

ABSENCE MANAGEMENT POLICY

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The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as ‘uncontrolled’ and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on Intranet
1.0	eMBED	New Policy under eMBED	Approved by SMT on 27 July 2016	January 2017

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INTRODUCTION

Harrogate and Rural District Clinical Commissioning Group (CCG) recognises the contribution of its employees and is committed to providing good working conditions and health and safety standards.

- 1.1 The overall purpose of the policy is to set out CCG's approach to the management of absence and attendance within the workplace. The policy will also set out guidance to staff and managers about their responsibilities in relation to Absence Management.
- 1.2 It is the responsibility of the CCG to protect the health and wellbeing of its employees and enable the best of its workforce; the Absence Management Policy is intending to contribute to delivering that objective.
- 1.3 This procedure will apply to all staff within the CCG except for those employees currently within their probationary period, if applicable, where the probationary policy should apply. If there is no probationary policy in place, managers should ensure that new employees have clear principles set and that their attendance is reviewed regularly.

2 ENGAGEMENT

This policy has been developed by the eMBED Health Consortium workforce team in partnership with employees, managers and trade unions and approved at the Joint Trade Union Partnership Forum.

3 IMPACT ANALYSES

3.1 Equality

In applying this policy, the CCG will have due regard to the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

An Equality Impact Assessment is attached at Appendix 4. This policy should be carefully monitored following implementation through the local annual staff survey and the annual monitoring data and to assess whether any particular protected groups are positively or negatively affected in terms of outcomes and accessibility.

3.2 Sustainability

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 5.

3.3 Bribery Act 2010

The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial or other advantage as a reward or incentive to perform a relevant function or activity improperly performed.

The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed and an individual convicted of an offence can face a prison sentence of up to 10 years.

The Bribery Act applies to this policy.

4 SCOPE

This policy applies to all staff including Governing Body members and members of the CCG Senior Management Team.

5 POLICY PURPOSE & AIMS

2.1 This procedure enables managers to address sickness absence issues, both short and long-term, in a fair, consistent and equitable manner. It is recognised however that all cases must be dealt with on an individual basis because of differing circumstances therefore this procedure gives an outline of the principles to be observed.

2.2 It should be noted that all other types of absence should be dealt with in accordance with the appropriate policy, i.e. maternity, adoption, career break, stress policy etc. Line managers should consider, and take due account of, individual circumstances and all relevant factors before action is taken e.g. maternity related absence, stress, disability related absence, work related factors.

Absence for planned elective medical treatment, which is for cosmetic reasons alone, must be taken as annual leave and not sick leave. Where planned medical treatment has both a cosmetic and health improvement purpose, absence should be reported as sick leave.

2.3 Confidentiality will be maintained in all aspects of absence management and records will be kept in line with the Data Protection Act.

2.4 Managers will be fully trained in policies and procedures relating to absence. All new staff will be made aware of the policy during their induction and existing staff will be informed of the changes.

2.5 The CCG recognises that everybody is sick or subject to emergencies from time to time, however regular attendance at work is a contractual requirement.

2.6 Short-term absenteeism refers to a series of illnesses, often unconnected, which result in frequent, short periods of absence. The appropriateness of referral to the CCG's Occupational Health Provider will be discussed between the individual, their line manager and a Workforce representative.

2.7 It is acknowledged that occasions do arise when people are away from work on a long-term basis as a result of chronic or acute ill health. Although each case will be dealt with on an individual basis this policy outlines certain principles that will always be observed.

- 2.8 In dealing with any sickness absence cases managers must be mindful of obligations that they and the CCG may have under the Equality Act 2010. In identifying whether or not an employee is covered by the Act advice will be sought from appropriate medical professionals.
- 2.9 Advice should be taken from the Workforce Team at all formal stages of this procedure to ensure the consistent application of this procedure throughout the CCG.
- 2.10 Employees may be accompanied by a trade union representative or workplace colleague in all formal discussions with management about their absence.

6 ROLES / RESPONSIBILITIES / DUTIES

6.1 Manager responsibilities

Line managers have an important role to play in the management of absence. The key responsibilities for managers include:

- Ensure that they are familiar with the Absence Management Policy and their obligations in relation of the management of the policy.
- Communicate appropriately with absent staff
- Deal with any actions in a timely manner when dealing with absence from work, balancing the needs of the individual with those of the service.
- Maintain accurate records of all absences and reasons for absence
- Hold return to work meetings after each individual episode of sickness
- Maintain confidentiality at all times
- Attend any CCG training provided on policy updates.
- Identify a 'nominated deputy' for staff to report sickness absence to during periods of annual leave/out of the office/non-working time and communicate this to staff.

6.2 Employee Responsibilities

Employees are expected to:

- Ensure regular attendance at work;
- Communicate appropriately with their manager when absent from work;
- Co-operate fully in the use of these procedures
- Attend Occupational Health when required to do so as a contractual duty
- Comply with the sick pay scheme
- Meet with their manager for a Return to Work meeting following any sickness absence
- Attend review meetings with Management when discussing periods of absence or planning return to work, reasonable adjustments or alternative employment.
- Submit any GP fitness notes or self-certification as required, in line with this policy

GENERAL POINTS

- 4.1 The CCG's procedure for managing absence must be followed by all employees. It is the responsibility of every employee to report any absence and only in exceptional cases should this procedure be carried out by someone else on their behalf.
- 4.2 If an employee knowingly gives any false information, or makes false statements

about their sickness, it may be treated as misconduct and may result in disciplinary action being taken. In proven cases of gross misconduct it could lead to dismissal (e.g. absent on sick leave and working elsewhere).

- 4.3 Any employee who unreasonably fails to comply with the CCG's Absence Management policy and procedure may have their occupational sick pay withheld. Any decision to withhold sick pay must be made in conjunction with the Workforce Team. Advice may also be sought from Occupational Health .
- 4.4 The CCG has the right to dismiss employees whilst they are receiving sick pay entitlement. Any decision to dismiss on capability grounds will be subject to receipt of medical advice.
- 4.5 The CCG reserves the right to request a Doctor's Certificate for periods of absence of less than seven calendar days in cases of short-term persistent absence. However this should normally follow an Occupational Health referral where there is no medical reason for continued short-term persistent absence. Furthermore, this option should only be used for a finite period and should be reviewed on a regular basis. Finally, should the employee incur a cost in obtaining a Doctor's certificate, then this will be reimbursed by the CCG.

5. SCHEME OF DELEGATION

- 5.1 Each policy will contain a scheme of delegation specific to the stages and actions associated to the policy. All Schemes will adopt the levels as outlined below therefore ensuring consistency throughout all policies and clarity within the CCG

Informal procedure	Line Manager or equivalent level manager from elsewhere within the CCG
Formal procedure	Line manager or equivalent level manager from elsewhere within the CCG or the line manager's direct manager if the line manager has been previously involved or implicated. A Workforce Representative will attend formal meetings.
Appeal following formal procedure	Line Manager's manager or equivalent who has not previously been involved or implicated. A Workforce Representative will attend formal meetings.
Dismissal Hearings	.Chaired by a Director, or manager with delegated authority, or equivalent plus one other manager who has not previously been involved or implicated and a Workforce representative. If the respondent is a Director, a separate Director will chair the Panel with another Director, Lay Member or GP and a Workforce Representative.
Appeal against dismissal	Chaired by a Director whom has not already been involved or implicated plus one other Director or Governing Body member and Workforce Representative.
Appeal against dismissal for	Clinical Chair plus one other Governing Body

a Director	member whom has not already been involved or implicated and a Workforce Representative.
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7 IMPLEMENTATION

- 7.1 The CCG Senior Management Team is responsible for formal approval and monitoring compliance with this policy. Following ratification the policy will be disseminated to staff via the organisation's intranet.

