with HR to initiate the guidance for dealing with long term sickness absence, the manager must consider the appropriateness of arranging a specific meeting (communicated in writing) with the employee to discuss their sickness absence. The employee must be informed of the purpose of the meeting and that s/he may bring a Trade Union representative or work colleague to the meeting. See **sample letter 6**. Where an employee is not fit to attend a meeting at work, the manager may consider the appropriateness of a home visit described above. If this is not appropriate, the manager must write to the employee to: -

- Notify them that their sickness absence is being monitored
- Advise them if their case is being referred to the Occupational Health Unit, to help clarify when the employee is likely to return to work and to identify any practical steps that might be taken to accelerate their return
- Explain the Occupational Health Unit will write to them separately to obtain their consent to apply to their Doctor for a medical report and/or for them to attend a medical examination
- Provide them with a copy of the referral form
- Explain a meeting will be arranged following the receipt of medical advice (depending on their fitness to attend or to be visited) to discuss their circumstances.

The manager must make a note of any meetings/discussions and confirm this in writing to the employee. If the sickness absence reason and date of return is clearly known at this stage, a referral may not be necessary. A copy of the referral must be provided to the employee.

13.3.3 Week Four and Beyond

By week four and beyond, the manager must continue to maintain contact with the employee. The manager must hold a meeting with the employee and make a referral to the Occupational Health Unit if this has not taken place already. The manager must take action following the receipt of medical advice and arrange a Sickness Absence Review meeting with the employee (at home if necessary) to give information and feedback. See **sample letter 7**. The aim of the meeting will be to:

- Review the reason for the sickness absence and medical advice
- Establish details of any treatment being received

- Establish the likely period of recuperation and possible date of return to work
- Determine any support to the employee to facilitate a planned/phased return to work
- Update the employee on developments at work
- Set a review period and date for a further Sickness Absence Review meeting

Where appropriate the manager may start to consider a planned/phased return to work (See Section 14). Where medical advice is received on exploring medical redeployment and reasonable adjustments, this must be discussed with the employee. Where there is no indication of a likely date of return to work, the employee should be informed that the Council cannot sustain long term sickness absences and that their employment may be at risk. See **sample letter 14**.

13.3.4 At Week Twelve or the Review Period

By week twelve or the date set for review, the manager in consultation with Human Resources must hold a Sickness Absence Review meeting to review the actions taken to date, and the latest advice from the employee and Occupational Health Unit on the likelihood of return to work. Where the expected date of return is not known or it is contrary to the needs of the service, the manager must consider the appropriateness of activating the Medical Capability Review Procedure. See **sample letter 5** instructing an employee to attend a Medical Capability Review meeting and a suggested format for preparing the management position in **appendix 6**.

14 Phased Return to Work

14.1 Purpose of a Phased Return to Work

The purpose of a Phased Return to Work is to rehabilitate an employee to their full duties and/or normal working hours within a fixed timescale. A Phased Return to Work typically arises when an employee returns to work from long term sickness absence and the Occupational Health Unit has recommended a rehabilitation programme. This may mean working reduced hours, undertaking alternative work or not undertaking the full range of duties for the post. In all circumstances the Phased Return to Work must be planned and take into account relevant medical advice. The objective is to secure full recovery and a safe return to work.

14.2 Procedures for Working Reduced Hours

The Local Terms and Conditions of Service, Part 3, paragraphs 10.5 (10.5.1 - 10.5.5) provide for the following procedures in relation to working reduced hours:

“There are a number of situations which may arise that would be alleviated by the employee being allowed to work reduced hours. This can be for a temporary period to cover unforeseen circumstances such as:

- i) an employee returning from a period of sickness absence;*
- ii) an injury, the onset of a medical condition or a deterioration/worsening of an existing condition (particularly if the condition constitutes a disability under the DDA);*
- iii) problems in an employee’s domestic situation such as the care of a dependent (either a new situation or the breakdown of existing arrangements).*

The Service head should take account of the circumstances and consider whether a short-term arrangement can be entered into to accommodate the continued presence of the employee at work. This may include: altering start and/or finish times; allowing an increased flexible hours deficit within reasonable limits (so as not to place a high burden on the employee in making up the hours); or a period of reduced working.

