

# Human Resources and Organisational Development

## Attendance Management Policy and Procedure

Version 1.0

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# 1. INTRODUCTION

## Policy principles

- 1.1.1 The Council is committed to the health, safety and wellbeing of all staff. The Council aims to encourage all its staff to maximise their attendance at work whilst recognising that, from time to time, staff may be unable to come to work due to ill health. The Council is committed to promoting the health, safety and wellbeing of its staff by:
- ❖ Providing appropriate support to facilitate staff retention and return to work after illness, for example through a phased return, counselling, occupational health, flexible working, reasonable adjustments (if applicable) and in some cases redeployment.
  - ❖ Tackling issues which may result in absence due to work related stress.
  - ❖ Encouraging attendance, monitoring absence and the cost of sickness absence.
  - ❖ Working with unions and health and safety representatives to identify actions and preventative measures to promote the health, safety and wellbeing of staff; and providing coaching and training for managers dealing with sickness absence issues.
- 1.1.2 The Attendance Management policy aims to ensure that absence is managed in a consistent, supportive and effective way so that operational and service levels are maintained. This policy applies to all staff with a contract of employment and is in line with ACAS guidance.
- 1.1.3 This policy applies to all directly employed staff of the Council, including directly employed staff working in schools. It is not applicable to other staff directly engaged by schools.
- 1.1.4 It is important to note that this policy should be viewed primarily as a way of helping and encouraging staff to improve their attendance and/or manage long term sickness absence. It is intended to ensure that health related absence issues are dealt with promptly, fairly and consistently in accordance with the Council's policies, employment legislation and best practice.

# 2. APPROACH

## 2.1 PURPOSE OF THE POLICY

- 2.1.1 It is good practice for sickness absence to be monitored and reviewed in order to ascertain reasons for absences. This has two main purposes: firstly, so that individual health concerns can be identified at an early stage, and medical advice sought to the benefit of the staff, secondly, managers can be aware of the actual and potential problems with service delivery.

## 3. MANAGEMENT OF SICKNESS

### 3.1.1 GENERAL POINTS

The intention is to try and resolve health related issues informally, wherever possible and help staff to reach and maintain the required standards.

3.1.2 Staff must be advised, at each stage (formal), by their manager, of the precise nature of any concerns. The manager should carry out a return to work meeting immediately after each absence and record it promptly.

3.1.3 Staff must be given the opportunity to respond and/or improve before any formal action is taken.

### 3.2.1 EQUALITIES ACT 2010

The Council recognises it has a diverse workforce and will take into account different ways of work and the need for reasonable adjustments for staff who have a disabling medical condition.

3.2.2 When handling issues relating to sickness absence, the manager will ensure that equality, diversity and inclusion is considered at every stage of the process.

3.2.3 Staff who have a disabling medical condition or under the definition contained within the Equalities Act, are encouraged to inform their manager so that consideration can be given to appropriate support. If a reasonable adjustment is required to support staff to effectively perform their duties, this will be managed with due regard to the Council's duty under the Act.

### 3.3.1 REPORTING SICKNESS

Staff must ensure they understand the requirements of how and when to notify their manager when they are not able to attend work.

3.3.2 Managers must specify who staff must inform if they are unable to attend work.

3.3.3 When reporting absence, staff must contact their line manager or nominated contact no later than **1 hour** before they are due to start work and explain the following:

- ❖ why they cannot attend
- ❖ what steps they are taking to assist their recovery, and
- ❖ when they expect to attend work again
- ❖ any scheduled meetings or work deadlines that they will not be able to attend or meet due to the sickness.

3.3.4 Staff must contact their line manager, or another nominated contact, on the **first, fourth and eighth** (working) day of sickness absence and at agreed intervals if the period of absence continues. This is to ensure their manager is aware of the reasons for their absence, to offer appropriate support and make plans to ensure services can be delivered throughout the expected period of absence. The provision of a fit note does not negate the need to maintain regular contact.

3.3.5 Contact must be made directly by the staff member, unless they have been hospitalised, or had a serious accident or sudden illness, and are unable to contact the manager themselves.

