

Report to: Appointments and Conditions of Service Committee

Subject: Review of Absence Management Policy and Procedures

Date: 02 August 2012

**Authors: Chief Executive
Service Manager; Organisational Development**

1. Purpose of the Report

To introduce both the management proposals relating to the Council's Absence Management Policy and procedures together with the recommendations made by the Joint Consultative and Safety Committee (JCSC) following a 30-day consultation exercise with trade unions, in order to inform this Committee in its decision to adopt revised policies relating to the management of sickness absence.

2. Background

Senior Leadership Team has a clear view that there is a need to reduce the current levels of sickness absence.

Although as a general trend sickness absence levels have reduced over the last ten years, from over 14 full-time equivalent (FTE) days lost per FTE at its worst, in more recent years, the pattern of absence has been erratic and the consistent improvement to the levels of attendance that we once had seen seem to have stalled. Although the year end outturn for 2011/12 shows absence at 9.92 FTE days, just short of the target 9.5 FTE days following a fairly steady decline in rates of absence since September 2011 (the time when the revised absence reporting process and documentation was introduced), this figure rose to 10.25 in May 2012. Currently, our targets seek to reduce absence to 8 FTE days by 2014/15.

The problem of the high rate of sickness absence has been discussed both in a working group chaired by the Chief Executive and at Senior Management Team during late 2011. In addition, and also towards the end of 2011, our existing sickness absence policies and procedures were the subject of an external audit review by RSM Tenon. The proposals made in the original report reflected both the outcome of discussion at Senior Management Team and the accepted audit recommendations together with the more recent revisions recommended by the newly-formed Senior Leadership Team.

Management proposals to review the existing Absence Management Policy and procedures were fully introduced to the JCSC on 30 May 2012 which was also

the start of formal consultation with trade unions. Consultation closed towards the end of June and the JCSC again met on 27 June to consider comments made by the trade unions.

In the **Background Papers** to this report, the original management report to the JCSC including the full suite of proposed modified policies and procedures is shown at Appendix A1. For completeness, the Equality Impact Assessment that was carried out on our existing policies procedures in 2010, and which contributes to the recommended policy modifications, is shown at Appendix A2.

Appendix A3 shows the Unison comments that were submitted for consideration to the JCSC of 27 June. These were the subject of discussion and contributed to the recommendations made by that Committee for which the draft recorded resolutions are shown at appendix A4.

Although detailed in full in Appendix A1 of the **Background Papers**, in summary, the main and substantial changes to current policy and procedures originally proposed are as follows:

Proposal

- 2.1 Redrafting of Stage Two of the Absence Management Procedure to simplify process and to introduce a longer length over which employees need to comply with attendance targets (four occasions or ten days' absence over a two-year period rather than one-year).
- 2.2 A tightening-up in the definition of cases where absence would be excluded from "trigger points" (and would be managed as a welfare issue) to include only cases that are either pregnancy or maternity-related, or which are recognised as a disability and defined as such under the Equality Act
- 2.3 Improvements to monitoring and management information, strengthening of escalation measures to senior management where there is non-compliance with process and clarity in respect to managers' role in the management of action.
- 2.4 A clear and strong statement is made about referral to Occupational Health at four weeks or before in cases of absences relating to stress, depression or similar, or where the cause of absence is not certain or straightforward, or if the timing of return to work is not clear.
- 2.5 Improved guidance for management of welfare or "Equality Act" cases is included.
- 2.6 Removal of potential for race or religious bias within the policies.
- 2.7 Promotion of healthy lifestyle opportunities which may be relevant to the management of certain types of absence. Reference is made to the Council's "Well@Work" initiative.

- 2.8 Reporting of work-related stress to the Safety Officer has been removed from the policy wording as this is not a “reportable absence” to the Health and Safety Executive.
- 2.9 Introduced for the first time is the idea of visiting people at home “unannounced”, particularly for short-term absences. Consideration has been given to ensure every visit has a purpose, rather than it being a means of “trying to catch someone out”.
- 2.10 The importance of proper notification to employees of any changes to policy, together with appropriate briefing and training to supervisors and managers is recognised in the original report.

The draft resolutions of the JCSC of 27 June (Appendix A4 in the **Background Papers**) identify both joint recommendations for amendment of the original management proposals and also identify specific concerns raised by Unison in respect to specific proposals but which were not supported as an agreed recommendation by Members of the JCSC. Although the JCSC was able to support many of the key management recommendations for change, in particular the changes to the “trigger point” definitions in the Absence Management Procedure, the following proposals were suggested for exclusion or modification:

Proposal 2.2: The joint view of JCSC was that the new policy and procedures should not adversely affect female employees. In particular, Unison had raised concerns that gynaecological conditions relating solely to women should be excluded from trigger points in the same way that maternity or disability defined under the Equality Act would be.

Proposal 2.4: Following discussion, it was the joint view of the JCSC that referral to Occupational Health on the basis as described in the original report was appropriate although any such referral should be sensitively handled and assessed on an individual case-by-case basis.

Proposal 2.8: The joint view of JCSC was that the notification of cases of work-related stress should still be reported to the Safety Officer.

Proposal 2.9: Unison did not support the proposal to make unplanned visits to employees’ homes (other than exceptional cases where there was genuine concern for someone’s wellbeing). Although not fully able to support Unison’s argument, Members of the JCSC suggested a modification to the policy proposal in respect to unplanned home visits to state; “This action only to be taken where other reasonable means of communication have been exhausted and that any such visit is only to be authorised by a Service Manager or Corporate Director”.

In addition, Unison suggested that there may be merit in more widely reporting levels of sickness absence to employees as well as ensuring that there continues to be easy access to absence management policies and procedures.

Following receipt of the draft resolutions from the Joint Consultative Committee as well as the comments received from Unison both in written form and also as part of discussion at the JCSC meetings, the Chief Executive together with

other senior managers of the organisation has taken the opportunity to again review the management proposals to be put to this Committee for resolution. The final proposals are detailed in the **recommendations** below and have been modified to reflect these views.

3. Recommendation

The Committee is **recommended** to adopt the new policies and procedures relating to the management of sickness absence as detailed in the Background Papers Appendix A1 with the following amendments and modifications:

- 3.1 Exclusions from “trigger points” in absence management to be allowed not only for conditions relating to disability as defined in the Equality Act and for absence relating to pregnancy or maternity, but also for gynaecological conditions.
- 3.2 A statement be included in the Absence Management Policy to confirm that any referral to Occupational Health will be sensitively handled and the need to refer be assessed on an individual case-by-case basis
- 3.3 The absence management procedures be amended to include the requirement that the Health and Safety Officer is informed of any cases of absence relating to work-related stress.
- 3.4 Withdraw in its entirety all reference to the proposal to allow unplanned home visits but to recognise that outside the policy, where there are genuine concerns about employees’ wellbeing and safety, home visits by a manager will still take place.
- 3.5 The timescale for implementation be amended to allow sufficient time to serve notice on the existing policy and procedures and to properly notify employees of the new arrangements and to deliver appropriate training in support of this; a target date of 1 January 2013 is proposed for full implementation.

Background Papers

Report to Joint Consultative and Safety Committee

Subject: Review of Absence Management Policy and Procedures

Date: 27 June 2012

Author: Service Manager; Organisational Development

1. Purpose of the Report

To reintroduce the proposals relating to the Council's Absence Management Policy and procedures and invite comments from trade union representatives as part of the formal consultation process that concludes on 29 June 2012. After final consideration of the Senior Leadership Team's proposals contained in the report, and taking account of any comments received, any recommendations made by the Joint Consultative and Safety Committee will be referred for consideration to the Appointments and Conditions of Service Committee which is responsible for authorising policy change.

2. Background

Proposals to review the existing Absence Management Policy and procedures were fully introduced to this Committee on 30 May 2012 which was also the start of formal consultation with trade unions. Consultation is due to close on 29 June 2012. The original report to this committee, including the full suite of proposed modified policies and procedures is shown at Appendix A1. For completeness, the Equality Impact Assessment that was carried out on our existing policies procedures in 2010, and which contributes to the recommended policy modifications, is shown at Appendix A2.

3. Recommendation

The Committee is asked:

- a. to consider the detailed report at Appendix A1,
- b. to receive and consider comments from trade union representatives, and
- c. subsequently to forward recommendations for consideration by the Appointments and Conditions of Service Committee which will determine final policy.

Appendix A1

Original report presented to the Joint Consultative and Safety Committee,
including the full suite of proposed modified policies and procedures

Report to Joint Consultative and Safety Committee

Subject: Review of Absence Management Policies and Procedures

Date: 30 May 2012

Author: Service Manager; Organisational Development

1. Purpose of the Report

To introduce to the Joint Consultative and Safety Committee (JCSC), proposals for changes to the current sickness absence policies and procedures of the Council and to commence a period of 30-day consultation on these proposals with the recognised trade unions. These proposals are endorsed by the Council's Senior Leadership Team (SLT)

At the close of consultation the JCSC will be asked to meet again to accept any comments made by the trade unions and to make any recommendations that they see as appropriate to the Appointments and Conditions of Service Committee in order to help inform any decisions made by that committee in respect to policy change.

2. Background

Senior Leadership Team has a clear view that there is a need to reduce the current levels of sickness absence.

Although as a general trend sickness absence levels have reduced over the last ten years, from over 14 full-time equivalent (FTE) days lost per FTE at its worst, in more recent years, the pattern of absence has been erratic and the consistent improvement to the levels of attendance that we once had seen seem to have stalled. Having said this, the year end outturn for 2011/12 shows absence at 9.92 FTE days, just short of the target 9.5 FTE days following a fairly steady decline in rates of absence since September 2011 (the time when the revised absence reporting process and documentation was introduced). Currently, our targets seek to reduce absence to 8 FTE days by 2014/15.

The problem of the high rate of sickness absence has been discussed both in a working group chaired by the Chief Executive and at Senior Management Team during late 2011. In addition, and also towards the end of 2011, our existing sickness absence policies and procedures were the subject of an external audit review by RSM Tenon. The proposals now detailed in this report reflect both the outcome of discussion at Senior Management Team and the accepted audit recommendations together with the more recent revisions recommended by the newly-formed Senior Leadership Team.