In the case of an employee returning to work after a severe or long term injury/illness, temporarily reducing working hours may benefit the service (which regains a valued employee) and aid the rehabilitation of the employee. Such a process should only be carried out under the guidance of the Council’s OHU staff and may involve a staged increase to full contracted hours. Where such a process is being carried out then the employee should continue to receive full pay and benefits.

In the case of an employee with a disability (as defined by the DDA) it may be appropriate to temporarily reduce working hours while investigating any longer term adjustments which can be made to assist the employee. Such a process should only be carried out under the guidance of the Council’s OHU staff and/or the Recruitment & Equalities Unit. Where such a process is being carried out then the employee should continue to receive full pay and benefits.

If the employee proposes working reduced hours on a permanent basis or the arrangement is for a longer term then pay and benefits should be adjusted pro-rata to the reduced hours being worked. Advice should always be sought before reducing an

employee's pay. In the case of a disabled employee contact the Recruitment and Equalities Unit".

14.3 Preparing a Return to Work Plan

To manage an employee's return to work after long term sickness absence, the manager will seek advice from the Occupational Health Unit, who will make the recommendation of a Phased Return to Work. This is on the basis of the individual circumstances of each case and will normally be up to a six week period. The manager in consultation with the Head of Service must consider the Occupational Health Unit's recommendations and what steps might reasonably be taken to support the employee's Phased Return to Work. The manager must contact the employee to discuss the options prior to his or her return and consider in consultation with the employee:

- What duties s/he will be fit to perform
- What specific adjustments (temporary or permanent) may need to be made
- Whether any special arrangement or support needs to be provided initially
- Whether s/he is still taking any medication; if there are likely to be any side effects, (for example, tiredness) and agree the timescale, duties, working arrangements and any restrictions

If the manager considers partial home working as part of the phased return to work, a risk assessment is necessary and arrangements detailing hours of work, communication, performance targets, and periods in the office and supervisory arrangements must be agreed.

The manager and employee must agree the plan and it might include:

- The goal of the plan
- The time period of the plan;
- Information about alternative working arrangements
- Information about changes to terms and conditions
- What checks will be made to make sure the plan is put into practice
- Dates when the plan will be reviewed

14.4 Implementing the Plan

Before implementing the plan, the manager must check the employee is in agreement with the plan. The implementation of the plan might include a visit to the workplace for the employee where they have been on a prolonged period of sickness absence, shortly before the proposed return date so that they can meet informally with colleagues and be brought up to date on a range of matters. The manager may also arrange for one of the employee's colleagues to act as a 'buddy' (with their consent) for a period, taking responsibility for helping the employee with any difficulties in the first few weeks.

The manager should monitor the plan and meet with the employee at agreed intervals to check the employee is coping adequately, to assess progress and identify any issues. If there are difficulties or any alterations requested or recommended, the Occupational Health Unit, manager and employee should meet to review the situation.

14.5 Timescale for Phased Return

The phased return to work programme will normally not exceed six weeks, and is on the basis of an agreed time limit, targets and further review by the Occupational Health Unit if necessary. The Head of Service must seek ongoing advice where it becomes apparent the employee is unlikely to resume normal working hours by the sixth week. This may result in a further time limited extension and temporary contractual reduction in working hours, or agreeing the need for the employee to resume sick leave and re-submit medical statements. In some cases, consideration of Medical Redeployment maybe appropriate, subject to advice from the Occupational Health Unit. Where none of these measures are appropriate, consideration to initiating the Medical Capability Review procedure must be given (See **appendix 4**).

