

**Sickness Absence Policy and Procedure
For Employees at
Bromsgrove District Council**

January 2007

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Sickness Absence Policy and Procedure

Sickness Absence Policy

1.0 Introduction

- 1.1 Bromsgrove District Council (the Council) is committed to managing effectively and efficiently all its services. The Council believes that quality customer service can only be achieved through committed employees, who form its most valuable resource. High attendance levels are therefore vital in enabling the Council to meet its objectives.
- 1.2 High sickness absence levels are costly to the Council not only in direct terms in the form of sick pay but also in indirect costs caused by loss of productivity, paying for additional staff cover and loss of management time. If left unchecked, high absence levels can also have a detrimental effect on the morale of existing employees. The Council operates with minimum staffing levels so the impact of sickness absence is potentially very great. The Council therefore recognises its duty of care to *both* employees off sick *and* those remaining at work.
- 1.3 All cases of sickness absence will be handled compassionately, and action taken to support the individual both whilst absent and on their return to work. Whilst recognising that employees may be prevented from attending work through ill health, the Council has a duty to maintain service delivery and minimise disruption. The Council is therefore committed to managing attendance and sickness absence and believes that it is the responsibility of the Council's managers, trade union representatives and employees to work together to promote the management of sickness absence and ill health.
- 1.4 The policy takes into account the legal requirements of the Disability Discrimination Act 1995 (as amended) the detail of which requires the Council to make reasonable adjustments to enable employees with disabilities to stay in work. Further information regarding what constitutes a disability can be found at Appendix A. The policy also takes into account the requirements of the Data Protection Act 1998 and the Access to Medical Reports Act 1988. Whilst every effort has been made to ensure that this policy and procedure accurately reflects the current legal position, ongoing changes in case law will determine how individual cases should be handled. If there are any queries regarding interpretation of any legal or procedural issue, please contact Human Resources in the first instance.

2.0 Scope

- 2.1 This policy and procedure applies to all employees of Bromsgrove District Council up to and including the Chief Executive.

3.0 Guiding Principles

3.1 The Council will achieve high levels of attendance through:

- Promoting the health, safety and well being of all employees, including use of risk assessments to identify and manage hazards impacting on health in the workplace.
- Monitoring levels of sickness absence for individuals, teams and the Council as a whole.
- Implementing procedures to support and manage staff absences, whilst dealing with unjustified and/or high levels of sickness absence.

3.2 The following principles apply to the Council's procedures for dealing with attendance:

- Good attendance is valued and all opportunities should be taken by managers to acknowledge and recognise such attendance.
- Matters raised relating to an employee's attendance do not imply any distrust of staff or concerns regarding their conduct.
- Sickness absence will be dealt with in a way that is nondiscriminatory and in accordance with the Council's Equalities Policy.
- Employees will be dealt with consistently and the sickness absence procedures will be fairly applied across the Council.
- The Council will aim to promote a positive and preventative approach rather than a punitive approach.
- Managers need to be aware of any concerns relating to an employee's welfare. Early intervention will be key to enabling this approach.
- The Council will be sensitive and supportive to those suffering the effects of ill health.
- Sickness absence cases will be conducted with respect for confidentiality and in accordance with the requirements of the Data Protection Act 1998 and Access to Medical Reports Act 1988.
- Open communication between managers and employees will be encouraged and promoted.
- The Council will aim to distinguish between absence due to genuine sickness and any abuse of the sickness absence scheme.
- The sickness absence policy and procedure will be jointly monitored and reviewed by the Council and the recognised staff trade unions to ensure that it continues to meet the Council's aims and Bromsgrove District Council complies with the principles it outlines.

Employees and trade union representatives are encouraged to be involved in this process.

- 3.3 Line managers/supervisors will monitor and investigate cases of high levels of sickness absence, frequent and persistent short term absence and other patterns of sickness absence as appropriate as defined at section 9.0 'Reviewing Absence Records and Trigger Points' on page 17 of this policy. Disciplinary action may be taken to address any abuse of the sickness absence policy.

Sickness Absence Procedure

4.0 Sickness Notification and Certification Procedures

4.1 Line managers/supervisors need to be aware of any concerns relating to an employee's welfare at the earliest opportunity, and in order for service delivery to be maintained, it is essential for managers to know when a member of staff is unable to attend work. In addition, every absence has to be certified to ensure prompt and correct payment of occupational and statutory sick pay and to ensure that accurate records are maintained. Where an employee is absent from work because of illness, the procedure below must be followed:-

4.2 **First Day of Absence**

Employees reporting sick must do so personally by telephone and not through a third person subject to genuine and exceptional practical constraints (e.g. if the employee is hospitalised, or unable to access a telephone.) Further advice regarding what constitutes 'exceptional' circumstances can be sought from Human Resources. Unless specific local arrangements apply, employees must notify their line manager/supervisor of sickness within one hour of their normal start time. If the immediate line manager/supervisor is not available, the absence should be reported to an equivalent or senior line manager within the Division. E-mails and text messages are not appropriate and messages must not be left with colleagues. Where contact with their line manager/supervisor or equivalent manager is not possible, employees should contact their Departmental Sickness Absence Administrator to report their sickness. If all other attempts to report absence have been exhausted, employees should leave a voicemail message on their line manager's answerphone stating their name, time, date and specific information as detailed in 4.2.1.

4.2.1 When reporting sick, employees must state the reason for their absence, their anticipated length of absence and where possible, work commitments (if any) that may need rearranging. Where the employee feels unable to disclose the reason for their absence to their immediate line manager/supervisor due to this being of a sensitive nature, the employee should contact Human Resources directly.

4.2.2 The first seven calendar days' absence (which includes working and nonworking days) will be covered by the Self-Certification Form at Appendix B which the employee will complete upon return to work in conjunction with the line manager/supervisor.

4.2.3 If contact is not made by the employee as required during a period of sickness absence and any absence is unexplained, the manager will take reasonable steps to contact the employee, i.e., by telephone or by making a home visit.

4.2.4 Where an employee starts work and then leaves early on account of sickness, there will be a requirement for the line manager/supervisor to record the absence and notify the departmental sickness absence administrator. For example, if the employee works less than 50% of the contracted hours for that day, then half a day's sickness absence will be recorded. If, however, the employee works more

than 50% of their contracted hours, no sickness absence will be recorded for that day.

4.3 Second and Third Day of Absence

No action is required unless the employee has given an indication of an expected return on the second or third day. If the employee is unable to return as indicated, they should again contact their manager to keep them informed of progress.

4.4 Fourth Day of Absence

Unless an alternative contact timescale has been agreed with the line manager, the employee wherever practicable should make further contact with their manager to provide an update on their absence. If possible, depending on the nature of the absence, they should indicate an expected date of return. Non-working days, such as rostered days off, weekends and bank holidays *are* included in calculating the 4th day of absence. Should the 4th day fall upon an individual's non-working day when the Council offices are closed, contact should be made on the next available working day.

4.5 Fifth, Sixth and Seventh Day of Absence

No action is required unless the employee has given an indication of an expected return on the 5th, 6th or 7th day. If the employee is unable to return as indicated, they should again contact their manager to keep them informed of progress as in section 4.2.

4.6 Eighth Day of Absence

The employee must consult a doctor and obtain a medical certificate for all absences from the eighth day onwards until they return to work. The employee will contact their line manager/supervisor to inform of the reason and period for refraining from work as indicated on the medical certificate. The certificate should then be sent to the line manager/supervisor as soon as possible.

4.7 Continuing Sickness Absence

Where there is continuing sickness absence, the employee must submit consecutive medical certificates as soon as possible for each consecutive period of sickness to their manager to ensure that the whole period of absence is covered. The line manager/supervisor must also ensure that appropriate and timely certificates are received from the employee and that the departmental sickness absence administrator is notified.

4.8 On receipt of the certificate, the employee must notify the line manager/supervisor of the date given by the doctor for a return to work. If an employee is required to return to their GP at the expiry of their medical certificate, a medical certificate or statement of fitness to resume work must be obtained before the employee returns to work. Upon their return to work, the medical certificate or statement of fitness to resume work must be submitted to the line manager/supervisor at the Return to Work Discussion. For further information regarding Return to Work Discussion, please refer to Appendix C.

4.9 For further information and advice on maintaining contact, please refer to section 6.0 on page 11.

4.10 Return to work prior to expiry of Medical Certificate

In some circumstances, an employee may feel well enough to return to work prior to the expiry of the medical certificate. In such circumstances, the employee must obtain a medical certificate from their doctor before they start work stating that they are fit for work and proceed as indicated in section **4.8** above.

4.11 Sickness during a period of Annual Leave

If an employee becomes ill whilst on annual leave, the absence can only be recorded as sickness absence after a medical certificate has been provided. The date of commencement of sick leave will be the date provided by the doctor on the medical certificate.

4.12 Absence related to work place injury

If the employee believes their absence may have been caused by something that happened at work they should inform the line manager/supervisor of this and the line manager should arrange for an Incident Report Form to be completed, where possible, the same day. The line manager/supervisor should ensure that the 'Report of an injury or dangerous occurrence' form is issued to the Health and Safety Adviser as soon as possible and payroll notified accordingly. For further information regarding sick pay for periods of absence related to work place injury, please refer to section 5.3 on page 9.

4.13 Removal of right to self-certification

In exceptional circumstances and following discussion with the employee regarding their sickness absence levels, if the manager remains concerned at the frequency of an employee's absence, or their account for their reasons of absence, the employee may be required to submit doctor's medical certificates, rather than self-certificates, from their first day of absence. In such cases, the Council will meet the cost of any fee charged. This arrangement will be confirmed in writing to the employee.

4.14 Unauthorised Absence

If an employee is absent from work without authorisation and provides no reasonable explanation, written notice may be given to stop pay for the period of absence. Unauthorised absence may be treated as misconduct, which could result in disciplinary action. In particular, the following situations may be identified as unauthorised absences which require investigation:-

- An employee's request for leave of absence was refused, but the employee has reported in sick. In this circumstance, a GP's certificate should be requested.
- The employee has not followed the notification procedure for sickness absence (see Para 4.2-4.8) for example the employee fails to submit a medical certificate to cover absence beyond the self-certification period.

5.0 Sick Pay Eligibility

5.1 Bromsgrove District Council operates an occupational sickness payment scheme which supplements the Statutory Sick Pay (SSP) scheme. Sickness payments are based on local government service and are as follows:-

Length of Service	Pay Eligibility	
	Full Pay	Half Pay
During 1 st year of service		
0 – 4 months	1 month	
5 – 12 months	1 month	2 months
During 2 nd year of service	2 months	2 months
During 3 rd year of service	4 months	4 months
During 4 th and 5 th year of service	5 months	5 months
After 5 years service	6 months	6 months

5.2 Payment for sickness absence is not an automatic entitlement and in all cases of sickness absence, payment is conditional upon:

- the sickness being genuine;
- the individual notifying their line manager/supervisor of their sickness in accordance with section 4.0 above;
- a Self-Certification form being completed by the employee and/or their line manager/supervisor and, where applicable, receipt of a GP's medical certificate . The Self-Certification form must be authorised by the line manager/supervisor and a copy sent to Human Resources stating the reason for absence and the number of days taken off in total. All GP's certificates must be checked by the line manager/supervisor and sent to Payroll.

5.3 Where an employee has a period of absence due to industrial disease, accident or assault, or where an employee is prevented from attending work owing to contact with infectious diseases arising from the course of their normal duties, they will continue to receive normal pay and their eligibility for sickness benefits as applied in the table in 5.1 above will not be affected.

5.4 If an abuse of the sickness absence scheme is suspected at any point, the matter will be fully investigated and may fall to be dealt with under the Council's agreed Disciplinary procedure. An outcome of such a proceeding might be that disciplinary action is taken and sick pay withheld or recovered.

5.5 Where an employee has several periods of sickness absence, the sick pay entitlement is calculated by deducting the total periods of paid absence in the 12 months immediately preceding the first day of absence from the employee's overall entitlement (as highlighted in section 5.1 above).

5.6 Payment will be made in the normal weekly or monthly salary and will be subject to tax, National Insurance and other authorised deductions in the usual way.

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Adjustments to salary will normally be made one month or one week in arrears depending on the normal frequency of salary payment.