8 TRAINING & AWARENESS

This Policy will be available to view on the CCG website. Training and support will be available to all line managers in the implementation and application of this policy.

9 MONITORING & AUDIT

- 7.1 The implementation of this policy will be audited on a regular basis and reported to the CCG Senior Management Team.

10 POLICY REVIEW

This policy will be reviewed every 3 years by the Workforce team in conjunction with operational managers and trade union representatives. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance. Where review is necessary due to legislative change, this will happen immediately.

APPENDICES

PART 2 – PROCEDURE

PART 2

PROCEDURE

1. REPORTING ABSENCE

- 1.1 All employees must contact their line manager on the first day of absence as soon as is reasonably practicable or within one hour of their normal starting time. The

employee must make this call. The only exception is where it is clearly not possible for employees to ring personally, such as admission to Hospital.

1.2 Employees must talk directly to their line manager. It is not acceptable to text, e-mail or leave messages with anybody else. This will establish an effective two-way dialogue to take place and to elicit the information required as set out in 1.4 below. If the line manager is unavailable, then the employee should contact the alternative nominated manager, as confirmed by the line manager.

1.3 If an employee does not have a telephone at home alternative arrangements for reporting sickness must be made.

If an employee fails to attend work and does not notify their manager of their absence or cannot themselves be contacted then the employee's next of kin may be contacted.

1.4 When reporting absence employees must give the following information:

- the reason for the absence (if known);
- the expected length of absence (if known);
- whether a visit will be made to their GP, and if so, the date of the appointment.

Where possible the manager should be advised of any outstanding work that may require urgent attention during the period of absence. This will enable managers to better plan and allocate work.

1.5 In cases of continued absence, employees must contact their line manager regularly to provide them with up to date information. Should the absence continue then the employee and the manager must decide upon the frequency of further/continued contact and the form that this will take (this could be weekly/every two weeks or monthly, depending on the nature of the illness and the employee's situation. More contact is generally required if the discussions centre around either a return to work or leaving the CCG due to ill health. The frequency of contact should be agreed between the manager and employee and noted.) It is not sufficient to provide fit notes as a means of maintaining contact. It should be noted that failure to maintain contact as per the agreement with the line manager, may result in the payment of occupational sick pay being delayed or withheld. Any decision to take disciplinary action or to withhold or delay payment of occupational sick pay must be made in conjunction with a Workforce Representative

Evidence of Incapacity for work

1.6 For absences lasting seven calendar days or less, on the first day back at work, employees will be required to complete a Sickness Self-Certificate. (appendix 4) This should include the reason for absence. The Certificate will be countersigned by a manager and subsequently will be kept in the employee's personal file.

1.7 If an absence exceeds seven calendar days, a doctor's fit note must be submitted to the line manager, no later than the tenth day of absence, covering the absence from the eighth day. The fit note is normally retained by the line manager and the absence recorded on the appropriate staff absence record form.

1.8 If an absence continues beyond the period covered by the initial fit note, further fit note must be submitted to give continuous cover for the period of absence. On eventual return to work employees must complete the CCG's Sickness Self-Certificate in respect of the first seven days or less not covered by a doctor's fit note.

1.9 Failure to submit consecutive fit notes in a timely manner may be considered in breach of the Absence Management policy and may invoke the Disciplinary Procedure. Such periods of unauthorised absence could result in suspension of pay until the submission of a fit note (see 1.5 above).

1.10 If the doctor's fit note does not specify the period of absence covered, it will be taken as covering a period of seven calendar days only.

1.11 For reporting purposes, reports will show long-term absence as 28 calendar days or more.

Statement of Fitness to Work (FIT Note)

1.12 The statement of fitness to work, known as the 'fit note' was introduced in April 2010. It allows a doctor/GP to advise whether an employee is either:

- Fit to work
- Not fit to work
- May be fit to work (subject to conditions)

If the doctor/GP suggests that they 'May be fit to work' there are now a number of options open which may help to get the employee back to work:

- Phased return to work
- Amended duties
- Altered hours
- Workplace adaptations

Any such recommendations should be discussed and agreed with the individual and line manager prior to commencement of work at a return to work meeting.

If the recommendations made by the doctor/GP on the fit note cannot be accommodated, the medical note should be used as though the doctor/GP had advised 'Not fit to Work' for the duration of the note. This means the employee does not need to return to their doctor until the expiry of the note.

Employee Occupational Sick Pay Entitlements

1.13 The amount of paid sickness leave entitlement depends on length of service, as outlined below:

- During 1st year of service One months' full pay and two months' half pay
- During 2nd year of service Two months' full pay and two months' half pay
- During 3rd year of service Four months' full pay and four months' half pay
- During 4th and 5th years of service Five months' full pay and five months' half pay
- After 5th year of service Six months' full pay and six months' half pay

1.14 The period during which sick pay is paid and the rate of sick pay for any period of absence is calculated by deducting from the employee's entitlement, on the first day of

absence, the aggregate periods of paid sickness during the 12 months immediately preceding that day.

1.15 The definition of full pay will include regularly paid supplements, including any recruitment and retention premia, payments for work outside normal hours and high cost area supplements. Sick pay is calculated on the basis of what the individual would have received had he/she been at work. This would be based on the previous three months at work or any other reference period that may be locally agreed.

1.16 Full pay is inclusive of any statutory benefits. Half pay plus statutory sick pay will not exceed full pay.

1.17 For the purpose of calculating entitlement to sick pay, a previous period or periods of NHS service will be counted towards the employee's entitlement to sick leave with pay where there has been a break, or breaks, in service of 12 months or less.

1.18 In the event of employment coming to an end, entitlement to sick pay ceases from the last day of employment.

Occupational Sick Pay Conditions

1.20 The conditions for sick pay are financial provisions indicating an entitlement to occupational sick pay and in no way indicate the amount of absence to which an employee is entitled.

1.21 If sick pay entitlement is exhausted before a Final Review Meeting takes place, and where the failure to undertake the Final Review is due to delay by the manager, sick pay will be reinstated at half pay as follows:

- Employees with more than 5 years reckonable service – sick pay will be reinstated if the entitlement is exhausted before the Final Review meeting takes place and is due to management delay.
- Employees with less than 5 years reckonable service – sick pay will be reinstated if the entitlement is exhausted before the Final Review meeting takes place (due to management delay) within 12 months of the start of their sickness absence.

Reinstatement of sick pay in these circumstances will continue until the Final Review meeting takes place. It is not retrospective for any period of zero pay in the preceding 12 months of service.

1.22 The period of full or half sick pay detailed in 1.13 may be extended:

- where there is the expectation of a return to work in the short term and an extension would materially support a return and/or assist recovery. Particular consideration will be given to those staff without full sick pay entitlements.
- where it is considered that individual circumstances mean that an extension will relieve anxiety and/or assist recovery.

When an extension to sick pay is being considered for any reason this must first be discussed with a Workforce Manager.

1.23 Sick pay is not normally payable for an absence caused by an accident due to active participation in sport as a profession, or where contributable negligence is proved.

1.24 An employee who is absent as a result of an accident is not entitled to sick pay if damages are received from a third party. Under these circumstances the employee will be advanced a sum not exceeding the amount of sick pay payable under this scheme providing the employee repays the full amount of sickness allowance when damages are received. Once received, the absence will not be taken into account for the purposes of the scale set out in 1.13 above.

