Management of Sickness Absence

Purpose and Context

The University has a commitment to supporting the development of a healthy workforce and will work to ensure that factors relating to the workplace and work process itself do not have an impact on sickness levels.

The procedure seeks to enable managers to monitor and reduce sickness absence effectively, fairly and in a sensitive manner with due regard to absences that may relate to impairments as defined under the Equality Act 2010.

This procedure seeks to:

- Maintain accurate records for staff
- Ensure individual records are reviewed
- Objectively assess absence and decide on appropriate action, if necessary
- Explore the reasons for sickness absence in order to seek to prevent the absence recurring, address any welfare problems and ensure appropriate medical or other assistance is provided.
- Identify any work related causes of absence and take action to address such issues

Statistics will be maintained on absence levels and reported through the annual monitoring report to senior managers and trade unions to identify any trends and any actions that need to be taken to address the welfare, health and safety of staff.

Scope

This procedure applies to all staff, save for Senior Staff dismissal arrangements to comply with the Articles of Government.

1. The Role of Occupational Health

1.1. Occupational Health is concerned with the prevention of ill health in employees. It is about managing the effect of the work environment on health and the effect of health on work and, where appropriate, for advising on reasonable adjustments and adaptations to be considered. It encompasses the following:

- The effect of health on work, thus addressing the fitness of the task for the worker and not the fitness of the worker for the task alone;
- Rehabilitation and recovery programmes;
- The effect of work on health, whether through injury or long-term exposure to agents with latent effects on health and the prevention of occupational disease through techniques which include health surveillance, ergonomics and working closely with human resource group and Human Resources management systems;
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1. Helping those with disabilities to secure and retain work; and
2. Managing work related aspects of illness with potentially multifactorial causes (e.g. musculo-skeletal disorders, coronary heart disease) and helping workers to make informed choices regarding lifestyle issues.

Above all the University’s Occupational Health’s Department main aim is to prevent, rather than cure, ill health from whenever it arises in the workplace.

1.2. The University will employ the services of a suitably qualified Occupational Health team who will be able to provide opinions in relation to an employee’s ability to carry out their duties as detailed in their job description. General information relating to health conditions (e.g. clarity regarding a condition named on a ‘Statement of Fitness for Work’) may be provided without formal referral but any information relating to an individual employee will only be provided following a formal referral to the Occupational Health Department.

1.3. The Occupational Health team are required to work to the highest standards of professional behaviour and practice as directed by the various governing bodies. Occupational health practice is fundamentally different from GP type services. It is a specialist field where the primary role is the prevention of ill health in the workplace and therefore a special consideration of ethical standards in Occupational Health arise because of this. Further information regarding Occupational Health can be viewed on http://www.hud.ac.uk/oh/.

2. Disability

2.1. The University recognises that disability can be the cause or a contributing factor to absence and performance issues. As a disability symbol user and as a matter of good employment practice, the University is committed to making every effort when employees become disabled, or where a disability changes, to help employees stay in employment.

2.2. A disability may affect an individual’s ability to carry out certain tasks or require a change to hours of work, the workplace itself or the way certain duties are carried out.

2.3. When considering absence or performance issues where disability may be a factor the Human Resources Manager should be consulted who may seek specialist advice. Practical advice on how adjustments may be made and available equipment can be provided by the Disability Employment Advisor through the Job Centre Plus. A record of suggested adjustments and action taken should be maintained.

2.4. Consideration must always be given to whether adjustments to the workplace might reasonably be made and so facilitate a return to work from long-term sickness absence, address short term absence issues and/or performance/capability issues.

2.5. Examples of adjustments that could be considered are as follows:

- Adjustment to premises – structural or physical, e.g. widening doorways; providing ramps; relocating light switches, door handles and shelves; providing appropriate contrast in decorations.
• Allocating duties to another person – minor duties could be allocated to another person, e.g. if a job occasionally involves going on to an open roof of a building an employer might have to transfer work away from an employee whose disability involves severe vertigo.

• Transferring a person to fill an existing vacancy – if an employee becomes disabled, or has a disability which worsens and cannot work in the same place or under the same arrangements, then the person should be considered for any suitable alternative posts that are available

• Altering working hours – this could include flexible hours to enable additional breaks or changing hours to fit treatment and care programmes.

• Changing the workplace – when buildings or part of a building become inaccessible the employer should always consider transferring the person and their work station to a place with access.

• Paid and/or unpaid absence for rehabilitation, assessment or treatment – time off during work may be needed for treatment, e.g. psychoanalysis for the employee to become rehabilitated into the work environment.

• Using flexible working processes and home working to support rehabilitation

• Training – this could be training in the use of a piece of equipment unique to the disabled person or general training that needs to be adapted.

• Application of the Flexible Working Procedure to accommodate time off for appointments such as medical reviews and counselling or physiotherapy sessions

• Acquiring or modifying equipment – this involves providing specialist equipment needed to do the job, e.g. providing an adapted telephone for someone with a hearing impairment or providing an adapted keyboard for someone who is visually impaired.

• Modifying instructions and manuals – the format of instructions and manuals may need to be modified, e.g. produced in Braille or on audio tape or instructions for people with learning difficulties conveyed orally with individual demonstrations.

• Modifying procedures for testing – this ensures that tests do not adversely affect people with certain disabilities, e.g. where a person with restricted manual dexterity would be disadvantaged by a written test the employer could give an oral test.

• Providing a reader or interpreter – this could involve reading mail to a person with a visual impairment or hiring a sign language interpreter.

• Providing supervision – where someone’s disability leads to uncertainty or a lack of confidence.