14.6 Payment During Phased Return

The manager must notify the employee of details on salary during the phased return. Normal pay and benefits will usually be allowed up to six weeks of a Phased Return to Work Plan, where normal hours are likely to be resumed. If the Phased Return to Work Plan arrangements continue beyond six weeks, normal pay and benefits will usually be adjusted pro-rata to hours worked. Managers must seek advice from their Head of Service and the Head of HR on all requests for a further extension to the Phased Return to Work Plan on full pay and benefits.

15 Medical Redeployment

15.1 What is Medical Redeployment?

The full procedures relating to the redeployment of staff on medical grounds is detailed in the Local Conditions of Service, Part 2, 12.4 and Part 3, 12.3 - 12.5, which is reproduced and appended in **appendix 7**.

Medical redeployment involves an initial twelve week search for an employee to seek suitable alternative employment, as a ring fenced priority candidate to all advertised vacancies across Ealing Council.

Medical Redeployment applies where the Council's Occupational Health Physician has issued a statement an employee is unfit to carry out his the duties of his/her post and where no appropriate reasonable adjustments in line with the Disability Discrimination Act 1995 (if applicable) to enable the employee to remain in his/her post can be made.

15.2 Medical Redeployment meeting

Managers are responsible for arranging a meeting with an employee to discuss the medical advice received and notifying them of the medical redeployment process and terms. (See **sample letter 9**).

The employee is entitled to be accompanied by a Trade Union or a work colleague to the meeting. Managers can arrange for the designated HR contact to support them at the meeting and initiate the search process.

The meeting must cover the following:

- Discussion on whether there are any other reasonable adjustments the manager could consider to enable the employee to continue in their existing role.
- Employee is advised of his/her right to appeal against the medical advice.
- Discussion on what type of alternative work the employee considers is within his/her capability.
- The next steps:
 - Notify employee the HR contact will complete a redeployment referral form with the employee's contact details, copy of medical advice and issue this to the Redeployment Officer to facilitate the 12 week search;
 - The Redeployment Officer will meet the employee to go through the process and to complete a skills profile form to be used to compare any posts the employee expresses an interest in;
 - After the meeting, the Redeployment Officer will arrange for a weekly vacancy list to be issued to the employee by post or email;
 - The manager and HR Advisor will arrange to meet the employee on a monthly basis to indicate any posts s/he maybe suitable for and review progress on the medical redeployment search.

15.3 Medical Redeployment Search

The search for alternative employment covers the following:

- The employee is required to submit a supporting application addressing the person specification of any posts s/he is interested in and submit this to the Redeployment Officer.
- On receipt, the Redeployment Officer will ask the Occupational Health Physician to assess whether the employee is medically fit for the post and to identify any reasonable adjustments that would enable him/her to undertake the role.

- The employee has a right of appeal if the Occupational Health Unit considers the employee unfit and will be notified of this by them in writing.
- At the same time the Redeployment Officer will forward a copy of the skills profile form to the recruiting manager and designated HR Advisor for the department which has the vacancy, who may wish to compare the skills profile form against the person specification for the post.
- If the role is considered suitable, the application will be sent to the recruiting manager for short-listing.
- The recruiting manager will arrange an interview date or provide feedback if they do not shortlist the employee.
- The employee has a right of appeal if they are not offered an interview.
- Disabled employees who part meet the criteria for a role will be guaranteed an interview.
- The interviewing panel must consider and make any reasonable adjustments in line with the Disability Discrimination Act 1995, and ensure appropriate training is provided during the trial period
- A HR Advisor will normally sit on all redeployment interview panels.
- The Redeployment Officer will notify the employee of the outcome of any interviews in writing.
- If an employee is not appointed to a vacancy, the interviewing panel must record clear and objective reasons in writing to the employee together with notifying the employee of his or her right of appeal.