2. SICKNESS DURING ANNUAL LEAVE

2.1 If an employee falls sick during a period of annual leave either in this country or overseas, and the period of incapacity seriously interrupts the period of leave, then they may count the absence as sick leave provided they;

- Notify their line manager either in writing or by telephone at the earliest opportunity, in line with CCG procedures and no later than the fourth continuous day of illness; and
- Provide a statement by a qualified medical practitioner; the statement should cover the period of the illness and the nature of the illness.

For information, a serious interruption of annual leave would be deemed as four or more days of continuous illness.

2.2 If an employee is absent on sick leave and has pre-booked annual leave then they must notify their manager as soon as possible of the nature of the leave, otherwise it will be assumed that the annual leave is being taken. If the employee intended to spend time at their normal place of residency then the leave may be credited back upon receipt of appropriate medical statements/Doctors notes.

2.3 If the employee intends to spend more than one night away from their normal place of residency whether it be overseas or in the UK, then the employee must provide a written statement from a medical practitioner advising that the holiday would be beneficial to their condition or recovery, and in no way would aggravate or cause detriment to the illness/injury. Where necessary, the CCG will reimburse the cost of such letters. In addition, the CCG may also choose to obtain a medical opinion from the Occupational Health Provider. If the leave is supported by a medical practitioner then the employee will have the option to continue with sick leave and have the annual leave credited back or take the time as annual leave, in which case sick pay, occupational and/or statutory as appropriate, will cease. If an employee is physically unable to return to work after a holiday they must submit a fit note which covers them from the day on which they were expected to return to work. Should the employee take the leave as sickness, then entitlements to sick pay both occupational and statutory will be in line with the normal eligibility rules.

2.4 Where the request to continue with a pre-booked holiday is not supported by a medical practitioner, then annual leave should be taken.

2.5 Employees will not be entitled to an additional day off if they are sick on a statutory holiday.

3. SHORT TERM ABSENCE

3.1 The CCG operates an accurate method of recording and monitoring levels of absence. If the amount of time being taken off for illness is giving cause for concern, managers will discuss this with employee at the return to work meeting and provide them with a record of all absences from work. The individual will have the opportunity to explain any personal or work-related issues which may be a factor in the absence.

3.2 To ensure the consistency with the application of Absence Management Policy, trigger points are used to monitor short term sickness and long term sickness. The triggers for short term absence are:

- Three occasions of absence in any 12 month period, or
- 12 days absence in any 12 month period
- Identifiable patterns of absence

3.3 Where an employee reaches a trigger, either an informal attendance discussion or a formal attendance monitoring meeting will be held with the individual as can be seen within Appendix 1. The purpose of the meeting is to provide support and assistance to overcome any short – term issues, patterns or problems which are identified. At this stage an action plan of improvement will be set which will include targets. The CCG will look at patterns of absence and will review if a pattern is emerging, even if the trigger points are not met in respect of occasions or number of days. Failure to meet these targets set at each stage of the procedure (in accordance with Appendix 1 ‘*Stages of attendance management and improvement notification*’) will result in progression to the next stage of the procedure. In applying this procedure, consideration should be given to any Occupational Health advice received, particularly in relation to any underlying or on-going medical conditions.

3.4 Informal Attendance Discussion – Stage 1

Where an individual fails to maintain regular attendance at work deemed acceptable by the CCG, an informal attendance discussion will be held between the employee and their line manager to offer the opportunity to discuss the absences in more detail, identify any reasons for absence and agree improvement targets moving forwards.

The informal discussion is similar in format to the return to work interview and can be conducted at the same time as the return to work interview if it is appropriate to do so with the addition of an informal improvement plan which can be found at Appendix 6. If the employee fails to meet the agreed objectives regarding attendance at work as specified within the informal improvement plan, they will progress to stage 2 of the absence management process which is formal.

The employee should be provided with a copy of the informal improvement plan for their records in addition to the copy which will be kept by the manager in the employee’s personal file.

STAGE 2 FORMAL Attendance Monitoring Meeting (at all formal stages of this procedure staff have a right to be accompanied a companion)

3.5 At the agreed review meeting or before if the employee has failed to meet the improvement targets set at the informal attendance discussion, the manager and workforce representative will meet with the employee to review their attendance. The employee is entitled to be accompanied by a companion. During this discussion it may be necessary to issue a first written warning and agree a time period over which

their attendance will be monitored for improvement. The standard of attendance required must be clearly identified

- 3.6 The First Written Warning will remain live on the employee's personal file for 12 months from the date and time of issue. The employee must also be advised of their right to appeal.
- 3.7 The employee will be informed of the agreed actions in writing usually within 5 working days and reviewed again at the end of the agreed review period.
- 3.8 At the end of the agreed period the manager and individual will meet again to review the attendance levels. This meeting may be brought forward if it is established that the agreed standards have not been met.
- 3.9 If the attendance has improved to the agreed standard, it may not be necessary to take any further action.
- 3.10 If at the end of the agreed monitoring period, the employee's absence has not improved/maintained to the agreed standard. The manager will either agree an extension to the monitoring period to refer to a second formal review. The outcome of the review stage meeting will be confirmed in writing usually within 5 working days.

STAGE 3 Second FORMAL Attendance Discussion meeting

- 3.11 At the agreed review date, the manager and a Workforce Representative will meet with the employee to review their attendance the employee is entitled to be accompanied by a companion.
- 3.12 If the employees absence has not improved/maintained to the agreed standard following the previous periods of monitoring, and support having been implemented or accounted for. It may be necessary to issue a final written warning and agree a time period over which their attendance will be monitored. The standard required must be clearly identified.
- 3.13 The Final Written Warning will remain live on the personal file for 12 months from the date and time of issue. The employee must also be advised of their right of appeal.
- 3.14 The employee will be informed of the agreed actions in writing usually within 5 working days and reviewed again at the end of the agreed review period.
- 3.15 If the attendance has improved, it may not be necessary to take any further action.
- 3.16 If the attendance has not improved/been maintained to the agreed standard the manager will either agree on extension to the monitoring period or refer to a Final Review Meeting (see section 7).

4. LONG TERM ABSENCE

- 4.1 Long-term absence is classed as at least four weeks continuous absence. However it should be noted that for reporting purposes only, reports will show long-term absence as 8 calendar days or more.

4.2 In all cases of Long term absence, Occupational Health advice must be sought.

4.3 In cases of long-term absence line managers must arrange to conduct regular review meetings to discuss possible courses of action should the absence continue. These may include rehabilitation and return to work requirements, redeployment, ill-health retirement etc. The meetings should be recorded and notes sent to the employee concerned. Employees may be accompanied by a trade union representative or a CCG work colleague not acting in a professional or legal capacity. The line manager may also be accompanied by a Workforce Representative. The frequency of such meetings will depend upon the circumstances of the individual case.

4.4 These meetings should be held at mutually convenient locations, with due regard made to the employee's circumstances. If an employee is too ill to travel, the line manager may arrange to conduct a home visit at a mutually convenient time, if the employee agrees. However it should be noted that, as part of the return to work process, it may be more relevant to hold the meetings at a business location, or a suitable alternative venue.

4.5 Review and decision dates should be arranged taking into consideration the individual's sick pay entitlements and there must be a review meeting before their sick pay ends.

4.6 Employees who fail to attend sickness review meetings may be subject to the various sanctions within this policy.

5. ON-GOING MEDICAL CONDITIONS

In some situations an employee may have on-going health related problems which may impact upon their ability to perform the duties of their role. The employee may still be in work, or have long term or short term absence. This will be addressed by any or all of the following three steps.

1. **Medical advice**, support and guidance to help determine the best course of action for the individual
2. **Reasonable Adjustments / redeployment** – consider what adjustments can be made to role including hours or lighter duties. Identify if there is any suitable alternative role the individual could undertake either on a permanent basis or Interim basis. (refer to redeployment policy for additional information)
3. **Final Review Panel**- if the individual's substantive post is not suitable due to their ill health and the above stages have been unsuccessful in supporting the employee to resume full duties, a final review hearing should be arranged.