2.6. Most adjustments require little change to the workplace and are easy to arrange, in consultation with the individual. Support is available through the Disability Employment Advisor and in particular Access to Work. Access to Work provides practical help for disabled people and assistance is tailored to the needs of a particular job. Assistance can apply to any job, permanent or temporary, full-time or part-time. Examples of support include:

• A communicator to attend meetings etc., training for people who are deaf or have a hearing impairment.

• A reader for someone who is blind or has a visual impairment.
• A job coach to assist someone while they familiarise themselves with a new job or changing job.
• An assistant to help with personal needs.
• An escort to assist travel to and from work.
• Adaptations to a vehicle.
• Assistance with transport costs and/or taxi fares for someone who is unable to use public transport.
• Equipment or adaptations to existing equipment, e.g. enlarged keyboards, telephone aids.
• Alterations to premises or the working environment, e.g. lowering machinery, installing alarms with flashing lights.

3. Access to Medical Reports

3.1. The Access to Medical Reports Act 1988 gives an individual the right to have access to any report which is to be, or has been, supplied by a medical practitioner for employment purposes. Consent will need to be obtained by the Occupational Health team before they request a report from an employee’s GP, hospital doctor/consultant or other medical specialist. The individual may:

3.2. Withhold consent to a medical report being supplied.

• Inspect or be supplied with a copy of the doctor’s report before it is sent to the employer (the Occupational Health team) if this has been indicated on the attached consent form or if the individual notifies the report supplier direct before the report has been sent.
• When it has been indicated that the individual wishes to see the report, they must make arrangements with the doctor within 21 days of the date on the consent form. If arrangements are not made within that time, the doctor may send the report regardless.
• Having been given access to the report, it cannot be sent to the employer (Occupational Health team) without the employee’s consent. Before giving consent, the employee has the right to request the doctor to amend or delete any part of the report deemed inaccurate or misleading. If the doctor declines, the employee may require the inclusion of a statement of their views with the report.
• The doctor has the right to deny access to the report or part of it if, in the opinion of the doctor, it may cause serious physical or mental harm or would cause problems for a third party who has not consented. The report may still not be forwarded without the individual’s consent.
• The individual will continue to have the right to apply for access to the report for six months after it has been prepared.

3.3. Under the Access to Medical Reports Act 1988, a medical practitioner is defined as any person registered under the Medical Act 1983, who has been responsible for their clinical care. For the purposes of the Management of Sickness Absence procedures this would not include the Occupational Health team.
3.4. Each employee has access to information held about them by the Occupational Health Department, employees are required to setup an appointment with the Occupational Health Department to view their personal file. Copies can be provided upon written request and will be provided under the University’s data protection procedures and in accordance with the Access to Health Records Act 1990.

4. Referrals to the Occupational Health Department

4.1. A referral to the Department for medical examination or assessment may be made through Human Resources by the manager. The referral will include details of:

- The length of absence
- The reason(s) for absence
- Any factors (work related or otherwise) that cause or aggravate the absence(s)
- Any previous absence(s)
- Any action taken by the manager to assist the employee
- Details of the job, workplace and tasks undertaken
- Details of any work related or other difficulties
- Whether any adjustments to the workplace, duties or hours may assist the employee and facilitate a return to work and/or reduce absences and/or assist performance.

4.2. If the individual has had any time off work as a result of a workplace injury/workplace ill health, then the Manager is responsible for notifying this to Occupational Health as soon as possible.

4.3. The manager should notify the employee of the intention to refer the employee and the reasons for this. A copy of the referral will be provided to the employee. The process may include seeing the employee, obtaining (with the employee’s consent) medical details or other related details and/or conducting workplace assessments for individuals.

4.4. A copy of the Occupational Health report will be provided to the employee and the manager to be used as the basis for further discussion with the employee.

4.5. An employee may self-refer to Occupational Health. Where there are no relevant work-related issues the referral and any outcomes will remain confidential to the unit. Where there are relevant work-related factors that emerge in the discussions/assessment these will be reported to the employee’s line manager. The employee will be informed at the time of appointment that a report will be sent to the manager. Any report will be copied to the employee. The line manager will then arrange to meet with the individual to discuss how work-related issues can be addressed.

4.6. Where an employee is required to submit to a medical examination by an approved medical practitioner the employee can arrange for their own doctor to be present. Such arrangements would need to be made by the
employee and any costs arising from such arrangements would need to be met by the employee.

5. Medical Suspension

5.1. In rare cases it may be necessary to suspend an individual employee on medical grounds in order to ensure that the individual does not stay at work or resume their duties if the manager perceives that there is a risk to themselves or others, or where a statutory duty applies. Such suspension should only be used where the employee is unable or unwilling to immediately see their own GP and must automatically be followed by an Occupational Health referral or where medical evidence advises that an individual is unfit to work and this is not accepted by the employee.

5.2. Medical suspension is on full pay. Medical suspension does not count against an individual's entitlement to occupational sick pay.

5.3. Where medical suspension is considered the Human Resources Manager must be consulted who will then make arrangements.

6. Statement of Fitness for Work

6.1. When employees are absent consecutively for more than 7 calendar days they must produce a medical certificate from the 8th calendar day of absence. This form, called a Statement of Fitness to Work” (sometimes referred to as a “fit note”) must be secured from the individual’s GP. An unreasonable failure to submit appropriate certification may result in the individual losing their entitlement to sick pay. A copy of the Statement is provided at Appendix 1.

6.2. The medical certificate will state that either the employee is “not fit to work” or “may be fit for work”. If they are “not fit” they should not undertake any work until either they return to work to their normal duties or to temporary adjustments or further advice is received from the GP. Staff are not required to be declared fit by their GP before they return to work. Sometimes an employee will be able to return to work before the end of a Statement period where a doctor has advised that they are not fit to work. This may occur because the employee has recovered faster than expected by the doctor or the doctor did not recognise ways the individual’s return could be supported. If the line manager agrees with the employee that it is appropriate to return to work; they may do so. There is no need to wait until the end of the Statement period.

6.3. The Statement may also suggest that the employee “may be fit for work” taking account of advice on adaptations and adjustments, including a phased return, amended duties, altered hours or workplace adaptations. If the Statement indicates that the employee “may be fit” the line manager should contact the employee to discuss the temporary adaptations and adjustments required. On the statement a doctor will state the period of time their advice is for. When agreeing a return plan, the manager should be clear on the length of time any amended duties, amended hours or additional support is provided for. Return to Work Plans would not normally be expected to last more than 4-6 weeks. Permanent changes in duties,
hours etc… would require contractual change and fall outside the scope of sickness absence and sickness pay procedures. Such adaptations should be made, as applicable, under the Equality Act 2010. Further advice should be taken from Human Resources where such change is required.

6.4. Where this is relatively straightforward and easy to agree the line manager and employee may discuss via telephone and agree a return date. The line manager should confirm the “Return to Work Plan” in writing to the employee before they return and send a copy to Human Resources.

6.5. Where the changes suggested are more complex or substantial, the line manager should contact the employee and arrange a meeting as soon as practicable. The employee and line manager should seek to reach an agreement on the return date and any adaptations that are required. The line manager should confirm the “Return to Work Plan” in writing to the employee before they return and send a copy to Human Resources.

6.6. It is anticipated that return to work plans will be agreed through informal meetings between the manager and the employee. However, if preferred the employee can ask to be represented by their trade union representative or friend. In those circumstances a Human Resources representative would also attend.

6.7. When considering the GP’s advice and following discussion with the employee, it may not always be possible to implement the suggested changes. In such cases the line manager should explain their reasons in writing. The employee will then be classed as “not fit to work”, they do not need a new Statement to confirm this. If an employee is dissatisfied with this decision they should address this through the University’s Grievance Procedure.

6.8. On occasion the employee may not agree with the GP’s assessment that they “may be fit”. In such circumstances the line manager should arrange to meet with the employee to find out why they believe they cannot return to work, with support. If no agreement is reached on the employee’s fitness for work and the line manager believes that appropriate support, as advised by the GP, can be provided, the issue should be referred to the Occupational Health Service for further assessment and advice. In such circumstances an unreasonable failure on the part of the employee to co-operate with further investigations, for example, failure to attend appointments etc… may result in the individual losing their entitlement to sick pay.

7. **Planned Sickness Absence**

7.1. In many cases a long term absence may be planned to accommodate a hospital admission, operation and recovery time. In such cases the employee should discuss the absence with their manager.

7.2. As far as is possible the manager and employee should plan for the absence

- Consider what work requires cover and the best way of managing this
- Discuss how contact (including general updating and social events) will be maintained through the period of absence
• Make initial plans for the return to work
• Agree the appropriate time to discuss detailed plans to support the return

7.3. At the agreed time the manager and employee should meet to discuss any temporary or permanent adjustments required to support the employee’s return to work.

7.4. Where a return date is uncertain or where significant adaptations are required an Occupational Health assessment should be requested. This is to ensure appropriate health and safety provisions are maintained and explore how adaptations and adjustments support and sustain the return to work.

7.5. If following the Occupational Health referral there is still no definite return to work date established within the immediate future the long term absence procedures should be followed at the second formal meeting stage (para. 17.14).

8. Absence Reporting Procedure

8.1. The absence reporting procedure is a requirement of the Disciplinary rules. It is a manager’s responsibility to ensure compliance with the procedure.

8.2. The following absence reporting procedure applies to all staff. Failure to follow the reporting procedures may result in a loss of pay.

On Day One

• The employee must notify a named person, usually their line manager, or designate by 9.00am on their first day of absence that they are unable to attend work. Where local arrangements differ these will be notified to all employees in writing.
• Wherever possible employees should telephone personally and if possible, provide an estimate of their expected length of absence.
• If possible employees should notify of any important work e.g. classes, tutorials, meetings that need to be rearranged during the length of absence.
• If someone does not have access to a telephone, local arrangements for notification will be agreed.

On or by Day Four

• Employees should contact a named person, usually their line manager, to inform them of their continued absence and wherever possible estimate their expected length of absence and again where possible notify of any important work e.g. classes, tutorials, meetings that need to be rearranged during the length of absence.
• If the reason for absence is due to a work related injury or work related ill health effect and the individual has been off for more than three days (do not count date of accident but every subsequent day thereafter – including weekends whether required to work or not), then the Manager must notify the OHSOH immediately to ensure conformance with requirements of RIDDOR 1995.
On or after Day Eight

- Employees must obtain a Statement of Fitness for Work from their GP and submit this to their manager either in person or by first class post.
- Employees should contact a named person, usually their line manager, to inform them of their continued absence, the content of the Statement of Fitness for Work and if possible estimate their expected length of absence.
- Employees must submit future ‘Statements of Fitness to Work’ either in person or by first class post immediately upon expiry of the current ‘Statement of Fitness for Work’.

9. Communication with the Employee whilst Absent from Work

9.1. In cases of short term absence contact will be maintained when the employee reports absent under the Absence Reporting Procedure.