15.4 Offer of Suitable Alternative Employment:

- An offer of suitable alternative employment is subject to a minimum 4 week trial period, subject to any training and assessment of reasonable adjustments. An extension will be agreed by the recruiting manager, HR representative and employee before the start of the trial period.
- The recruiting manager and employee should discuss the key requirements for the role, a training plan and record progress on a weekly basis.
- The recruiting manager is required to provide reasons if at the end of the trial period the employee is not considered suitable for the post, which will revert to his or her previous contract of employment.
- The previous manager/HR representative should consult the Occupational Health Physician for a re-examination.

15.5 Other Medical Redeployment Terms:

- The manager may consider extending the twelve week search by one month in exceptional circumstances, for example, following a failed redeployment attempt, or where the extension is likely to lead to a placement in the foreseeable future or some other substantial reason, including consideration to a reasonable adjustment in view of the Disability Discrimination Act 1995. This would be to ensure a disabled employee has a fair chance to remain in his or her post or achieve a successful redeployment.
- An alternative offer of employment is subject to 4 years pay protection in line with the Conditions of Service, Part 2, paragraph 13.3.2.3 on 'Pay Protection in cases of assimilation and redeployment to a lower graded post' (Contractual pay is protected

for a period of two years from the start date in the lower graded post, then frozen for 6 months on the second anniversary, then reduced by 25% of the difference between the frozen rate and job at the appropriate grade, then by 75% and 50% (respectively) of the remaining difference at further intervals of 6 months. On the fourth anniversary it will be finally reduced to the rate for the job. If working hours vary from the original post then the appropriate rate of pay protection will apply pro rata)

- Only one offer of redeployment will normally be made.

15.6 No Suitable Alternative Employment:

- If no suitable alternative employment is found, the Redeployment Officer will refer the employee back to the manager and designated HR contact, to arrange for the Occupational Health Unit to re-examine the employee.
- The manager assisted by the HR representative will ask the Occupational Health Physician to re-examine the employee to indicate whether the employee is permanently unfit to continue in his or her post or any other reasonable course of action.
- If an Ill health retirement certificate is issued, the process described in the following section 15 must be followed.
- The medical capability procedure will be initiated in the absence of any alternative courses of action.

15.7 Medical Redeployment Appeals:

- An employee may appeal against any decision based on medical advice from the Occupational Health Physician that the employee: -
 - Is unfit for his or her post and being recommended for medical redeployment
 - Not to interview for a post
 - Not to offer a trial period
 - Not to confirm a post after a trial period
- To appeal the employee must provide a medical certificate to the Occupational Health Unit showing the contradictory medical opinion within 10 working days of the written decision.
- The Occupational Health Unit will consider this. If the opinions cannot be reconciled, the matter will be referred to an independent medical referee nominated by the Director of Human Resources.
- The medical referee will make a final decision as to the fitness of the employee and whether they can efficiently undertake the duties.
- The Director of Human Resources and Director of the department of the disputed post will consider the decision of the medical referee, providing the outcome to the employee in writing.

16 III Health Retirement

16 III Health Retirement

16.1 What is III Health Retirement?

Ill health retirement means retirement has been taken on the grounds of ill health, and can occur at *any* age before normal retirement age. An independent registered medical practitioner qualified in occupational health must certify that the employee is permanently incapable of performing the duties of that employment, or a broadly comparable local government employment, with his employing authority because of ill-health or infirmity of mind or body. (Best Value Indicator Number BV 015)

The termination of an employee's contract on the grounds of permanent ill health retirement is a dismissal. Dismissal requires written notice from the employee's Director stating the employee is permanently unfit to carry out the duties of the post, and that there is no suitable alternative employment available. (as per the Local Terms and Conditions of Service, part 3, 12.3.23). An employee also has a right of appeal against the issue of a certificate that the employee is permanently unfit (as per the Local Terms and Conditions of Service, Part 3, paragraph 12.5)

16.2 Definition of III Health Retirement

The Local Government Pension Scheme Regulations defines ill health retirement as:

“(1) Where a member leaves a local government employment by reason of being permanently incapable of discharging efficiently the duties of that employment or any other comparable employment with his employing authority (SI 1999/1212) because of Ill-health or infirmity of mind or body, he is entitled to an ill-health pension and grant.