Before any decision to terminate an employee on medical grounds the following must have been meaningfully considered:

- Rehabilitation
- Phased return
- A return to work with or without adjustments
- Redeployment with or without adjustments

6. RETURN TO WORK MEETING

6.1 On their return to work, employees will be required to attend a return to work meeting with their line manager to discuss their absence. If the employee has been absent with a highly sensitive condition he/she may ask for a manager of the same gender to manage the absence. The meeting is separate to an absence review meeting and will take place at an agreed time and in a private place.

6.2 The discussion should allow for an exchange of information and be as frank and as open as possible as this will prevent any misunderstandings concerning the nature of the absence. Managers should also take this opportunity to discuss any patterns or trends of absence that may emerge.

6.3 This will also enable the line manager to discuss any assistance, help, counselling or action on work-related issues that may be provided to enable an employee to return to work or prevent further absence occurring.

6.4 Notes and outcome of the meeting will be agreed and retained on file.

7. OCCUPATIONAL HEALTH

7.1 In cases of long-term absence, managers are expected to exercise discretion in referring such absences to Occupational Health and the following principles should be applied:

- Occupational Health can be consulted for advice when the likelihood of a return to work or cause of absence is not known.
- A member of staff should be referred to Occupational Health at an early stage in the absence if it is considered that a referral may benefit the employee or the CCG.
- Occupational Health is available to give both general and specific advice on the fitness of an employee for work, adjustments to the workplace where appropriate and likely return dates.
- An employee may request an Occupational Health referral, via their manager, for advice and support on the best way of seeking a return to work.

7.2 Where there is doubt regarding an employee's ability to return to work on a permanent basis advice must be sought from Occupational Health. Employees may be eligible to ill-health retirement benefits if they have two years continuous membership of the NHS Pension Scheme. Ill-health retirement should be discussed with the individual and the Workforce Team during the review meetings. Further information is available in the Retirement Policy.

7.3 Employees must make themselves available to attend Occupational Health referrals as a contractual obligation (this may include home visits by an Occupational Health representative or the attendance at an Occupational Health Office). However, due regard should be made to the accessibility of the location in relation to the nature of absence. Following the referral, Occupational Health will then provide a written report to management, a copy of which will also be sent to the individual. In most cases management will meet with the individual to discuss the content of the report.

7.4 In some cases it may be more appropriate for Occupational Health to contact a third party for a medical opinion e.g. GP, Consultant etc. In such cases consent must be obtained from the employee concerned before accessing any third party medical records. In these cases, any information provided by a third party is always disclosed to Occupational Health and not to management. Occupational Health will then provide management with a written

summary of information provided which is pertinent to the employee's on-going employment. Employee consent is not required for the release of this report.

7.5 Occupational Health may recommend appropriate treatment, such as physiotherapy or cognitive behavioural therapy, in supporting staff to remain in work, or return to work, at the earliest opportunity.

8. DISABILITY RELATED ABSENCE AND REASONABLE ADJUSTMENTS

8.1 If an employee is disabled or becomes disabled during their employment, then the CCG is legally required under the Equality Act 2010 to make reasonable adjustments to enable the employee to continue working. The Act broadened the provisions of the Disability Discrimination Act of 1995, for public sector employees.

8.2 Advice must be sought from Occupational Health as to what they suggest are 'reasonable adjustments'. However it will be the line manager's decision as to whether those adjustments are also reasonable for the service. Any adjustments made must be discussed with the individual concerned. Where the manager has any doubt, they must speak to a Workforce representative for advice.

8.3 The amendment to the Disability Act (now Equality Act 2010) also introduced the concept of positive action where a disabled member of staff (if they are as qualified) can be treated differently in order to ensure they remain in work. E.g. An internal disabled applicant, who has been displaced from their current role, may be considered favourably against an able bodied candidate.

8.4 Where there is a lack of understanding, on any part, if the absences are linked to a disability Occupational Health advice should be sought at the earliest opportunity.

9. SUBSTANCE MISUSE

9.1 Where an employee's absence is as a result of a suspected or admitted substance misuse problem please refer to the CCGs Substance Misuse Policy.

10. RETURNING TO WORK

10.1 Wherever possible the CCG will aid a return to work on a permanent basis. To establish the most effective way of doing this the CCG may seek further medical advice.

10.2 This may include making reasonable adjustments to the employee's job, allowing a phased return to work, or by allowing the employee to return to work on a reduced or alternative hours basis.

Phased Return

10.3 Where a phased return to work is recommended by Occupational Health, or a medical practitioner, the employee will be able to return to work on a part-time basis whilst receiving their full pay. This will be for a maximum period of four weeks, thereafter the employee must either substitute their annual leave for days not worked or receive payment only for the hours worked.

10.4 Where an employee requests a phased return to work themselves, they must take annual leave for days not worked or receive payment only for the hours worked.

Redeployment

10.5 If medical opinion is that an employee is unfit to return to their former employment, the possibility of alternative employment must be considered. (Please refer to the Redeployment Policy).

10.6 Where an employee's pay reduces because of ill-health or injury, and they have the required membership of the NHS Pension Scheme, their membership at the higher rate of pay may be protected. All queries should be passed to the Pension Agency for advice.

Temporary Injury Allowance

10.7 Employees on sick leave, and receiving either reduced pay or no pay, as a result of an injury or illness that is wholly or mainly attributable to their NHS employment will be eligible to apply for Temporary Injury Allowance. Applications should be made by the employee to their line manager who will make the decision on whether payment should be made, in conjunction with a Workforce representative. Further guidance may be sought from Occupational Health Service or NHS Pensions.

10.8 Employees do not need to be members of the NHS Pension Scheme to apply for Temporary Injury Allowance.

10.9 Temporary Injury Allowance will stop when the individual returns to work or leaves their employment.

Medical Suspension

10.10 If a manager has concerns with regards to an employee and their ability to undertake work without risk to themselves or others they may ask the employee to remain off duty on medical suspension until Occupational Health advice is sought. Alternative duties or place of work may also be considered at this point to support the employee

Ill Health Retirement

10.11 Throughout the absence management process all options, such as rehabilitation, redeployment, part time working, job redesign etc must be considered in conjunction with the employee.

Where the medical opinion indicates that an employee is permanently unfit for any employment or for the duties of their current role, the individual has the option of applying for early retirement on the grounds of ill health, in line with the provisions of the NHS Pension Scheme. This option is only available to employees who have at least two years continuous, pensionable NHS employment.

If an application for ill-health retirement is made, this constitutes a mutual decision that the employee is unable to fulfil their contractual obligations due to their ill-health condition and therefore a termination date will be agreed between the individual and their line manager.

This option should be discussed with an individual in full at the appropriate time and as much information as possible will be provided to enable the employee to make an informed

decision. For more information regarding this procedure please contact The Workforce Team.

Resignation

10.12 At any time during the process an employee may choose to resign from their employment. They are required to give their contractual notice and any outstanding accrued holiday entitlement will be paid in lieu.

10.13 Payment in lieu of notice may be agreed by the line manager in conjunction with The Workforce Team.

Dismissal On The Grounds Of Capability

10.14 Before dismissal is considered, all other options as outlined above must have been discussed with the employee during the regular meetings that have taken place throughout the absence. Managers must be satisfied that all relevant information has been obtained and all relevant facts investigated. Documentation supporting this must be provided to the employee. In cases of long-term sickness, managers must also be mindful of the cessation of occupational sick pay entitlements in conjunction with the long-term prognosis.

