MANAGEMENT OF ABSENCE POLICY



**Introduction**

Royal Borough of Kensington and Chelsea cares about the health and wellbeing of its staff so that they able to deliver quality services that are responsive, effective and efficient.

We understand from time to time employees become unwell meaning that they are not fit to attend work. This policy therefore recognises the importance of balancing an employee's need to recover full health with the need to meet their obligation to work and is designed to ensure that all absences due to sickness will be treated fairly and consistently. The Council aims to achieve this by implementing procedures which will maintain contact with absent employees and assist them in returning to work

Frequent or high levels of sick absence impacts upon us being able to put communities first. There is a financial cost to the Council and an impact upon other team members when employees are unable to attend work due to sickness.

Any failure to comply with the requirements of this policy may result in further action being taken under the Council's Disciplinary and / or Capability Policies, or, the withdrawal of sickness pay.

**Scope**

This policy applies to all employees of the Council, except those employed in schools under the control of Governing Bodies, for whom procedures adopted by the Governing Body will apply. For the purpose of this policy, employees are as defined in section 230 of the Employment Rights Act 1996 or any substituting or amending legislation.

Employees who are on probation and not fit to attend work will be managed under the probation policy.

**Standards for Sickness Absence**

The Council trigger for an initial review of your sickness absence record is;

6 days in a 12 month rolling period, unless a pattern is evident before then

*Triggers for employees attending less than five days per week will be proportionate to their attendance pattern*

**Different Types of Sickness Absence**

In addition to the ‘normal’ sick absence that we may incur (flu, infections etc.,) there may be times when the sick absence that is incurred needs to be managed differently

**Pregnancy related absence**

Pregnancy related absences should be discounted from the formal attendance process, but such absences should still be recorded and reviewed to ensure that the correct support is being agreed..

Where an absence is unrelated to pregnancy, for example if the employee has a cold, it could be considered as part of the formal attendance process.

**Employees with a Disability**

The Council is committed to the employment of people with disabilities and will not tolerate any unjustifiable less favourable treatment of a person on the grounds of their disability.

The Council will carefully consider, and make, any reasonable adjustments which are necessary to address any disadvantage which the employee may be experiencing because of their disability to enable them to carry out their core duties. This may include time off for disability related hospital appointments.

**Time off for Doctors/Hospital and Dental Appointments**

We recognise that it is not always possible to make medical appointments outside of works time. Where practically possible we would encourage colleagues to make best use of any flexible or homeworking arrangements to attend. Where this is not possible, arrangements with your line manager should be made to take off and subsequently make up any time off to attend a medical appointment.

Where whole or half day hospital appointments occur, these should be recorded as medical appointments on ESS, and will be paid. Line Managers may request sight of the relevant appointment letters.

**Industrial Injury**

A payment may be paid where:

* an employee becomes incapacitated for work, either on a short-term or permanent basis due to injury or disease whilst in the employment of the Council; and
* this can be specifically attributable to the nature of their duties; and
* this is not wholly or mainly due to or seriously aggrieved by their own negligence or misconduct

**Third Party Injury Claims**

Any payments, other than statutory sick pay, which RBKC make during absence from work as a result of an accident and where the employee is making a claim shall be repaid to the Council, as the employer.

The full amount from such damages or settlement should be repaid in one lump sum.

**Sickness while overseas**

Where an employee is sick whilst overseas, the normal reporting arrangements, set out still apply. However, it is accepted that first and fourth day contact may need to be via a third party.

A medical certificate must be forwarded to the employee’s line manager. The manager may forward the original to OH for verification. If the certificate is satisfactory, annual leave will cease and any sick pay the employee is entitled to will commence from the date of notification.

If the absence is deemed to be outside the terms of sickness absence, any absence which extends beyond the end of approved annual leave will be treated as leave without pay and the department may wish to review further action on the matter.

**Medical Treatment Overseas**

Where an employee proposes to receive medical treatment overseas, they must seek approval for their absence in advance, as they would for any period of leave.

The employee must provide their line manager with evidence of their medical condition and the treatment they are going to receive. This may be forwarded to OH for verification. Where the treatment is deemed to fall outside the terms of sickness absence, the absence will not be regarded as sick leave and the employee will not be entitled to pay in accordance with the Council’s sickness allowance. Instead, the employee will need to take annual leave or the leave will be regarded as unauthorised and may result in action being taken under the Council’s Disciplinary Policy.

**Elective Surgery**

Elective surgery is surgery that is not considered to be medically necessary and we do not expect employees to take sick absence for these procedures. This includes cosmetic surgery, which is concerned with the enhancement of appearance through surgical and medical techniques, eg face-lifts or breast implants\*. It also includes other medical procedures such as laser eye treatment.

**Medical suspension**

There may be circumstances where it is necessary for employees to be suspended from work for medical reasons. In such cases, the employee will be required to stay at home while a medical matter is investigated.

Medical suspensions should only occur in exceptional circumstances and should be for as limited a time as possible. Suspension on medical grounds is likely to be a difficult time for all parties concerned and managers should ensure that a sensitive and supportive approach is taken throughout the process.

A medical suspension will arise where the manager and / or OH have concerns about an employee’s fitness for work. Prior to any suspension, the manager / OH must:

* discuss their concerns with the employee
* consider whether further advice is required from OH / the GP’s doctor before further action is taken and consult the ER team regarding the situation
* be satisfied that there is no reasonable alternative to dealing with the situation than requiring the employee to stay at home
* obtain the approval of the Head of Service before proceeding.

If the employee’s GP is consulted and there is any disagreement between OH and the employee’s GP about the employee’s fitness to be at work, the view of OH will prevail.

\**reconstruction surgery* ***would not*** *be considered as elective surgery*

During the period of any medical suspension, the employee will receive their full contractual pay.

If the result of the assessment is that the employee is not fit to return to work, they will remain on sick leave and will receive sick pay according to their entitlement. This will be backdated to the start of the medical suspension.

**Employee Support & Responsibilities**

Employees, who require support and guidance in relation to health or absence, are able to speak to their line manager or to specialist advisors such as Occupational Health (OH), Employee Counselling or their HR advisor. Employees may also contact their trade union for advice.

**Occupational Health Employee Assistance Programme Responsibilities**

* Offers suggestions to the employee on where their health may be improved upon
* With the employee’s consent may seek further information about their health from their GP/other health practitioner (EG. Hospital Consultant)
* Assesses an employees health to provide management advice on expected return to work timings, any underlying health condition or disability
* Advises on possible adjustments of an interim or permanent nature to enable employee to return to work

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**Employee Assistance Programme Responsibilities**

* Ensure a confidential independent service
* Offer free counselling and signposting to resources WILL INCLUDE LINK

**Employee and Manager’s Responsibilities**

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| **Employees Responsibilities** | **Managers Responsibilities** |
| On the first day of absence Employees will make contact with their manager prior to the start of their normal working day. This should always be by the beginning of the normal working day and by telephone. The reason for the sickness should also be discussed, especially if this is related to any type of accident that has happened at work | Treat all absences confidentially, fairly and consistently and with compassion |
| On the subsequent days of absence, up to five days, employees will contact their manager to advise that they are still unfit for work.*Thereafter, regular contact should be agreed with between you and your line manager so that you can be supported to return to work as soon as practically possible* | Maintain regular contact with employees during periods of sickness *this could include agreed home visits, telephone calls* |
| Employees will contact their manager the day before they intend to return to work | Seek medical and/or HR advice where necessary; advising and obtaining the employees consent where necessary |
| For absences which are more than seven calendar days, employees will obtain and send their fit note to their manager, which continues until they return to work | Understand their duty of care for the health, safety and welfare of their staff and not put undue pressure on staff to return to work who are unfit |
| Employees will engage and cooperate in the sickness absence process, attend absence review meetings and occupational health assessments where practically possible | Ensure that a Return to Work interview is carried out promptly when an employee returns to work after sickness, all absences are accurately recorded on ESS, and continuous fit notes are sighted for absences exceeding seven calendar days |
| All sickness absence, including half days should be recorded by the on line system as well as uploading any associated documents. Half days will count towards trigger points where a pattern is emerging | Immediately notify Health & Safety if the reason for sick absence is owing to an injury at work |
| Any underlying health condition or disability should be discussed with their line manager | Carefully consider our legal obligation to make reasonable adjustments where performance is affected by a disability |
| Employees should not declare themselves unfit for work to conceal any other reason for being unable to attend work, such as family emergency, childcare difficulties etc., | Monitor and manage sick absence promptly and have open and honest conversations about next steps if attendance does not improve |
| Check IBC regularly to monitor their sick pay entitlement | Initiate risk assessments where necessary |
| Report and record all accidents at work immediately | Consider and where practically possible facilitate any temporary adjustments to enable employees to return to work. |

**Entitlement to Sick Pay**

RBKC’s Council’s Sick Pay Scheme

Occupational Sick Pay (OSP); which is sick pay that RBKC is not obliged to pay, but chooses to, in order to enhance the statutory sick pay (SSP) which the Government pays.

Entitlement for each new period of sickness will depend on what has been paid over the previous 12 months.

When calculating entitlement to RBKC’s sick pay, previous continuous service with a local government will count towards service

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| **Service** | **Entitlement** |
| During 1st year | 1 month's full pay and (after completing 4 months' service) 2 months' half pay |
| During 2nd year | 2 months' full pay and 2 months' half pay |
| During 3rd year | 4 months' full pay and 4 months' half pay |
| During 4th and 5th year  | 5 months' full pay and 5 months' half pay |
| After 5 years | 6 months' full pay and 6 months' half pay |

**Statutory Sick Pay (SSP)**

This is the minimum entitlement laid down by law which the Council is required to pay employees while sick

SSP will be paid to employees when sick for four days or more in a row

Employees will receive SSP for up to 28 weeks in a spell of sickness

Spells with 8 weeks or less between them count as one spell

If the employee is sick after 28 weeks they will be issued with form SSP1 which they can use to claim state benefits

Employees who are not entitled to receive SSP will receive a form stating why, which can be used when claiming benefit.

A combination of SSP and OSP will not cumulatively be higher than your normal salary.

**Annual Leave during Sickness Absence**

Employees can take annual leave, during periods of sick absence, subject to normal line management approval.

Employees will continue to accrue annual leave during any period of sick absence and are subject to the Council’s procedures for carrying over annual leave as set out in the Authorised Leave Policy. Only statutory annual leave will be carried over at the the end of the year, which will be calculated on an individual basis, based upon the period of absence. Any variation to this must be agreed by the relevant Director in conjunction with the Director of HR&OD.

**Discretion**

Extension of Occupational Sick Pay

Extension of sick pay may be considered in exceptional circumstances. Each case will be considered on its merits. Decisions are made jointly between the Departmental Director and the Director of HR&OD.

Exceptional Circumstances

In certain, exceptional circumstances, the manager may feel it is inappropriate to commence the formal process or move to the next stage even though the level of absence has passed the trigger points (e.g. in cases of terminal illness, death of a partner, accident etc).

An example may be where an employee, who has recently returned from a long period of sickness absence, suffers a short illness, unconnected to the longer absence.

In these circumstances, the manager may wish to delay implementing the formal process. The line manager must complete the ‘Management of Absence – Exceptional Circumstances’ form and seek approval from their own line manager regarding this decision. INSERT LINK

**Facilitating a Return to Work**

There will be occasions when employees can return to or remain at work if they have a phased return to work. The type of support required (EG reduced working time gradually reverting to a normal attendance pattern, more regular breaks, set attendance times etc.,) is likely to be confirmed by a GP or OH. Phased returns should be planned and agreed over a four-week period, during which time an employee will receive full pay.

It could also be the case that an employee is newly classified as disabled and to enable a return to work, a workplace adaption or risk assessment needs to be undertaken and steps put in place to facilitate a smooth return to work. INSERT LINK

1. **Medical Redeployment**

If you are identified by Occupational Health as unfit to carry out your normal duties and a recommendation is made that you should be redeployed on medical grounds, a consideration for dismissal meeting will be convened at which you will be advised of the implications of this recommendation.

If the manager agrees that redeployment is a viable option, you will be issued notice of dismissal that will run concurrently with a 12 week redeployment period. During this period, a search for suitable alternative work will be carried out. If this search is not successful, the consideration for dismissal hearing will be reconvened before the end of the 12th week to confirm that you will be dismissed. This meeting will provide an opportunity to consider any new medical evidence, such as a change in prognosis, before your dismissal is confirmed.

**Trigger Points**

Recognising our commitment to being open and honest, we are clear about our standards for attendance before a formal process is instigated.

The following trigger points are shown for those employees who have an attendance pattern which is five days per week. A pro-rata’d amount should be calculated for those employees who are not contracted to work five days per week.

Half days should be recorded on IBC but generally do not need to be factored into any trigger points unless there is an emerging pattern (IE Friday afternoons/Monday mornings, afternoon before starting annual leave etc.,).

Managers have discretion not to move to through the stages in exceptional circumstances, as long as a record of the decision is recorded and uploaded on the employees personal file.

**STAGES**

There are three formal stages to the management of absence process, prior to the appeals process

**Short term absence**

A review period will be agreed during the1st stage formal meeting, this would normally be a period of six months, where attendance will be monitored and an improvement is expected before the review meeting takes place. The level of absence during this time should be no more than three days within the six month period. If more than three days absence are incurred before the six month review period, the review may be brought forward.

Where, during the review period, there has been a clear improvement in the employee’s attendance they should be advised in writing that: no further formal meeting will take place as long as the improvement is maintained. a failure to maintain a satisfactory level of attendance during the following 12 months will normally result in the next Formal Stage taking place immediately.

A review period will be agreed during the 2nd stage formal meeting, this would normally be a period of six months, where attendance will be monitored, and an improvement is expected before the review meeting takes place. The level of absence during this time should be no more than three days within a six-month period. If more than three days absence are incurred before the six-month review period, the review may be brought forward.

Where, during the review period, there has been a clear improvement in the employee’s attendance they should be advised in writing that: no further formal meeting will take place as long as the improvement is maintained. a failure to maintain a satisfactory level of attendance during the following 12 months will normally result in the next Formal Stage taking place immediately.

**Long Term Absence**

The Council classes long term sick absence as a continuing absence of **twenty eight calendar days or more.**

The Council is committed to dealing fairly and sympathetically with employees who are absent from work for long periods because of ill health. The Council aims to assist employees on long-term sick leave with their rehabilitation and eventual return to work.

The Council understands that an employee may have a health condition or injury that means that they are not fit for work, and that the employee's recovery may be a slow process. However, the Council must also pay due regard to its operational needs. The absence of an employee on long-term sickness absence can damage efficiency and productivity and place an additional burden on the employee's colleagues.

The Council will consider dismissing an employee on long-term sick leave only after it has made all reasonable and practicable attempts to support their return to work, including any reasonable adjustments if the employee has a disability.

RBKC are committed to the Dying to Work Charter;

<https://www.dyingtowork.co.uk/>

and that means that it will not dismiss any person with a terminal diagnosis because of their condition.

The Manager should also seek support and advice to enable, where practically possible, a return to work.

**Outcome of Dismissal Hearing**

For both long and term sickness absence there are two possible outcomes to a dismissal hearing;

**Ill Health Retirement**

Where it appears that an employee who is a member of the Local Government Pension Scheme (LGPS) may be suffering from ill-health that would qualify for early retirement on the grounds of permanent incapacity, the relevant provisions of the pension scheme will apply.

An application can be made to enable an Independent Registered Medical Practitioner (who in the case of new applications will not usually have seen them before) to provide the Council with a certified opinion on whether they fall within the LGPS criteria for ill-health retirement, to assist the Council in making its decision regarding their application.