3. Proposals for change

A full copy of the proposed policy and procedures that contain the changes summarised in Section 3 below are shown at:

Appendix 1- Sickness Absence Management Procedure

Appendix 2- Absence Management Policy

Appendix 3- Sickness Reporting Procedure

Appendix 4- Attendance Incentive Scheme

Appendix 5- Summary of actions agreed from audit review 2011

A summary of the proposals for change is as follows:

3.1 Sickness Absence Management Procedure

3.1.1 The procedure is redrafted with revised trigger points in “stage two”. The intended purpose of this is to simplify what is a very complex scheme (Appendix 6 shows the current Absence Management Procedure Chart), and to try to further encourage an ethic of consistent attendance. In effect, the changes proposed are:

- The removal of the additional “six-month targets” at the start of the stage two process. There is no real evidence of the added value of this set of triggers and they add complication to a scheme that is often misunderstood by managers.
- The return of stage two triggers to reflect those of stage one (four occasions/ 10 days) but to extend the period of monitoring over two years. There is little doubt this level of consistent attendance may prove difficult for some employees to attain, however, there is a drive by the organisation to improve attendance and embed a culture of attendance and it is important to bear in mind that:
 - Before being placed into Stage Two, an employee will have needed to have breached the stage one target in the first instance.
 - Once in Stage Two, the longer monitoring period still allows for a “bad spell” at any time over two years.
 - Where stage 3 is reached, if there is a genuine prospect of improvement, dismissal may be avoided.
 - Conditions relating to an Equality Act-defined disability will be managed separately and differently within policy and procedure, as will pregnancy or maternity-related sickness absences.

3.1.2 Phraseology has been tightened up to reflect discussion at SMT in 2011. Treatment outside the policy and procedure is expected now only for conditions that are either pregnancy or maternity-related or which are recognised as a disability and defined as such under the Equality Act. This proposed change was supported by the recent RSM Tenon audit report.

3.1.3 A more structured approach to monitoring and escalation of non-compliance will be adopted. This is a particular requirement of the

recent audit review of absence management procedures. Systems will be developed as part of the Organisational Development work programme during 2012/13. Changes to the current practices are proposed both in the strengthening both of the Sickness Absence Management Procedure (paragraph 2.6) as well as the Policy.

3.1.4 Appeal rights will be amended to reflect the new reporting arrangements in place at 1 January 2012. These changes are proposed both in the body of the Sickness Absence Management Procedure and in the procedural guidance for the Appeals and Retirements Committee (Appendix 1A).

3.1.5 A copy of the current process is shown at Appendix 6.

3.2 Absence Management Policy

3.2.1 The proposed revised trigger targets described above are reflected in the re-drafted policy.

3.2.2 A clear and strong statement is made about referral to Occupational Health at 4 weeks or before in cases of absences relating to stress, depression or similar, or where the cause of absence is not certain or straightforward, or if the timing of return to work is not clear. This will remove uncertainty both for an affected employee and their manager and will help to effectively manage cases when improvement is expected but then does not materialise. Again, this previous proposal received support from the recent audit review. (Paragraph 2.2 / 4.2 of the Absence Management Policy (AMP))

3.2.3 Clarity is provided about how a single ten-day absence that is neither pregnancy/maternity-related nor identified as a disability under the Equality Act is to be treated in respect to trigger points in the first stage of the policy (i.e. counted as an occasion, but not added to the count of total days). Although this practice has already been adopted as it is merely clarification of how the current scheme should operate, the proposed policy makes this definition clear and open. It is further proposed that the same logic is applied to the trigger points in the second (10 days) and final (five days) stages. (Paragraph 2.8 of AMP)

3.2.4 Improved guidance is included in respect to managing "Equality Act cases"; for example the use of appropriate changed trigger levels more appropriate to an employee's specific circumstances. Indefinite poor attendance cannot be sustained for any employee. By altering the scheme to reflect an appropriate and fair set of targets will help to both manage certain cases of absence but also to help defend potential claims of unfair dismissal. (Paragraph 2.8 of AMP)

3.2.5 The current scheme refers to treatment of cases "where there is substantial underlying condition or that are DDA-related". At the time of writing the original policy this seemed reasonable, however, over time the term "underlying condition" has become difficult to apply consistently and may have been open to interpretation and possibly abuse. It is proposed that the term "underlying condition" be removed

from the policy and to only treat differently absence that is specifically defined as disability within the Equality Act or which is maternity or pregnancy-related. Where necessary, medical advice will be obtained to determine if a condition is covered by the Equality Act.

In practical terms, this would mean that:

- Only cases that are covered by the Equality Act definition of “disability” (i.e. a long-term condition affecting everyday living, for example cancer, M.S. etc) or which are maternity/pregnancy-related will be managed outside the normal “trigger system” on a case by case basis.
- A single absence of ten or more days (5 or more days in the final stage) will be counted as an occasion of absence but not used against the “number of days trigger”. Again, maternity/pregnancy or Equality Act cases are managed outside normal triggers and such absence may not count as an occurrence (see 3.2.3 above).
- Short lengths of absence (below 10 or in the final stage, 5 days), unless they are specifically defined within the Equality Act, or which are maternity or pregnancy-related will be counted both towards the total number of days absence and the number of occasions triggers.

3.2.6 Already accepted as best practice guidance by Senior Management Team (SMT), trade unions and the Equalities Group in 2011, is the recognition that there needs to be proper management of absences that may be influenced by race (for example sickle-cell anaemia) or religion (for example conditions requiring blood transfusion). The revised draft policy now reflects this guidance. (Paragraph 2.5 of AMP)

3.2.7 The policy now refers to advice and support that may be provided internally in respect to promoting a healthy lifestyle which may be relevant to the management of certain types of absence. Reference is made to the “Well@Work” initiative. (Paragraph 2.9 of AMP)

3.2.8 Wording is altered to strengthen and clarify the purpose of the return to work interview with a particular emphasis on improving future attendance. (Paragraph 2.1 of AMP)

3.2.9 As with the Absence Management Procedure (section 3.1.3 above), the Policy is also amended and strengthening in respect to monitoring of actions taken by departmental managers and escalation of non-compliance with policy or procedure. Section 5 of the Absence Management Policy now defines the principle of monitoring and reporting of management actions. Further development of process to determine how this occurs will take place during 2012/13 through the Organisational Development Team’s work programme.

3.2.10 As recommended by the RSM Tenon audit report, reference to the reporting of work-related stress to the Safety Officer has been removed from the policy wording. This is not a reportable absence under the RIDDOR legislation.

3.2.11 An additional statement is included in the Policy draft (paragraph 2.10) that confirms the responsibility of managers and Service Managers to identify patterns of sickness absence and to investigate and take appropriate action, with support from a senior Personnel Officer as necessary.

3.3 Sickness Reporting Procedure

3.3.1 Introduced for the first time is the idea of visiting people at home “unannounced”, particularly for short-term absences. Although discussed at the “Sickness Absence Group”, the proposal is worded quite carefully as clearly it is not only contentious but also may potentially conflict with the Human Rights Act (“right to a private life”). Consideration has been given to ensure every visit has a purpose, rather than it being a means of “trying to catch someone out”. (Paragraph 1.3)

3.3.2 Generally the phraseology has been brought up to date and refers now to the new Sickness Recording Form (SC1) which has already been agreed by SMT for implementation.

3.4 Absence Incentive Scheme

3.4.1 The scheme has been in place for many years. A review of the current practices was undertaken towards the end of last year and the value of the schemes was discussed through the Chief Executive’s working group and the STEPs Group (the employee engagement group) as well as extensive consultation taking place direct with employees across the organisation. The RSM audit report supported this action to challenge the current incentive scheme arrangements.

3.4.2 The result of the employee consultation showed that only 40% of respondents felt that the current prize draw incentive scheme actually encouraged improved attendance. A slightly higher figure of 44% of respondents felt that additional leave incentivised their attendance. This response was the subject of discussion at SMT and in the STEP Group at the end of last year and more recently with SLT and again with STEP. In particular SLT’s view was that the current prize draw no longer provided sufficient incentive or reward and that the budget could be better used for the benefit of more employees.

The current policy allows for the withdrawal of any of the attendance incentive awards at any time. After consideration of the consultation results, at the end of April SLT confirmed their decision to withdraw the prize draw scheme but to retain the award of additional annual leave. The last prize draw was made in April.

The saving of approximately £9,075 realised through the removal of the prize draw was proposed by SLT to be used in whole or part, to fund the Council’s “Well@Work” employee wellbeing programmes (health and fitness) and this was supported by the STEP Group. It is anticipated that using funding in this way will meet SLT’s stated aim of spread health benefits to a larger number of employees.

3.4.3 In summary, under delegation within existing policy, the current Absence Incentive Scheme has been redesigned as shown in Appendix 4 and no further cash prize draws will take place after 31 March 2012 but that the annual leave incentive remains unaltered.

4. Training

- 4.1 Training in absence management procedures and case management has been regularly delivered. In recent times, the emphasis has been on working with small teams of departmental managers to refresh knowledge of practices and procedures, to identify and share good practice, and to help managers to work through live cases. This was last undertaken in mid 2011 when the new sickness reporting system was introduced across the Council.
- 4.2 The RSM Tenon audit report supported the idea that training is an important feature of effective absence management. Although detail needs to be developed, should the proposals for changed policy and procedure be adopted, briefing sessions will be delivered to notify all supervisors and managers of the changes so that employees, in turn, can be effectively briefed with further support training sessions offered to smaller groups of managers who feel that they need a more in-depth briefing or training.
- 4.3 All employees will be written to, to explain the new arrangements in summary terms and to outline the method of implementation. Although administratively burdensome, this will not only ensure that all employees know about the new standards of attendance, it also ensures that the issue of sickness remains high profile.

5. Future Development Work

- 5.1 Improvements to, and simplification of the absence management monitoring systems are necessary. This was a feature brought out in the RSM audit report, from which a summary of agreed actions is shown at Appendix 5. Included in the Organisational Development work plan for 2012/13 is the development of such improved reporting.
- 5.2 Other agreed audit recommendations shown at Appendix 5 include the delivery of appropriate training events (as described already in section 4 above) and a review of management information. It is proposed that once a new scheme is implemented, during 2012/13 Senior Management Team will be consulted to determine if changed or additional management information is required.

6. Implementation

- 6.1 Change to policy requires union consultation and referral both to the JCSC to the Appointments and Conditions of Service Committees. On this basis, consultation and committee approval is likely to be at least a six-week process.

6.2 There are a number of implementation issues to consider following consultation and approval. Assuming that the proposals for policy and procedure development are implemented largely unchanged, the following issues are key:

6.2.1 Briefing for managers and supervisors, and notification of all employees. This is necessary so that all employees are aware of the new system “trigger points” and will need to take place prior to the policy implementation date.

6.2.1 The trigger reports produced for managers will need to be altered to reflect the new parameters. Although this work can commence behind the scenes early in the process, and it may be possible to adapt the reports in-house, due to their complexity there may be a need to engage consultancy support to make the background report changes; funding for this would be drawn from existing budgets. In whichever way the reports are developed, there will be a time-commitment for officers.

6.2.2 It is proposed that implementation of the scheme takes place on 1 November 2012 subject to necessary notice of change being served (12 weeks) and sufficient training to have been delivered to managers.

For an employee who has already reached a particular stage within the current scheme at the point of implementation of the new policy and procedures, they will continue to be treated within the general terms of that stage, but as defined by the new policy. Any and all occasions of absence existing at the point of implementation will be counted towards the triggers of the new scheme.

6.2.3 A provisional implementation timetable is suggested as follows:

End May Introduce at JCSC and commence consultation with unions (30 day)

End June Review by JCSC at end of consultation period

Start July Final recommendations to Appointments and Conditions of Service Committee

Mid July 1) Write to all employees to confirm change to terms of employment in respect to absence management including notification of removal of Incentive Prize Draw from 1 April 2012 and management within new scheme with all absences starting from 1 November 2012.

2) Training briefings delivered to managers and supervisors to identify changes to policy and procedures.

3) General communication of changes to scheme, triggers and removal of Incentive Draw Scheme. Detail to be confirmed, but to include: Summary “fact sheets” for all

employees (to be used by managers for team briefings)/
Gen item/ Intranet item.

4) Alter parameters of absence trigger reports to be used
for absences from September onwards.

Start Nov Implementation of new schemes (as described in para
6.2.2).

7. Costs

Although there may be no additional costs directly relating to the implementation of these proposals, indeed with the removal of the Incentive Prize Draw Scheme there are potential savings, there are a number of indirect costs that may arise. These include:

7.2.1 Possible consultancy costs arising from the need to redesign absence trigger reports. Although this may be possible in-house, should there be a need for external assistance then costs are estimated at about £1,000 funded through existing budgets.

7.2.2 There will be a requirement for managers and supervisors to attend additional training sessions prior to implementation.

8. Recommendations

The Committee is asked to:

- i. note the content of the report and the changes made to policy and procedures as detailed and the programme of implementation suggested.
- ii. receive initial comments from union representatives.
- iii. invite trade union representatives to consider the proposals and to forward comment or suggestion to the Corporate Director that will be reported back to, and considered by this JCSC towards the end of the formal consultation period.
- iv. note the change to the Attendance Incentive Scheme (removal of current Incentive Prize Draw Scheme from 1 April 2012) made under delegation through existing policy by Senior Leadership Team.

Formal Absence Management Procedure

1. Purpose of the procedure

The formal absence management procedure is designed to provide a framework for the fair management of sickness absence for those employees for whom a manager has concern about their level or frequency of sickness absence. The procedure governing how sickness absence is reported is covered in a separate scheme, the Sickness Reporting Scheme.

2. Placement of an employee into the Procedure

- 2.1 This procedure will be initiated and carried out by line managers, normally at a senior level, but not necessarily a Service Manager. Managers are expected to seek advice from Personnel before placing an employee within this procedure. In some cases it may be appropriate for a Personnel Officer to be present at meetings between managers and employees where health issues are discussed.
- 2.2 The general Sickness Absence Management Policy applies to any employee who is not already being monitored within the Formal Absence Management Procedure. Once an employee appears in the Stage One Exceptions Report (four or more occasions of absence or ten or more days of absence during a 12-month period) they will be placed within this procedure, subject to the absences that trigger the report not being due to either a pregnancy-related condition or a disability recognised and defined in the Equality Act (2010).
- 2.3 The Council's Sickness Absence Management Policy describes the management action that will have taken place prior to an employee being issued with a Notification of Concern and being placed into the Formal Absence Management Procedure. Section 3 of the Policy explains how this formal Absence Management Procedure is activated.
- 2.4 Once placed into this Procedure, an employee is expected to meet further specific standards of attendance.
- 2.5 If the employee does not meet the prescribed standards of attendance at Stage Two, and there are no, or insufficient reasons offered in mitigation, a Final Notification of Concern will be issued which sets down a final set of standards that must be reached by the employee. If the Final Stage standards are not met, dismissal may occur following a formal Hearing.
- 2.6 Senior Leadership Team requires that the appropriate Service Manager is notified of any occasion when an employee breaches a trigger point but a Notification of Concern is not issued even though this would be the expectation within policy. Normally this notification will be produced through the Organisational Development team. A copy of a notification of this non-compliance will be sent to the appropriate Corporate Director. This monitoring process will be carried out within the Organisational Development Service, but action taken as a result of any non-compliance is the responsibility of the appropriate Service Manager or Corporate Director, as appropriate.

The standards expected

3. Stage One

- 3.1 Stage One commences when absence reaches 4 occasions or reaches 10 working days within a 12-month period and Section 3 of the Absence Management Policy has been followed.
- 3.2 If the employee's attendance does fall below the expected standards, a formal hearing will be called to discuss the reasons for the absences, unless there is a known underlying condition that is defined as a "disability" within the Equality Act that is already being managed, or which is pregnancy or maternity-related.

A hearing under the Formal Absence Management Procedure must be held. At least seven working days' notice of attendance will be given to the employee and the right to be supported at the meeting by a trade union representative or work colleague will be explained. The role of the supporter is not, however, to answer questions on behalf of the employee. At this meeting the employee would be expected to identify any mitigating circumstances for the level of sickness absence. Referral to Occupational Health to determine if there are any reasons for the level of absence may be appropriate at this point.

The manager will determine whether to issue a Notification of Concern or a Letter of Guidance, however the latter case will only be appropriate if the sickness absence trigger breach is due wholly or in part due to an Equality Act-defined disability or a pregnancy/ maternity-related absence.

- 3.3 Contained within any Notification of Concern issued at the conclusion of the hearing, will be the expectation that attendance will not drop below a certain standard. Full details of the process that may lead to the issue of a Notification of Concern are included in the Sickness Absence Management Policy.
- 3.4 If a Notification of Concern is not issued, instead a Letter of Guidance will be issued reflecting discussion about how the disability (which needs to be defined within the Equality Act) or pregnancy/maternity-related condition is to be managed. In such circumstances, the employee will continue to be monitored within Stage One until 12 months without reaching the trigger point has elapsed (taking into account any absences that the manager believes should not be placed outside the monitoring process). Later, if absence not relating to the Equality Act-defined disability or maternity/pregnancy-related condition reaches the trigger point for Stage One, the employee will again be placed into the procedure and managed as described above.
- 3.5 If the employee believes that they should not have received the Notification of Concern, there is a right of appeal to the appropriate Service Manager unless this person has been involved directly in a case, when an appeal should be made to another independent Service Manager as nominated by a Corporate

Director. Any appeal should be made in writing within 14 days from receipt of the Notification of Concern.

- 3.6 Any Notification of Concern or Letter of Guidance needs to be copied to the Service Manager; Organisational Development. This will be placed onto a personal file.

4. Stage Two

Once placed within Stage Two, specific standards of attendance are required. Employees will be monitored within Stage Two of the procedure once they have been issued a Notification of Concern within Stage One. The trigger for further action within Stage Two is four or more occasions of absence or 10 or more days of absence in the following 24-month period.

- 4.2 If the employee's attendance does fall below the expected standards in Stage Two, again a formal hearing will be called to discuss the reasons for the absences. Again, the hearing is not disciplinary in its purpose.
- 4.3 At least seven working days' notice of attendance will be given to the employee and the right to be supported at the meeting by a trade union representative or work colleague will be explained. At this meeting the employee would be expected to identify any mitigating circumstances for the level of sickness absence. If the employee has not by this stage been referred to Occupational Health to determine if there are any reasons for the level of absence, it would normally be expected that a referral is made at this point.
- 4.4 Other than occasions where attendance is being managed differently due to the employee's condition being an Equality Act-defined disability or relating to pregnancy/maternity, the manager will confirm the intent to issue a Final Notification of Concern.
- 4.5 If the manager believes that it is appropriate to issue a Letter of Guidance rather than a Final Notification of Concern, the employee will continue to be monitored within Stage Two of the procedure until two years has elapsed since their initial Notification of Concern was issued through Stage One.

It is only appropriate to issue such a Letter of Guidance if the triggers have been breached by absence either wholly or partly due to Equality Act-defined disability or due to a pregnancy/maternity-related condition.

- 4.6 The Final Notification of Concern will be issued in writing. It will state that the attendance of the employee will continue to be monitored and that future absences will carry on being treated within the Formal Absence Management Procedure. Contained within the Final Notification of Concern will be the expectation that attendance will improve to the required standard.
- 4.7 If the employee believes that they should not have received the Final Notification of Concern, there is a right of appeal to the appropriate Service Manager unless this person has been involved directly in a case, when an appeal should be made to an independent Service Manager nominated by a

Corporate Director. Any appeal should be made in writing within 14 days from receipt of the Final Notification of Concern.

- 4.8 Any Notification of Concern or Letter of Guidance needs to be copied to the Service Manager; Organisational Development. This will be placed onto a personal file.

5. Final Stage

- 5.1 From the issue of the Final Notification of Concern the employee should not be away from work due to sickness absence on two or more occasions or for a total of 5 or more working days during the next six months. If these levels of absence are reached at any point during the six-month period, the manager may take action at that point. It is not necessary to wait until the monitoring period has expired before action is taken.

- 5.2 If the employee's attendance is satisfactory during and at the end of the 6-month monitoring period of the Final Stage, measured against these standards, they will then return to be monitored under the previous stage (Stage Two) of the Formal Absence Management Procedure until two years has elapsed since their initial Notification of Concern was issued through Stage One. If their level of sickness absence triggers again their inclusion in an exceptions report, the Stage Two process will again be followed and may again conclude with a Final Notification of Concern. At the end of the two-year period, the employee will drop out of monitoring within the Absence Management Procedure.

If absence does trigger inclusion in the Final Stage Report, but the employee is not dismissed due to mitigating circumstance, including strong and credible evidence that there is likely to be a reasonable prospect for substantial improvement to attendance, they will continue to be monitored within the Final Stage of the process until six months from the issue of Final Letter of Concern has been issued. Unless further absence triggers inclusion again on the report which requires treatment again within the Final Stage of the Procedure, after six months, the employee will return to Stage Two until two years have elapsed from the point of issue of the first Notification of Concern.

- 5.3 If the employee's attendance does fall below the expected standards, the line manager will meet with the employee to establish if there is any particular underlying condition that is recognised as a disability under the Equality Act, or which may be maternity or pregnancy-related, that may have caused inclusion on the Final Stage exceptions report. If there are such reasons, the manager at that stage may decide to manage the absence through a Letter of Guidance containing a plan to manage the condition. If there appear to be no such circumstances, or the absences have exceeded personal targets that recognise the disability and have been set to recognise the problem, a final hearing will be called to discuss the reasons for the absences. A more senior manager, or if necessary to preserve independence, an independent manager from a different service area will chair the final hearing.

- 5.4 At the final hearing, the manager chairing will explore the reasons for absence, concerns about the amount of past sickness absence, the effects that absence has on the business and any strategies for improvement that might be agreed by the employee and manager. Any mitigating circumstances relating to the employee's personal circumstances or the nature of the absences and if they are work-related should again be considered. The option of redeployment on a permanent or temporary basis or adaptation of working methods and environment will also be considered if it is felt that this may improve attendance.
- 5.5 The final hearing is a hearing under the Formal Absence Management Procedure. Although the Hearing is not disciplinary in its nature, it will be held in a similar format to the Council's Disciplinary Procedure. That is to say; the manager dealing with the case up to this point will present their summary of the case to a more senior line manager who will chair the Hearing. The employee or their representative will be invited to ask questions and to put their case to the Hearing Chair.
- 5.6 Reasonable notice of attendance (at least 7 working days) will be given to the employee and the right to be supported at the meeting by a trade union representative or work colleague will be explained. Again, the role of the supporter is not to answer questions on behalf of the employee but rather to help present the employee's case and provide guidance if necessary.

At this Hearing, the employee would be expected to identify any mitigating circumstances for the level of sickness absence. The need to take further advice medical advice from Occupational Health will be considered.

Again, the option of redeployment on a permanent or temporary basis or adaptation of working methods and environment will be considered if it is felt that this may improve attendance.

- 5.7 If after proper consideration, the Chair feels that the employee's attendance is a still a potential matter of concern for the future and there are insufficient mitigating circumstances for the continued level of absence, the Chair may choose to dismiss the employee with appropriate notice. The dismissal will be for non-compliance with the policy governing standards of attendance, without good reason. Where it is possible that the employee's attendance may improve if they were to undertake work of a different kind, and there was medical evidence to support this, the Authority would make efforts to redeploy to an appropriate post during the period of notice; any redeployment on medical grounds will be on a pay protection basis as defined in the Protection Policy.
- 5.8 Any decision to dismiss will be confirmed in writing. The letter will confirm the right of appeal against the dismissal. The Appeals and Retirements Committee would hear any appeal. The intention to lodge an appeal should be made in writing to the Service Manager; Organisational Development to be received within 14 calendar days from receipt of the letter of dismissal. Appendix A contains general guidance about the operation of the procedure that is applied by the Appeals and Retirements Committee. A diagram representing the Sickness Management Procedure is shown at Appendix B.

Appeals and Retirements Committee

The Committee has delegated powers to act.

General procedural guidance:

1. Advisers

- 1.1 Either side shall have the right to have in attendance persons with specialised knowledge in a consultative or advisory capacity, but without the right to vote. For the purposes of representation, the appellant has the right to be accompanied at the appeal hearing by a trade union representative or workplace colleague only. Written statements or supporting documents produced for use at the appeal hearing can originate from any source.
- 1.2 Such attendance shall be notified to the Secretary who will arrange for notices of meetings, agendas and records of the meeting as necessary, to be forwarded to such representatives, unless otherwise requested. Documents to be referred to at the appeal hearing should be supplied in advance to the Secretary so that they can be forwarded to interested parties prior to the appeal hearing.

2. Voting

- 2.1 The decision of the Committee, where not unanimous, will be reached by a majority vote.

3. Decisions

- 3.1 The decision of the Appeals Committee will be made known orally at the end of the hearing.
- 3.2 The decision will be confirmed in writing.
- 3.3 The decision will be final in respect to the internal processes of the Council.
- 3.4 If the decision is in favour of the employee, it will be the duty of relevant Service Manager to take all necessary steps to implement the decision.

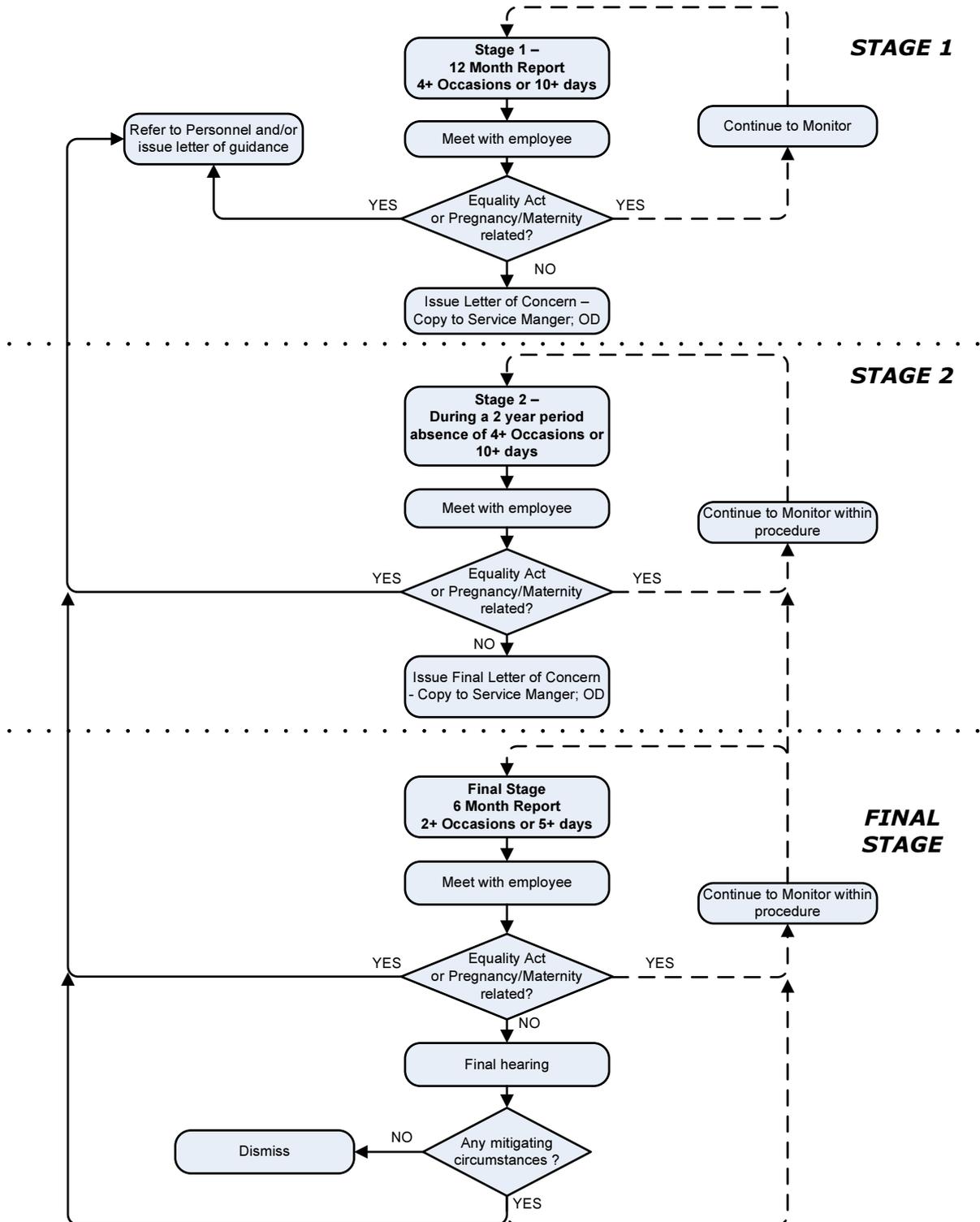
4. Procedure

- 4.1 The hearing will be conducted in an informal but orderly manner.
- 4.2 The local authority's representative(s) shall put the case in the presence of the appellant and his representative and may call witnesses.
- 4.3 The appellant (or their representative) to have the opportunity to ask questions of the local authority's representative on the evidence given and of any witnesses called.
- 4.4 The Committee may ask questions of the local authority's representative and witnesses. Normally witnesses called would then withdraw.

- 4.5 The appellant (or their representative) to put their case in the presence of the local authority's representative and to call such witnesses as they wish.
- 4.6 The local authority's representative to have opportunity to ask questions of the appellant and witnesses.
- 4.7 The Committee may ask questions of the appellant and their witnesses. Normally witnesses called would then withdraw.
- 4.8 The local authority's representative and the appellant (or representative) to have an opportunity to sum up their case if they so wish.
- 4.9 The local authority's representative, the appellant and their representative withdraw.
- 4.10 The Committee, with the officer appointed as Secretary to the Committee, to deliberate in private only recalling the local authority's representative and the appellant (and representative) to clear points of uncertainty on evidence already given. If recall is necessary both parties are to return notwithstanding only one is concerned with the point giving rise to doubt.
- 4.11 The Committee will announce the decision orally to both sides at the end of the hearing.
- 4.12 The decision will subsequently be confirmed in writing to both parties by the Secretary to the Committee.

SICKNESS MANAGEMENT PROCEDURE

Appendix B



Managers Notes

- If at any stage there is evidence of disability or the reasons for the absence are not straightforward, seek further advice from Personnel.
- The next stage in the procedure is activated once the relevant trigger is reached and the employee appears on the relevant report.
- Example 4+ means 4 or more; 10+ means 10 or more.

Sickness Absence Management Policy

1. Policy Objectives

The purpose of this policy is to identify the methods by which the Authority would expect to manage sickness absence. In adopting this policy the Council aims:

- ◆ to ensure there is a consistent approach to sickness absence management across all Departments
- ◆ to ensure that each individual case is dealt with fairly with due regard to individual circumstances
- ◆ to confirm that unless there is evidence to the contrary every occasion of absence is considered to be genuine. Any abuse of the sickness absence scheme would be dealt with under the appropriate disciplinary procedures

2. General principles of absence management

- 2.1 Where an employee has had sickness absence of any length, a return to work interview should always be conducted by the manager using the Sickness Reporting Form (SC1). The Sickness Reporting Scheme details this requirement.

The return to work interview should take the form of an open discussion and should focus not only on the nature and length of the recent absence, but also on effective reintegration back into work and the possibility of preventing, or reducing the likelihood of future absence.

- 2.2 Where there has been an absence of any length due to stress or depression, this must be treated with sensitivity and managers may wish to seek guidance and support from a senior Personnel Officer. In such situations, managers should always carry out a more formal return to work interview in private surroundings. If the reason for the sickness absence is work related, action should be taken immediately to try to resolve this.

For each and every occasion of stress-related absence or similar, that lasts or seems likely last for a period of four weeks or more, the Senior Personnel Officer should be notified, following which a referral to the Occupational Health Service will be made. At the latest, this referral will normally be made after four weeks of absence. If appropriate to the case, a referral may be made at any time prior to the fourth week of absence. The same process should be adopted where the reason for the absence is uncertain or not straightforward, or if the timing of return to work is not clear, or simply where early medical advice would help manage the absence.

- 2.3 If the absence is non-work related then an early understanding of any difficulties that an individual faces will help in managing their performance and giving appropriate assistance.
- 2.4 To make sure that sickness absence is being recorded properly it may be appropriate to make random checks comparing reasons for absence given at the time of notification against self-certification forms completed as part of the return to work interview process and also doctor's notes that are submitted.
- 2.5 Certain medical conditions may potentially affect different racial groups in different ways, for example, sickle-cell anaemia. Such conditions, where substantial, will be defined within the Equality Act and will be managed appropriately within the policy.

Similarly, an absence may be prolonged or affected due to treatment having been related to the demands of a particular faith or religion. In such cases, the management of an absence will take this material difference into account. This does not mean that absence will not be managed properly, but that it will be managed in a reasonable way and with reference to the difference.

- 2.6 Absence will be monitored to establish if any pattern exists. A pattern of absence could be:
- ◆ Employees who have recurring incidences of short-term sickness absence
 - ◆ Employees who are regularly absent through sickness at certain times, for example before or after weekends or holidays.
 - ◆ Employees who are on long-term sick leave.
- 2.7 Should there be any evidence that the sickness is not genuine or that the employee has been undertaking other work whilst off sick, this is potentially a disciplinary offence. The appropriate procedure should then be followed. Such matters may be viewed as issues of gross misconduct.
- 2.8 For single absences of 10 or more days (in stages 1 and 2 of the scheme) and 5 days (in the final stage of the scheme) , the absence will be treated in the following way for the purposes of this Scheme:
- 2.8.1 The absence will count as an occasion of absence for monitoring purposes and will count towards the total number of occasions of absence necessary to trigger a movement to the next stage of the absence management process where the limit for the number of occasions has been breached (subject to the absence not being covered in 2.8.3).
- 2.8.2 The number of days in any absence of 10 or more working days (5 if monitored under the final stage), irrespective of reason, will not be added to the total number of days to be used when assessing whether or not a trigger point has been reached.

- 2.8.3 If the absence is recognised as a disability under the Equality Act, or it is pregnancy or maternity-related, then it will not automatically be taken account of for the purposes of determining whether a trigger point has been reached or not.

When managing such conditions, a different set of trigger points (either total days or number of occasions) may be determined by a manager following consultation with a senior Personnel Officer and after receipt of Occupational Health advice. These trigger points will reflect a more fair and reasonable set of attendance targets appropriate to an individual, with a particular condition working in a particular job. Any such revisions to the normal trigger points within the Scheme will be notified in writing to the employee. If that employee believes that the revised set of trigger points is not fair and reasonable, they have the right to appeal against the manager's decision through the Grievance Procedure of the Council.

- 2.9 The Council tries to encourage the wellbeing of all of its employees. There are many practical examples of this sort of support, for example, reduced costs of membership for the Council's leisure centres and periodic health fairs at which a range of health advice is offered. In addition, where there is support from a GP, arrangements can be made for free use of Leisure Centre facilities for limited periods of time in order to help speed recovery and a return to work. Advice about lifestyle and diet can be given by the Council's own officers through the Well@Work programme.
- 2.10 Line managers and each Service Manager are responsible for monitoring absence patterns within their work teams (through absence monitoring reports and "MyView" functionality).

3. The management of frequent short term absences

- 3.1 Management information exception reports will be produced on a regular basis. These will identify employees whose absence might seem to be a cause for concern either in respect of the frequency of absence or the total amount of absence over a period of time.

If an employee who has a recognised medical condition defined by the Equality Act appears on this report, it is expected that managers will already have identified this as a reason for absence, probably at the return to work interviews held earlier. In such cases it may be more appropriate to manage the absence on a case-by-case basis as described below rather than following the normal short-term absence management process.

If trigger points are reached, a management meeting is necessary. Where an employee has not previously appeared on an exception report, or where they have fallen out of monitoring at Stage Two (or beyond) due to satisfactory attendance, and they appear on the exception report that identifies people who, during a 12-month period have reached 4 or more occasions of absence or a total of ten or more working days' absence (and where there is no recognised Equality Act-defined disability or pregnancy-related condition, and

taking into account of any single absence of ten or more days as described in paragraph 2.8), managers should ensure they discuss with them reasons for this pattern of absence. This meeting should be called on a formal basis, with proper notice of at least 7 working days, and giving the opportunity for the employee to be accompanied by a union representative or work colleague if they so wish. By hitting these trigger points, an employee has entered Stage One of the Formal Absence Management Procedure.

The manager should confirm at this meeting that no underlying medical condition exists that is pregnancy-related or which is defined under the Equality Act. Also, in the discussion it is important to identify possible personal circumstances (problems with home life, care of others etc) which may have an impact on attendance but which could be treated, or accounted for in ways other than by taking sickness absence. In such cases it may be more appropriate to manage any future such absence through other procedures for example, the use of: flexible working arrangements, annual leave, unpaid leave or special leave. The aim would be to agree how the absence levels can be reduced through mutual flexibility.

- 3.2 If situations arise which are complex, difficult or outside the individual manager's sphere of experience, it may be appropriate to work with other colleagues, such as senior managers or a senior Personnel Officer to try to identify ways of addressing certain issues. It may be appropriate to consider the relevance of support that could be offered by external specialists.

If there appears to be an underlying or ongoing medical condition which is causing excessive absence it may be appropriate to refer the individual to Occupational Health for advice. This should be done through a senior Personnel Officer and under no circumstances done without prior discussion with the individual. In a similar way, there may be personal or work-related issues which have meant that the employee's attendance has been poor. These situations too should be managed sensitively on a case-by-case basis. In such circumstances, the method for managing future absence should normally be confirmed in writing to the employee. Any formal Notification of Concern issued should contain details of any agreement detailing how absence might be reduced in the future, or accounted for in different ways, together with any specific, personal targets for attendance.

- 3.3 If absences do not appear to be due to an underlying pregnancy or maternity-related medical condition, or a disability defined within the Equality Act, then at the formal meeting it will be necessary to discuss how the individual is going to reduce the level of absence. In such circumstances a detailed discussion should take place with the employee to consider the reasons for the absences, the impact of current and future absences on the business and the likelihood for improvement in attendance. At this meeting the employee would be expected to identify any mitigating circumstances for the level of sickness absence and which might have a bearing on their ability to improve future attendance.
- 3.4 Where an employee does choose to be accompanied at the meeting, it must be understood that the role of the supporter is not to answer questions on behalf of the employee.

- 3.5 If the employee has breached the trigger points of the scheme, and absences are not due either to a maternity or pregnancy-related condition or which are not defined as a disability under the Equality Act, a Notification of Concern will be issued by the line manager. This letter will outline the manager's concerns about the amount of past sickness absence, the effects that the absence has on the business and any strategies for improvement agreed by the employee and manager. The issue of this Notification will mean that the employee's attendance will be monitored and managed within Stage Two of the Formal Absence Management Procedure.
- 3.6 If the employee believes that they should not have received the Notification of Concern, there is a right of appeal to the appropriate Service Manager, or if they have dealt directly with the case, an independent Service Manager nominated by a Corporate Director. Any appeal should be made in writing within 14 days from receipt of the Notification of Concern. A Letter of Guidance (only issued in cases where absences are due to a pregnancy-related condition or an Equality Act-defined disability), due to its nature, is not something against which there is a right of appeal.
- 3.7 In addition to the issue of the Notification or Guidance letter, a manager may believe it necessary to request medical certificates for any absence even though these are only normally required when an individual's absence exceeds 7 days continuously. This will be set for a period of time and the employee advised of when it will terminate and under what circumstances. This is appropriate where absence is high and for various reasons. Where a GP levies a charge for the issue of such a certificate, this will be borne by the department.
- 3.8 Copies of any formal letters, Notifications of Concern or notes of the formal meeting will be sent to the Service Manager; Organisational Development to be retained on an individual's personal file.

4. The management of long term absence

- 4.1 Where an employee's absence begins to extend for several weeks it is important to take action to try to limit this. If the absence is time limited, for example, post-operative recuperation, broken leg etc., it is generally appropriate and sufficient for the manager and colleagues to keep in touch with the employee. It may, however, be appropriate in such cases to explore with the employee whether "light" or different duties could be productively undertaken either at work or home. It is important that such work does not hinder recovery and proper advice from a GP or the Occupational Health Consultant would be sought.
- 4.2 Where the length of, or reason for an absence is not clear but it seems likely to last for a period of four weeks or more, a senior Personnel Officer needs to be notified in order for a referral to be made to the Occupational Health Service. At the latest, this appointment should take place within four weeks of the absence commencement. If appropriate to the case, a referral may be made at any time prior to the fourth week of absence.

- 4.3 In conjunction with a line manager, Personnel Officers in the Organisational Development team can support a resolution to the situation that may include the use of:
- ◆ Home welfare visits
 - ◆ Referral to Occupational Health
 - ◆ Referral to other health specialists
 - ◆ Adaptations/redeployment
 - ◆ Ill Health retirement
 - ◆ Phased return to work
 - ◆ Capability dismissal
- 4.4 Cases of long-term sickness absence may be complex and can take many months to resolve. Early intervention is helpful particularly if seeking medical advice. The aim of intervention is to establish the extent of the absence, identify options for the employee and to facilitate a return to work or termination of employment. All reasonable effort will be made to try to explore alternatives to dismissal. Where the Authority believes it is necessary to dismiss, medical advice will always be taken. Dismissal may be with or without pension depending on the nature of the advice given.
- 4.5 It is essential with long-term absence, as it is for short term absence, to identify at the outset the reason for the absence. This will usually mean direct contact with the employee. This contact is necessary not only to establish the general nature of the absence which will allow the manager to determine how to deal with the case, but also to make appropriate health and safety reports if the absence is work-related.
- 4.6 The above guidelines are also appropriate for the management of shorter, frequent absences where the absence is related to a condition defined within the Equality Act, or which is pregnancy or maternity-related. That is to say the absences will be managed on a case-by-case basis. If for sound business reasons the Council felt it necessary to dismiss someone for unacceptable standards of attendance but there was an underlying medical condition, appropriate possible solutions for improvement as indicated above will be thoroughly explored.

5. Monitoring and Compliance

Senior Leadership Team requires that the appropriate Service Manager is notified of any occasion when an employee breaches a trigger point at any stage in the procedure, and a Notification of Concern is not issued but where there would normally be a requirement to issue such a notification and the terms of the Sickness Absence Management Policy. A copy of a notification of this non-compliance will be sent to the appropriate Corporate Director. This monitoring process will be carried out within the Organisational Development Service, but action taken as a result of any non-compliance is the responsibility of the appropriate Service Manager and Corporate Director (these procedures are to be developed and improved during 2012/13).

6. Sickness absent management- summary statement

Any action taken to improve sickness absence should start from the premise that there is genuine sickness. It is inevitable that some people will have higher levels of absence than others and where there are underlying medical problems this may be accepted up to a point where the ability to perform the duties of the job is significantly affected. Since every situation is unique it is not possible to give hard and fast rules however the policy guidelines give options to follow and a consistency of approach.

Sickness Reporting Scheme

If you are absent from work due to sickness you must comply with the following requirements.

For the purpose of this scheme, and other sickness absence management policies, a “day” would be defined as the period of time that an employee would normally attend for work on any occasion.

1. First Day

1.1 On the first day of absence through sickness or industrial injury you must report to your direct line manager or supervisor (both referred to in this document as “manager”) by no later than 10.00am if you work normal office hours, unless there are extenuating circumstances. If you work at a site where non-standard hours are involved you should report your absence as early as possible, but not later than 2 hours before the commencement of your shift or, if you are on the first shift of the day, at the immediate start of the shift.

1.2 If your direct line manager is unavailable you should try to contact either a more senior manager or another manager who you know will be able to deal with the matter. You should not under normal circumstances ask another team member or work colleague to pass on a message for you unless it is impossible to speak to a supervisor or manager. In some situations where employees work remotely or outside normal working hours, it may be difficult to contact managers. In these cases, managers will put in place alternative reporting arrangements.

1.3 You will be asked questions that will allow the manager, or person recording your absence, to complete the standard corporate Sickness Recording Form (SC1). You are required to provide full information and without this occupational sick pay may be withheld.

Even with short absences, although you may not be able to undertake the full, or normal duties of your job, there may be occasions where other work, or reduced duties may be appropriate for your condition. When you contact your manager on the first day of absence or at any time after, this option may be discussed with you. You will be expected to make a positive attempt to suggest and participate in alternative duties as long as these are not of detriment to your health and safety or that of others. If you do not contact your manager direct when you report an absence and you cannot be contacted by telephone to properly discuss the possibility of alternative duties, or where the information given is unclear or incomplete, a manager may visit you at home without notice to discuss the suitability of this option.

- 1.4 In the case of industrial injury managers should ensure the incident is recorded in the Accident Reporting Book, on an Accident Report Form and if appropriate, on the appropriate incident form as specified in the Authority's Accident Reporting Scheme. Any incident form produced should be sent to the Safety Officer.

2. Fourth Day

- 2.1 On the fourth consecutive day of sickness absence you should again contact your Manager to inform them of your continued absence, the expected duration of your absence, any medical advice sought and an estimated date of return.
- 2.2 For the purposes of calculating consecutive days Saturdays, Sundays and Public Holidays shall be counted as absence through sickness.

3. Eighth Day

- 3.1 For sickness absence on the eight consecutive day onwards, a medical certificate ("doctor's note") must be obtained and forwarded to your Manager.
- 3.2 Medical certificates must be sent to your Manager at regular intervals. In exceptional circumstances you can be required to provide Medical certificates at more frequent intervals. The medical certificate authorises proper payment of sickness benefits. Without a certificate, or where there is a gap between certificated absence, payment cannot be made. It is your responsibility to ensure that a certificate reaches your manager in good time and that there is a record of continuous absence.

4. During Annual Leave

If you are sick during Annual Leave you will be regarded as on sick leave from the date of a doctor's Medical Certificate (this can be obtained from the first day of sickness) and will be entitled to take the balance of the holiday at a later date. However you must:

- a) inform your Manager immediately of the situation.
- b) Obtain a Medical Certificate covering the whole period of sickness and forward it to your Manager.
- c) Ensure that your Department is aware that the time lost through sickness is credited to your record of annual leave.

5. Returning To Work

- 5.1 Upon returning to work after any period of sickness absence, you should report immediately to your Supervisor/Manager before commencing work.
- 5.2 Your Manager will see you during your first day back at work and a self-certification form (SC1) will be completed jointly at the meeting. This form records the actual days of absence and should be completed correctly, taking account of any non-working days during the period of absence.
- 5.3 If there is any doubt regarding the cause of absence or where your attendance or performance level has deteriorated the Authority may request that you see the Occupational Health Consultant in order to gain specialised medical advice to identify any potential work related issues. The Occupational Health Consultant may also wish to consult with your doctor to gain further medical opinion. Where your absence, or performance at work, suffers because of conditions related to stress, anxiety or mental health, it may be appropriate for you to be offered access to external counselling support. Such a referral would be made through a senior Personnel Officer. If you feel that you may benefit from access to such a service, you may raise this with your manager or, if you wish, on a confidential basis with a senior Personnel Officer in the Organisational Development team.
- 5.4 If your manager does have concerns about your level of absence (total amount of time or frequency of absence) they will raise this with you. This may result in a separate meeting, held under the Sickness Absence Management Policy. Your manager at any time may believe it appropriate to give you written guidance about how your absence may be managed in the future.
- 5.5 If there is evidence that your absence may not be genuine, this will be treated as a conduct issue and will be formally investigated under the Disciplinary Procedure. If misconduct related to unauthorised absence is proven, pay may be withheld for that period.

6. Complying With Instructions

Failure to comply with these requirements may be investigated and dealt with under the Disciplinary Procedure. Also failure to comply with the instructions may mean the absence is treated as unauthorised leave and pay withheld.

Attendance Incentive Scheme

1. Background

As a basic principle, regular attendance at work is expected.

Where absence is necessary because of illness or personal circumstance, effort should be made to deal with the absence sensitively and appropriately, and always consistently within policy.

As part of the “suite” of sickness management policies, the need to acknowledge the efforts of those employees who attend work on a regular basis is recognised. The Attendance Incentive Scheme (AIS) is designed to offer tangible recognition to employees who have shown a good record of attendance.

The scheme described below applies from 1st April 2012 and modifies and replaces all previous schemes.

2. The Scheme

2.1 The basis of the Scheme

- 2.1.1 Extra holiday is awarded for those people regularly attending work. This is called the Reward Day Scheme.
- 2.1.2 The AIS is accessible to all employees below the level of Corporate Director. It applies to all employees who are contracted to work working a defined number of hours each month, whether full-time or part-time. Temporary employees are included wherever they are contracted to work for the whole length of the period for which the extra holiday calculation covers.

3. The Reward Day Scheme-

3.1 Application

This system is applied to all employees satisfying the criteria. Changes to, or withdrawal of the scheme can take place without notice. The scheme remains unchanged from the original scheme that commenced 1st April 2003, and operates in the following way:

- 3.1.1 For each employee who has not been absent due to sickness in either the first or second half of the financial year, a half-day “Reward Day” will be credited to their annual leave entitlement. Half-day means a length of time approximately equivalent to half of an average working day for that person. Where the person has not been absent due to sickness for a full financial year, a total of 1½ days will be credited.
- 3.1.2 Any absence relating to a declared medical condition defined as a disability within the Equality Act 2010 or absence due to pregnancy or maternity, will not be counted when determining eligibility for additional leave under this Scheme.

- 3.1.3 Once data for each of the two six month periods has been collected, Service Managers will be notified of any employee in their team who should be awarded additional leave.
- 3.1.4 "Reward Day" time allocated to the individual can be taken at any in the 12 months following notification. This will mean that leave years will be crossed on many occasions. This carry over is to be treated separately to any other carry over leave arrangements.
- 3.1.5 The "Reward Day" time should be entered as a defined credit on a person's leave card held within the department.

4. Review and Monitoring

- 4.1 The overriding principle of the AIS, first introduced in 2003/04, is that it should contribute to improvements in attendance which will result in improved efficiency and reduced costs. If satisfactory levels of attendance are not sustained, the scheme may be withdrawn at anytime without notice.
- 4.2 The application of the scheme is dependent on Council-wide absence levels meeting a corporate target. If after six months in any year these targets are not being met, the schemes may be withdrawn immediately.
- 4.3 The targets set for Council sickness absence will be agreed annually through the performance plan process and can be expected to be increasingly challenging. However, a balance will be drawn between setting high targets and continuing to provide an attendance incentive scheme.
- 4.4 There is an expectation that any Scheme costs will be (more than) offset by the savings made in improved attendance. Improved attendance will lead to both notional financial benefit in terms of improved productivity and direct savings in terms of reduced casual or agency worker cover in services such as Leisure and Direct Services.
- 4.5 The direct costs associated with cover arrangements for additional holidays awarded will be met from departmental salary budgets wherever possible.

AUDIT RECOMMENDATIONS ACTION PLAN

Audit Report: Human Resources Sickness Absence

Report Reference: IAR1112-11

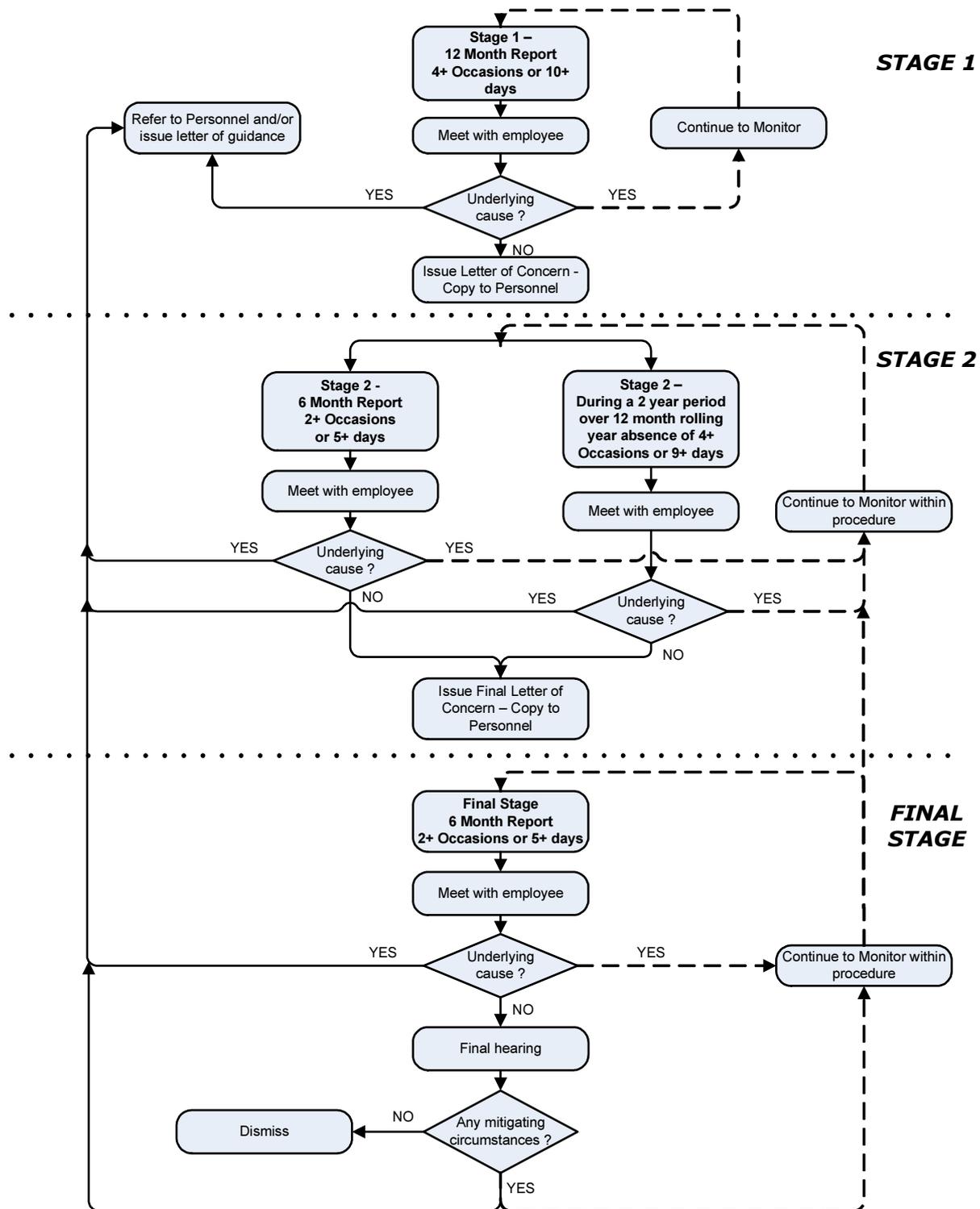
Review Date: July 2011

Action Required	By Whom (Lead Responsibility)	When (Deadline Date)	Status/Amendment
<p>A review of sickness absence policies and supporting procedures, including the sickness incentive scheme, is currently in progress. This should be completed and consideration given to the recommendations made in the Internal Audit review (IAR1112-11) of sickness absence procedures.</p> <p>The review should consider the corporate need for an overarching Human Resources strategy.</p>	David Archer – Personnel Manager	30 th June 2012	
<p>A full review of sickness absence management information will be undertaken. The review will consider end user requirements, including line managers, the senior management team and members.</p> <p>Consideration will be given to both in-house and external development of the reporting suite to ensure value for money in meeting the end user reporting requirements.</p> <p>A training needs analysis will be undertaken to identify and deliver any staff training needs relating to the production and analysis of the reporting suite.</p>	David Archer – Personnel Manager	30 th June 2012	

<p>Upon completion of actions 1 and 2 above, a central monitoring and control process will be developed and implemented. The purpose of which is to ensure consistency in the application of policy and procedures and provide an appropriate escalation process to identify and report instances of non-compliance.</p>	<p>David Archer – Personnel Manager</p>	<p>30th September 2012</p>	
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Current Absence Management Process at May 2012

SICKNESS MANAGEMENT PROCEDURE



Managers Notes

- If at any stage there is evidence of disability or underlying cause of absence, seek further advice from Personnel and/or Occupational Health.
- The next stage in the procedure is activated once the relevant trigger is reached and the employee appears on the relevant report.
- Example 4+ means 4 or more; 10+ means 10 or more.

Appendix A2

Equality Impact Assessment that was carried out on our existing policy procedures in 2010



EQUALITY IMPACT NEEDS ASSESSMENT

Policy/Service/Procedure to be assessed	Corporate Absence Management Policy	
Assessment completed by:	Personnel Manager	
Aims/objectives of the Policy/Service/Procedure		
<ul style="list-style-type: none"> - To ensure that absence management is carried out consistently and fairly across the Council - To set clear standards of what, under normal circumstances, the organisation has determined to be an acceptable level of attendance - To put into context, the general ways that we would expect to manage periods of longer term absence, particularly where these may be linked to an underlying condition. - Linked to the Absence Management Policy, the Council currently also offers an attendance incentive scheme. This offers reward of extra annual leave and a potential for financial award. This scheme will also be included as part of this assessment review. 		
Key Performance Indicator	Current Performance	Target
LI006- Full time equivalent days lost per full time equivalent employee (old National Best Value Indicator BV12)	9.23 days lost	8.8 days lost
Who are the customers and stakeholders of this service?		
<p>This is an internally-focused policy and applies to all contracted employees.</p> <p>High levels of attendance will have a direct effect on service provision.</p> <p>Consultation has taken place with:</p> <ul style="list-style-type: none"> - Corporate Steering Group; Absence Management. The Group approved the proposals for policy change. - Unison 		
Detail below what information you already have about the impact this policy/service/procedure has on the following groups including results from consultation, complaints, census:		
Black and minority ethnic people	None	
Men/women and trans	There have been a number of "complaints" received from employees about part-time employees potentially receiving the same financial reward as full time employees. Currently, there are more part time female employees (74%) than male (16%).	

	For the purposes of monitoring, any absence associated with a woman's pregnancy is ignored for the purposes of the quarterly and annual financial award "draw" (that is, they will still be included). Absences associated with the pregnancy will still be recorded as an absence when determining if additional leave should be awarded (that is, they will be excluded).
Disabled people	<p>Monitoring of the policy already looks at long term absence versus short term absence in any one month.</p> <p>For the purposes of monitoring, any absence associated with an underlying medical condition is ignored for the purposes of the quarterly and annual financial award "draw" (that is, they will still be included). Such absences will still be recorded as an absence when determining if additional leave should be awarded (that is, they will be excluded).</p>
Gay/Lesbian/bisexual People	None
People from different faiths	None
People of different ages	<p>Research has been undertaken by Notts county Council. The findings suggest that older workers tend to have a larger proportion of their absence as longer term absence. Younger people tend to have more frequent short-term absence. Taking one recent month, at Gedling, the breakdown of long term absence was:</p> <ul style="list-style-type: none"> - 35-40 17% - 41-45 - - 46-50 34% - 51-55 49% -56+ -

How will this policy/service/procedure impact on the following groups:		
	Positive impact	Negative impact
Different racial groups	None identified	Potential for certain diseases or conditions to be more prevalent in particular racial groups; for example, sickle-cell anaemia. Although such impact may not be commonly experienced, it is important to realise the potential. However, for such conditions, it is likely that they will manifest as an underlying condition and, as such, should be managed on a case-by-case basis and normally will be outside the standard monitoring triggers.
Men/women and trans	<p>To award different (lower) awards through the attendance incentive scheme to part-time employees would potentially be discriminatory (indirect sex discrimination) as there are many more female part time employees. By awarding the same amounts, the scheme should be safe from challenge.</p> <p>Women on maternity leave are still eligible for inclusion in the financial award draw.</p>	<p>Trans-gender employees may be away from work for reasons of re-assignment surgery. To not recognise this within the scheme potentially discriminatory. Areas of potential negative impact might be:</p> <ul style="list-style-type: none"> - an increased chance of hitting sickness triggers - an reduced chance of gaining additional leave or winning a financial award <p>Women on maternity leave are still eligible for inclusion in the financial award draw. They are not eligible for receipt of additional leave if they have absence, even if the only periods of absence are related to their maternity leave or to a condition relating to the pregnancy; this is potentially discriminatory.</p> <p>As legislation moves forward in the area of childcare, and paternity leave (paid or unpaid) becomes a right, this will need to be picked up within the policy as currently, there is no reference.</p>
Disabled people	The Absence Management Policy does recognise the need to manage underlying conditions in a structured, personal and business-like way. Absences relating to an underlying medical condition will not be recorded against normal trigger reports.	<p>There will be occasions where it may be appropriate to manage an absence relating to a disability or underlying medical condition against a more appropriate set of triggers. Currently this is not clearly stated in the policy.</p> <p>People with a disability (DDA condition) are still eligible for inclusion in the financial award draw. They are not eligible for receipt of additional leave if they have</p>

		absence, even if the only periods of absence are related to their underlying condition; this is potentially discriminatory.
Gay/Lesbian/bi-sexual people	None identified	None identified
People from different faiths	None identified	Some faiths may have particular rules about medical intervention which may have a material effect on the length of an absence. The current policy does not reflect this potential difference, which may be an issue of discrimination.
People of different ages	Even though different age groups may, in general terms, be more likely to experience absence of differing types (long/ short), the current policy does aim to ensure clear and consistent management of all absence. Particularly in respect to longer term absence, the current policy clearly introduces the range of options that may be available to help an employee back to work and which take account both of employee and employer interests. The new "Fit Note" to be introduced for use by G.P.s in April 2010 may further add to the quality of information that helps us to manage longer term absence; this should perhaps be reflected in the policy.	None identified (subject to notes opposite)

What changes could be made to the policy/service/procedure to address any negative impacts?

The following policy changes are recommended:

- 1) Re-draft policy:
 - a. To recognise that certain conditions may potentially affect racial groups in different ways. The policy will confirm that such conditions, where substantial, will be treated as other underlying conditions and where appropriate under the Disability Discrimination Act.
 - b. To state that absences for women on maternity leave or pregnancy-related absence and men on paternity leave will be ignored for the purpose of building up additional leave under the terms of the attendance incentive scheme.
 - c. To state that absences related to a substantial underlying condition (normally a DDA condition) will be ignored for the purpose of building up additional leave under the terms of the attendance incentive scheme.
 - d. To recognise that where absence is prolonged or affected due to treatment having been related to the demands of a particular faith or religion, then the management of this absence will take this material difference into account. This does not mean that absence will not be managed properly, but that it will be managed in a reasonable way taking the difference into account.
- 2) That before policy is re-drafted, that consultation takes place on these proposals with the cross-departmental working group tasked with reviewing the Absence Management Policy and the Attendance Incentive Scheme. Further amendment to policy will be made, as appropriate, as a result of this consultation.

Policy changes agreed will be referred to Personnel and resources Committee for approval.

What monitoring will be carried out to ensure this policy/service/procedure meets diverse needs

Much statistical information is already produced as part of the absence management system. Following policy changes it is proposed that analysis is undertaken after one year to examine the impact of the changes. Predominantly difference is likely to be in the additional annual leave awarded. Such changes will be identified and, if there are concerns in terms of scale of impact, these will be reported to Senior Management Scheme.

What actions will be included in your service plan arising from this assessment?

Action	Outcome	Date?	Who?
Re-draft of policies	Policy will reflect current equality duties and legislation and will remove discriminatory bias.	Policy change by 1/4/10	Personnel Manager

Are you satisfied that all aspects of this policy/service/procedure have been thoroughly assessed for all the strands of diversity and that no further investigation is required? Y

If no then a fuller impact assessment is required.

Appendix A3

Unison comments that were submitted for consideration to the JCSC of 27 June.

Unison Gedling Branch

REVIEW OF ABSENCE MANAGEMENT POLICIES AND PROCEDURES JUNE 2012

Equality Act 2012

“The Act outlaws discrimination for the following nine “protected characteristics” – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation”

Unison supports the principle that the Council needs to reduce the levels of sickness and we also accept the simplification of the process in terms of removal of the 6 months part of the process and the introduction of the more stringent 4 occasions within 2 years down from 4 occasions over a rolling 12 months.

This support was recently demonstrated by our acceptance of the more stringent sickness reporting process.

3.2.5/3.2.6

- The new definition of underlying is too inflexible and doesn't take account of valid short term underlying conditions. eg. Post operations or conditions while awaiting operation. This could also have the opposite impact and result in staff taking off longer rather than returning earlier to avoid likelihood of then being off again with related illness.

Also if Managers are having difficulty in applying such definition, provide training and if there is abuse deal with it with the under the relevant procedure. Such situations cannot be that frequent and Personnel can advise and ensure compliance.

Also still leaves a lot open to interpretation. ie. If I 'm recovering from cancer and get flu, does this relate to an underlying condition or not.

How many cases of underlying conditions do we have at present? How many are claiming underlying conditions?

For example on gender grounds, other conditions to be “managed outside of the normal trigger system”

- A Member is waiting for a Hysterectomy Operation. She is receiving treatment from the hospital and GP every 4/5 weeks. Her periods are irregular and heavy and as a result cannot always attend work, affecting everyday living. Although this is not classed as an underlying condition, it is an ongoing condition, which can only be rectified with an operation. The

operation will then mean another amount of absence. How will this be managed?

- Another member suffers with menstrual migraines. It may only affect her, maybe 3-4 days a year, but it is a condition that is ongoing.

Should Genealogical Related Conditions be a separate issue?

- A member whose father passed away at Christmas, and had approx 6 weeks of absence with a valid note from her GP, unfortunately then her mother passed away 4 months later, leading to another period of absence of approx 6 weeks. How will this be managed? Completing an SC1 form and a back to work interview seems inappropriate.

Hopefully this situation would not occur on a regular basis, but should this be separate issue?

3.2/4.2

- Sending someone to occupational health for depression or similar after 4 weeks is felt to be too soon and unreasonable. It can take a while for your GP to get your medication correct, to make you feel like you can start to function again and usually your medication is for 6 months at least. This process could add additional pressures to individuals who are already low and cannot cope.

The OH can be offered in some cases at 4 weeks, perhaps 8 weeks may give a better indication, but each case should be taken on its own merits. As in 4.3 perhaps the offer of a welfare visit should be the first step and the OH could be mentioned then. UNISON will always support an OH visit to improve the health and welfare of our members.

- All referrals to OH should be made with the employees consent, as the report states.

3.2.10

- UNISON has concerns regarding the Health and Safety Officer being withdrawn from reporting of work related stress. As it is work related, the H&S officer should still be informed whether it is under RIDDOR or not.

- According to the HSE website (www.hse.gov.uk/statistics/) on Stress and Psychological Disorders, "The industries that reported the highest rates of total work-related stress in the last three years were health and social work, education and **Public Administration**"

- The industries with the highest estimated rate of case of work related stress was **Public Administration**.

- In terms of working days lost due to work related stress for people working in the last 12 months, in 2012/11 - Female workers took an estimated 5.9

million days of work.

- Large workplaces had a statistically significantly higher estimated rate of total cases.

3.3.1

- SC1 – the form already has in the Managers Statement – “I have concerns etc.” Is there a policy already in place for concerns without the need for unannounced visits?
- Unannounced home visits are unnecessary and unacceptable in terms of staff rights to privacy. UNISON will not accept this disgraceful intrusion into people’s private lives when they are ill. It is also UNISON understanding that Management has no right to visit an employee at their home without the express consent of the employee and with a very good reason. Failure to provide complete details cannot be deemed as a very good reason. We feel that this would cause a great deal of unhappiness and may raise grievances.”
- UNISON is of the opinion that failure to report sickness absence correctly can be dealt with either through the disciplinary procedures already in place, or by correct use of the Manager’s statement page 4 of Sickness Reporting Form – SC1’
- UNISON feels unannounced visits could be open to abuse and would need to be strictly completed ie
 - Records kept in Personnel of all home visits including reason for visit
 - Limit any visit to immediate managers, not just anyone who happened to be in the area
 - Only used if there was previously history of failure to report.
 - Also there is already a procedure in place to deal with frequent failure to comply with the reporting procedure i.e. paragraph 6.0 of the sickness reporting scheme.
 - ‘Failure to comply with these requirements may be investigated and dealt with under the Disciplinary procedure.....’
- David Archer stated in the JCSC that the recent reporting change is working and sickness is falling, therefore is this may have the desired long term impact. So the changing of underlying condition and the introduction of unannounced home visits may be unnecessary and could be possibly reviewed at a later date if sickness doesn’t continue to fall.

4.1

- Although employees will be written to, will the Absence Reporting Procedure be on the Intranet, so that all employees are aware of how to report in sick/absent? A simple guide would be useful and also useful to place on departments notice boards.
- UNISON believes the Council should raise the profile of sickness; report on sickness records, up or down. (There is nothing on the home page of E-Gen re links to policies, no simple guide re reporting).

8.0

- Although it is a disappointment to see the withdrawal of the prize draw especially as high as 40% felt that it **encouraged improved attendance**, UNISON did agree with its withdrawal
- The Reward Day Scheme. Are the employees that are on Maternity Leave still included in this scheme? UNISON felt that this was an unfair advantage as although, they are not absent due to sickness, they are still not attending work for 3, 6, 9 or 12 months. Perhaps a review of the Reward Day and who is included in the scheme is required.

Regards

UNISON Committee

Appendix A4

Draft resolutions of the Joint Consultative and Safety Committee of 27 June 2012

RESOLVED

- 1) That the Joint Consultative Committee agrees with the view of UNISON that the new absence management policy, particularly the more stringent triggers for sickness reporting, should not adversely affect female employees;
- 2) That UNISON does not support the introduction of unannounced home visits to employees that are absent from the workplace;
- 3) That members of the Committee recommend adding the following text in relation to unannounced home visits: "This action only to be taken where other reasonable means of communication have been exhausted and that any such visit is only to be authorised by a Service Manager or Corporate Director";
- 4) That both UNISON and members of the Committee agree that referrals to occupational health should be sensitively handled and assessed on an individual case by case basis;
- 5) That both UNISON and members of the Committee agree that the Council's Safety Officer should continue to be informed of incidences of work related stress as a matter of routine;
- 6) That both UNISON and members of the Committee agree that officers should take steps to promote sickness reporting both in terms of availability of policies to all staff and statistical reporting of days lost to sickness to all members of staff; and
- 7) That UNISON and the Committee welcome the use of "Reward Days" for staff with good sickness records and that staff on maternity leave remain eligible for such days.