In cases of short-term absence, managers must also consider the potential loss of specialist knowledge/experienced member of staff, the cost of replacing the employee, whether or not any flexible working arrangements could be agreed etc.

No

10.15 Should the dismissal of an employee be identified at any stage in the process as the only appropriate option (i.e. all other options as outlined above have been investigated and found to be inappropriate) a Final Review Hearing will be convened. This will be chaired by the appropriate manager with the authority to dismiss and will be attended by the employee in question, their line manager and a the Workforce Team representative.

10.16 Prior to this meeting the employee will receive a copy of the report, detailing the case history to date and considerations taken into account (e.g. Equality Act, implications, suitable alternative employment, ill health retirement) together with all other relevant documents, made to the person authorised to dismiss.

10.17 At this meeting the employee will have the opportunity to present their case and submit supporting evidence. They have the right to be accompanied by a trade union Representative or workplace colleague. The employee has the right to appeal this decision.

10.18 Following the meeting the employee will be given a letter confirming the reason for dismissal, the date of dismissal, their right to appeal, details of any payment in lieu of contractual notice and any other outstanding payments to which they are entitled e.g. annual leave.

11. MATERNITY RELATED ABSENECE

Should an employee be absent from work due to pregnancy related sickness, these absences should be recorded separately and not counted towards absence triggers. However such absence should continue to be monitored to allow for supportive measures and adjustments to be considered.

If an employee is off work ill, or becomes ill, with a pregnancy-related illness during the last

four weeks before the expected week of childbirth, maternity leave will normally commence at the beginning of the 4th week before the expected week of childbirth or the beginning of the next week after the employee last worked, whichever is the later. Please see the organisation's Maternity Policy for more detail.

12. APPEAL

Employees may appeal against any decision made under this procedure by writing to the appropriate Manager, giving the reasons for appeal, within 10 working days of any action being taken.

Where there is an appeal against a dismissal, employees should address their appeal to the Chief Officer outlining the reason for the appeal with 10 days of receipt of the letter.

7 of 7

Stages of Absence Management and Improvement Notification.

	Period of Absence	Improvement Target	Action	Decision
Stage 1 – Informal sickness absence discussion	<p>If the employee has had 3 occasions in 12 months or 12 days absence in any 12 month period they will be issued with Stage 1 informal notification (the CCG will also look at patterns of absence and will review if a pattern is emerging, even if the other trigger points relating to occasions or number of days are not met).</p> <p>Notes of discussion retained on file with a copy of the informal improvement plan being provided to the employee within 5 working days</p>	Over the next 12 months, If the employee has a further 3 occasions or 10 days absence in total, they will progress to Stage 2	<p>Attendance meeting: Review absence record and reasons for absence. Agree standard of attendance and support if necessary. Possible OH referral if needed Review period agreed</p>	<p>Notes of discussion retained on file with a copy of the informal improvement plan being provided to the employee within 5 working days</p> <p>Will remain on file for 12 months</p> <p>Right of appeal</p>
Stage 2 First Written Warning	<p>From the date of the Stage 1 informal meeting. If the employee has had 3 occasions or 10 days absence in total, they will progress to Stage 2 (the CCG will also look at patterns of absence and may review if a pattern is emerging, even if the trigger points are not met)</p> <p>Letter to employee sent with 5 working days' notice</p>	During the next 12 months, If the employee has a further 3 occasions or 10 days absence in total, they will progress to Stage 3	<p>Attendance meeting: Review absence record and reasons for absence. Agree standard of attendance and support if necessary. Refer to Occupational Health Review period agreed</p>	<p>Decision in writing within 5 working days, copy kept on personal file</p> <p>Will remain on file for 12 months</p> <p>Right of appeal</p>
Stage 3 Final Written Warning	From the date of the Stage 2 meeting. If the employee has a further 3 occasions or 10 days absence in	Over the next 12 months, If the employee has a further 3 occasions or 10	Attendance meeting: Review absence record,	Decision in writing within 5 working days, copy

	<p>total during, they will progress to Stage 3 (the CCG will also look at patterns of absence and may review if a pattern is emerging, even if the trigger points are not met)</p> <p>Letter to employee sent with 5 working days' notice</p>	<p>days absence in total, they will progress to Stage 4, final review panel</p>	<p>reasons for absence and medical advice. Agree standard of attendance and support if necessary. Possible consider alternatives if necessary, adjustments Review period agreed</p>	<p>kept on personal file</p> <p>Will remain on file for 2 years</p> <p>Right of appeal</p>
<p>Stage 4</p> <p>Final Review Panel</p>	<p>From the date of the third review up to 12 months, if the employee has a further 3 occasions or 10 days absence in total, they will progress to Stage 4, final review panel (the CCG will also look at patterns of absence and may review if a pattern is emerging, even if the trigger points are not met)</p> <p>Letter to employee sent with 5 working days' notice</p>	<p>If the employee hasn't met the improvement notification issued at Stage 3 consider review or reissuing of improvement targets</p>	<p>Final Review hearing: Individual is invited to attend Hearing in front of impartial panel. Including Line Manager/ Associate Director / HR. Review absence record, actions taken to date to support improvement and any supporting medical advice. Any alternatives' to dismissal will be discussed including redeployment</p>	<p>Decision in writing within 5 working days, copy kept on personal file</p> <p>Possible outcome Dismissal</p> <p>Right of appeal</p>

*Please note: The above triggers should be pro rata for Part time employees and calculated on contracted days worked

Appendix 2

Procedure for Reporting Sickness Absence and Return to Work

As an employee of Harrogate and Rural District CCG it is your contractual obligation to ensure that your manager is aware of any absence you have had due to sickness. Please make yourself aware of the Absence Management Policy , and the following guidelines, and if in doubt seek further advice from your manager or the Workforce Team.

Procedure for Reporting in sick:

You must contact and speak to your line manager or designated person on the first day of absence as soon as is reasonably practicable or within one hour of your normal starting time and you must make this call, unless it is clearly not possible for you to ring personally. It is not acceptable to text, e-mail or leave messages with anybody else. If your line manager is unavailable, then the employee should contact an alternative nominated manager.

Name	Job Title	Contact Numbers

When reporting absence please give the following information:

- the reason for the absence (if known);
- the expected length of absence (if known);
- whether a visit will be made to their GP, and if so, the date of the appointment.

Advise your manager of any outstanding work that may require urgent attention during the period of absence.

Procedure for Returning to Work

When returning from sick you will be required to complete a self certificate (appendix 4) form and attend a return to work meeting with your line manager to discuss your absence. This will also enable your line manager to discuss any assistance, help, counselling or action on work-related issues that may be provided to enable you to return to work.

Appendix 3

SELF CERTIFICATE OF SICKNESS FORM

This form must be completed for any sickness absence to account for up to 7 calendar days at the start of your sickness absence period. Absence lasting 8 calendar days or more require you to submit a Fitness to Work form from a medical professional to account for your sickness absence from the 8th calendar day onwards.