- 3.3.6 Contact should be by telephone, but if this is not possible, then by some other means. It is important that the manager knows that you are unable to attend work and to provide support if needed. If telephone contact is not possible on the first day of sickness, staff must ensure they speak to their manager on the second day.
- 3.3.7 If the absence is related to work staff should provide the manager with the reasons for this to determine if an Accident/Incident Report Form should be completed. The manager will take any supportive or remedial action that is necessary.

### **3.4 FIT NOTE**

- 3.4.1 If a period of absence lasts more than seven calendar days, staff must provide a fit note covering them from the 8th day onwards. They must forward the original or a scanned copy of the certificate to their manager without delay and no later than the tenth calendar day of absence.
- 3.4.2 Staff are required to submit fit notes to their manager at regular intervals and these must cover the entire period of sickness absence, without any gaps. On their return to work they must complete a self-certification form to cover the first 7 days of any period of absence. Staff are not entitled to receive occupational sick pay for periods of sickness absence that are either not self-certified (up to 7 days) or, from the eighth day of absence if a fit note is not provided.
- 3.4.3 In exceptional circumstances, staff may be required to provide fit notes at more frequent intervals than those given above. If costs are incurred, the council will reimburse the cost of the fit note on production of a receipt.
- 3.4.4 If staff receive a fit note from their doctor stating 'fit for work', they must immediately discuss the advice with their manager. The manager will discuss any suggested adjustments and explore how these can be accommodated, and agree a return to work date.
- 3.4.5 If staff have obtained a fit note from their doctor stating they must refrain from work for a given period, they can return to work before the fit note expires, providing this is discussed and agreed by the manager that it is appropriate to do so.
- 3.4.6 If staff are admitted to hospital, they do not need to provide regular certificates but should submit an admission and discharge slip when they enter and leave hospital. If the period that staff are unable to attend work continues after they leave hospital, they must obtain fit notes from their doctor to cover the remainder of the non-attendance and forward them to the manager as outlined above.

### **3.5 TRIGGER POINTS**

- 3.5.1 In managing any sickness, a balance needs to be struck between supporting staff and meeting service delivery needs. The Council uses a trigger point to alert the manager and staff that a certain level or pattern of sickness has been reached and requires formal intervention. When staff reach this trigger level the manager will arrange to meet with them.
- 3.5.2 The decision to commence the formal process 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 and giving due regard where there is an underlying medical condition.

- 3.5.3 Dealing with long term sickness absence will not be initiated at formal stage until there has been a continuous period of absence of 28 calendar days or more.
- 3.5.4 Staff will be subject to a monitoring period until such time as a satisfactory period has passed (within a 12-month rolling period).
- 3.5.5 Trigger points are as follows:
- 1) A total of 5 days or more absence, within a rolling 12 months period and/or
  - 2) 3 occasions of sickness absence in a rolling 6 months period; and/or
  - 3) 3 periods of sickness absence where there is a pattern of absence that causes concern, e.g., regular absence on a Monday or Friday, around shifts or during school holidays, immediately before or after annual/flexi leave, weekends, or public/bank holidays or on dates where a request for annual leave has not been approved.
- 3.5.6 Where staff have a disabling medical condition, defined under the Equalities Act, the manager has a duty to consider reasonable adjustments to support their attendance at work. One of the reasonable adjustments can be increasing the absence trigger level, for example up to 10 days within a rolling 12 months period, providing the period of absence is related to the impairment.
- 3.5.7 The formal stages will start if, following the return to work / informal meeting, attendance becomes a cause of concern.

### **3.6 TYPES OF SICKNESS ABSENCE**

- 3.6.1 Patterns of sickness absence usually occur in one of two ways,
- 3.6.2 Short term absence is any period of sickness lasting up to 28 continuous calendar days.
- Definition for short term absences are:
- ❖ 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.
- 3.6.3 Long term absence is any continuous period of absence of 28 calendar days or more. Definition for long term absences are:
- ❖ Long periods of continuous absence usually caused by an underlying medical condition.
  - ❖ Absences for chronic/long-term sickness may be due to a disability and/or will require special consideration.
  - ❖ Terminal illness will require special consideration.
- 3.6.4 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.