- 5.7 The maximum sickness payment receivable is normal full contracted salary. This will include any entitlement to SSP with the Council element adjusted accordingly.
- 5.8 For further information on SSP rules, visit the website of the Department for Work and Pensions <http://www.dwp.gov.uk/>. Alternatively, please contact the local Job Centre Plus on Bromsgrove 01527 483600.

6.0 Maintaining Contact

- 6.1 Where an employee is absent from work due to sickness, the line manager/supervisor should ensure that the employee does not feel isolated, vulnerable or out of touch. It is vital therefore that contact is maintained between the manager and employee. The line manager/supervisor also needs to ensure that work is reallocated and service delivery is maintained.
- 6.2 **Home Visits**
During the early stages of sickness absence, contact will normally be by the line manager/supervisor by telephone. However, home visits are usually preferable to telephone conversations in relation to long-term sickness absence, particularly for employees finding it difficult to leave the house, not only as a welfare check and to offer any assistance but also as a means of keeping employees informed of news within the Council. Preferably, home visits should be conducted by officers known to the employee.
- 6.3 The employee should be advised that they may be accompanied by a friend, relative or a Trade Union representative during a home visit. Home visits will only be undertaken with the consent of the employee other than in exceptional circumstances, e.g., where reasonable attempts to contact the employee have failed or where there are concerns for the safety of an employee who lives alone. A draft standard letter for arranging a home visit can be found at Appendix D. In exceptional circumstances where no prior consent has been given for a home visit, line managers/supervisors should not make unaccompanied visits to the homes of employees. Before making a home visit, line managers/supervisors should seek advice from Human Resources. Home visits are not to be used as a tool to aid discipline, but to act as a positive support to the employee.
- 6.4 **Follow up meetings and regularity of contact**
Other appropriate meeting venues may be agreed and, at certain stages of recovery, site-based meetings can assist employees in preparing for a return to work. The manager should seek agreement with the employee as to the means and the timing of contact, but it must be regular, e.g., weekly or fortnightly, or as appropriate to the individual case. For further information on phased return to work programmes, please refer to Appendix E.
- 6.5 If the employee wishes for a point of contact other than their line manager/supervisor, then an alternative manager, or a Human Resources Advisor, will be nominated. If an employee expresses a wish not to be contacted, or if attempts to make contact fail, the manager or Human Resources Advisor should write to him/her setting out the actions they intend to take and any options available to the employee. This will take account of all the 'known' circumstances relating to the case. Where possible, the trade union representative should normally be informed in advance of the letter being sent.

7.0 Recording, monitoring and communicating sickness absence

7.1 Accurate, accessible and well-presented information is essential to the effective management and control of absence. The Council is required to report on sickness absence levels as a Best Value Performance Indicator. Information and accurate data are also vital to enable line manager/supervisors to manage absence and to consider relevant options within their service areas.

7.2 Recording absences

Employees are responsible for notifying their line manager/supervisor of sickness absence (please refer to section 4.0 for notification procedure). On return to work a Self-Certification Form is completed and checked by the line manager/supervisor to ensure accuracy. The line manager/supervisor must ensure that these forms and any medical certificates are sent to Human Resources so that the information can be entered into the Sickness Absence Monitoring/Payroll system. This ensures sickness absence details are recorded for monitoring purposes and allows payments for sickness to be made. Line managers/supervisors must also ensure that departmental sickness absence administrators are notified of any absence.

7.3 Line managers/supervisors must ensure that information relating to an employee's health is confidential and should only be disclosed to those who have a direct and essential involvement in dealing with the case, i.e., the designated Human Resources Advisor and other senior managers within the division.

7.4 Monitoring absences

Each manager is required to monitor sickness absence levels within their team and take further action as necessary when trigger points are reached and/or where there are concerns about an employee's absence levels.

7.4.1 Sickness absence reports are regularly provided by Human Resources on a divisional and corporate basis. Consistency in how data is recorded is essential for effective monitoring and for the Council to be able to analyse patterns, problem areas and to monitor the effects of measures and procedures designed to reduce absence levels. Please refer to section 27.0 which highlights line managers' responsibilities.

7.5 Part-time employees

The Self-Certification Form requires employees to indicate both working and non-working days lost due to sickness absence, i.e., all calendar days. Both are vital for the overall management of sickness absence, not only for sick pay (based on calendar days) and timely referrals to occupational health but accurate monitoring of absence trends.

7.5.1 When reviewing employees' sickness absence levels, in the interest of treating full-time and part-time employees consistently, the line manager/supervisor should take account of the full period of sickness in calendar days rather than working days lost. Certain levels of sickness absence may give cause for concern as defined at paragraph 9.2 and warrant management action. For example, where an employee has a health problem which results in them being unfit for work for 14 calendar days (whether they work full-time or part-time) is cause for concern, regardless of the number of working days' absence.

7.6 Disability-related absences

All sickness absences of employees who are classified as disabled under the Disability Discrimination Act 1995 (as amended) will be recorded as with absences of non-disabled employees. However, it is important that the line manager/supervisor establishes which absences are related to the employee's disability. This may be through consultation with the employee or may necessitate seeking medical advice through occupational health.

- 7.6.1 Absences related to a disability will be accommodated as far as is reasonable within the terms of the Disability Discrimination Act 1995 (as amended) and will be disregarded in terms of trigger points reached unless reasonable adjustments have already been made. If a disabled employee is absent from work due to sickness which is unrelated to their disability, this sickness will not fall under the protection of the Disability Discrimination Act and should be dealt with under the normal sickness absence management procedure. In practice, it may be difficult to tell when an absence is disability related so it is vital that the employee is consulted and medical referral is sought at an early stage so that the line manager/supervisor can make an informed decision in consultation with Human Resources on how to manage absence.

7.7 Absences for reasons of pregnancy

Absences related to a person's pregnancy must also be recorded as with absences for other employees. However, in the consideration of trigger points, absences owing to pregnancy should normally be disregarded. For further advice, please refer to Human Resources.

7.8 Absences for reasons of workplace injury

If an employee has a period of absence due to industrial disease, accident or assault arising out of, or in the course of employment with the Council, this will be recorded separately from normal sickness records for the purposes of the Sickness Payment Scheme. Periods of absence on this account shall not be counted against the employee's entitlement to occupational sick pay. For further information on sick pay eligibility, please refer to section 5.3.

7.9 Contact with infectious diseases

An employee who is prevented from attending their place of employment because of contact with an infectious disease shall notify their line manager/supervisor immediately and shall be entitled to receive normal pay. For further information the line manager/supervisor should contact Alan Tweddell, the consultant responsible for Communicable Disease Control, Hereford & Worcestershire Local Health Protection Unit on 01905 760024 or email: alan.tweddell@sworcs-pct.nhs.uk. A period of absence on this account shall not be counted against the employee's entitlement to occupational sick pay. For further information on sick pay eligibility, please refer to section 5.3. Employees absent due to contact with infectious diseases should not return to work until cleared by the relevant authority.

7.10 Medical Appointments

Routine appointments, *initiated by the employee*, to the optician, dentist or

GP should be made outside of normal working time. Where this is not possible, appointments should be made at the beginning or end of the working day, or near to a lunch period to minimise disruption and the period of time away from the workplace. Employees will be required to make up the time lost. Where employees enjoy the benefits of the Flexi Time Scheme, appointments should be made outside of core hours. Appointments, that are not possible except in core time for unavoidable reasons, will normally be debited against the time record and thus be treated as debit hours.

- 7.10.1 Medical appointments with consultants *following a referral by the GP, hospital, dentist or opticians* to deal with health problems for diagnosis and/or treatment and/or prevention (e.g., screening) of physical or psychological health problems, should also be made *where possible* outside of normal working hours/core time (if subject to the flexi scheme). However, in exceptional circumstances where this is not practical, subject to the approving line manager/supervisor giving prior authorisation, reasonable leave with pay to attend such appointments will be granted. The employee should give their manager reasonable notice of the appointment and if requested provide evidence of each appointment.
- 7.10.2 Leave with pay for medical appointments of a day or less will not be treated as sickness absence for the purpose of sick pay entitlements but will be recorded as special leave on the employee's absence record. Medical appointments which require absence from work for more than one day will be treated as sickness absence and should be recorded on a Self-Certification Form. Leave with pay will be granted in line with the sickness payment scheme.
- 7.11 Where an employee starts work and then leaves early on account of sickness, there will be a requirement for the line manager/supervisor to record the absence. For example, if the employee works less than 50% of the contracted hours for that day, then half a day's sickness absence will be recorded. If, however, the employee works more than 50% of their contracted hours, no sickness absence will be recorded for that day.
- 7.12 **Communicating Sickness Absence**
This procedure provides guidance on dealing with sickness absence by monitoring and communicating sickness absence levels. It is essential to consult with the employee throughout the process, provide opportunities to discuss his or her position, and to seek appropriate medical advice. All employees should be aware that all absences are monitored and the importance of good attendance should be emphasised at all stages of employment. In particular by:-
- Emphasising good attendance at the recruitment and selection stage
 - Using pre-employment medicals to ensure the employee is fit to start the job
 - Induction programmes should be used to communicate the sickness policy and procedures
 - Sickness and attendance records should be regularly monitored during the probationary period and beyond
 - After every incident of sickness absence employees are required to complete a Self-Certification Form and the line manager/supervisor is required to discuss the absence with the employee upon their return to work (please refer to section 8.0 for further information)

- During periods of sickness absence, contact between employee and manager should be maintained regularly by phone or through arranged home visits.

7.13 In this way the Council will develop a working environment where attendance does matter and sickness absence is noticed. All parties should work to achieve high attendance levels and make absence controls effective.