9.2. Where the manager has not talked to the employee when the employee reports absent the manager should contact them directly on day one or day two of absence. The purpose of this contact is to check on their health and assess, where possible, changes to work routines that need to be made to cover the absence. If direct contact doesn’t take place on day four when the employee reports their continued absence the manager should again make contact. Contact should be maintained throughout the absence period to assess the likely return day and any assistance the employee may require.

9.3. In cases of long term absence, the manager should maintain contact with the employee at regular intervals. Where the contact involves general enquiries regarding the individual’s welfare, informing the employee of social events taking place, or passing on good wishes of staff telephone contact is appropriate. The manager should however make a written note of what contact has taken place and when. All other communication should be made in writing.

9.4. When telephone contact has not been possible the manager must seek to maintain contact through written correspondence to the employee’s home address.

10. Return to work

10.1. Upon return to work all employees must complete Part One of the Return to Work form, (see Appendix 2) available from the Human Resources website. The relevant manager will complete Part Two of the form and give a copy to the employee. Part Three of the form is only completed in cases of frequent and persistent short-term absence if an Attendance Review Meeting is held.

10.2. Some elements of sick pay will still apply during agreed “Return to Work Plans”. Payment of sick pay in combination with normal pay will be used so that the employee does not suffer any financial detriment over this temporary period of a supported early return. This period is limited to a maximum of 6 week’s duration (recognised as the standard recommended
maximum period for return to work plans). In exceptional cases, this time limit may be extended on the advice of occupational health.

10.3. Where individuals have accrued annual leave due to their absence they may prefer to use some of that leave during the Return to Work Plan as an alternative to continuing to accrue sickness absence during the return period.

10.4. The combination of sick leave/pay with normal work/pay would operate as follows:

- An employee who is in receipt of full sick pay (and would continue to receive full sick pay throughout the period of the “Return to Work Plan”) can claim sick pay (absences recorded as sickness absence) so that payment received each week equates to the normal working hours of the employee.
- An employee who is in receipt of half sick pay (and would continue to receive half sick pay throughout the period of the “Return to Work Plan”) can claim sick pay (absences recorded as sickness absence) so that the minimum payment received each week equates to half normal working hours of the employee. Additional hours worked above this would be paid.
- An employee who is in receipt of no sick pay would receive payment received for hours worked each day and sickness absence recorded for day not worked.

10.5. Where individuals move between stages of sick pay on their Return to Work Plans the above rules will be applied proportionally to contractual entitlement.

10.6. An example of the allocation of pay, sick pay and the recording of absence is illustrated in appendix 3.

11. **Return to Work Forms and Procedures**

11.1. A Return to Work form is completed by an employee and their manager. (Part Three of the Return to Work form is only completed if an Attendance Review Meeting is held).

11.2. Staff are asked to give details of their illness, if known, or symptoms. All information provided on the Return to Work form is treated as confidential and held by the employee, manager and personal record held in Human Resources.

11.3. The Return to Work form allows the manager to monitor absence by providing information they need in order to:

- Ensure good practice in managing sickness absence, which will increase attendance levels.
- Aid the early detection of problems (medical, welfare and work related) that can lead to speedier responses.
• Review of sickness levels and reasons for absence across a School or Department to identify potential health and safety, workload or morale problems.

11.4. The completion of a Return to Work form does not replace the good practice of seeing all employees when they return to work. The manager will wish to see any employee who has been off for any length of time. This is an informal process so that the manager can:

• Welcome back the employee
• Show concern for the employee’s health, check that they have fully recovered from their illness and offer support, as required.
• Update the employee of what has occurred in their absence.
• Provide an opportunity for the employee to discuss any problems they are experiencing which may have affected their health, e.g. problems at work or home. Sometimes an employee may need to discuss these issues with a professionally trained counsellor and in such circumstances a referral or self-referral to the Counselling Department should be made.

12. Attendance Review Meetings

12.1. In cases of frequent and persistent short term absence the manager should arrange a discussion regarding the reasons for absence with the employee concerned. This Attendance Review Meeting must be held when 6 working days absence accrue in a rolling 6 month period over two or more episodes of absence or if the manager has reason to be concerned about an employee’s attendance record, e.g. if a pattern appears to be emerging.

12.2. The Attendance Review Meeting is an informal meeting between the manager and the employee which should be held as soon as possible after their return to work. The employee should be given reasonable notice of this meeting. The discussion should be handled sensitively. It should be carried out at an appropriate time and should sensitively explore the reasons for the levels of sickness absence.

12.3. The purpose of the meeting is to:

• Show concern for the employee’s health, check that they have fully recovered from their illness and offer support, as required.
• Update the employee of what has occurred in their absence.
• Provide an opportunity for the employee to discuss any problems they are experiencing which may have affected their health, e.g. problems at work or home. Sometimes an employee may need to discuss these issues with a professionally trained counsellor and in such circumstances a self-referral to the Occupational Health Department should be made.
• Identify the likelihood of further absence.
• Explore whether the employee should be referred to the Occupational Health Department for an opinion on their continued fitness for work or to ascertain whether there is an underlying medical problem before further action is taken.
• Consider whether adjustments to workplace or duties need to be made.
12.4. Where no medical condition is disclosed, or where there has been a referral which has revealed no apparent medical condition, or any problems have been discussed but the manager remains concerned about the employee's level of attendance then, as part of the review the manager must:

- Make clear their concerns about the attendance record.
- Ask the employee to improve it.
- Indicate that absences will continue to be monitored and if there is no substantial improvement formal action will be taken.

12.5. If at any time a referral to the Occupational Health Department reveals or the employee discloses, an underlying medical condition and it is likely to be on-going the Long Term Sickness Absence Procedures should be followed.

12.6. As a general rule formal action should be taken if the situation has not improved sufficiently within three months of the Attendance Review Meeting. However, if there is sufficient cause for concern about absence levels shortly after that time formal action may be initiated.

13. **Short-term Sickness Absence – Formal Action**

13.1. **First Formal Meeting**

13.1.1. If the individual's attendance does not improve following the Attendance Review Meeting the manager will call the employee to a formal meeting to discuss the levels of absence.

13.1.2. The employee should be given at least five working days’ notice of the meeting and advised of their entitlement to be accompanied by a trade union representative or friend.

13.1.3. A Human Resources Manager will also be present to advise on procedural issues.

13.1.4. At the meeting the reasons for the absence should be explored together with any action it may be possible for the manager to take in terms of work issues, including adaptations and adjustment to support the individual at work

13.1.5. It may also be appropriate at this stage to refer the employee to the Occupational Health Department, or make a further referral if clarity is required.

13.1.6. If having listened to any explanations and taken any agreed action the manager still remains concerned about the attendance record, then the employee must be told that absences will continue to be monitored and if there is no substantial improvement further formal action will be taken which could ultimately lead to dismissal.

13.1.7. The outcomes of the meeting should be recorded and a copy sent to all parties so that the employee is aware of the potential consequences of further absence.
13.1.8. Again further action should be taken if the situation has not improved sufficiently within three months of this meeting.

13.2. **Second Formal Meeting**

13.2.1. If absence rates remain a problem, then the employee will be called to a second formal meeting.

13.2.2. The employee should be given at least five working days’ notice of the meeting and advised of their entitlement to be accompanied by a trade union representative or friend.

13.2.3. A Human Resources Manager will also be present to advise on procedural issues.

13.2.4. If after discussion concern still remains regarding the level of absence then the employee will be notified that, if there is no substantial improvement after a further period of monitoring, the case will be referred to a panel who will consider all relevant evidence and may decide on a further period of review or to dismiss the employee.

13.2.5. The outcomes of the meeting should be recorded and a copy sent to all parties so that the employee is aware of the potential consequences of further absence.

13.2.6. If the situation has clearly not improved after the second meeting the manager should seek an Occupational Health review if this has not previously been done before referring the matter to the Panel.

13.3. **Panel Review**

13.3.1. If the situation has not improved the matter will be referred to a Panel of three senior staff, not in the School/Service that the employee works in, who have had no prior involvement in the case and drawn from at least two categories of senior staff.

13.3.2. The employee should be given 10 working days’ notice of the meeting and informed of their entitlement to be accompanied by a trade union representative or friend.

13.3.3. The manager should prepare a report which details absence record, describes the action taken to date and provides any medical evidence/opinion. The report should be provided to the employee 10 working days before the meeting and the employee must be given the opportunity to submit a written response.

13.3.4. All relevant documents, including the employees’ written response, should be made available to the Panel three days before the meeting.

13.3.5. A Human Resources Manager not previously involved in the case will also be present to advise on procedural issues.
13.3.6. In exceptional circumstances extensions to these deadlines should be made. Where relevant medical evidence is not available in the timescale the meeting will be deferred until such reasonable time as it is available.

13.3.7. The manager should explain to the meeting all action that has been taken in accordance with the procedure.

13.3.8. The employee and/or their representative should be given the opportunity to make representations.

13.3.9. The Panel may question all parties.

13.3.10. Before reaching a decision the Panel should consider:

- The nature of the absences
- The need to have the work done
- Whether the absence is work related
- The consequences of the absence on the quality of the service and the effect on colleagues.
- Action taken to date by the manager
- Further action that might be taken to resolve problems
- Whether the sickness management procedures have been followed
- The extent to which the employee has been cautioned regarding the consequences of continuing absence.
- Any medical evidence
- The employee’s work record
- Representations made by the employee and their representative
- Evidence of any medical witnesses called.
- Any reasonable adaptations and adjustments that can be made to support the individual’s attendance at work.

13.3.11. The Panel may decide to:

- Agree that no further action is necessary
- Set a further review date where absence is monitored and warn the employee that dismissal will be considered if absence persists
- Implement adjustments to workplace or duties
- Dismiss on grounds of capability owing to absence

13.3.12. Where the Panel recommends a further review period the procedures in section 13.2 should be followed.

13.3.13. Where the Panel dismisses the employee this will be with contractual notice or with pay in-lieu of notice. The employee has a right of appeal against this decision to a further panel of three senior managers from outside the School/Service one of whom will be senior to those who reviewed the case. The employee’s notice of appeal must be in writing to Human Resources within 10 days of receiving written confirmation of the Panel’s decision.

13.3.14. The employee’s notice of appeal must set out the grounds of the appeal.
13.3.15. Where an appeal against dismissal is successful the notice will be immediately withdrawn or where PILON has operated the employee will be immediately re-instated and adjustments to salary made to reclaim any PILON payments already made.

14. Long term Sickness Absence – Formal Action

14.1. The Long Term Sickness Absence Procedure applies to both employees who are absent for one continuous period of 28 days or more and to those with a long term health condition which requires frequent periods of absence.

14.2. The approach should always be based on sympathy and understanding, in full consultation with the employee always taking account of available medical advice.

14.3. Managers will maintain general contact with employees on long-term sick absence but will formally review the situation from time to time in accordance with this procedure. The purpose of the review is to consider whether there is an imminent return to work, whether adaptations and adjustments could be implemented to facilitate a return or whether any work related factors could be quickly resolved and facilitate a return.

14.4. Where there is no clear outcome from the review the manager should call the employee to a meeting to discuss their absence. The employee should be given at least five working days’ notice of the meeting and advised of their entitlement to be accompanied by a trade union representative or friend. A Human Resources Manager will also be present to advise on procedural issues. The purpose of the meeting is to discuss whether there is an imminent return to work, whether adaptations and adjustments could be implemented to facilitate a return or whether any work related factors could be quickly resolved and facilitate a return. Where the employee is too ill to attend a meeting the review should take place through the employee’s trade union or through correspondence.

14.5. If a return to work date is not known, a referral to the Occupational Health Department must be made. The letter of referral should include the information set out in paragraph 6.1 above and a copy of the letter should be sent to the employee.

14.6. The Occupational Health Department may seek information and reports from the employee’s GP and/or consultants and specialists.

14.7. A copy of the Occupational Health Department report shall be sent to the employee as well as the manager.

14.8. If the Occupational Health Department report states, or the manager has clear information, that the employee will be fit to return to work by a set date in the reasonably near future and that they are likely to be able to carry out the full range of their usual duties then no further action is needed under these procedures.
14.9. If the employee is permanently unfit to resume or maintain normal duties ill health retirement or ill health dismissal may be initiated. Redeployment to other duties should also be considered.

14.10. In cases of terminally ill employees there is a need to deal with such employees and their friends and family in a particularly sensitive way. Consultation is vital so the manager can assess the needs and wishes of the employee and the employee can explore the financial options of their pension and salary arrangements. Specific pension information, including estimates of ill health benefits, dependants’ pensions and death in service grants will be facilitated by Human Resources.

14.11. Information regarding the schemes may be requested by the employee or manager but details of actual benefits will only be released to the employee or a person nominated by the employee to receive such information.

14.12. The manager will arrange a formal meeting with the employee in cases where the Occupational Health Department report indicates a situation is uncertain, and/or there is a possibility that adjustments to the workplace, duties or hours may reasonably be made and so facilitate the employee’s return to work.

14.13. **First Formal Meeting**

14.13.1. The employee should be given at least five working days’ notice of the meeting and be advised of their entitlement to be accompanied by their trade union representative or friend. A Human Resources Manager will also be present to advise on procedural issues.

14.13.2. At the meeting the following should be discussed.

   a) Any advice from the Occupational Health Department
   b) The length of absence
   c) The reason(s) for absence
   d) Any factors (work related or otherwise) that cause or aggravate the absence(s)
   e) Any previous absences
   f) Any action taken by the manager to assist employees
   g) Whether there are any adjustments to workplace, duties or hours which may facilitate the employee’s return to work and/or reduce absences.

14.13.3. Where the employee is unable to attend the workplace for this meeting then the appropriateness of a home or hospital visit should be explored with the employee and their representative.

14.13.4. If this is not possible the manager should write to the employee covering the areas which would have been covered in the meeting and giving the employee the opportunity to respond and consult with their trade union.

14.13.5. Alternatively, discussions may be held with a trade union representative, or other person formally nominated by the employee. A note of these discussions and any agreed actions must be sent to the employee.

14.13.6. The manager should set a date for the Second Formal Meeting
14.13.7. The employee should be advised that their employment may be at risk if the absence continues. Whilst absence is not a disciplinary issue ultimately it may result in dismissal.

14.13.8. Where a meeting has taken place the points for action should be confirmed in writing.


14.14.1. The purpose of the Second Formal Meeting is to review the continuing absence and consider future options taking account of advice from the Occupational Health Department and the particular circumstances of the case.

14.14.2. An updated Occupational Health report should be submitted prior to the meeting. The referral should seek to discover:

- What is the employee’s expected date of return?
- Will the employee be able to return to their normal duties?
- Will any changes to the workplace facilitate the employee’s return?
- Will any changes to the duties undertaken or working hours facilitate the employee’s return?
- A copy of this report will be sent to the employee.

14.14.3. The employee should be given five working days’ notice of the meeting and be advised of their entitlement to be accompanied by a trade union representative or friend. A Human Resources Manager will also be present to advise on procedural issues.

14.14.4. The advice received from the Occupational Health Department will be discussed with the employee. Whilst considering changes to working patterns, the employee will be informed that continued absence puts their continued employment at risk and that if absence continues without a clear indication of a successful return to work within a reasonable time frame, the case will be referred to a panel who may consider dismissal.

14.14.5. A review date will be set and the main points of the meeting will be confirmed in writing.

14.14.6. Where the employee is unable to attend the workplace for this meeting then the appropriateness of a home or hospital visit should be explored with the employee and their representative.

14.14.7. If this is not possible the manager should write to the employee covering the areas which would have been covered in the meeting and giving the employee the opportunity to respond and consult with their trade union.

14.14.8. Alternatively, discussions may be held with a trade union representative, or other person nominated by the employee. A note of these discussions and any agreed actions must be sent to the employee.
14.15. **Third Formal Meeting**

14.15.1. At the third formal meeting the procedure at the second formal meeting will be adopted. The absence and possible return to work should again be discussed with the employee, including the consideration of retirement.

14.15.2. If there is no solution the manager should refer the matter to the Panel who will consider dismissal.

14.16. **Panel Review**

14.16.1. The Panel will comprise three senior staff, not in the School/Service that the employee works in that have had no prior involvement in the case and drawn from at least two categories of senior staff. The employee will be given 10 working days’ notice of the meeting and be entitled to be accompanied by a trade union representative or friend.

14.16.2. The manager will prepare a report detailing the absence record, describing the action taken to date and providing any medical evidence/opinion. The manager may seek an updated medical opinion from the Occupational Health Department.

14.16.3. The report will be provided to the employee 10 working days before the meeting.

14.16.4. The employee will be invited to submit a written response which must be submitted to Manager. All relevant documents, including the employee’s written response, should be made available to the Panel three working days before the meeting. A Human Resources Manager will also be present to advise on procedural issues.

14.16.5. Both the employee and the University may call medical witnesses. In that case any reasonable costs of any medical witness called by the employee shall be borne by the University with prior agreement.

14.16.6. The University and employee shall notify the other if any medical witnesses are to be called and such notice shall be given at least five working days before the meeting.

14.16.7. In exceptional circumstances extensions to these deadlines should be made. Where relevant medical evidence is not available in the timescale the meeting will be deferred until such reasonable time as it is available.

14.16.8. The manager should explain to the meeting all action that has been taken in accordance with the procedure.

14.16.9. The employee and/or their representative should be given the opportunity to make representations.
14.16.10. The Panel may question all parties.

14.16.11. Before reaching a decision the Panel will consider:

- The nature of the absences
- The need to have the work done or the reasonableness of and impact of temporary cover arrangements
- Whether the absence is work related
- The consequences of the absence on the quality of the service and the effect on colleagues
- Action taken to date by the manager
- Further action that might be taken to resolve or alleviate problems including adjustments to the workplace/hours/duties.
- Whether the sickness management procedures have been followed.
- The extent to which the employee has been cautioned regarding the consequences of continuing absence.
- The medical evidence.
- The employee’s work record
- Representations made by the employee and their representative.
- Evidence of any medical witnesses called.

14.16.12. The Panel may decide to:

- Agree that no further action is necessary
- Set a further review date where absence is monitored
- Implement adjustments to workplace, duties or hours
- Recommend dismissal on grounds of capability owing to absence.

14.16.13. Where the Panel recommends a further review period the procedures in section 14.15 should be followed.

14.16.14. Where the Panel dismisses the employee this will be with contractual notice or with pay in-lieu of notice (PILON). The employee has a right of appeal against this decision to a panel of three senior managers from outside the School/Service, one of who is senior to the members of the original panel. The employee’s notice of appeal must be in writing to Human Resources within 10 days of receiving written confirmation of the Panel’s decision. The employee’s notice of appeal must set out the grounds of the appeal. Where an appeal against dismissal is successful the notice will be immediately withdrawn or where PILON has operated the employee will be immediately re-instated and adjustments to salary made to reclaim any PILON payments already made.

15. Appeal against Dismissal

15.1. The employee must be given at least 10 working days’ notice of the appeal hearing and advised of the entitlement to be accompanied by a trade union representative or friend.
15.2. The letter giving such notice should state the date, time and place of the appeal hearing, attach all relevant documentation, give the names of those hearing the appeal and any witnesses to be called in person.

15.3. If the employee wishes to call any other witnesses or include any other documentation, then they must inform Human Resources and send any information at least five working days before the hearing. Responsibility for notifying employee witnesses and arranging their attendance rests with the employee. A copy of the employee’s witness list and documentation will be sent to the manager.

15.4. All relevant documents, including the grounds of appeal, manager and employee response, will be made available to the Appeal Panel in sufficient time to enable the panel to read the evidence on both sides and prepare questions.

15.5. Appeal Panel members must not discuss the case with anyone prior to the hearing save each other.

15.6. A member of Human Resources staff will be present to advise the Panel on proceedings.

15.7. The manager should explain to the hearing all action that has been taken in accordance with this procedure. The employee and/or their representative must be given the opportunity to make representations.

15.8. Once all the evidence has been presented and all questions asked, the appeal hearing will be concluded, all parties except the Panel and any advisors will leave the room. The Appeal Panel must consider all the evidence presented to them and decide whether to confirm, modify or overturn the Panel’s decision.

15.9. The outcome of the hearing must be confirmed in writing to the employee within five working days.

15.10. The Appeal Panel’s decision is final. There is no further right of appeal. This does not affect the individual’s statutory rights to appeal to an Employment Tribunal.

16. Procedures at Appeal

16.1. The Appeal Panel, manager, employee and their representative, and any advisers to the Appeal Panel will be present at the start of the hearing. The Appeal Panel will consist of three Senior Managers (HoD, Dean, Director, Head of Service, Pro Vice Chancellor) one of whom must be senior to the Hearing Panel members. None of the members of the Appeal Panel should have had any previous involvement in the case and must be from outside the School/Service.

16.2. The Chair of the Appeal Panel will introduce those present explaining roles (whether decision-making or advisory).

16.3. The Chair will explain the purpose of the hearing and the procedures which will be followed.
16.4. The manager will present the case and introduce other documentary or witness evidence presented to the Appeal Panel.

16.5. The Appeal Panel will have the opportunity to ask questions or clarify any issues raised during the presentation and following witness evidence.

16.6. The employee and/or representative will be invited to ask questions on the case presented and following witness evidence.

16.7. The employee and/or representative will present evidence, including presenting documentary or witness evidence.

16.8. The Appeal Panel will have the opportunity to ask questions or clarify any issues raised during the presentation and following witness evidence.

16.9. The manager will be invited to ask questions on the case presented and following witness evidence.

16.10. The manager, firstly, and then the employee and/or representative will be invited to make their closing statements.

16.11. All parties will withdraw excepting the Appeal Panel and any advisers.

16.12. The manager and the employee may be recalled to clarify points of uncertainty on evidence already given. If recall is necessary, both parties will return irrespective of the point of clarification sought.

16.13. The Appeal Panel will consider the case and decision of the Panel. The panel will determine:

- To uphold the appeal and confirm that attendance is satisfactory;
- To set a further review period where absence is monitored and/or adaptations are implemented, or
- Dismiss the appeal and confirm the Panel’s decision to dismiss on grounds of capability due to absence.

16.14. The Appeal Panel’s decision will be confirmed in writing to the employee within five working days.

16.15. The Appeal Panel’s decision is final. There is no further right of appeal. This does not affect the individual’s statutory rights to appeal to an Employment Tribunal.

16.16. The Appeal Panel hearing the case shall determine any question of procedure not explicitly set out here and if the Appeal Panel thinks it necessary/appropriate it may vary the procedure.
# Appendix 1 - Detailed Guidance on the Statement of Fitness for Work

## Statement of Fitness for Work

For social security or Statutory Sick Pay

<table>
<thead>
<tr>
<th>Information</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient’s name</td>
<td>Mr, Mrs, Miss, Ms</td>
</tr>
<tr>
<td>I assessed your case on:</td>
<td>/ /</td>
</tr>
<tr>
<td>and, because of the following condition(s):</td>
<td></td>
</tr>
<tr>
<td>I advise you that:</td>
<td>you are not fit for work.</td>
</tr>
<tr>
<td></td>
<td>you may be fit for work taking account of the following advice:</td>
</tr>
<tr>
<td>If available, and with your employer’s agreement, you may benefit from:</td>
<td>a phased return to work</td>
</tr>
<tr>
<td></td>
<td>amended duties</td>
</tr>
<tr>
<td></td>
<td>altered hours</td>
</tr>
<tr>
<td></td>
<td>workplace adaptations</td>
</tr>
<tr>
<td>Comments, including functional effects of your condition(s):</td>
<td></td>
</tr>
<tr>
<td>This will be the case for</td>
<td></td>
</tr>
<tr>
<td>or from</td>
<td>to</td>
</tr>
<tr>
<td>I will / will not need to assess your fitness for work again at the end of this period. (Please delete as applicable)</td>
<td></td>
</tr>
<tr>
<td>Doctor’s signature</td>
<td></td>
</tr>
<tr>
<td>Date of statement</td>
<td>/ /</td>
</tr>
<tr>
<td>Doctor’s address</td>
<td></td>
</tr>
</tbody>
</table>

Med 3 04/10
Detailed form description

1. The name of your employee.

2. The date of the doctor’s assessment of the employee. An assessment can mean a face to face consultation, a telephone consultation or the consideration of a written report from another doctor or registered healthcare professional.

3. The condition or conditions that affect your employee’s fitness for work.

4. This box will be ticked when the doctor’s assessment of your employee is that they have or had a health condition that prevents them from working for the stated period of time. This is strong evidence of your employee’s fitness for work for Statutory Sick Pay purposes.

5. This box will be ticked when the doctor’s assessment of your employee is that their condition does not necessarily stop them from returning to work. However, they may, for example, not be able to complete all of their normal duties or could benefit from amended working hours.

6. These four tick boxes represent common ways to aid a return to work. The doctor will tick one or more of these options when they feel they could help your employee return to work. This list is not exhaustive and there may be other ways to help your employee return to work. Further information on each of these is included on page 11.

7. Where the ‘may be fit for work’ box has been ticked, the doctor will add information on the functional effects of your employee’s condition and what could help a return to work. Where a doctor feels an assessment by an occupational health professional is required, they will state it here.

8. Here, the doctor will state the period the advice covers for a forward period, which during the first 6 months of sickness can be up to a maximum of 3 months. Any period in days
### Appendix 2 - Illustrations of Pay, sick pay and leave during Return to Work Plans

**Example One:** Employee works full time. Return to Work Plan involves a phased return over 4 weeks. Week one employee works 2 mornings. Week two employees works 2.5 days. Week three employee works 4 days. Week four employee works full time.

#### a) Full Pay Sickness Entitlement

<table>
<thead>
<tr>
<th>Week</th>
<th>Days worked</th>
<th>Days Paid</th>
<th>Sick Pay</th>
<th>Sick Leave</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>1</td>
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<td>4</td>
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#### b) Half Pay Sickness Entitlement

<table>
<thead>
<tr>
<th>Week</th>
<th>Days worked</th>
<th>Days Paid</th>
<th>Sick Pay</th>
<th>Sick Leave</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>1</td>
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<td>4</td>
</tr>
<tr>
<td>2</td>
<td>2.5</td>
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<td>3</td>
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<td>4</td>
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#### c) No Pay Sickness Entitlement

<table>
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<th>Days Paid</th>
<th>Sick Pay</th>
<th>Sick Leave</th>
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<td>1</td>
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<tr>
<td>4</td>
<td>5</td>
<td>5</td>
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</table>

**Example Two:** Employee works part time (0.5FTE). Return to Work Plan involves a phased return over 3 weeks. Week one employee works 1 morning. Week two employees works 1.5 days. Week three employee works 2 days.

#### a. Full Pay Sickness Entitlement

<table>
<thead>
<tr>
<th>Week</th>
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<th>Days Paid</th>
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#### b. Half Pay Sickness Entitlement

<table>
<thead>
<tr>
<th>Week</th>
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<th>Sick Leave</th>
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<tbody>
<tr>
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<td>3</td>
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#### c. No Pay Sickness Entitlement

<table>
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### POLICY SIGN-OFF AND OWNERSHIP DETAILS

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### REVISION HISTORY

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<td>Formatting updates (minor amends not requiring committee approval)</td>
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