### **3.7 Short-term sickness with no underlying medical condition**

- 3.7.1 If the manager decides the level of attendance is unsatisfactory, they will advise the member of staff:

- ❖ That there is a need to improve
- ❖ That failure to reduce the level of sickness absence will result in progression to formal stages of the policy
- ❖ The timescale during which absence levels will be monitored and a target for reduction set.

### 3.8 Long-term sickness (Intermittent or continuous)

3.8.1 It is very important to deal sensitively with individuals who are suffering from an underlying medical condition that is causing their absence from the workplace, either continuously or for frequent short periods. It is important for managers to keep in touch with the member of staff and provide appropriate support and interventions to facilitate a return to work and retain them in employment where this is practicable.

3.8.2 It may be appropriate to have an informal review meeting and to progress to the formal stages of the procedure whilst the staff member continues to be absent.

3.8.3 The following may be explored as appropriate (this list is not exhaustive):

- ❖ Make any reasonable adjustments to working arrangements, possibly under the Equalities Act. This can be temporary variation to duties/hours on full contractual pay to support re-integration into the workplace, i.e., a phased return as advised by Occupational Health and/or any risk assessment
- ❖ Practical advice or support, e.g., counselling
- ❖ Referral to the Occupational Health or specialist advice taken
- ❖ Explore redeployment opportunities
- ❖ Whether they will be formally monitored
- ❖ If there is an ongoing impact on service delivery and/or colleagues during the monitoring period (following stage one meeting), they will be asked to attend a stage two or stage three meeting.

3.8.4 The table below details who has the authority to deal with each stage of this policy.

Informal Stage	Line Manager
Stage One	Line Manager or equivalent level manager within the service area.
Stage Two	Line manager or equivalent level manager within the service area
Stage Three	Chaired by Director or equivalent and a HR representative in attendance.
Stage Four – Appeal	Chaired by elected Members and a HR representative in attendance.

## 4. MANAGEMENT REFERRALS TO OCCUPATIONAL HEALTH

4.1.1 Managers will refer staff to the Occupational Health Service for an assessment if they have concerns regarding health and/or levels of sickness absence. Staff are expected to attend all appointments with the Occupational Health Service.

4.1.2 Staff are entitled to:

- ❖ Medical confidentiality
- ❖ Know the reason for the referral
- ❖ Be told the implications of refusing to attend Occupational Health (e.g., suspension of Occupational sick pay)
- ❖ Give consent to, or refuse, a medical report from their own doctor (subject to conditions set out in the Medical Records Act 1988)
- ❖ Request access to any report on them prepared by the Occupational Health

4.1.3 If staff refuse to consent to a medical report from Occupational Health, and/or refuse to give consent for additional information regarding the impact of their health condition to be disclosed to their manager (either from Occupational Health or from their GP), the council will proceed on the basis of the information available at the time. This may include proceeding to the next stage of the procedure up to and including dismissal.

## 5. RETURN TO WORK / INFORMAL REVIEW MEETING

5.1.1 When staff return to work, irrespective of the duration of the absence, the manager must carry out a return to work meeting as soon as practicable.

5.1.2 Whilst the policy advocates early intervention, managers will make decisions on a case by case basis and take account of prognosis, individual circumstances, including matters related to disability, and service needs.

5.1.3 Managers must therefore ensure that they have made staff aware of the required standards for the role and,

- ❖ Carry out return to work meeting. This should be undertaken in a confidential environment. **Note:** If staff have reached the trigger level, then this can be a combined return to work/informal meeting.
- ❖ Record the meeting promptly using HR Self Service.
- ❖ Ensure staff complete a return to work/self-certification form stating the reason for absence. The reason for sickness should be clear and the manager should clarify any ambiguity.
- ❖ Raise any concerns about attendance as soon as possible at the return to work meeting or informal review meeting.
- ❖ Ensure staff are aware of the Employee Assistance Programme and other support arrangements and consider reasonable adjustments for staff with a disabling medical condition.
- ❖ The informal review must take place either during the return to work meeting or take place immediately after the return to work meeting, within 1 week.
- ❖ Where staff are on long-term absence, the informal review to discuss support and next steps can take place during the period of sickness absence. The informal meeting can be held whilst the member of staff remains off sick.