“**Comparable employment**” means employment in which, when compared with the member's employment:

- (a) the contractual provisions as to capacity either are the same or differ only to an extent that is reasonable given the nature of the member's ill-health or infirmity of mind or body; and
- (b) the contractual provisions as to place, remuneration, hours of work, holiday entitlement, sickness or injury entitlement and other material terms do not differ substantially from those of the member's employment; and

“**Permanently incapable**” means incapable until, at the earliest, the member's 65th birthday (SI 2004/573)

16.3 How to Manage an III Health Retirement Certificate

If an ill health retirement certificate is issued, the manager must notify the employee in writing of the opinion of the Occupational Health Physician and invite the employee to meet with them giving at least five working days notice of the meeting and informing the employee that s/he may be accompanied by a trade union representative or colleague who may speak on his/her behalf. (as per Local Terms and Conditions, Part 3, Paragraph 12.3.21) A sample letter is appended in Annex 17.

If the employee states they are unable to attend a meeting due to their ill health, the manager should consider making arrangement for the meeting take place as part of a

home visit or as a telephone meeting, with the employee or their nominated representative. The employee or representative should be asked to send a written statement to indicate their views. The HR Advisor must request an estimate of the employee's ill health retirement benefits from the Pensions department and arrange for them to be forwarded to the employee.

16.4 Ill Health Retirement meeting

The purpose of the Ill Health Retirement meeting is to consider all the circumstances, specifically to:

- Advise the employee of the ill health retirement certificate.
- Seek the employee's opinion as to whether they are in agreement with the Occupational Health Physician's report and termination of contract of employment.
- Whether it is appropriate to terminate the employee's contract on the grounds that s/he is permanently unfit to carry out the duties of the post and that there is no suitable alternative employment available (and where appropriate any redeployment attempts).
- Consideration of any other options or information the employee feels have not been fully considered to support the employee's continuing employment.
- Encourage the employee to seek advice from the Pensions department and independent advice on any of their financial options.
- A statement that Ealing Council is considering termination of employment on the grounds of permanent ill health, unless any other significant issues need further consideration.
- The manager must make a note of the meeting and send it to the employee.

16.5 Termination of Employment

If it is determined that dismissal is the appropriate course action, the employee must be advised dismissal will require written notice from the employee's Director. (A sample letter is appended in Annex 18) The following information must be confirmed to the employee:

- The effective period of notice as specified in his or her contract of employment.
- Details of his/her rights of appeal
- Confirmation as to whether s/he will revert to full contractual pay from the effective date of notice.
- Entitlement to any outstanding annual leave accrued up to the last day of service.
- The search for suitable alternative employment will continue throughout the notice period.
- The employee is required to continue submitting a medical certificate to cover the notice period up to the last day of service.

List of extracts and sample letters

Appendix 1	National Conditions sickness scheme
Appendix 2	Conditions of service extract on accident reporting
Appendix 3	Sample return to work form
Appendix 4	Medical Capability Review Procedure
Appendix 5	Suggested meeting format to discuss sickness absence concerns
Appendix 6	Suggested management case format for medical capability review meetings
Appendix 7	Conditions of service extract on medical redeployment
Sample letter 1	Invitation to initial meeting to discuss sickness absence
Sample letter 2	Outcome of initial sickness absence review meeting
Sample letter 3	Invitation to further review sickness absence
Sample letter 4	Outcome of further sickness absence review meeting
Sample letter 5	Invitation to attend Medical Capability Review meeting
Sample letter 6	Invitation to initial meeting to discuss long term sickness absence
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Sample letter 9	Invitation to attend medical redeployment meeting
Sample letter 10	Invitation to attend ill health retirement meeting
Sample letter 11	Notification of dismissal on grounds of ill health retirement