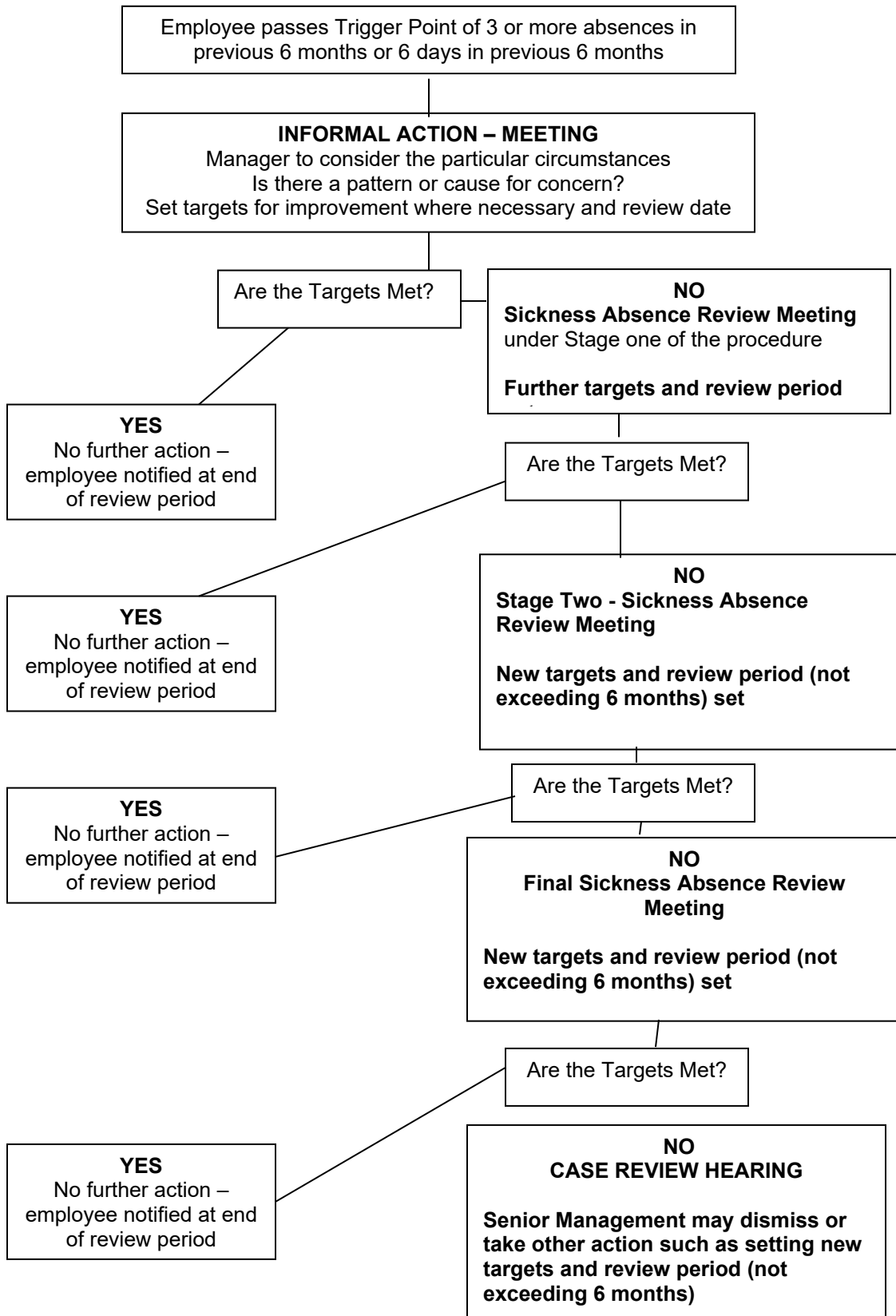
8.0 Return to work Discussions

- 8.1 Following every period of absence, a return to work discussion will be carried out by the line manager/supervisor on a one to one basis regardless of the nature and length of absence.
- 8.2 The interview should take place on the day the employee returns to work. However, it is acknowledged that for some categories of employee this may not be possible, e.g., certain shift workers. In such cases, the interview should be conducted at the earliest opportunity.
- 8.3 The key components of a return to work discussion will be to:
- welcome the employee back to work
 - confirm the reason for absence
 - make sure that the employee is fit to return to work
 - check whether there are any Health & Safety implications, i.e., contact with infectious diseases which might impact on ability to work
 - check any underlying problems which may be contributing to the employee's absence
 - consider any reasonable support required to assist the employee
 - update the employee on key developments during their absence
 - complete the Self-Certification Form
 - ensure that all periods of sickness absence are covered by the appropriate medical certificates
- 8.4 The salient points of the interview will be recorded on the Return to Work Discussion form at Appendix F, a copy of which will be retained by the employee. The return to work discussion and record will become a component of the employee's health record and will be retained on his/her personnel file.
- 8.5 For further guidance on Return to Work Discussions please refer to the Management Guidance Note: Return to Work Discussion at Appendix C.
- 8.6 Where a line manager/supervisor is concerned about an employee's sickness absence levels, or, where a trigger point has been reached (refer to Section 9.0), a separate Informal Meeting may be held in addition to a Return to Work Discussion. Further details on Informal Action Meetings can be found in Section 10.0.

9.0 Reviewing absence records and trigger points

- 9.1 Line managers/supervisors should review every employee's attendance record on a monthly basis. There are certain trigger points identified which highlight to managers those employees whose attendance records require further consideration.
- 9.2 As a guide, line managers/supervisors are asked to consider the following triggers and potential follow up actions in the circumstances outlined below:
- 9.2.1 **Persistent short-term absence (includes both self-certificated and GP certificated absence):** where an employee has **three or more periods of absence in any 6 month rolling period**, or if the total absence (whether reckoned in a single absence or by adding together a number of separate absences) extends to **6 working days or more in any 6 month rolling period**, an informal meeting should take place. For further information on informal action meetings, please refer to section 10.0 of this procedure or alternatively, contact your designated HR Advisor. This meeting is separate to a Return to Work Discussion.
- 9.2.2 In addition, certain **patterns of absence**, e.g., absences immediately before or immediately after annual leave, the weekend or a bank holiday may also trigger the need for informal action meetings.
- 9.2.3 **Long-term absence:** long-term absence will normally be classed as any **continuous absence exceeding 4 weeks**. For further information on follow up action, please refer to section 13.0.
- 9.3 Trigger points are intended as guidance only and are neither exclusive nor exhaustive and any record giving rise to concern should be reviewed. Each case will be considered on its own merits by the line manager in consultation with Human Resources. (See Section 10.0 for further guidance on informal action)
- 9.4 Trigger points provide consistency of approach and ensure that managers are aware of, and can deal with, employee absences. This will not detract, however, from individual circumstances and should not result in the automatic application of sanctions or inappropriate action being taken. (See Section 10.0 for further guidance on informal action)
- 9.5 It is important that the circumstances of each case are taken into account, as there may be cases where action should be taken before a trigger point is reached, or no action is taken despite a trigger point being reached.
- 9.6 It is important for line managers/supervisors to be aware that proactive and early intervention is key to successfully assisting employees to return to work and preventing longer-term absences from occurring. Under the Disability Discrimination Act 1995 (as amended), the responsibility clearly rests with the employer to determine whether reasonable adjustments should be made. It is vital therefore that line managers/supervisors are proactive in dealing with sickness absences promptly. For further advice on reasonable adjustments, please refer to **Appendix A**.

SHORT TERM SICKNESS ABSENCE – FLOWCHART



NOTES On Flowchart :

- This is a simplified representation of the Process, for full details refer to the full Policy Document
- Line Managers must ensure that the departmental sickness absence administrator is informed of the employee's absence on the first day of sickness
- A Return to Work Discussion must take place following every period of absence.
- In coming to a decision the Manager must consider all the information supplied and options available.
- There is a right of Appeal at all formal stages – to the Chief Executive for Dismissal or to the Head of Service for action less than dismissal.
- Employees have the right to representation at all formal stages
- Records of all decisions made must be kept at each stage

Managing Short-term Absences

10.0 Informal Action

- 10.1 Where a trigger point as highlighted in paragraph 9.2.1 and 9.2.2 has been reached, or where an employee's record of attendance is giving cause for concern as indicated in 9.3, informal action should be taken and a meeting held. This is an informal part of the sickness management process and, like the Return to Work Discussion, it is not normally necessary for the employee to be represented at this meeting. The main purpose of the meeting is to help improve the employee's attendance by reiterating the Council's policy on sickness attendance and to remind the employee of their individual absence record. No formal letter is required inviting the employee to the meeting but the employee should be aware as to what the meeting is in connection with and given a minimum of 24 hours' notice. Separate follow up action is required for employees absent from work on a long-term basis, normally classed as continuous absence exceeding four weeks. For further information, please refer to Section 13.0
- 10.2 Similar to the Return to Work Discussion, the meeting should be positive, sympathetic and constructive in nature and should seek to explore any possible underlying medical or work-related reasons for the level of sickness absence, including any relation to a disability and any assistance that may be required. For example, risk assessments may need to be updated or reviewed. Any patterns of absence, which might be evident, will be discussed together with the effect of sickness absence on the workplace and colleagues. The meeting is not designed to challenge whether the sickness absence is genuine or not but to focus on the level of sickness absence.
- 10.3 The meeting should conclude with an explanation as to the future procedure, where appropriate, if there is no improvement in the sickness absence and a review date will be set.
- 10.4 It is crucial that this meeting provides an open and honest dialogue to enable a thorough understanding of the individual's circumstances and to assist the manager in determining any appropriate future action. A record of the interview will be retained by the manager and a copy given to the employee within **5 working days** of the meeting.
- 10.5 Possible outcomes of the meeting might be:-
- Further review meetings with the line manager
 - A referral to Occupational Health. See Section 14.0 for further information.
 - Support to the employee such as counselling or training.
 - Consideration of changes to the work situation. (Reasonable adjustments such as changes to the workload, work practices or work pattern will usually be taken following occupational health advice).
 - Flexible working practices (either temporary or permanent).
 - No further action taken
- 10.6 If monitoring during the review period shows that the employee's attendance is no longer a cause for concern, the employee should be notified of this at the end of the review period.

- 10.7 If at any stage within the review period, there has been insufficient improvement in the employee's attendance, the matter should be referred to Stage One of the procedure in consultation with Human Resources.
- 10.8 Where individuals demonstrate a pattern of improvement in attendance levels for the required review period and then a subsequent dip, the line manager, in taking follow up action, will be able to call a formal meeting and initiate discussions from Stage One of the formal procedure in consultation with Human Resources.

11.0 Stage One – The Sickness Absence Review Meeting

- 11.1 Where there are continuing management concerns relating to persistent and/or intermittent sickness absences and informal mechanisms as highlighted in section 10.0 for dealing with the problem have proved unsatisfactory or have been exhausted, a formal Sickness Absence Review Meeting should be conducted.
- 11.2 The line manager/supervisor will request the employee, in writing, to a formal meeting. The employee should be given a minimum of 5 (and a maximum of 10) working days' notice of the meeting. The letter (please refer to Appendix G for a standard letter) should state the absence details and provide the opportunity for the employee to be accompanied/represented by a Trade Union representative or work colleague. No other third party representation is permissible. Line management should be notified as to who is representing the employee at least 24 hours in advance of the meeting. An HR Advisor will also be present at the meeting and will provide advice and guidance on the use and interpretation of the procedure.
- 11.3 At the Stage One Sickness Absence Review Meeting, attention should be drawn to the levels of absence and/or absence pattern of the individual and the reasons given for absence. The reasons should be discussed in an attempt to identify any underlying causes. Any support which has been provided should be reviewed.
- 11.4 The line manager/supervisor should ensure that the employee clearly understands that the level of attendance is considered to be unsatisfactory and that improvement is needed over a relevant and reasonable review period. The emphasis should remain on supporting and encouraging the employee to maintain a satisfactory attendance level.
- 11.5 A letter confirming the outcome of the meeting should be issued within 5 working days of the meeting taking place. A sample letter is used for this purpose. Please refer to Appendix H for details. For further information and guidance on conducting formal sickness absence review meetings, please refer to Human Resources. A Management Guidance Note: Checklist for conducting a Sickness Absence Review Meeting is also available at Appendix I.
- 11.6 If monitoring during the review period shows that the employee's attendance is no longer a cause for concern, the employee should be notified of this *in writing* at the end of the review period. If at any stage within the review period, there has been insufficient improvement in the employee's attendance, the matter shall be referred to Stage Two of the procedure. Where individuals demonstrate a pattern

of improvement in attendance levels for the required review period and then a subsequent dip, the line manager/supervisor, in taking follow up action, will be able to call a formal meeting and initiate discussions from Stage Two of the formal procedure. Referral to Stage Two following a dip in improvement should only be where necessary and not automatic, depending on the reason for the dip.

- 11.7 The timescale for review will normally be no less than 6 weeks and no more than 3 months depending on the circumstances. Managers may choose to meet with their employees throughout the review period. The frequency of any such meetings will be determined by the manager in conjunction with the employee and will be based on the circumstances of the case. For further advice regarding timescales and target setting, please contact Human Resources.

12.0 Stage Two & Three –Sickness Absence Review Meetings

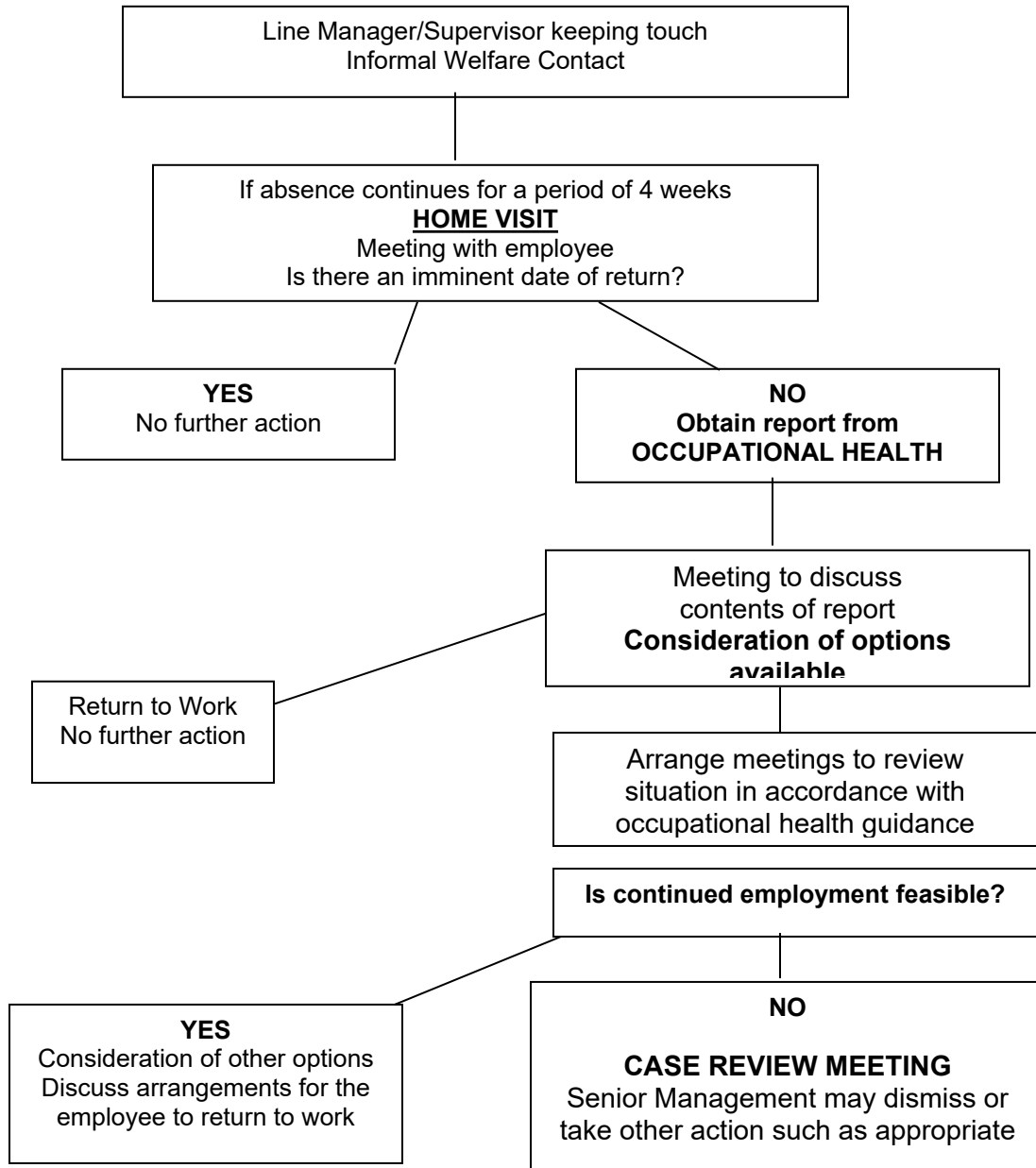
- 12.1 If there has been no acceptable improvement after Stage One, and there are no exceptional circumstances meriting an extension of the period, then a second formal meeting with the line manager/supervisor should be held. An HR Advisor will also attend this meeting.
- 12.2 This meeting will cover the same points as at Stage One. The letter requesting the employee to the meeting and the rights to representation are as at Stage One. Please refer to Appendix G for a standard letter. The meeting should also cover the implications of the continued excessive absence. For example, cost implications, loss of service provisions etc. Assistance from Occupational Health and other sources should continue to be explored.
- 12.3 The employee should be warned that the level of attendance is still considered to be unacceptable and that sustained improvement is needed. The manager will explain that a further period – again to be determined according to individual circumstances – will be monitored. A reasonable target for improvement will be set and agreed, i.e., usually no less than 6 weeks and no more than 3 months.
- 12.4 The outcome of the Stage Two meeting should be confirmed in writing within 5 working days and it should be stressed that if attendance deteriorates during the review period to the extent that absence exceeds the target set, the review date will be brought forward. A copy of the letter should be placed on the employee's personnel file. A standard letter for this purpose is located at Appendix J.
- 12.5 If monitoring during the review period shows that the employee's attendance is no longer a cause for concern, the employee should be notified of this *in writing* at the end of the review period. If at any stage within the review period, there has been insufficient improvement in the employee's attendance, the matter shall be referred to Stage Three of the procedure. Where individuals demonstrate a pattern of improvement in attendance levels for the required review period and then a subsequent dip, the line manager/supervisor, in taking follow up action, will be able to call a formal meeting and initiate discussions from Stage Three of the formal procedure. Referral to Stage Three following a dip in improvement should only be where necessary and not automatic, depending on the reason for the dip.

- 12.6 If there has been no acceptable improvement after this Stage Two meeting, and there are no exceptional circumstances meriting an extension of the period, then a third formal meeting with the line manager/supervisor should be held. An HR Advisor will also attend this meeting.

Stage Three – Final Sickness Absence Review Meeting

- 12.7 This meeting will cover the same points as at Stages One and Two and will follow the same procedure/format and review timescales as detailed above in points 12.2-12.4). At this third stage meeting, the employee will be advised that if there is no sustained improvement, then a possible recommendation to dismiss on grounds of capability could be made to the Head of Service and a Case Review Hearing convened.
- 12.8 If following the review period, attendance improves and is within acceptable levels, no further action should be taken except to confirm to the employee concerned (in writing with a copy on the personnel file) that attendance is now considered to be satisfactory. However, the employee should be reminded that attendance is continuously monitored and if further action is deemed to be necessary under this policy within the following 12 months, such action will be at this stage (third and final sickness absence review meeting) of the procedure.
- 12.9 If attendance does not reach the target levels during the review period agreed in Stage Three and there are no exceptional circumstances meriting an extension of that period, then the line manager/supervisor will send a report to the Head of Service, or a nominated representative, recommending that a Case Review Hearing take place. For further information on the procedure regarding Case Review Hearings, please refer to Section 23.0.

LONG TERM SICKNESS ABSENCE – FLOWCHART



NOTES:

- This is a simplified representation of the Process, for full details refer to the full Policy Document
- Line Managers must ensure that the departmental sickness absence administrator is informed of the employee's absence on the first day of sickness
- Contact must be maintained with the employee during the absence.
- In coming to a decision the Manager must consider all the information supplied and options available.
- There is a right of Appeal at all formal stages – to the Chief Executive Officer for Dismissal or to the Head of Service for action less than dismissal.
- Employees have the right to representation at all formal stages
- Records of all decisions made must be kept at each stage

Managing Long-term sickness absence

13.0 Procedure for handling long-term sickness cases

13.1 As indicated in 9.2.3, absences of 4 continuous weeks or more are considered long-term. Where an employee is absent for 4 continuous weeks or more, the line manager/supervisor will meet with the employee *normally* at home to discuss the absence and the prospect of a return to work. This meeting will facilitate consideration of the following points:-

- What progress the employee is making in terms of becoming well enough to return to work. In some circumstances, where it is clearly evident that the employee will not return to work in the near future, the discussion may focus on the general well-being of the employee; progress to date, sick pay benefits and medical evidence.
- Whether the absence is influenced by working conditions or arrangements, together with an examination of whether any changes can take place which might help the employee return to work. This will be particularly relevant where absences are related to disability;
- Whether the Council can in any way assist with or influence any external contributors to the employee's absence.
- In the event that the employee does not return to work in the next two weeks, i.e., after 6 weeks' absence, the likelihood of a referral to the Council's Occupational Health Adviser who will, in turn, advise the Council accordingly.

13.2 The line manager/supervisor will maintain regular contact with an employee who is absent due to long-term sickness as discussed in section 6.0 Maintaining Contact. The frequency and form of this contact e.g., telephone calls; home visits will depend on the circumstances and the health requirements of the individual and may vary from case to case. Managers must deal with the issue with tact and sensitivity. However, a home visit will normally be carried out before a referral to the Occupational Health Adviser is recommended. Depending on the circumstances, however, this may not always be practicable, and in some cases referral to Occupational Health may be recommended earlier or later.

13.3 The purpose of regular contact is to reassure the employee that the Council is concerned about their well-being and is trying to assist them to get better and to keep them up-to-date with developments in their section. The purpose of regular contact is also to ascertain the nature and progress of the illness and hopefully the recovery of the employee. The contact should also help to facilitate a return to work and to ensure that the employee is aware of and understands the procedures which will apply during their absence.

13.4 Any action taken regarding a long-term absent employee should be with due regard to the advice from Occupational Health and Human Resources and will depend on the individual circumstances of the case. Line managers/supervisors should refer to section 14.0 on the role of Occupational Health and to section 17.0 Acting on Medical Advice.

- 13.5 Even where absence is clearly genuine, long-term absence cannot be sustained indefinitely and where there is no reasonable prospect of a return to work in the foreseeable future; if after following the procedure detailed in sections 13.0-22.0) and all available options for the employee to return to work have been exhausted, the manager will usually need to recommend a Case Review Hearing to consider termination. Special consideration should be given to employees suffering from a terminal illness. See section 24.0 for further information.

14.0 The role of the Occupational Health (OH) Adviser

- 14.1 The Council has an occupational health contract with Performance Through Health Group Limited (PTH). Appointments with the OH Nurse are normally held at Banham Court, Hanbury Road, Stoke Prior, Bromsgrove, B60 4JZ. Generally, referrals to Occupational Health have a dual purpose:-
- To support the employee by providing specialist medical advice with regard to protecting their health in relation to their job (rather than the more general role of a GP)
 - To provide managers with information to enable decision-making with regard to what action and support is required or reasonable adjustments

15.0 When to make a referral to Occupational Health

- 15.1 The question of whether a referral should take place depends on the circumstances of the case. Above all, a referral to Occupational Health should not be used as a punishment or as a substitute for management responsibility. The following guidelines should be observed and common sense applied:-
- Where an employee is indicating that they are having particular problems affecting their job which are related to a medical condition, *referrals can be made immediately*. The employee may not necessarily have had any sickness absence and this referral will be proactive;
 - Where an employee is on long-term absence, *a referral will normally take place after 4-6 weeks' continuous absence*. However, if the absences are related to major surgery, serious fracture, etc., and the expected absence exceeds 4 weeks, a referral at 4 weeks would be unlikely to provide any useful information. It may be appropriate to make the referral at a later date or if the employee does not return to work after the expected recovery period.
 - Where it is indicated that an employee may not be able to resume normal work activities due to a period of illness or medical treatment, *a referral should be made*.
 - Where there is a problem of persistent short-term absence and the employee or manager knows or suspects that an underlying medical problem is a contributory factor, then *a referral is likely to follow one of the meetings held under the procedure for return to work discussions or the management of short-term sickness absence*.

16.0 Procedure for making a Referral to Occupational Health (OH)

- 16.1 All referrals should be made via Human Resources. The standard referral form found at Appendix L should be used and supplementary information provided where necessary, e.g., sickness absence records and job description. The designated HR Advisor will complete the form with assistance from the line manager/supervisor where appropriate.
- 16.2 The employee must be made aware of their rights under the Access to Medical Reports Act 1988 in relation to the Council's request for Occupational Health to seek a report from the employee's GP. Authorisation to obtain a medical report form is completed by the Occupational Health Nurse during the referral process.
- 16.3 When the referral process is complete, an appointment for medical assessment will be made directly with the employee by Occupational Health at the earliest opportunity. The line manager/supervisor will be informed via Human Resources of any appointments made. The employee may take a friend, partner, or counsellor with them to the appointment if they so wish.
- 16.4 Following medical assessment, the OH Nurse will inform the employee of the findings and confirm this in writing to the referring HR Advisor normally within 10 working days of the assessment. Where reasonably practicable, the referring HR Advisor will provide a summary of information or advice pertinent to the employment situation of the individual to the employee's line manager/supervisor.
- 16.5 Subsequent medical assessments may be necessary over a period of time. On any such occasions, the process described in paragraphs 16.3 and 16.4 will be followed.
- 16.6 Human Resources is solely responsible for obtaining medical reports and other confidential details. All such information is treated in confidence and will be retained only on the confidential personnel file. Throughout the operation of this procedure the employee is entitled to access any reports submitted to and obtained from Occupational Health. The employee has a right to request a copy of the medical report directly from the Council's Occupational Health providers.
- 16.7 Where an employee does not give their consent to the OH Nurse seeking a report from their GP and/or refuses to meet with the OH Physician, any decisions regarding the employee's future employment with the Council will be based *only* on the information available. The implications of this should therefore be discussed with the employee and confirmed in writing.

17.0 Acting on Medical Advice

17.1 The outcome of a medical examination will be that an employee is:-

- **Fit to return to full duties** of the post and a return to work should be supported as appropriate, or
- **Fit to return to the post subject to reasonable adjustments** being made. There will be a need to explore reasonable adjustments taking account of Disability Discrimination legislation where this applies, or
- **Permanently unfit for their post, but fit for other suitable alternative employment** within the Council. In this case, the Redeployment procedure would be followed (see Section 21.0 for further information), or,
- **Permanently unfit for their post or other comparable employment.** In this case, a Case Review Hearing should be held to consider whether termination is appropriate or ill health retirement where pension scheme rules are satisfied, or,
- **Case to be reviewed.** In this case a review period may be set with further advice to be sought from Occupational Health.
- **Referred to a consultant for further diagnosis** or referral for further tests/treatment to be undertaken. This can result in a significant continuation of an employee's absence and where this is likely to be the case, consideration may be given as to whether it is in the Council's interest to facilitate a speedier referral through the private sector.

17.2 Some of the key potential outcomes are handled separately and in more detail in the following sections 18.0-22.0.

18.0 Rehabilitation within the Current Role – General

18.1 It is hoped that with mutual determination and support, employees may be successfully rehabilitated back into the workplace following a period of sickness absence. Occupational Health advice may require temporary adjustments to be made to the job role, working hours or general arrangements to ensure that rehabilitation is at an appropriate pace.

18.2 It is recognised that employees who have been off for a prolonged period will normally require a settling-in period before they feel comfortable and confident being back at work, during which they should be offered encouragement and support. Difficulties adjusting to work may be temporary or permanent. The Council is required to consider whether there are any ways that the employee can return to their current job and whether any adjustments may be required. Adjustments within the current job could relate to phased returns (dealt with in more detail in section 19.0); reduced or changed hours; or changes in work practices, e.g., making adjustments to equipment used or changing actual tasks. Formal reviews should be arranged on a regular basis and recorded.

- 18.3 Line manager/supervisors should consider whether there are any training or development needs that have arisen, e.g., training on new IT systems that have been implemented whilst the employee has been absent.
- 18.4 The line manager/supervisor should also seek agreement as to how an individual wishes their return to be treated by others, i.e., are they happy for other team members to ask them how they are, know why they have been absent, etc?
- 18.5 A checklist of issues to consider regarding rehabilitation within the current job is available at Appendix L.

19.0 Phased return to work

- 19.1 There may be occasions where an employee has recovered from a long-term illness but would find it difficult to return immediately to their full contracted duties and hours of work without further risk to their health. In some cases employees are sufficiently recovered to be able to carry out some of their duties/hours of work. In such cases, line managers/supervisors are required to take a flexible approach to facilitate the employee's earlier return to work by allowing a phased return.
- 19.2 Following discussion with the employee the line manager/supervisor via Human Resources will seek advice from the OH Nurse on a suitable structured programme for a phased return to work. This may include restrictions to work activities and/or reduced hours. Periods of home working may also be considered where practical on a temporary/permanent basis. Restrictions to work activities and phased return to work programmes must be agreed prior to the employee's return to work. A letter for this purpose is held at Appendix M.
- 19.3 The period of time over which the phased return to work programme can be based will be dependent on the advice of Occupational Health and will be agreed between the line manager/supervisor and the employee.
- 19.4 Full contractual benefits and pay will be maintained for the agreed period of an approved phased return to work programme. Any extension of the phased return to work period can be made using annual leave, unpaid leave or reduced contractual hours of work. For further information on phased return to work programmes, please refer to the Management Guidance Note: Phased Return to Work Programmes at Appendix E.

20.0 Reasonable adjustments to the post

- 20.1 Following advice from Occupational Health and/or specialist disability related advice; it may be possible to make reasonable adjustments to a post on a permanent or a long-term basis to enable an employee to return to work. Such adjustments may include reducing the hours; altering work practices; introducing home working arrangements, modifying equipment used; changing location or layout of premises. Further information on reasonable adjustments is to be found at Appendix A.

- 20.2 In considering its legal obligations under the Disability Discrimination Act 1995 (as amended), the Council will have regard to the reasonableness of such adjustments, including cost, practicality and the effects upon colleagues and overall performance.
- 20.3 Further advice may also be sought by contacting an *Access to Work Adviser* at The Business Centre for the West Midlands on 01782 382148 where further information and advice is available.

21.0 Redeployment to alternative work within the Council

- 21.1 Where changes in hours or work practices are impractical, have been unsuccessful or are inappropriate, or when supported by medical recommendation, it is necessary to consider alternative employment opportunities. Redeployment on medical grounds should be considered as an alternative to dismissal and/or as a reasonable adjustment for an individual with a disability.
- 21.2 Where there is a recommendation by the OH Nurse to look for alternative work for an individual, the line manager/supervisor will meet to advise the employee of the OH findings and explain the procedure for redeployment. It is important to ensure that the employee accepts the medical view that a return to their previous job is not possible and that action needs to be taken.
- 21.3 It is important that the employee's GP is supportive of redeployment as the process can be difficult for an employee who has been suffering from health problems. The Council needs to ensure therefore that the employee is fit enough to deal with the process and must obtain the GP's declaration of fitness.
- 21.4 All reasonable attempts will be made to secure suitable alternative employment. Such work may not be at the same level of salary. However, there is no onus upon the Council to create a special job for an employee where none exists. Again, the Council will have due regard to its obligations under the Disability Discrimination Act 1995 and will consider reasonable adjustments to *all* potential redeployment opportunities.
- 21.5 The Council will need to consider support to employees seeking redeployment in the form of job application skills training, career counseling and providing employees with details of vacancies prior to advertisement. Further information on the medical redeployment process can be obtained by contacting Human Resources.
- 21.6 There may be funding available both from within the Council and external agencies to enable an employee with a disability to be redeployed to another post within the Council. For further information and advice, please contact Human Resources.
- 21.7 If an employee unreasonably refuses the offer of suitable alternative work, this may potentially lead to termination of employment and the employee may become ineligible for early pension benefits.

22.0 Permanent Ill Health

- 22.1 Should medical evidence show that an employee is *‘incapable of discharging efficiently the duties of his/her post or any comparable employment by reason of permanent ill health’*; and ill-health retirement has been discussed and applied for as appropriate, the evidence should still be submitted for consideration at a Case Review Hearing before any action regarding termination of employment is taken.

23.0 Case Review Hearing

- 23.1 Where there are continuing concerns regarding persistent, short-term absences and previous warnings have been given and a lack of sustained improvement as agreed at Stage Two is evident, or, where a long-term period of absence is continuing and options as discussed/referred to in sections 13.0-22.0 to enable the employee to remain in employment have been unsuccessful, the employee may be asked to attend a Case Review Hearing. This is the final stage of the Sickness Absence procedure and is designed to deal with all issues related to the employee's capability due to either persistent short-term or long-term absence.
- 23.2 The purpose of the Case Review Hearing will be to consider whether there are any further actions that the Council can take to assist the employee in continuing their employment or whether employment should be terminated because of ill health/sickness absence. Under the Employment Rights Act 1996, the Council has a duty to consider all reasonable alternatives before coming to a decision about whether or not to dismiss. Where an employee is disabled under the Disability Discrimination Act 1995, the Council has to consider reasonable adjustments. In all cases, any decision must take into account the most up-to-date medical information and should follow consultation with the employee, the employee's representative, Occupational Health, a disability employment adviser and a representative from Human Resources.
- 23.3 The Head of Service, or a nominated representative, will act as Chairperson at the Hearing accompanied by a member of Human Resources. The Chairperson will not normally have previous knowledge of the case.
- 23.4 The employee will be given a minimum of 5 (and a maximum of 10) working days' written notice of the hearing and shall be informed in the same letter of:
- The fact that it is a formal hearing to make a decision about their continued employment with the Council or their dismissal
 - An opportunity to review the full history of the individual's absence
 - His/her right to be accompanied at the hearing by a trade union representative or workplace colleague. Where a trade union representative is under review, normally the full-time regional officer will be used.
 - The option to rearrange the date, should both parties be in agreement

23.5 Order of Proceedings

- 23.5.1 Details of the case will be presented by the employee's line manager/supervisor and should include:-
- detailed records of sickness absence;
 - up-to-date medical advice from the Occupational Health Provider, who will have assessed GP & Specialist reports;
 - details of meetings held and actions taken under this policy and procedure, i.e., informal meetings and formal meetings held at stage one, two and three;
 - details of other arrangements made by the line manager/supervisor to support the employee;

- any issues raised or comments expressed by the employee or his/her representative.

The employee or his/her representative will have access to all documentation to be used at the hearing.

23.5.2 The employee and/or his/her representative will have a right to address the Chairperson. In some long-term sickness absence cases, for example, where there is a case of permanent ill health, the employee can give formal notification that they agree for their representative to attend the hearing on their behalf.

23.5.3 When reaching a decision about whether or not to dismiss, the Chair person will consider issues such as:-

- nature of the illness and/or absence
- the likelihood of the illness recurring or some other illness arising
- the need for the work to be undertaken;
- the impact of the employee's absence and ill health on other employees and service delivery;
- the length of the employee's absence record
- financial and cost implications to the Council;
- representations made by the employee and/or their representative;
- what actions have been taken in an attempt to enable the employee to continue in employment;
- adoption and exercise of the Council's Sickness Absence Policy and Procedure
- medical advice received;
- the extent to which the employee is aware of how serious the Council sees the absence and what the potential implications are for the employee should their absence continue, i.e., has adequate consultation taken place?

23.5.4 This list is not exhaustive and the weight attached to each will depend upon the circumstances of the case, whilst balancing the needs of the employee and of the Council. A checklist for issues to consider at a Case Review Hearing is situated at Appendix N of this policy.

23.5.5 The Chairperson has the option to refer the process back to any of the previous stages, if they consider this to be the most appropriate course of action.

23.5.6 If the Chair person is satisfied that despite all reasonable efforts to facilitate attendance at work, the employee remains incapable of achieving and sustaining satisfactory standards, they will be dismissed *normally* by reason of capability by issue of the appropriate notice, i.e., contractual or statutory, whichever is longer.

23.5.7 Whatever the outcome of the Case Review Hearing, the employee will be informed of the decision in person and this decision will be confirmed in writing within 5 working days. Where a decision to dismiss has been made, the letter will also inform the employee of notice of termination of employment.

23.5.8 Where decisions are made regarding termination of employment, the employee will have the right of appeal against the decision. For further information, please refer to section 24.0-25.0.

24.0 Actions following decision to terminate employment

24.1 Permanent Ill health

On receipt of a permanent ill health certificate and medical report from the OH Nurse and a Case Review Hearing recommendation to dismiss, the line manager/supervisor will arrange to meet the employee (if he/she was unable to be present at the Hearing) to explain the findings of the Case Review Hearing and/or OH Physician to advise that he/she will be unable to continue in their post. The line manager/supervisor should be accompanied by a designated HR Advisor. The employee will also have the right to be accompanied by a friend, relative or a trade union representative.

24.2 The procedure to be followed will be fully explained as will the contractual benefits that are payable to the employee upon the termination of their employment. A pension estimate, where applicable, will be sought from the Payroll Section of Human Resources & Organisational Development to clarify the benefits available to the employee. The employee will be made aware of their right to appeal against the decision. If such an appeal is made, depending on the grounds for appeal, an independent medical examination may be arranged, the cost of which will be borne by the Council.

24.3 Where the employee is declared permanently medically unfit, written confirmation of the decision to terminate their employment should also be given immediately in person and confirmed in writing within 5 working days. The termination date will be determined from the date the notice is served. Notice will be paid at full pay regardless of the stage the employee is at with their sickness benefit payments.

24.4 Employees may be dismissed prior to the expiry of their contractual sick pay benefits. The decision to dismiss is separate to the payment of sick pay benefits. The provision of sick pay benefits does not give rise to a contractual right not to be dismissed.

24.5 Ill Health Retirement

Once a decision has been reached that employment can no longer be sustained, if the employee is a member of the Local Government Pension Scheme, they may be eligible for the early release of pension benefits under ill health retirement. It is advisable for the appropriate line manager/supervisor to obtain a pension quotation from the Payroll Section of Human Resources prior to meeting with an employee to discuss their termination arrangements. Adequate notice should be given to the Pensions Section at Worcestershire County Council. The decision regarding whether a member of the Pension Scheme is eligible for benefits is entirely separate to the Council's decision regarding the employee's future employment. For further advice on pension information, please refer to the Local Government Pension Scheme Handbook or, contact the Payroll Section of Human Resources.

24.6 Terminal Illness

Ill health conditions will vary in terms of severity. In the case of a terminally ill employee, there is a need to consider the person's situation and their continued

employment in a particularly sensitive way. Consideration needs to be given as to whether dismissal is appropriate in such circumstances, or whether the Council could wait so that the employee's spouse or next of kin benefits from a death-in-service payment. Consultation is a key part in determining the employee's wishes and in providing them with information on the options available.

24.7 Annual Leave

Employees will still accrue annual leave during periods of sickness absence, but will not be able to take their entitlement until they return work. For example, if an employee is absent for the first six months of the leave year, their entitlement when they return to work will still be the equivalent of a full year's leave less any leave already taken.

24.7.1 If an employee does not return to work before the end of the leave year, the entitlement to annual leave is lost, subject to the Council's carry forward provision of 5 days' annual leave entitlement.

24.7.2 If the employee is absent from work immediately prior to the termination of their contract, payment will be made for any untaken leave.

25.0 Right of Appeal

- 25.1 Where decisions are made to terminate employment under this procedure the employee has the right of appeal to the Council's Appeal Panel.
- 25.2 In order to exercise the right, the employee must write to their respective Corporate Director within 10 working days of receipt of the written notice of termination of employment. In their letter, the employee must state the grounds of appeal.
- 25.3 The Council will arrange for the appeal to be held as soon as possible following receipt of the employee's letter of appeal.
- 25.4 An external advisor to the Council will fulfil the role of Appeal Hearing Officer (for example, a professional advisor from the regional employers organisation, a chief officer [Head of Service or above] from another local authority, or a former Chief Executive not previously involved in the case).
- 25.5 The designated Appeal Hearing Officer must ensure the employee is given a minimum of 5 working days written notice of the date of the appeal hearing and be advised of the right to be accompanied by a Trade Union representative or colleague
- 25.6 Should the employee be unable or fail to attend the appeal hearing, an alternative date will be arranged. Should the employee also fail to attend this alternative date, without reasonable explanation, the appeal may be considered in their absence
- 25.7 The Appeal Hearing Panel will be advised on procedural matters by either an HR Advisor or an appropriate external adviser.
- 25.8 During the appeal hearing, both the Council and the employee will have the opportunity to state their case and provide any documentary evidence.
- 25.9 The Appeal Panel will communicate their decision in writing, within 5 working days of holding the appeal.
- 25.7 The decision of the Appeal Panel is final within the Council's internal procedures.

26.0 Special Considerations

26.1 Stress

The Health and Safety Executive (HSE) defines stress as 'the adverse reaction people have to excessive pressure.' The HSE also states that pressure can improve performance, but when demands and pressures become excessive, this can lead to stress which has a negative effect on mental and physical health.

26.2 Stress is not defined as a disability under the DDA. However, where stress leads to mental illness 'recognised by a respected body of medical opinion' and the disability has a 'substantial and long-term adverse effect on the person's ability to carry out normal day to day activities', the employee may be covered by the Act. It is important for line managers/supervisors to recognise signs of stress and/or unusual behavioural changes in their staff in order to tackle stress issues before they reach a critical point.

26.3 Every individual has their own threshold for handling stress and this threshold may vary in different situations and at different times. It is important that line managers/supervisors are alert to changes in employees that may indicate signs of stress. In addition, records on absence levels and reasons for absence may help to identify potential problems relating to stress affecting individuals. Statistics can also highlight potential areas of concern within teams across the Council. These issues can be dealt with on an individual, team or strategic basis. For further information relating to the management of stress, please consult Human Resources.

27.0 Summary of Key Responsibilities

27.1 Employees

Employees are expected to:-

- Attend work unless unfit to do so.
- Raise concerns with their manager or HR Advisor if they believe that their job is making them ill or contributing to illness.
- Report sickness absences promptly, in accordance with the sickness notification procedure in section 4.0.
- Ensure that the appropriate certifications are completed, in accordance with the procedure.
- Accept contact with their manager during periods of sickness absence.
- Cooperate fully with the Council when medical advice is required from the Occupational Health
- Ensure that medical advice and treatment is received as quickly as possible in order to facilitate a return to work
- In the case of long-term sickness absence, receive a visit at home or at a neutral venue from their line manager/supervisor or an alternative line manager/supervisor if it is not possible to come to work.

27.2 Line manager/supervisors

It is a line manager/supervisor's responsibility to actively manage attendance and to address absences. If absence is not addressed early then it may become a problem. The key responsibilities are summarised below:-

- **Maintain accurate records:** sickness reports for a manager to work from can only be produced if records are accurate. Managers must ensure that procedures are in place to record and report to Human Resources each occasion of absence. Ensuring that departmental sickness absence administrators are notified.
- **Maintain contact:** When an employee is absent from work due to sickness, it is important that regular contact is maintained between the manager and the employee.
- **Regular monitoring:** Monitoring sickness absence levels is an integral part of the line management process
- **Undertake return to work discussions** with employees after every incident of sickness absence
- **Communicate** to employees the existence of the sickness absence management policy and procedure
- **Encourage** a positive attitude to attendance at work
- **Seek help, guidance and support from the HR service** in interpreting sickness figures and finding solutions, which are consistent and fair while allowing for flexibility to individually tailor responses.

27.3 Heads of Service

- Provide clear leadership for the reduction of sickness absence levels and ensure this policy is implemented within the service
- Encourage the production of action plans to deal with areas of high sickness absence and support managers in achieving defined standards
- Receive regular information on sickness absence levels and understand its cost implications.

27.4 Human Resources

The Human Resources Division is responsible for:

- Reviewing the overall effectiveness of this policy and procedure
- Promoting health awareness
- Providing advice and support on all procedural aspects of sickness absence
- Managing the process of occupational health referrals
- Providing regular sickness absence reports

28.0 List of Appendices

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The Disability Discrimination Act 1995 (as amended)

The Disability Discrimination Act 2005 amends the Disability Discrimination Act 1995 (DDA) by extending the provisions of the Act and the definition of disability to provide automatic coverage for people with HIV, cancer and MS from the point of diagnosis, and removes the requirement for a mental illness to be 'clinically well-recognised'. See below for further information relating to disability. The purpose of the Act is to require employers and providers of goods and services to eliminate discrimination against disabled people at all levels. The enforcement agency of the DDA is the Disability Rights Commission.

A Definition of Disability

A disability is defined under the Disability Discrimination Act 1995 (as amended) as '*a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities.*' Many conditions with substantial, i.e., non-trivial effects are considered disabilities. For further information relating to disability, please see the Disability Rights Commission's website: www.drc-gb.org

A physical or mental impairment will be taken to affect a person's ability to carry out '*normal day-to-day activities*' if it affects:

- Mobility (such as difficulty going up or down stairs)
- Manual dexterity (such as pressing buttons on a keyboard)
- Physical coordination
- Continence
- Ability to lift, carry or move everyday objects
- Speech, hearing or eyesight
- Memory or ability to concentrate, learn or understand
- Perception of the risk of physical danger

'Physical impairment': is not defined in the Act, but many conditions and illnesses may fall under the definition of disability depending always on the effects of the condition on the individual.

'Mental impairment' means an impairment resulting from or consisting of a mental illness. The criteria for a mental illness to amount to a disability are the same as for a physical illness, i.e., the illness must be one that has a substantial adverse effect on the person's ability to carry out normal day-to-day activities and must have lasted, or be expected to last, at least 12 months. This does mean that some stress related illnesses may amount to disabilities; depending on whether their effects on the person are substantial or long-term.

'Substantial long-term adverse effect': The impairment is long-term if it lasts, or is likely to last for at least 12 months, or for the rest of the disabled person's life. If an impairment is intermittent with the result that it sometimes affects the person and sometimes does not, it can still be considered as a disability, provided it is likely to recur. In these circumstances, the person with the condition will be deemed to be disabled at all times irrespective of whether the condition is affecting them at a particular time. Substantial and adverse means 'not minor or trivial' with the result that an impairment does not have to have extreme or major adverse effects on an individual in order for the condition to amount to a disability in law.

People suffering from progressive conditions such as cancer, muscular dystrophy, Alzheimer's disease and Parkinson's disease, Multiple Sclerosis and HIV infection are

covered by the definition of a disabled person, Learning difficulties and other conditions such as dyslexia may amount to disabilities. The level of adverse effect on an individual is the most relevant factor in determining whether or not the particular conditions constitute a disability. Those who have a severe disfigurement are also covered, although deliberate disfigurements such as tattoos and body piercing do not fall within the definition. Addiction to or dependencies on alcohol, nicotine or any other substance (other than those that are being medically prescribed) are specifically excluded from the definition.

Reasonable Adjustments

Under the Disability Discrimination Act 1995 (as amended), an employer is required to make suitable reasonable adjustments to any provision, criterion or practice that they apply, in order to accommodate the needs of an employee or job applicant with a disability if it is reasonable for them to have to do so in all the circumstances of the case. A list of reasonable adjustments as determined by the DDA Code of Practice is highlighted below. This is by no means an exhaustive list and advice should be sought on special cases directly by contacting an *Access to Work Adviser* at Job Centre Plus. The area Adviser, can be contacted on 01782 382148. Failure to comply with a reasonable adjustment can amount to unlawful direct discrimination.

Making adjustments to premises

An employer might have to make structural or other physical changes such as: widening a doorway, providing a ramp or moving furniture for a wheelchair user; relocating light switches, door handles or shelves for someone who has a difficulty in reaching; providing appropriate contrast in décor to help the safe mobility of a visually impaired person.

Allocating some of the disabled person's duties to another person

Minor or subsidiary duties might be reallocated to another employee if the disabled person has difficulty in doing them because of the disability. For example, if a job occasionally involves going onto the open roof of a building, an employer might have to transfer this work away from an employee whose disability involves severe vertigo.

Transferring the person to fill an existing vacancy

If an employee becomes disabled, or has a disability which worsens so he/she cannot work in the same place or under the same arrangements and there is no reasonable adjustment which would enable the employee to continue doing the current job, then he/she might have to be considered for any suitable alternative posts which are available. (Such a case might also involve reasonable training).

Altering the person's working hours

This could include allowing the disabled person to work flexible hours to enable additional breaks to overcome fatigue arising from the disability, or changing the disabled person's hours to fit with the availability of a carer.

Assigning the person to a different place of work

This could mean transferring a wheelchair user's workstation from an inaccessible third floor office to an accessible one on the ground floor. It could mean moving the person to other premises of the same employer if the first building is inaccessible.

Allowing the person to be absent during working hours for rehabilitation, assessment or treatment

For example, if a person were to become disabled, the employer might have to allow the person more time off during work, than would be allowed to non-disabled employees, to receive physiotherapy or psychoanalysis or undertake employment rehabilitation. A similar adjustment might be appropriate if a disability worsens or if a disabled person needs occasional treatment anyway.

Giving the person, or arranging for him/her to be given, training

This could be training in the use of particular pieces of equipment unique to the disabled person, or training appropriate for all employees but which needs altering for the disabled person because of the disability. For example, all employees might need to be trained in the use of a particular machine but an employer might have to provide slightly different or longer training for an employee with restricted hand or arm movements, or training in additional software for a visually impaired person so that he/she can use a computer with speech output.

Acquiring or modifying equipment

An employer might have to provide special equipment (such as adapted keyboards for a visually impaired person or someone with arthritis), or an adapted telephone for someone with a hearing impairment or modified equipment (such as longer handles on a machine). There is no requirement to provide or modify equipment for personal purposes unconnected with work, such as providing a wheelchair if a person needs one in any event but does not have one: the disadvantage in such a case does not flow from the employer's arrangements or premises.

Modifying instructions or reference manuals

The way instruction is normally given to employees might need to be revised when telling a disabled person how to do a task. The format of instructions or manuals may need to be modified (e.g., produced in Braille or on audiotape) and instructions for people with learning disabilities may need to be conveyed orally with individual demonstration.

Modifying procedures for testing or assessment

This could involve ensuring that particular tests do not adversely affect people with particular types of disability. For example, a person with restricted manual dexterity might be disadvantaged by a written test, so an employer might have to give that person an oral test.

Providing a reader or interpreter

This could involve ensuring a colleague reading mail to a person with a visual impairment at particular times during the working day or, in appropriate circumstances, the hiring of a reader or sign language interpreter.

Providing Supervision

This could involve the provision of a support worker, or help from a colleague, in appropriate circumstances, for someone whose disability leads to uncertainty or lack of confidence.

SELF-CERTIFICATION FORM

This form is to record sickness absence information and is to be completed by the employee on the first day of return to work and countersigned by your line manager. It must be completed for all periods of absence of half a day or more.

If you are absent due to illness for more than 7 consecutive calendar days, you must also provide a Doctor's certificate.

Once completed, your Line Manager will forward this form to Human Resources, where it will be held on your personal file.

Your line manager will also keep a separate record of your overall attendance, and will speak to you directly if they have any concerns.

Full name of employee	
Date on which you first became unfit for work	
Total number of working days (including half-days) that you were absent due to illness	
Please give details of the nature of your illness or injury – please note that stating “sick”, “ill” or “unwell” is insufficient	
Did you visit your doctor or seek other medical advice in relation to this period of illness or injury?	YES/NO* <i>Please delete as appropriate</i>

Declaration

I declare that the information I have given on this form is true and I confirm that I am now fit to resume work. I understand that it is a serious disciplinary offence to provide false information on this form.

Name:..... Name:.....
(insert name of employee) (insert name of line manager)

Signed:..... Signed:.....

Date:..... Date:.....

For Admin purposes only:
 White copy: Line Manager copy
 Yellow copy: Employee copy
 Pink copy: Forward to HR

Management Guidance Note

Return to Work Discussions

This Guidance Note is to be read in conjunction with the Sickness Absence Policy and Procedure and provides support and advice on how to conduct return to work discussions.

1. Conducted by whom:

Line manager/supervisor or designated contact officer within employee's department.

2. When to be conducted:

The first day back from sickness to establish the reasons for absence and whether there is an ongoing health problem. This type of informal interview can conveniently be combined with a request to the employee to complete a self-certification form. It is acknowledged that for some categories of employee this may not be possible, i.e., certain shift workers. In such cases, the interview should be conducted at the earliest opportunity in accordance with agreed divisional procedures. It is best practice to interview all employees on their return from a period of sickness absence no matter how long they were off for.

3. How long should an interview be:

There is no defined guidance regarding how long a return to work discussion should last as each circumstance is different. The interview can simply be an informal and brief acknowledgement that the employee has returned and an enquiry that they are well.

4. Where to be conducted:

The meeting should be held in a quiet location, i.e., a private room or area out of earshot of other employees.

5. Preparation:

Preparation is the key to the success and benefit of this meeting. The manager should prepare by ensuring that he/she has up to date factual knowledge of:

- The employee's absence record including reason for absence and any potential underlying causes, e.g., disability or incident at work;
- Collate any relevant correspondence, i.e., medical certificates, occupational health reports
- Emerging trends
- Employee's age and length of service
- Any changes in the employee's job role or in his/her personal circumstances (if known)
- Evidence of unexplained changes in the employee's behaviour or in the way that he/she does his/her work

Arrange a time for the discussion which should ideally be agreed with the employee in advance. Divert phones, switch off mobiles and put a do not disturb sign on the door if you are in an office.

Ensure you have a blank copy of the Self-Certification form and Return to Work Discussion form. You may also require a 'Report of an injury or dangerous occurrence', where absence is attributable to an accident at work.

Think about what you want to discuss and speak to your designated HR Advisor if you are unsure about the approach to take particularly for an ongoing issue.

6. Interview structure checklist

Opening the discussion

- Welcome employee back to work
- Ask them if they are feeling better
- Ensure employee has not returned to work too early; has the GP authorised the return (see section 4.10 of policy for further clarification)
- Check that there are no health and safety implications/risks for the return of the employee
- Tell them that they have been missed
- Bring the employee up to date with news/changes (if any) that have occurred in their absence

The following checklists are intended as a guide and may not be applicable in every case. You need only cover those you feel are relevant to the individual circumstances. Please speak to Human Resources if you are unsure of which to cover.

Identifying causes of absence

- Confirm the reasons for the absence even if it is only for part of a day
- Where absence is owing to an incident/injury at work, ensure that any relevant information has been given to the Health & Safety Advisor
- Try to find out if there is an underlying health problem
- If you have concerns, raise them
- Check and double-check your understanding of the situation
- Find out what the employee has done to correct/address the ill health issues
- Will there be a need for more time off to attend more appointments to the doctor or specialists?

Points to bear in mind when identifying causes of absence:

It is important to categorise the absence correctly and to try to establish the key reason for the absence. Reasons for absence could include the following:

- Sickness
- Disability (refer to Disability guidance and consider reasonable adjustments)
- Health and safety – work related (refer to accident reporting procedure and consider risk assessments)
- Linked to maternity
- Linked to alcohol or drug abuse
- Time off to care for dependants

- If there is no underlying health problem, establish other factors culminating in absenteeism, e.g., personal/marital problems, low morale, unhappiness at work, poor relationships with colleagues

Offering support:

- If appropriate, offer help from Occupational Health
- Do any reasonable adjustments to workloads, patterns or practices need to be made? If so, Occupational Health may need to be consulted.
- Has GP recommended a phased return to work? If so, Occupational Health referral should be made
- If health and safety at work is an issue, a risk assessment may be necessary
- Explore whether the employee is taking any medication that may affect his/her capacity and ability to work, or if he/she requires facilities to take the medicine
- Where a personal or domestic difficulty is perceived as the cause of poor attendance, sensitively discuss and encourage them to seek advice and support from the employee counselling service, available through Occupational Health
- If the employee is experiencing child care difficulties, are there any adjustments that can be made, e.g., changes to hours, start-times etc., even if only temporary to cover school holidays, partner being ill, etc.,

Closing the interview:

- Explain the importance of good attendance for the Council
- Reiterate the sickness notification and certification procedures; ensure that the employee is made aware of his/her responsibilities under the Sickness
- Absence Policy and Procedure and that he/she has a copy.
- Share with employee their sickness record.
- Ask if the employee has any further questions

7. Paperwork to complete:

- Check that you have a medical certificate signing the employee back to work (this is a national condition of service for employees who have been signed off with a GP's certificate for 14+ days)
- Complete a self-certification form and attach any medical certificates
- Ensure the self-certification form and medical certificates are sent to Human Resources for SSP purposes via departmental sickness absence administrators
- Keep a record of the interview by completing a Return to Work Discussion form. This should be shared and agreed with the employee
- Record only factual information and do not write/make assumptions
- Send a copy of the Return to Work Discussion form to HR to be held on the personnel file, give one copy of the record to the employee

8. Outcomes of the Return to Work Meeting

There are a number of possible outcomes that may arise as a consequence of the Return to Work Meeting which are summarised below:-

No further action is necessary when:

The manager is satisfied with the points discussed in the meeting. However the manager will continue to monitor sickness absence in the normal way.

An action plan should be formulated when:

The manager has identified issues relating to work, personal or domestic life that by providing appropriate support or making relevant adjustments enable the employee to improve his/her attendance at work.

A written action plan is agreed between the manager and employee including time scales, review dates and on-going monitoring. This is to ensure continued managerial support and to confirm an improvement in the standard of attendance to an acceptable level.

Where the absence has been due to a work related incident, the action plan should identify any training or other needs for the employee that have been identified as a result of the incident investigation and risk assessment review. This will include any changes to work methods and provision and use of work equipment.

A referral to Occupational Health will occur when:

The manager identifies a health-related issue that he/she needs further medical advice in order to support the employee at work or to facilitate his/her return to his/her current post or attendance has not improved to a satisfactory standard and/or is unlikely to improve. Further guidance on occupational health referrals can be found at section 15 of the Sickness Absence Policy and Procedure.

No conclusive outcome occurs when:

The meeting does not identify any underlying issues. The manager will continue to monitor sickness absence and further meetings held as necessary until either attendance improves to the required standard, or it fails to improve and further action becomes necessary. In these circumstances, managers should seek guidance from Human Resources.

9. Interview tips:

- When dealing with sickness absence, a caring approach demonstrating sympathy, compassion and understanding should be adopted at all times.
- Put the employee at ease. Help the employee feel they are free to talk
- Empathise with the employee. Try to put yourself in the employee's place so you can see their point of view.
- Try to be as neutral as possible and not jump to conclusions. This will only put the employee on the defensive
- Keep an open mind
- Deal with issues sensitively
- Keep the momentum upbeat and the atmosphere positive
- Ask open-ended questions
- Actively listen to what the employee is telling you
- Stop talking! You cannot listen if you are talking
- Show the employee that you want to listen. Look and act interested. Do not read your mail while they are talking.
- Remove distractions. Don't doodle, tap, or shuffle papers.
- Be patient. Allow plenty of time. Do not interrupt.
- Ask further probing questions to gain more information about any areas of doubt

The Officer to contact regarding this matter is

Direct Line (01527) 88

Your Ref:

My Ref:

Personal and Confidential

[insert title, name, surname]

[insert address]

[insert date]

:

Dear [name],

Home Visit

Following our recent telephone conversations, I am writing to ask if you would be kind enough to contact me with regard to arranging a home visit [time]. I will be accompanied by [designated HR Advisor name], a representative from Human Resources.

It is Council policy to keep in touch and support employees when they are absent from work with illness, and the visit will also provide an opportunity for me to answer any questions or queries you may have.

You have the right to be accompanied by a Trade Union representative or a companion if you so wish. If you are not comfortable with us meeting you in your home, then you may wish to come to us or to choose a neutral venue.

I hope you are making a recovery and look forward to hearing from you shortly.

Yours sincerely

[Name]

[Position]

Management Guidance Note

Phased Return to Work

This Guidance Note is to be read in conjunction with the Sickness Absence Policy and Procedure and provides support and advice on how to organise a phased return to work programme.

Introduction

The Council wishes to encourage employees to return to work as quickly as possible following absences due to illness or injury on the grounds that to do so would be in the best interests of the Service and the employees concerned.

Benefits to the Division

- Reduces the cost of absence
- Making use of the employee's services once again

Benefits to the employee

- Direct financial benefits in circumstances when the employee would otherwise have been on half contractual sick pay or run out of sick pay
- Helps employees to re-familiarise themselves in the work environment
- Accelerates a return to full duties; and
- An agreement with the employer to continue working on a part-time basis permanently in circumstances where the employee wishes to carry on working or is not defined as permanently unfit for work and, therefore, not entitled to ill health retirement benefits even if a member of the relevant pension scheme.

Purpose

To agree the contractual arrangement where an employee returns to work following absence due to illness or injury but is unable initially to fulfil their contracted hours of work.

Conditions

- Arrangements for a partial return to work should be made in full consultation with the employee and their trade union representative where applicable. Regular review dates should be agreed with a view to the employee gradually increasing the number of hours worked and reviewing their contracted hours as soon as practicable.
- A return to work on reduced contractual hours must be supported by a return to work certificate from the employee's GP and a written report from Occupational Health which supports the return to work on a partial basis.
- The work being undertaken will be those duties derived from and responsibilities required under the employee's existing contract of employment.
- The risks to which the employee is exposed during the course of their work may need to be reassessed in light of any physical or psychological changes that

have occurred as a result of the illness/injury. Where this review indicates that it would be inappropriate for the employee to continue carrying out the tasks, consideration should be given to a reasonable adjustment being made to either the tasks or the physical working environment.

- A return to work on a temporarily reduced hours basis must be approved by the Head of Service. Consideration should be given to the operational implications; in particular, the duties and responsibilities of the post, the ability to provide partial cover for the employee and the reasonableness of making adjustments to the physical working environment.
- The employee should be prepared to visit Occupational Health at any time at the request of the line manager/supervisor, having first sought advice from Human Resources.

Pay arrangements

- Neither SSP nor occupational sick pay will be paid to the employee during the period when reduced contractual hours are being worked.
- No state sick benefit will be claimable by the employee during the period when reduced contractual hours are being worked
- Normal pay will be paid throughout the *agreed* period of the phased return as though the employee had returned to work their normal contractual hours.
- Annual Leave may be used to extend a phased return to work programme over and above the period agreed. Any extension will need to be assessed and agreed in accordance with operational requirements.
- The arrangements set out above should not be encouraged to continue beyond the end date of the phased return to work period (for example, a 6 week programme) unless a return to *full* contractual hours is imminent. The arrangement should be reviewed at this point. Any additional phased return period should be based on the actual number of hours worked.
- The arrangements should be subject to regular review, in consultation with the employee and where applicable their trade union representative/colleague.

Checklist of issues to explore:-

- Is there a clear timetable for the phased return period – what hours are being completed when and over what period?
- Are other team members clear about the arrangements, in terms of contact with the employee and operational practicalities?
- Has the pay arrangement been made clear in writing to the employee? [see sample letter at appendix M of sickness absence policy and procedure]
- Has the payroll section been informed of any changes to the pay?
- Have the arrangements been agreed and cleared through Occupational Health?

RETURN TO WORK DISCUSSION FORM

Name of Employee:		
Interview Conducted by		
Period of Absence	<i>Date of First Day Absent:</i>	<i>Date of Last Day Absent:</i>
Total number of working days absent <i>(Excluding actual day of return)</i>		
Reason for Absence		
Date of this Discussion		
Is this the first or second period of absence in the last 6 months? <i>(If this is the 3rd or more period, please refer to trigger points in Management of Attendance Policy)</i>		Yes/No*

Areas that should be covered during Discussion, where applicable:

If the absence was covered by a GP certificate, does the employee have medical clearance to carry out full duties	Yes/Not Applicable*	Update on workload and workplace developments that occurred during employee absence	Yes/Not Applicable*
Referred to Occupational Health via HR (discuss report received)			Yes/Not Applicable*
Discuss any information about work problems or health	Yes/Not Applicable*	Any other actions? <i>e.g. counselling, part-time working etc</i>	Yes/Not Applicable*

If absence was a result of an accident:

Was absence due to an accident at work? <i>(attach a copy of accident report) (See Mgmt of Attendance Policy)</i>	Yes/No*	Did the accident happen out of work	Yes/No*
--	---------	--	---------

Details of Issues Discussed *(please continue on a separate page as necessary)*

Support Discussed/Offered *(please continue on a separate page as necessary)*

Actions Agreed *(please continue on a separate page as necessary)*

Notification/Certification

Notification of absence received in line with Council Procedure : <i>Please see Mgmt of Attendance Policy</i>	Yes If No: please give details of action taken
Self Certification Form - Please ensure this document has been completed	
Confirmation of GP note covering periods beyond 7 days of absence :	Yes/Not applicable*

Signature of Manager:

Signature of Employee:

Data Protection Act 1998 – The information on this form will be used for the control and monitoring of sickness absence. Information will be processed in accordance with the requirements of the above.

RETURN TO WORK DISCUSSION – MANAGEMENT GUIDANCE NOTES

The return to work discussion is an essential and compulsory element in the Management of Attendance and the interview should take place on the day of return, or as soon as reasonably practicable.

The reasons for undertaking a return to work discussion include:

- a. To facilitate the effective management and monitoring of sickness absence.
- b. To ensure that there is verbal and effective communication between the employee and the Manager.

The return to work discussion will vary in accordance with the reasons for the absence and any previous absences.

The following checklist indicates possible areas for discussion during this meeting:

- a. Establishing the cause of the absence.
- b. Confirming the Manager's interest in the welfare of the employee.
- c. Reinforcing the policy and confirming the Manager's role in the management of attendance.
- d. Establishing whether the employee is truly capable or fit to resume their duties, by identifying any obvious symptom, which may endanger the employee in their role at work.
- e. Allowing general discussion on the attendance record of the employee, which may include any trends or patterns of absence, any future monitoring or performance expectations.
- f. Giving the employee an opportunity, whereby, other facilities (e.g. counselling) or policies (e.g. Grievance, Stress, Drugs and Alcohol) can be instigated.
- g. Identifying any other underlying causes, e.g. Domestic Circumstances, Work Related Problems, Stress, etc.
- h. Giving an opportunity to discuss the employee's own health management.
- i. Where the absence relates to a disability, pregnancy, or a work related Injury or Ill health – gives an opportunity to explore any possible support or adjustments, which could assist the employee in the post

Further return to work information and advice for Managers is contained within the Managing of Attendance Policy and Procedure.

All contacts of this nature should be conducted confidentially with a degree of sensitivity. Line Managers must advise their Service sickness administrators on the first day of this absence.

SAMPLE LETTER

The Officer to contact regarding this matter is

Direct Line (01527) 88

Your Ref:

My Ref:

Strictly Private and Confidential

[Insert Title, First Name and
Surname]

[Insert Name]

[insert date]

Dear [insert first name]

**Re: Stage One/Stage Two - Sickness Absence Review Meeting/Stage Three – Final
Sickness Absence Review Meeting**

Further to our recent discussions/meetings regarding your sickness absence levels on [insert dates where possible], I would like to invite you to a meeting to be held in [room booking] on [date] at [time].

This meeting, which will be held in line with the Council's Sickness Absence Policy and Procedure will be an opportunity to discuss your recent absences from work due to ill health as detailed on the attached list. I am looking to find a positive way forward to provide you with the necessary support to help improve your attendance levels. [name], HR Advisor will attend the meeting to give advice and guidance.

You have the right to be represented at the meeting by your trade union representative or a work colleague. If you or your chosen companion is unable to attend this meeting, you are asked to contact {insert name} as a matter of urgency so that an alternative date and time can be scheduled.

Yours sincerely

[insert name]

Line Manager

CC: Human Resources

SAMPLE LETTER

The Officer to contact regarding this matter is

Direct Line (01527) 88

Your Ref:

My Ref:

Strictly Private and Confidential

[Insert Title, First Name and

Surname]

[insert address]

Dear [insert first name]

Re: Stage One - Sickness Absence Review Meeting

I am writing to confirm the outcome of the **sickness absence review** meeting I held with you on [date] at [time]. The purpose of the meeting was to discuss with you my concerns relating to your levels of sickness absence. Also present at this meeting was [name].

I explained that the reason for my concern was that you have had [number] days/episodes of absence during the past [number] months. I gave you a copy of your sickness absence record at the meeting.

As you are aware, we have met [number] occasions prior to this review meeting, at return to work meetings, where we have discussed your sickness absence levels, what support is available to you such as [] and what further actions to take, which have included [].

At the review meeting on [date] we discussed further your sickness absence levels and reasons for absence. Your response was []. We also discussed whether there was any additional support that could be provided to you such as [].

We agreed that the following measures would be put in place:

- Include reference to support measures agreed and targets set, with timescales
- Ddd
- Xxx
- xxx

I explained that it was important that if you continue to experience problems that affect your attendance record you discuss these with me, so that we can determine whether any further support could be made available to you.

I hope that the measures that we have agreed will help you to improve your attendance. However, if there is an insufficient improvement in your attendance levels during the next [number] months, I may need to refer this matter to [person] who may choose to meet with you for a further review meeting. If, following this review meeting there remains

Bromsgrove District Council

insufficient improvement in your attendance record the matter may be referred to the **Head of Service** who may choose to hold a **case review hearing** with you, where decisions may be made regarding your continuing employment.

I hope that this clarifies the points we discussed and that there is a significant and sustained improvement in your attendance level.

[if appropriate] I enclose a second copy of this letter that you might wish to pass to your representative.

Yours sincerely

[insert name]

Line Manager

CC: Human Resources

Management Guidance Note: Sickness Absence Review Meeting – checklist

Opening the meeting:

- ❑ Introduce all parties present and explain roles
- ❑ If the employee was offered trade union representation and/or to be accompanied by a work colleague (as per invitation letter) and has come to the meeting alone, confirm the employee is happy to continue without representation
- ❑ Explain that this is a formal absence review meeting in line with the Council's Sickness Absence Policy and Procedure
- ❑ Provide a copy of the Sickness Absence Policy and Procedure
- ❑ Highlight the section which is applicable to the employee
- ❑ Confirm that the employee is at stage One/Two of the procedure
- ❑ Check that the employee understands the process
- ❑ Confirm that the employee can take time out of the meeting if needed
- ❑ Whilst the meeting is part of a formal process, keep the meeting as informal as possible
- ❑ Explain that the objective of the meeting is to look at the employee's sickness absence record and to find ways of reducing the level of sickness absence to an acceptable level
- ❑ Explain that the meeting is part of a positive move to improve the employee's attendance.
- ❑ Explain that as a reasonable employer, the Council expects and tolerates a certain amount of sickness absence
- ❑ Explain the importance of Best Value Key Performance Indicators and the target average figure for days of sickness absence per employee at the Council is 9.5 days per annum
- ❑ Explain that the employee's absence is above average and very high

Review the sickness absence record:

- ❑ Examine the sickness absence record in some detail:-
 - ✓ Discuss the breakdown of absence
 - ✓ Is there a common thread?
 - ✓ Are there any underlying medical reasons for the absence?
 - ✓ Is there a pattern of absence?
 - ✓ Have the trigger points been breached as per Section 9.0 of the policy and procedure?
 - ✓ Are the absences work-related?
 - ✓ Does the employee have a disability?
- ❑ Provide the employee with an opportunity to discuss absences
- ❑ Examine the reasons for the absence
- ❑ If you have concerns, raise them
- ❑ The focus should not be on the legitimacy of the causes of sickness absence, but on the level of sickness absence

Actions to consider:

- ❑ Suggest that the employee returns to their GP if they feel that any existing medical conditions are not being managed appropriately
- ❑ Do any adjustments need to be made to workloads, patterns or practices? If so, Occupational Health may need to be consulted

- ❑ If the employee is experiencing difficulties as a carer, are there any adjustments that can be made, e.g., changes to start times, hours etc., on a temporary/permanent basis?
- ❑ Consider whether referral to Occupational Health is necessary
 - ✓ As part of our duty of care, does the Council need to know the extent and likely duration of the condition and whether treatment and employer support will bring the absenteeism to an acceptable level?
 - ✓ Persistent short-term absences may be the result of a recurring condition or symptomatic of an underlying medical condition.
 - ✓ In this case, referral may be necessary
 - ✓ Explain the Council's duty of care to help the employee find out whether the employee has a disability

Consider whether it is appropriate to withdraw the right to self-certification

Closing the meeting and target setting:

- ❑ An improvement in attendance is required – clarify what you would expect
- ❑ Remember that the period for which improvement is needed needs to be of sufficient length to allow for adequate improvement
- ❑ Agree the arrangements for monitoring the attendance over the review period with the employee
- ❑ Explain the likely consequences of failing to achieve improvements and targets set, i.e., a possible referral to the next stage of the process
- ❑ Confirm the matters discussed and agreed in writing within 5 working days of the meeting taking place. See sample letters in Appendix H and J for further information

SAMPLE LETTER

The Officer to contact regarding this matter is

Direct Line (01527) 88

Your Ref:

My Ref:

Strictly Private and Confidential

[Insert Title, First Name and

Surname]

[Insert Address]

Dear [insert first name]

Re: Stage Three - Final Sickness Absence Review Meeting

I am writing to confirm the outcome of the **final sickness absence review** meeting I held with you on [date] at [time]. The purpose of the meeting was to discuss with you my concerns relating to your levels of sickness absence. Also present at this meeting was [name].

I explained that your line manager, [name], had expressed concerns to me regarding your absence levels. The reason for these concerns was that you have had [] days/episodes/instances of absence during the past [] months. I gave you a copy of your sickness absence record at the meeting.

As you are aware, you have met with you line manager on [] occasions prior to this review meeting. At these previous meetings your absence was discussed, support was provided to you such as [] and actions were agreed such as [].

At the review meeting on [date], we discussed further your sickness absence levels and reasons for your absence. Your response was []. We also discussed whether there was any additional support that could be provided to you such as [].

We agreed that the following measures would be put in place:-
[include reference to support measures agreed and targets set, with timescales]

I reiterated that it was important that if you continue to experience problems that impact upon your attendance record you discuss these with you line manager, so that he/she can determine whether any further support could be made available to you.

I hope that the measures that we have agreed will help you to improve you attendance. However, if there is an insufficient improvement in your attendance levels during the next [] months, I may need to refer the matter to the Head of Service, [name] who may choose to hold a Case Review Hearing with you. I should warn you that one possible outcome of the Case Review Hearing is that your employment could be terminated.

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I hope that this clarifies the points we discussed and that there is a significant and sustained improvement in your attendance level.
[if appropriate] I enclose a second copy of this letter that you might wish to pass to your representative.

Yours sincerely

[insert name]

Line Manager

CC: Human Resources

STRICTLY CONFIDENTIAL

Bromsgrove District Council Referral Form

Part 1 – Information required by the OH Nurse

a) Details of Person making Referral

Name: **Position:** Human Resources Advisor

Date of referral: **Contact telephone number:** 01527 881276

Contact address: The Council House, