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HUMAN RESOURCES

ATTENDANCE MANAGEMENT PROCEDURE



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1. Introduction

1.1 Aim

The aim of this procedure is to provide a framework to effectively and consistently manage attendance, while ensuring that all staff are treated with respect, understanding, and compassion, according to their particular circumstances. Full regard will be paid to all Royal Greenwich's policies and duty of care and welfare to its employees.

1.2 Scope

This procedure applies to all employees of Royal Greenwich excluding schools, agency staff and those on probation. Probationers with poor attendance will be managed under the Royal Borough's Probation Procedure. The requirements to report sickness absence and conduct return to work interviews, contained in this procedure, still apply.

1.3 Confidentiality

Throughout the application of this procedure, Managers may become aware of medical or other personal information concerning individual employees. Managers must take care to ensure that confidentiality is maintained throughout and that information is only disclosed to those persons who are authorised to receive it.

1.4 Disabled Employees

It is essential that managers ensure that disabled employees are not unlawfully discriminated against for a reason which relates to their disability. Managers must take account of this when dealing with any absence due to an employee's disability. This includes consideration of reasonable adjustments at all stages of this procedure. (see *guidance Dealing with disability related absence*)

For Rights and responsibilities in managing attendance (see *guidance notes*)

2. Types of Sickness Absence

Broadly speaking patterns of sickness absence usually occur in one of two ways, namely:

- Persistent short-term absences characterised by:
- frequent periods of intermittent absence caused by unconnected illnesses where there is no underlying condition or;
- chronic cases where an underlying medical condition is present which results in frequent short term absence.
- Long term absence; characterised by a long period of continuous absence normally caused by an underlying medical condition. Absences for chronic/long-term

sickness may be due to a disability and will require special consideration. (see guidance [Dealing with disability related absence](#))

Not all patterns of sickness absence fall neatly into one of these groups. The appropriate course of action will depend on the circumstances of the case and some flexibility of approach may be needed.

3. Informal Management of Attendance

3.1 Sickness Reporting Procedures

Employees must notify their manager (normally by phone) as soon as possible on the first day of absence in line with local reporting requirements, indicating the nature of the illness and, where possible, the expected duration of their absence. Text messages or getting someone else to ring in to report their absence on their behalf is not normally appropriate.

Managers must record all periods of sickness absence to ensure that absence reporting information and payroll records are accurate. (see guidance *Rights and responsibilities on managing attendance*)

3.2 Return-to-Work Reviews

When an employee returns to work, irrespective of the duration of the absence, managers must conduct a return to work review as soon as practicable. Managers should still carry out the return to work review in cases where the trigger for a formal stage 1 meeting has been hit.

The purpose of the review is to create an opportunity for the manager to cover the following:

- Welcome the employee back to work.
- Clarify the reason for the absence and discuss any problems and/or health concerns.
- Give the employee the opportunity to raise any other concerns relevant to their return to work.
- Clarify if there are any patterns to the sickness or any concerns you may have as to the reason for the absence.
- Find out if the illness is likely to recur and what this will mean in practice to the individual and service i.e. if further time-off will be necessary (e.g. for treatment).
- Establish whether the absence is related to a disability or impairment and discuss whether any reasonable adjustments are required.
- Assess whether an early referral to occupational health is relevant particularly in relation to mental health (stress, depression, anxiety) or musculoskeletal absences.
- Advise the employee of their responsibility to maintain a satisfactory level of attendance.

- Advise the employee, if relevant, of any problems arising from the absence, the impact on the service, and potential consequences of unsatisfactory sickness absence levels.
- Ensure the employee has completed a self-certification form or where appropriate, provided medical certificates to cover the whole period of absence, including a final 'fit to work' certificate.
- Advise the employee that if the period of absence has triggered the formal sickness procedure they will be asked to attend a Stage I Sickness Review Hearing.

4. Triggering the Formal Attendance Management procedure

The formal procedure is triggered when:

(a) the employee's pattern of sickness absence reaches 9 working days sickness absence (continuous or cumulative), or 3 periods of absence totaling 5 working days or more in a 12 month period.

OR

(b) an employee's pattern of sickness absence gives rise to managerial concern (e.g. causing on-going service delivery issues). Alternatively, where there are trends of absences occurring (e.g. particular days of the week or linked to certain tasks/weather conditions).

Triggering the Formal Procedure occurs automatically, but the decision following the review will depend on the individual circumstances and merits of the case. Care should be taken to ensure that formal meetings are conducted in a supportive rather than adversarial manner especially where there is an underlying medical condition.

All formal meetings may be attended by trade union representative. A work colleague may attend as a representative if the employee wishes. Five working days' notice of the meeting will be given. If the representative is not available on the given date of the hearing the employee is entitled to propose a reasonable alternative date, which may be up to five working days after the original date. After this period the manager is entitled to hold the meeting irrespective of whether or not the employee attends. Outcomes from formal meetings should be confirmed in writing within ten working days.

5. Stage I Review – Short Term Absence

As soon as the trigger is reached a Stage I review is the first formal step in addressing sickness absence. (see *Standard Letter instruction to attend Stage I Formal Review meeting*)

The purpose of the meeting will be to:

- Review the sickness absence record and the impact the absence is having on the service and colleagues. At this stage consideration may also be given to historical patterns of absence in previous years (normally up to five years).
- Consider any relevant medical information that is available and obtain further medical information if deemed necessary by referral to Occupational Health. This is essential where there is underlying medical condition but early referral may also be useful in other cases, in particular stress related issues. (see *Standard Letter Referral to Occupational Health*)
- Discuss the reasons for absence and any relevant information the employee has to offer (e.g. personal, domestic, welfare issues, that the absence was connected to a disability).
- Take into account any disability related absence and consider, with the employee, whether reasonable adjustments are required, which may assist them in reducing their sickness absences (e.g. change in hours, working arrangements, alternative or temporary duties, redeployment bearing in mind the needs of the service).
- The implications of further periods of absence

(see *Guidance Conducting a Stage 1 Formal Review*)

The outcome of the meeting will depend on the circumstances but will normally include the employee being advised that their attendance will be monitored for a defined period of time, with a view to reducing their level of absence to one that falls below the trigger points detailed in paragraph 4.1. (see *guidance Setting a monitoring period &, Standard Letter Stage 1 Review outcome*). There is no appeal to a Stage 1 outcome.

During the monitoring period the manager should ensure regular contact with the employee to discuss their attendance /sickness and progress. Further actions may also include:

- Agreeing any reasonable adjustments to working arrangements.
- Further referral to Occupational Health.
- Requiring fit notes for any further periods of absence, regardless of duration. (This must be agreed by the relevant Director or Assistant Director)
- Considering other types of support that may be available and/or appropriate (eg undertaking stress risk assessments where appropriate).

If a satisfactory level of attendance has been achieved at the end of the monitoring period the employee will be advised in writing and reminded of the need to sustain their level of improvement. If the level of improvement is subsequently not maintained, the absence procedure will move to Stage 2. However previous sickness records can be considered in any subsequent process as long as they do not exceed two years.

A record of the review will be placed on the employee's personnel file. This will be disregarded for the purposes of this procedure after a period not exceeding two years of satisfactory attendance.

Guidance regarding the distribution of the notes of the meeting, are in section 11 of this procedure

6. Stage 2 Review – Short Term Absence

Stage 2 is reached in the following circumstances, either:

- When the initial monitoring period has failed to achieve a satisfactory reduction in the level of absence such that it falls below the defined trigger points.

OR

- The initial improvement achieved at the end of the monitoring period at Stage 1 has not been sustained.

A further meeting will be arranged by the manager to review the employee's sickness record and will also be attended by an HR Adviser. The outcome will depend on the circumstances of the case but will normally include setting a further monitoring period for improved attendance within a specified timescale. (see *Standard Letter Stage 2 invite, Guidance on conducting a Stage 2 Formal review*)

The employee will also be advised that their employment is at risk (EAR) and failure to reduce their level of sickness absence will result in them moving to Stage 3 of the procedure where a decision to dismiss may be made. This will be confirmed in writing. There is a right of appeal against a decision to issue an EAR. (See *guidance Appeal against the decision to issue an EAR*)

A record of the review will be placed on the employee's personnel file. This will be disregarded for the purposes of this procedure after a period not exceeding two years of satisfactory attendance.

During the monitoring period the manager should ensure regular contact with the employee to discuss their attendance /sickness and progress. Further actions may also include:

- Agreeing reasonable adjustments to working arrangements.
- Further referral to Occupational Health.
- Requiring sick notes for any further periods of absence, regardless of duration (This must be agreed by the relevant Director or Assistant Director).
- Considering other types of support that may be available and/or appropriate.

If a satisfactory level of attendance has been achieved at the end of the monitoring period the employee will be advised in writing and reminded of the need to sustain their level of improvement. If the level of improvement is not maintained, the absence procedure will result in progression to Stage 3.

Guidance regarding the distribution of the notes of the meeting, are in section 11 of this procedure

7. Stage 3 Review – Short term absence

Stage 3 is reached when:

- The employee has failed to achieve a reduction in absence since the Stage 2 review such that it now falls below the defined trigger points.

OR

- The initial improvement achieved at the end of the monitoring period set at Stage 2 has not been sustained.

In these circumstances the employee must be referred to Occupational Health for a report to be provided to the Manager (see *guidance Referral to Occupational Health*).

In the light of the medical report, which should normally be no more than six weeks old, a decision will be made on how to proceed. Options may include:

- Consideration of any recommendations Occupational Health may make in relation to reasonable adjustments, redeployment or ill health retirement.
- No further action at this time, but a further monitoring period to be set on attendance levels.
- A further meeting being arranged (chaired by an officer PO7 and above with the authority to dismiss) to consider dismissal on absence grounds. An HR representative must attend this meeting.

See [Guidance on conducting a Stage 3 Formal Review](#)

See Standard Letter [Instruction to attend Stage 3 formal review](#)

See Standard Letter [Instruction to attend Stage 3 formal review no return to work](#)

See Standard [Letter confirming dismissal following EAR](#)

If dismissed an employee's appeal rights will be in accordance with Appeal against decision to dismiss (see *guidance [Appeal against decision to dismiss](#)*)

Guidance regarding the distribution of the notes of the meeting, are in section 11 of this procedure

8. Stage 1 Review – Long Term Absence

Long-term sickness absence may be identified at Stage 1 (once the trigger is reached) when the case is reviewed and if there is an indication that the absence has been caused by an underlying medical condition. It is therefore essential that at this stage the employee is referred to the Medical Adviser for assessment no later than three weeks

after the beginning of the absence period. See *Standard Letter Referral to Occupational Health*)

On receipt of the medical assessment a copy will be sent to the employee by the manager. The case will then be reviewed in light of the medical information, the on-going impact on service delivery and other factors set out in para 5.1 above. The employee will be required to meet with their manager to discuss the situation and any options that may be available. This may also include any phased return to work.

If the employee is unable to attend any formal sickness review, they have the option of providing relevant information to the manager for consideration or asking their trade union representative to represent them in their absence.

Guidance regarding the distribution of the notes of the meeting, are in section 11 of this procedure.

9. Stage 2 Review – Long Term Absence

Where an employee's sickness absence has continued to be a cause of concern, it is important that this is kept under regular review by the manager. This includes maintaining contact with the employee to see how they are progressing, further referrals to Occupational Health and case reviews with HR and Occupational Health where appropriate.

At an appropriate stage, the Manager shall make an assessment of the position based on the following factors:

- The nature of the illness and any medical information available.
- The likely length of the continuing absence and the likelihood of a return to work.
- Any other relevant circumstances including any adjustments that can be made to job duties/hours/etc, or other support if the employee can return to work (including stress risk assessments where appropriate).
- Any recommendation from Occupational Health of redeployment/ill health retirement.
- Any phased return to work where this is supported by medical advice or is appropriate in the manager's opinion. (see guidance [Phased return to work](#))

It is important at this stage that the employee understands the serious concern, which exists about the length of their sickness absence and is given reasonable opportunity to discuss with their manager any factors or personal circumstances, which they would like taken into account in the overall assessment of their absence.

If the manager decides, in light of all the information, that it is not reasonably practicable to wait any longer for the employee to return to work or if the employee has returned but the subsequent level of absence has been unsatisfactory, the manager should first consult HR Coaching & Advice before taking any further steps. If it is decided to proceed the manager should meet the employee (and confirm in writing) to advise them

that their employment is at risk (EAR) and a failure to reduce their level of sickness absence will result in the decision to dismiss being considered at a formal meeting. There is a right of appeal against a decision to issue an EAR. (See *guidance on Appeal against the decision to issue an EAR*)

The EAR letter will be placed on the employee's file, but will be disregarded for the purposes of this procedure after a period of two years of satisfactory attendance.

Guidance regarding the distribution of the notes of the meeting, are in section 11 of this procedure.

10. Stage 3 Review – Long Term Absence

When an employee does not return to work, or does not sustain an acceptable level of attendance following the issue of an EAR, a further meeting at an appropriate time will be arranged to consider dismissal on absence grounds.

It is essential that up to date Occupational Health advice is obtained including whether the employee will be able to return to work or sustain regular attendance within a period of time that the manager considers to be reasonable or whether they recommend that the employee can no longer carry out their duties and should not return to their existing post.

The Chair of the Stage 3 Hearing must be the next manager up and must be PO7 or higher. The Line Manager's responsibility will be to prepare a brief management report and chronology of sickness management action taken to date which will be presented at the Stage 3 Hearing to the PO7/higher manager.

See Guidance Conducting a Stage 3 Formal Review
See Standard Letter confirming dismissal following EAR

[*\(see guidance Appeal against decision to dismiss\)*](#)

11. Notes of the Meetings

The notes taken at all of the hearings must be shared with all parties present, including the employee and their representative within 2 weeks of the date of the hearing.

Copies of the notes are for information only and no invitation to comment should be made. If the employee and their representative do wish to comment on the notes they should make their comments in writing which should then be retained and noted for the records.

12 Other Key Issues in Managing Attendance

12.1 Misconduct and absence

Disciplinary action will be taken where:

- The employee's reported absence is proven not to be genuine.
- The employee engages in conduct the manager considers prejudicial to their recovery unless the employee's medical advice states otherwise.
- An employee unreasonably refuses to attend or fails to attend a meeting.
- without good reason with Occupational Health or be examined by that Adviser. Employees need to be aware that any such refusal may result in decisions being made on the facts available at the time.

(see disciplinary procedure)

12.2 Role of Occupational Health

Control of absence is a management issue and referral to Occupational Health should not be used as a substitute for such action.

Employees can be referred to Occupational Health at any time. Early referrals would be particularly beneficial in the following situations:

- (a) short term absence cases relating to stress and musculoskeletal causes.
- (b) absences where a range of different causes have been reported.
- (c) long term absences to identify underlying medical conditions where there is no immediate return to work envisaged.
- (d) regular reviews for long term absence to check progress.
- (e) where you require a report regarding whether an employee can attend a formal absence meeting.

Occupational Health must be consulted in all sickness-related cases, prior to terminating an employee's service and earlier, where appropriate (*see guidance Referral to Occupational Health, Conflict between OH and employee's GP*).

A 'duty of care' referral may be made to Occupational Health where levels of sickness absence have not triggered informal/formal action but where advice is required to offer support and minimise potential future absence.

If at any time the advice of Occupational Health conflicts significantly with the opinion of the employee's own GP then the employee should be interviewed or examined by an independent Medical Referee ([see *Conflict between the OH Medical Adviser and Employee's GP*](#)).

12.3 Sick Pay

Royal Greenwich operates a sick pay scheme in accordance with the provisions of the National Agreements.

Nothing in that scheme prevents Royal Greenwich from considering terminating an employee's service due to sickness absence prior to an employee exhausting their entitlements.

12.4 Annual Leave and Sickness

Annual leave entitlement continues to accrue during sickness absence regardless of how long the employee is off. Paid annual leave may be taken during a period of sick leave (even if covered by a medical certificate). Any leave accrued (to a maximum of the difference between what leave they have already taken and the statutory four week entitlement) during a period of sickness may be carried over to be taken within the following year.

12.5 Absence due to Pregnancy

This procedure does not apply to sickness absence as a consequence of pregnancy, from the time of conception up to the conclusion of the statutory/contractual maternity leave period. Sickness absence that occurs after that period is covered by this procedure and should be managed accordingly.

12.6 Industrial Injury

Royal Greenwich operates a separate Industrial Injury Scheme. Where a Manager believes that an employee's absence as a result of an industrial injury gives rise to managerial concern, action should be taken in accordance with the principles of this procedure. Absences due to sickness and industrial injury are separate for pay purposes. They must be recorded as one or the other and the employee will be entitled to either sick pay or industrial injury pay, not both.

[The procedure for reporting and vetting industrial injury absences](#) should be followed.

12.7 Employees who in the Manager's opinion are unfit to work due to sickness.

Managers have a duty under Health and Safety legislation to take appropriate action where they believe that an employee is unfit to work. If a manager believes that an employee is unfit to work they should first discuss the matter with the employee and encourage them to absent themselves on the grounds of sickness and to seek medical advice if appropriate.

If an employee refuses then they should be placed on medical suspension and arrangements should be made for the employee to be interviewed or examined urgently by Occupational Health. If Occupational Health, or the employee's own Medical Adviser confirms that the employee is unfit then the period of absence will be treated as sickness. In the event that the employee is deemed to be fit by either the employee's own GP or Occupational Health and the manager continues to have significant concerns a management decision will need to be taken as to whether the period of medical suspension is extended pending further advice.

If the advice of Occupational Health conflicts significantly with the opinion of the employee's own GP then the employee should be interviewed or examined by an

independent Medical Referee (see Guidance [Conflict between the OH Medical Adviser and Employee's GP](#)).

If Occupational Health does not confirm that the employee is unfit then the period of absence will be regarded as special leave.

12.8 Trade Union Officials

In the case of Trade Union Officials who are absent due to sickness, no action should be taken beyond Stage I until the circumstances of the case have been fully discussed with a full-time official of the Union concerned and a HR Coaching and Advice team representative.

12.9 Part-time employees

Any trigger points or targets set for improvement in accordance with this procedure shall apply equally to part-time employees as outlined below. Therefore an employee who works 4 days pw (0.8) would have a trigger of 7 days. The trigger of 3 periods over 5 working days would also apply to part-timers.

| FTE | Trigger |
|-----|---------|
| 1 | 9 |
| 0.8 | 7 |
| 0.6 | 5 |
| 0.4 | 3.5 |
| 0.2 | 1.5 |

13. Time off for Medical, Dental and IVF Appointments

Staff attending medical appointments (doctor, dentist, optician, hospital etc.) should normally do so in their own time.

In some cases, it is difficult to arrange appointments outside normal working hours and is therefore reasonable in such cases to allow time off work, subject to service considerations. Where possible, staff should make appointments at times that minimise disruption to service delivery e.g. taking time off at either the beginning or end of your normal working day or during the lunch period, using flexi-leave, TOIL or annual leave. In exceptional circumstances where an employee requires urgent treatment and has no choice about when an appointment can be made, paid time off may be given and this will be recorded as medical appointment under the sickness absence reporting arrangements.

Staff requesting time off may be required by their manager to produce an appointment document confirming details of the appointment.

Pregnant employees have the right to paid time off for antenatal care appointments; see maternity policy for further information.

Time off for IVF appointments should be treated in the same way as other medical appointments. There may be times when the employee is unable to work due to the effects of the treatment and must be treated in the same manner as sickness absence. From the point of implantation of the fertilised ova, the woman is regarded as pregnant and therefore has the right to paid time off for antenatal appointments. Managers should advise the employee of the Maternity Policy and Procedure.

13.1 Treatment for Underlying Medical Conditions

For staff who need to undergo regular treatment for an underlying medical condition, appointments during working hours should be accounted for as above (see below for employees with disabilities). In some cases a temporary adjustment of the employee's contractual hours may be appropriate. Each case will be treated on its merits and much will depend on the individual circumstances and the nature of the treatment. Arrangements should be discussed and agreed, in advance between the individual and his/her line manager.

13.2 Cancer Screening

Employees are entitled to paid time off for cancer screening. In the event that cancer is diagnosed absence will be monitored in accordance with the sickness procedure.

13.3 Employees with Disabilities

It is essential that Managers ensure staff with disabilities are not unlawfully discriminated against for a reason, which relates to their disability. The Equality Act 2010 states that paid time off for medical appointments linked to disability will be treated as a reasonable adjustment and monitored in accordance with the sickness procedure. This may be taken into consideration when taking action, if appointments are frequent, on-going and /or are having an impact on the service.

Accurate recording and monitoring of medical appointments where paid time off is granted is essential not only in terms of good management practice but also in demonstrating reasonable adjustments taken in respect of disabled employees.

14. Further guidance and advice

Managers should contact HR Professional Service in the first instance on the application of this policy.