Surname _____	First Name _____
Payroll Number _____	_____

About Your Sickness	
Date you became unfit for work	_____
Date fit for work	_____
Reasons for absence	
Notification made to (name)	Date
_____	_____

Have you consulted a GP or visited a hospital?	Yes / No
Have you been prescribed medication?	Yes / No
Were you issued with Fitness to Work Certificate?	Yes / No

Was the absence a result of an accident at work or as a result of industrial disease?	Yes / No
If yes, please give details	
Have you reported the accident?	Yes / No
Please provide any additional information	
Was the absence as a result of an accident outside work?	Yes / No

I declare that the information given is correct. I understand that giving false information could result in the loss of sick pay benefits and/or disciplinary action and/or action by the Department of Work and Pensions	
Employees Signature	_____
Date	_____

**Appendix 4
RETURN TO WORK INTERVIEW FORM**

Employee Name:	Job Title:
Name of Return to Work Interviewers:	Job Title Return to Work Interviewers:
Absence Start Date:	Return to Work Date:
Reason for Absence:	Are you fully recovered? Yes / No Comments:
Total Number of Days Sick:	Number of days sick in last 12 months:
Has the Employee Hit any Sickness Absence Trigger Points? Yes / No	Will the Employee be referred to a Formal Monitoring Meeting? Yes / No
Are you fit to be back at work? Y/N Is this subject to any reasonable adjustments (inc. phased return)?	Were the correct reporting procedures followed? Y/N Self cert form received: Y/N Doctors note received: Y/N
Are there any problems relating to your illness/injury that may affect your ability to perform your job? Y/N	Have you suffered from a condition which is likely to re-occur? Y/N
Do you need further Occupational Health support? (where appropriate) Yes / No	Did you attend hospital /clinic or GP surgery? Y/N
Are you taking any medication? Y/N	Are there any follow up appointments required? Y/N
Is Occupational Health aware of your sickness/injury? Y/N	Is there any further support that can be provided now or in the future? Y/N
Additional Comments:	
Employee Signature:	Date:
RTW Interviewers Signature:	Date:

Please retain this form along with any medical certificates in the employee's personal file.

Appendix 5

Informal Attendance Improvement Plan (to be completed in addition to the return to work interview)

Objective: Please agree and enter the attendance objective which is normally described in terms of the level of attendance required over a period of time	Attendance Objective: •
Support: Any additional support e.g. Occupational Health, Training, etc. that was agreed	Please enter:
Other Action: Any other action that has been taken to resolve the situation	Please enter:
Next Meeting	Date:
Employee Comments (Optional)	Please enter:
Employee Signature and date (required)	Signature: Date:
Manager Comments (Optional)	Please enter:
Manager Signature and date (required)	Signature: Date:

Appendix 6 – letter templates

Ref: L1

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@[nhs.net](mailto:forename.surname@nhs.net)

Dear ...

Receipt of Fitness to Work Note

I am writing to acknowledge receipt of your Statement of Fitness to Work which I received on [date]. Can I ask that you continue to keep me updated with regards to your sickness and continue to forward on any Statement of Fitness to work forms as and when applicable.

I hope that you are beginning to feel better and if there is anything further you need from me in relation to your sickness please do not hesitate to contact me.

Kind regards

Name

Job Title

Ref: L2

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@[nhs.net](mailto:forename.surname@nhs.net)

Dear ...

I am writing to you in accordance with the Harrogate and Rural District Absence Management Policy.

As you have been absent from work due to sickness since [date] I would like to meet with you informally to discuss any help or assistance the [organisation] can offer you.

I would be grateful if you could call me on [number] to arrange an appropriate time and location

In the meantime if there is anything further you need from me in relation to your sickness please do not hesitate to contact me.

Kind regards

Name

Job Title

Ref: L3

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@[nhs.net](mailto:forename.surname@nhs.net)

Dear

Failure to Attend Occupational Health

I have been notified by Occupational Health that you failed to attend your appointment that had been arranged for you on [Date, Time] and had not contacted them to inform them that you wouldn't be attending.

Can I bring to your attention that as a Harrogate and Rural District CCG member of staff the current Absence Management Policy states that 'Employees must make themselves available to attend Occupational Health referrals as a contractual obligation' and I have enclosed a copy of this policy for your information.

I have therefore arranged for a further appointment for you at Occupational Health on [date, time and location].

Can you please inform Occupational Health if this date is not suitable so they can organise an alternative date.

Kind regards

Name

Job title

Address Line 1
Address Line 2
Address Line 3
Address Line 4
Postcode

Telephone: (01234) 567890
E-mail: forename.surname@nhs.net

Ref: L4

Date

Address
Dear

Invite to Formal Attendance Monitoring Meeting - Stage 1

I am writing to advise you / confirm that a meeting has been arranged under the Harrogate and Rural District Absence Management Policy to discuss your level of absence as you have hit the policy's trigger point. The dates which we have recorded over the last ** months for you being sick are as follows:

Start Date	End Date	Reason	Total Calendar Days

We have therefore arranged a Formal Attendance Monitoring Meeting at Stage 1 to discuss your absences and this will take place as follows:

Date
Time
Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I shall be chairing the meeting and will be supported by [name], [job title].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L5

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@nhs.net

Dear

Outcome of Informal Attendance Monitoring Meeting - Stage 1

I am writing to advise you of the outcome following the Informal Attendance Monitoring Meeting at Stage 1 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence. You confirmed that you had had the opportunity to bring a trade union representative or YHCS work colleague with you to the meeting and were happy to proceed without.

We discussed each absence period and the reasons for absence which you confirmed were correct. It was confirmed that you remained in contact with the relevant manager throughout the sickness periods and no further support was necessary in respect of absence.

You were formally issued with a verbal notification of unsatisfactory attendance as per the Harrogate and Rural District Absence Management Policy. This notification will be held on your file for 12 months from the date of this meeting [Date].

The target for improvement was discussed at the meeting and I advised you that during the next 12 months if you have a further 3 occasions or 10 days absence then you will be referred to Stage 2 of the Absence Management Policy.

I would like to arrange a review meeting in 3 months to review how you are doing against the plan and this meeting will be arranged in due course.

** We agreed that an Occupational Health referral will be made to support you and to identify any adjustments that can be made to help you to sustain your attendance at work. Can I bring to your attention that it is a contractual obligation that you attend Occupational Health.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within ** days of this letter.

In the meantime if you have any questions please let me know.

Kind regards

Name
Job title

Cc: Personal File

Workforce Representative

Ref: L6

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@nhs.net

Dear

Invite to Formal Attendance Monitoring Meeting - Stage 2

I am writing to advise you / confirm that a further meeting has been arranged under the Harrogate and Rural District Absence Management Policy to discuss your level of absence at Stage 2. This is following your Stage 1 meeting which was held on [date] where your levels of absence were discussed and monitoring periods agreed . Since [date] you have been absent on a further 3 occasions / 10 days which we have recorded as follows:

Start Date	End Date	Reason	Total Calendar Days

We have therefore arranged a Formal Attendance Monitoring Meeting at Stage 2 to discuss your absences and this will take place as follows:

Date

Time

Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I shall be chairing the meeting and will be supported by [name], [job title].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L7

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@nhs.net

Dear

Outcome of Formal Attendance Monitoring Meeting - Stage 2

I am writing to advise you of the outcome following the Formal Attendance Monitoring Meeting at Stage 2 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence.

As I explained at the meeting you have had a further 3 occasions **or** 10 days absence over the last ** months and due to this you were formally issued with a First Written Warning as per the Harrogate and Rural District Absence Management Policy. This warning will be held on your file for 12 months from the date of this meeting [Date].

The target for improvement was discussed at the meeting and I advised you that during the next 12 months if you have a further 3 occasions or 10 days absence then you will be referred to Stage 3 of the Absence Management Policy.

I would like to arrange a review meeting in 3 months to review how you are doing against the plan and this meeting will be arranged in due course.

I advised that I would be making a management referral to Occupational Health to support you and to identify any adjustments that can be made to help you to sustain your attendance at work. Can I bring to your attention that it is a contractual obligation that you attend Occupational Health.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within ** days of this letter.