- 5.1.4 **Phased Return to work:** If staff return to work following a period of absence on a phased return basis, i.e., on reduced working hours, only the first 2 weeks will be paid at full pay.
- 5.1.5 After 2 weeks any continuing reduction in hours must be accommodated by annual leave, flexi - time or reduced pay.
- 5.1.6 In exceptional circumstances, for example, if the absence was related to a disabling medical condition, or if Occupational Health thinks this will be critical to their health, the Director or Service Manager in conjunction with advice from the ER Team may agree to extend this period up to 6 weeks in total. Extending the phased return can be combination of paid, annual leave, flexi - time or reduced pay.

## 6. FORMAL STAGES - ATTENDANCE REVIEW MEETINGS

- 6.1.1 In addition to the informal review, there are four formal stages of the procedure (including an appeal against dismissal). Managers can refer staff to Occupational Health at any stage of the formal process. Formal absence review processes should not continue indefinitely and staff will be subject to a monitoring period and the process, until such time as a satisfactory period has been passed, after which staff will revert back to being subject to the normal trigger levels (within a 12 month rolling period).

Stage One – Formal Attendance Review	To bring the manager’s concerns relating to health and sickness absence to the attention of staff. To offer support and set required attendance improvements, as necessary.
Stage Two – Final Attendance Review	To discuss the continuing impact of absence on work and service delivery, to review required attendance improvements and review the support that has been offered. To advise staff that further absence will lead to Stage Three of the procedure – Consideration for Dismissal and that their continued employment may be at risk.
Stage Three – Consideration for Dismissal	To consider if the staff member is capable of giving regular and efficient service, whether is it sustainable for the service to continue to support them whilst they are off sick and if not, decide on dismissal, redeployment or any other appropriate action.
Stage Four – Appeal	To consider appeals against dismissal.

### 6.1.2 **STAGE ONE MEETING**

- 6.1.3 If a staff member has reached the trigger level of sickness absence and this has been discussed at an informal review meeting with the manager, and/or there are further concerns over the level of attendance at work, then the Stage One meeting will be arranged. This is the first stage of the formal attendance management procedure.
- 6.1.4 The purpose of the meeting is to inform staff that their level of absence is causing concern and to provide an opportunity for both manager and staff member to discuss the absences and to offer the appropriate support to improve attendance.
- 6.1.5 This applies to both short term/intermittent and long-term absences, regardless of the length and frequency.
- 6.1.6 For staff whose absence is due to an underlying medical condition of an acute or chronic nature, this may be serious, continuing, worsening illness/disease or serious injury, usually of a long-term nature, but may also result in short, frequent periods of absence. Where staff are on long term absence, the manager should allow them a reasonable amount of time to receive treatment and recover before commencing the formal stage (Stage One).
- 6.1.7 Staff on long term sickness absence will be seen under Stage One following a period of continuous absence of 28 calendar days or more.
- 6.1.8 At least five working days' notice will be given of the Stage One meeting. The notification will contain sufficient information regarding the concerns about the levels and dates of absence and the possible consequences to enable the staff to prepare for the meeting. The invite will contain details of the time and place of the meeting and will advise the staff of their right to be accompanied by a trade union representative or a work colleague.
- 6.1.9 At the meeting, the manager should provide an opportunity for the staff 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.
- 6.1.10 The manager may consider referring the staff to Occupational Health to explore what additional measures the council can make to support the staff.

### 6.1.11 **Outcomes of the Stage One Meeting**

- ❖ **Monitoring period within a rolling 12 months period**  
A monitoring period should be confirmed at the meeting if the staff member has already returned to work or confirmed a return date within 2 weeks of the meeting date. The monitoring period will commence from the date staff return to work.
- ❖ **Review period of one month and maximum of three months**  
The review period will apply to staff who are likely to remain off sick following the Stage One meeting. The purpose is to allow them time to receive further treatment and/or more time to recover. During the review period the manager

has the option to hold a **reconvened stage one** meeting. If staff return to work at the time of the reconvened stage one meeting, the manager can decide no further action is required and confirm any monitoring period. Monitoring periods will commence from the date the staff return to work.

❖ **Progress to Stage Two**

If the staff member remains off sick and/or there is no improvement in attendance, management should proceed to next stage.

6.1.12 The manager must ensure a letter confirming the outcome of the Stage One meeting is sent within five working days of the meeting date.

## **6.2.1 STAGE TWO MEETING – FINAL REVIEW**

6.2.2 The manager must invite the staff member to a Stage Two meeting if:

- ❖ They have failed to meet the required improvement set at Stage One and/or
- ❖ Their level of sickness is still causing concern and/or
- ❖ They do not maintain an improvement beyond the monitoring period.

Staff must be referred to Occupational Health prior to holding a Stage Two meeting.

6.2.3 The purpose of the Stage Two meeting is to discuss the health and wellbeing of staff, to ensure that appropriate support is in place, to review any required improvements and to inform staff of the continuing impact of their absence on work. Managers should also advise staff that any further absence will lead to progression to Stage Three of the procedure and that their continued employment will be at risk.

6.2.4 At least ten working days' notice will be given of the Stage Two absence review meeting. The notification will contain sufficient information regarding the concerns relating to the levels and dates of sickness and the possible consequences to enable them to prepare for the meeting. The invite will contain details of the time and place of the meeting and will advise the staff of their right to be accompanied by a trade union representative or a work colleague.

6.2.5 At the meeting, the manager should confirm the period of sickness within a rolling 12 months period and what was discussed and agreed at previous meetings, explore any underlying causes for the continued absences and review any Occupational Health advice received.

6.2.6 The manager should discuss the option of medical redeployment, if it identified that the staff member is unlikely to be fit to return to their substantive post but may be fit for other work.

## **6.2.7 Outcomes of Stage Two Meeting**

❖ **Continue to monitor (from Stage One)**

The manager will continue to closely monitor the staff attendance. If any subsequent absence relates to a disabling medical condition the manager should seek further advice from the Employee Relations Team.

❖ **Monitoring period within a rolling 12 months period**

The period of monitoring should be confirmed at the meeting if the staff member has already returned to work or confirmed a return date within 2 weeks of the meeting date. The monitoring period will commence from the date the staff member returns to work.

❖ **Review period of one month and maximum of three months**

The review period will apply to staff who are likely to remain off sick following the Stage Two meeting. During the review period the manager has the option to hold a **reconvened stage two** meeting. If staff return to work at the time of the reconvened meeting, the manager can decide no further action is required and confirm the monitoring period. The monitoring period will commence from the date staff return to work.

❖ **Progress to Stage Three** - if staff remain off sick and/or there is no improvement in attendance, management should proceed to next stage.

6.2.8 The manager must ensure a letter confirming the outcome of the Stage Two meeting is sent within five working days from the meeting date.

**6.3.1 STAGE THREE MEETING – CONSIDERATION FOR DISMISSAL**

6.3.2 If following Stage One and Stage Two Review meetings, there has been insufficient improvement in the staff level of sickness absence and/or attendance during the monitoring period, despite all reasonable support having been provided, staff will be invited to a Stage Three (Consideration for Dismissal) meeting, which will be chaired by the Director, who will be advised by a member of Human Resources.

6.3.3 At least ten working days' notice will be given of the Stage Three (Consideration for Dismissal) meeting. The notification will contain specific information about the reasons for the meeting, including a copy of the staff absence record, a copy of the manager's report, and that dismissal may be considered as a possible outcome. The invite will contain details of the time and place of the meeting and will advise the staff of their right to be accompanied by a trade union representative or a work colleague.

6.3.4 The Stage Three (Consideration for Dismissal) Meeting will consider all the documentation relating to the staff members attendance, including the sickness absence record. The Chair will explore any underlying causes for absence and review what has been put in place to help them return to work or maintain a satisfactory level of attendance. Staff will be given the opportunity to explain the reasons for their absence, including any mitigation, medical evidence, and their previous employment or attendance record, etc.

**6.3.5 Outcomes of Stage Three (Consideration for Dismissal) Meeting**

❖ **Continue to monitor (from Stage Two)**

The manager will continue to closely monitor attendance. If any subsequent absence relates to a disabling medical condition the manager should seek further advice from the Employee Relations Team.

❖ **Monitoring period within a rolling 12 months period**

The period of monitoring should be confirmed at the meeting if the staff member has already returned to work or confirmed a return date within 2 weeks of the meeting date. The monitoring period will commence from the date the staff member returns to work.

- ❖ **Medical Redeployment** – staff will be issued notice of medical redeployment. See details in Section 7.
- ❖ **Dismissal** - with contractual notice, where evidence suggests improvement is unlikely to be made. Employment will end with immediate effect and staff will receive pay in lieu of notice.

## 7. MEDICAL REDEPLOYMENT

- 7.1.1 If it is confirmed by Occupational Health that staff are unfit to carry out the normal duties of their substantive post and a recommendation is made that they should be redeployed on medical grounds, a Stage Three (Consideration for Dismissal) Meeting will be convened at which the staff will be advised of the implications of this recommendation.
- 7.1.2 If the manager agrees that redeployment is a viable option, staff will be issued with notice of 12 weeks' 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 meeting will be reconvened before the end of the 12th week to confirm whether the staff member will be dismissed on grounds of incapacity.
- 7.1.3 A reconvened Stage Three meeting will provide an opportunity to consider any new medical evidence, such as a change in prognosis, before the dismissal is confirmed.
- 7.1.4 If staff have a disabling medical condition and the nature of their impairment significantly restricts the type of work for which they are suitable, the Director, in consultation with the manager and with advice from a member of Human Resources, will consider making a recommendation that the period of medical redeployment be extended beyond 12 weeks, if it is likely to assist the staff member in obtaining suitable alternative employment. The extended period can be up to another 4 weeks, making a total of 16 weeks' notice.
- 7.1.5 If the search is not successful, the Stage Three (Consideration for Dismissal) Meeting will be reconvened before the end of the notice period to confirm whether the staff member will be dismissed on grounds of incapacity.

## 8. ILL HEALTH RETIREMENT

- 8.1.1 There may be occasions when it is in the best interests of staff to retire early on the grounds of ill health if they are permanently incapable of carrying out their duties. Each case will be dealt with on an individual basis, and appropriate advice will be sought from Human Resources, Occupational Health, the staff and/or their representative.

- 8.1.2 Staff will be retired on ill-health grounds if an independent registered medical practitioner certifies that they are permanently incapable of performing the duties of their post on grounds of ill health or infirmity of mind or body.
- 8.1.3 The Council will not proceed with any case of ill-health retirement without first exploring a range of options to support staff in returning to work, including redeployment possibilities. Occupational Health will review existing medical evidence to assess where there appears to be a case for ill health retirement. If additional medical information is required, staff may be requested to attend an appointment with Occupational Health, and/or their GP/Consultant may be asked to provide a report. If there is sufficient medical evidence to support the case for ill health retirement, Occupational Health will confirm which tier will be awarded.

## 9. STAGE FOUR - APPEAL AGAINST DISMISSAL

- 9.1.1 Staff have the right to appeal against a decision to dismiss.
- 9.1.2 Appeals must be submitted in writing to the Corporate Director within 10 working days of the date of receipt of the outcome letter, providing the grounds for their appeal.
- 9.1.3 Grounds for appeal are:
- That the medical opinion was wrong
  - That redeployment was a viable option
  - That there are procedural irregularities which prejudiced the decision to such an extent that a fair hearing was not possible
  - That the decision was unfair or unreasonable in the circumstances
- 9.1.4 The appeal letter must make it clear which aspect(s) of the decision staff wish to appeal against, and why. Reasons such as 'unfair' or 'too severe' would not be sufficient in themselves to justify an appeal.
- 9.1.5 Appeals will be heard by elected Members. Appeals against **dismissal** from a Stage Three (Consideration for Dismissal) Meeting will normally be heard within three months of the date of dismissal.
- 9.1.6 The appeal panel must allow both the staff and the manager who carried out the dismissal to present their cases.
- 9.1.7 Any extensions to timescales will be discussed and agreed by both parties

### 9.2 APPEAL OUTCOMES

- 9.2.1 The appeal panel may decide to:
- Uphold the dismissal
  - Overturn the dismissal and reinstate the staff member. The staff member will be advised that their attendance will be monitored for a period of 12 months. If during that time there are further concerns about their attendance, then a Stage Three (Consideration for Dismissal) Meeting will be convened.

9.2.2 Any appeal outcome will be communicated to the staff, in writing, within 5 working days of the date of the appeal hearing. There is no further internal right of appeal.

## 9.3. RESPONSIBILITIES

<p><b>Managers:</b></p> <p>Managers must give clear instructions to their staff, confirming the reporting process, who to and by when. They must also advise staff that failure to comply with the procedure may result in the non-payment of occupational sick pay for the period in question.</p>
<p><b>Staff:</b></p> <p>Staff are responsible for achieving and maintaining regular attendance at work and protecting their health and wellbeing and will be supported by managers, as appropriate.</p> <p>Staff are required to attend appointments with the Occupational Health and other medical appointments made by the Council.</p> <p>Staff are expected to act reasonably whilst they are absent from duty due to sickness and must not undertake any other work without prior management approval, or participate in activities that may be prejudicial to their recovery and/or return to work.</p> <p>Staff who are unable to attend work due to ill-health are required to notify their manager of their absence by following the sickness absence reporting procedure.</p> <p>Staff should not abuse or knowingly make a false, misleading or inaccurate claim for sickness absence/pay. Any doubt that a notification/claim, is false, etc, may, following investigation, lead to disciplinary action being taken against the staff.</p>
<p><b>Trade Unions / Representative:</b></p> <p>Trade unions are supportive of the Council's aim to protect the health and well-being of its members.</p> <p>Staff may be accompanied at any meetings under the 'Formal' Review meetings and the Consideration for Dismissal meeting by their trade union representative or a work colleague.</p> <p>It is the staff members responsibility to inform their trade union representative / work colleague of the details of the formal meetings. If a companion is not available to attend a meeting, an alternative date will be given. This will normally be within 5 working dates of the original date. No further alternative dates will be given unless there are exceptional circumstances.</p>
<p><b>Human Resources:</b></p> <p><b>Recruitment and Resourcing Team:</b></p>

RRT will be the first point of contact for general enquiries on the Attendance Management Policy and Procedure.

**Employee Relations and Engagement Team:**

The ER team will advise managers on handling sickness issues and monitor all formal cases to ensure that staff are managed in accordance with the policy, employment and equalities legislation, and best practice.

The ER team will attend the Stage Three (Consideration for Dismissal Meeting) to ensure the Attendance Management Policy is followed properly and fairly, and that any decision is reasonable in all the circumstances.

**Occupational Health:**

To provide support and advice on the medical aspects of any referral cases and the application of reasonable adjustments under the Equality Act 2010 in relation to the Council's obligations related to disability.

It will provide as appropriate, a counselling service, guidance and advice to ensure and enhance the wellbeing of staff.

Occupational Health, in line with the Access to Medical Reports Act 1988 process information about staff medical records in order to advise managers on how a medical condition may impact on the ability to carry out duties.

## 10. RELATED INFORMATION

### 10.1.1 SICK PAY

10.1.2 Statutory Sick Pay (SSP)/Occupational Sick Pay (OSP) will be paid in accordance with the contract of employment and length of continuous local government service.

### 10.1.3 DISABILITY RELATED SICKNESS

10.1.4 If staff have a disability, as defined under the Equalities Act, they are still required to comply with this policy. However, the manager may agree to different reporting requirements during periods of absence that are related to an impairment.

10.1.5 The Council has a duty to consider reasonable adjustments to assist staff to undertake their job and the manager will discuss with them whether any adjustments can be made to help staff to carry out their duties. Managers will consider:

- ❖ Increasing the trigger level within a rolling 12 months period
- ❖ What support can be given to alleviate any difficulties
- ❖ Adjusting duties, working arrangements or hours of work
- ❖ Whether additional or modified equipment would be of assistance to them

10.1.6 If staff have informed their manager that they have a disabling medical condition and, where they are fit for work but need time off for treatment, physiotherapy, health assessments or to attend courses to help them manage their condition, they can request Rehabilitation Leave, as set out in the Special Leave Policy. This



leave can be requested for both short and long-term periods of absence. For example:

- Regular short periods where staff are unable to attend work due to the need to attend appointments that will assist in managing an impairment. This may help staff to manage their attendance and reduce future periods of sickness absence. Up to 2 weeks paid rehabilitation leave a year to attend regular or one-off appointments can be requested.
- Longer periods of non-attendance to help manage changes created by a new or existing impairment. For example, attendance at a course to be trained to use a guide dog, pain management therapy or to adjust to changes in life following an accident that results in the staff becoming disabled. Up to 4 weeks paid rehabilitation for longer periods of non-attendance to enable staff to adjust to changes caused by new or existing impairments can be requested.

10.1.4 Rehabilitation leave is not to be used for periods of sickness absence.

10.1.5 Where sickness absence is related to a disabling medical condition, this will be recorded on the absence record.

## **10.2 PREGNANCY RELATED SICKNESS**

10.2.1 Pregnant staff are required to comply with the reporting arrangements in this procedure. Absence that is related to the pregnancy, i.e., the absence would not have occurred but for the pregnancy, will be recorded separately and will not count toward any sickness trigger.

## **10.3 SICKNESS BEFORE OR IMMEDIATELY FOLLOWING ANNUAL LEAVE**

10.3.1 When staff fall ill on the working day before they are due to start annual leave, they must contact their manager on the first day of planned annual leave to confirm:

- ❖ They are well and will be taking their planned annual leave as booked or
- ❖ They are sick and they will not be taking their planned annual leave

10.3.2 Staff may reclaim booked annual leave, but they must provide a doctor's certificate (fit note) to cover the period of sickness.

10.3.3 Staff who are sick on the day they are due to return from annual leave must report sick, as per the reporting procedure. The manager **may** request a fit note to cover the period of sickness following annual leave.

## **10.4 SICKNESS DURING ANNUAL LEAVE IN THE UK AND OUTSIDE THE UK**

10.4.1 Where staff become ill during a period of annual leave and wish to be recorded as sick, they must notify their manager in accordance with the procedure (i.e. contact the manager on the first day they become unfit for work). If they notify their manager of sickness absence retrospectively on their return to work, this will not be counted as sickness absence and the period of annual leave may not be reclaimed.

10.4.2 Staff must provide a fit note to cover the period of absence if they wish to have

their annual leave reinstated for the period that they were ill.

- ❖ If staff become sick while on holiday abroad, they will not normally be recorded as sick unless they have had to return home before the planned end date of their holiday (unless they were too ill to travel). Staff must provide a fit note to cover the period of sickness, which can include obtaining a doctor's certificate from another country.

## 11 SPECIAL CONSIDERATIONS:

- 11.1.1 **Meetings** under this procedure will normally be held at a council location (either physically or virtually, including by telephone), or, by agreement, at a staff members home or other location where mobility is preventing them from travelling. Where, exceptionally, it is not possible to hold a meeting with staff either at work or at an alternative location, they may be given the opportunity to make a written submission for consideration, or give authority for a trade union representative or work colleague to speak on their behalf.
- 11.1.2 **Term Time Only Staff:** Meetings should not be arranged for term-time-only staff during their holiday periods, except where there are serious concerns about their health and wellbeing and to delay could have an adverse detrimental effect.