In the meantime if you have any questions please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L8

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@nhs.net

Dear

Invite to Formal Attendance Monitoring Meeting - Stage 3

I am writing to advise you / confirm that a further meeting has been arranged under the Harrogate and Rural District Absence Management Policy to discuss your level of absence at Stage 3. This is following your Stage 2 meeting which was held on [date] where you were issued with a First Written Warning. Since [date] you have been absent on a further 3 occasions / 10 days which we have recorded as follows:

Start Date	End Date	Reason	Total Calendar Days

We have therefore arranged a Formal Attendance Monitoring Meeting at Stage 3 to discuss your absences and this will take place as follows:

Date

Time

Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I shall be chairing the meeting and will be supported by [name], [job title].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L9

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@[nhs.net](mailto:forename.surname@nhs.net)

Dear

Outcome of Formal Attendance Monitoring Meeting - Stage 3

I am writing to advise you of the outcome following the Formal Attendance Monitoring Meeting at Stage 3 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence.

As I explained at the meeting you have had a further 3 occasions **or** 10 days absence over the last ** months and due to this you were formally issued with a Final Written Warning as per the Harrogate and Rural District Absence Management Policy. This warning will be held on your file for 24 months from the date of this meeting [Date].

The target for improvement was discussed at the meeting and I advised you that during the next 24 months if you have a further 3 occasions or 10 days absence in total in any 12 month period then you will be referred to a Final Review Panel, Stage 4 of the Absence Management Policy.

We discussed what alternatives would be available to you in terms of *reduced hours*relocation*redeployment and also any adjustments that could be made to support you to sustain your attendance at work.

I would like to arrange a review meeting in 3 months to review how you are doing against the plan and this meeting will be arranged in due course.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within ** days of this letter.

In the meantime if you have any questions please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L10

Date

Address

Address Line 1
Address Line 2
Address Line 3
Address Line 4
Postcode

Telephone: (01234) 567890
E-mail: forename.surname@nhs.net

Dear

Invite to Final Review Hearing – Stage 4

I am writing to advise you / confirm that a hearing has been arranged under the Harrogate and Rural District Absence Management Policy at Stage 4. This is following your Stage 3 meeting which was held on [date] where you were issued with a Final Written Warning. Since [date] you have been absent on a further 3 occasions / 10 days which we have recorded as follows:

Start Date	End Date	Reason	Total Calendar Days

We have therefore arranged a Final Review Hearing at Stage 4 to discuss your absences and this will take place as follows:

Date

Time

Location

The panel will be chaired by [name, job title] supported by [name, job title]. Also in attendance will be {name, Job title} who will be supported by [name, job title].

The purpose of this hearing is to review your absence record and the actions that have been taken to date to support your improvement and also any supporting medical information. You will have an opportunity to present your case and submit any supporting evidence.

Please note that the hearing could ultimately result in dismissal although every effort will be made to look at alternatives including redeployment.

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

Ref: L11

Date

Address

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Postcode

Telephone: (01234) 567890

E-mail: forename.surname@[nhs.net](mailto:forename.surname@nhs.net)

Dear

Outcome of Final Review Hearing - Stage 4

I am writing to advise you of the outcome following the Final Review Hearing at Stage 4 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of this hearing was to review your absence record and the actions that have been taken to date to support your improvement and also any supporting medical information.

The outcome of the meeting was that it was that a redeployment option would be considered. Can you please liaise with [name, job title] with regards to the process and the options that are currently available to us.

OR

Due to your continuing absences and failure to achieve satisfactory improvement in your attendance you employment with [organisation] was terminated.

Your employment was terminated on [date] and you are entitled to ** days outstanding annual leave which will be paid in your final salary.

I can confirm that you are entitled to ** weeks pay in lieu of notice and I will ensure this is included within your final salary.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within ** days of this letter.

In the meantime if you have any further queries please do not hesitate to contact [name, job title]

OR

On behalf of Harrogate and Rural District may I express my regret that your employment has ended in these circumstances

Kind regards

Name

Job title

Cc: Personal File
Workforce Representative

A POLICY OF PROVIDING A GUIDE TO TRUST SERVICES IN ENGLISH ONLY

1. Equality Impact Analysis: Assessment Test

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Gender (Men and Women)	x			Considered – no impact
Race (All Racial Groups)			x	People who cannot read English will not be able to have access to this information
Disability (Mental and Physical)			x	People who are blind or partially sighted or have a learning difficulty may not be able to have access to this information
Religion or Belief	x			Considered – no impact
Sexual Orientation (Heterosexual, Homosexual and Bisexual)	x			Considered – no impact

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010*?

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining Reason</i> exists
Pregnancy and Maternity	x			Considered – no impact
Transgender	x			Considered – no impact
Marital Status	x			Considered – no impact
Age	x			Considered – no impact

2. Action Planning

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by *The Equality Act 2010*?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:
People who cannot read English will not be able to have access to this information	<p>Speak with people who already work with different racial groups to find out how they think the information could be made accessible to them.</p> <p>Proactively produce information in a specific language where there is a specific need.</p>			
People who are blind or partially sighted or have a learning difficulty may not be able to have access to this information	<p>Engage with local communities from different disabilities to find out how they in what way they would like to access this information.</p> <p>Speak with people who already work with different disabilities to find out how they think the information could be made accessible to them.</p> <p>Proactively produce information in a specific format as recommended by groups (look at font size, coloured paper)</p>			

3. Equality Impact Analysis

Policy / Project / Function:	Absence Management Policy
Date of Analysis:	05.07.16
This Equality Impact Analysis was completed by: (Name and Department)	HR Department
What are the aims and intended effects of this policy, project or function ?	The overall purpose of the policy is to set out Organisation's approach to the management of absence and attendance within the workplace. The policy will also set out guidance to staff and managers about their responsibilities in relation to Absence Management.
Please list any other policies that are related to or referred to as part of this analysis?	<ul style="list-style-type: none"> • Retirement Policy • Substance Misuse Policy • Redeployment Policy • Disciplinary Procedure
Who does the policy, project or function affect ? Please Tick ✓	<p>✓ Employees</p> <p>Service Users <input type="checkbox"/></p> <p>Members of the Public <input type="checkbox"/></p> <p>Other (List Below) <input type="checkbox"/></p>

4. Equality Impact Analysis: Screening					
	Could this policy have a positive impact on...		Could this policy have a negative impact on...		Is there any evidence which already exists from previous (e.g. from previous engagement) to evidence this impact
	Yes	No	Yes	No	
Race	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	
Age	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	
Sexual Orientation	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	
Disabled People	<input type="checkbox"/>	✓	✓		The policy is not clear how disability- related absence should be recorded however, this can be mitigated with the close involvement of HR and Occupational Health professionals who can consider advice accompanying the Equality Act 2010
Gender	<input type="checkbox"/>	✓	✓		Staff with Caring responsibilities (often women) may be recorded as sick and should be reminded that Special Leave Policies are available to deal with urgent domestic issues
Transgender People	<input type="checkbox"/>	✓	✓		The policy does not specify arrangements for absence connected to medical processes related to trans issues and that any employee diagnosed with Gender Dysphoria or Gender Identity Disorder this will be covered by the normal arrangements of this sickness absence policy.
Pregnancy and Maternity	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	
Marital Status	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	
Religion and Belief	<input type="checkbox"/>	✓	<input type="checkbox"/>	✓	

Reasoning

If there is no positive or negative impact on any of the Nine Protected Characteristics go to Section 7

5. Equality Impact Analysis: Local Profile Data

Local Profile/Demography of the Groups affected as at Jan 2015	
General	Total number of employees in the CCG is 54
Age	77.78% are aged 30-55 18.52% of staff are over 55 3.7% of staff are under 30
Race	88.89% staff employed in the CCG are White 7.41% of staff have are not stated/undefined their ethnicity 1.85% staff are Black 1.85%staff are Asian
Sex	68.52% staff employed are male 31.48% staff employed are female
Gender reassignment	No information at this stage
Disability	79.63% of staff employed declared themselves as having no disability 18.52% did not declare /undefined 1.85% have declared a disability
Sexual Orientation	72.22% of staff described themselves as heterosexual 27.78% did not wish to respond /undefined
Religion, faith and belief	Christianity is the largest religious group declared by staff in the CCG (42.59%) 37.04% were undefined or did not wish to declare 18.52% declared themselves Atheist 1.85% declared themselves Buddhists
Marriage and civil partnership	77.78% of employees are married. No employees are in a civil partnership. 1.85% of staff were undefined The remainder (20.37%) are single/divorced/legally separated or widowed
Pregnancy and maternity	No information yet as the CCG has not been established long enough to build meaningful data

6. Equality Impact Analysis: Equality Data Available

<p>Is any Equality Data available relating to the use or implementation of this policy, project or function?</p> <p>Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'.</p> <p>Examples of <i>Equality Data</i> include: (this list is not definitive)</p> <ol style="list-style-type: none"> 1. Application success rates <i>Equality Groups</i> 2. Complaints by <i>Equality Groups</i> 3. Service usage and withdrawal of services by <i>Equality Groups</i> 4. Grievances or decisions upheld and dismissed by <i>Equality Groups</i> 	<p>Yes <input checked="" type="checkbox"/> employee data</p> <p>No <input type="checkbox"/></p> <p>Where you have answered yes, please incorporate this data when performing the <i>Equality Impact Assessment Test</i> (the next section of this document).</p>
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5. <i>Previous EIAs</i>	
List any Consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function	
Promoting Inclusivity How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation	

7. Equality Impact Analysis: Assessment Test

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i> ?				
Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Gender (Men and Women)			✓	Staff with Caring responsibilities (often women) may be recorded as sick and should be reminded that Special Leave Policies are available to deal with urgent domestic issues. Mitigated by internal communication
Race (All Racial Groups)	✓			
Disability (Mental and Physical)	✓		✓	The policy will have negative and positive impacts on disability. Whilst disability related absences should be recorded, impacts this can be mitigated with the close involvement of Workforce and Occupational Health professionals who can consider advice accompanying the Equality Act 2010. Disabilities may increase absence levels of staff but proper application of this policy will ensure they are fully supported and all reasonable adjustments made.
Religion or Belief	✓			
Sexual Orientation (Heterosexual, Homosexual and Bisexual)	✓			
What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i> ?				
Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists

Pregnancy and Maternity	✓			
Transgender		✓		The policy does not specify arrangements for absence connected to medical processes related to trans issues and that any employee diagnosed with Gender Dysphoria or Gender Identity Disorder will be covered by the provisions of this policy and by disability discrimination provisions to take reasonable time off work for medical treatment and of the Equality Act 2010. However HR and Occupational Health advice should be sought.
Marital Status	✓			
Age	✓			

8. Action Planning

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:
The policy is not clear how disability- related absence should be recorded.	Any disability related absence will be managed with the close involvement of HR and Occupational Health professionals who can consider advice accompanying the Equality Act 2010.	HR Manager	Ongoing	Ongoing
The policy does not specify arrangements for absence connected to medical processes related to trans issues and that any employee diagnosed with Gender Dysphoria or Gender Identity Disorder will be covered by the provisions of this policy and by disability discrimination provisions to take reasonable time off work for medical treatment and of the Equality Act 2010.	The HR function should be included in the management of all cases where disability related absence is an issue to ensure that decisions are made in accordance with the Equality Act provisions	HR Lead	Ongoing	One year from implementation of the policy
Monitoring this policy and particularly its effects on staff with disabilities is essential	Monitor on an ongoing and annual basis	HR Lead	Ongoing	One year from implementation of the policy
Staff with Caring responsibilities (often women) may be recorded as sick	Staff should be reminded that Special Leave Policies are available to deal with urgent domestic issues – in communication networks	HR Lead	Ongoing	One year from implementation of the policy

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9. Equality Impact Analysis Findings

Analysis Rating:	<input type="checkbox"/> Red	<input type="checkbox"/> Red/Amber	<input type="checkbox"/> Amber x	<input type="checkbox"/> Green
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		Actions	Wording for Policy / Project / Function
<p>Red</p> <p>Stop and remove the policy</p>	<p>Red: As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. It is recommended that the use of the policy be suspended until further work or analysis is performed.</p>	<p>Remove the policy</p> <p>Complete the action plan above to identify the areas of discrimination and the work or actions which needs to be carried out to minimise the risk of discrimination.</p>	<p>No wording needed as policy is being removed</p>
<p>Red Amber</p> <p>Continue the policy</p>	<p>As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. However, a genuine determining reason may exist that could legitimise or justify the use of this policy and further professional advice should be taken.</p>	<p>The policy can be published with the EIA</p> <p>List the justification of the discrimination and source the evidence (i.e. clinical need as advised by NICE).</p> <p>Consider if there are any potential actions which would reduce the risk of discrimination.</p> <p>Another EIA must be completed if the policy is changed, reviewed or if</p>	<p>As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. However, a genuine determining reason exists which justifies the use of this policy and further professional advice.</p> <p><i>[Insert what the discrimination is and the justification of the discrimination plus any actions which could help what reduce the risk]</i></p>

		further discrimination is identified at a later date.	
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Equality Impact Findings (continued):

		Actions	Wording for Policy / Project / Function
<p>Amber</p> <p>Adjust the Policy</p>	<p>As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.</p>	<p>The policy can be published with the EIA</p> <p>The policy can still be published but the Action Plan must be monitored to ensure that work is being carried out to remove or reduce the discrimination.</p> <p>Any changes identified and made to the service/policy/ strategy etc. should be included in the policy.</p> <p>Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.</p>	<p>As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.</p> <p><i>[Insert what the discrimination is and what work will be carried out to reduce/eliminate the risk]</i></p>
<p>Green</p> <p>No major change</p>	<p>As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.</p>	<p>The policy can be published with the EIA</p> <p>Another EIA must be completed if the policy is changed, reviewed or if any discrimination is identified at a later date</p>	<p>As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.</p>

Brief Summary/Further comments	
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Approved By		
Job Title:	Name:	Date:

Sustainability Impact Assessment

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	Absence Management Policy
What is the main purpose of the document	To provide information on the CCG's approach to Managing employee absence in the workplace.
Date completed	05.06016
Completed by	HR Team

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport? Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)? Will it reduce 'care miles' (telecare, care closer) to home? Will it promote active travel (cycling, walking)? Will it improve access to opportunities and facilities for all groups?	0		
Procurement	Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery? Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives? Will it promote ethical purchasing of goods or	0		

	<p>services? Will it promote greater efficiency of resource use? Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)? Will it support local or regional supply chains? Will it promote access to local services (care closer to home)? Will it make current activities more efficient or alter service delivery models</p>			
Facilities Management	<p>Will it reduce the amount of waste produced or increase the amount of waste recycled? Will it reduce water consumption?</p>	0		
Workforce	<p>Will it provide employment opportunities for local people? Will it promote or support equal employment opportunities? Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)? Will it offer employment opportunities to disadvantaged groups?</p>	0		
Community Engagement	<p>Will it promote health and sustainable development? Have you sought the views of our communities in relation to the impact on sustainable development for this activity?</p>	0		
Buildings	<p>Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)? Will it increase safety and security in new buildings and developments? Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)? Will it provide sympathetic and appropriate landscaping around new development?</p>	0		

	Will it improve access to the built environment?			
Adaptation to Climate Change	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?	0		
Models of Care	Will it minimising 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes? Will it promote prevention and self-management? Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available? Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?	0		

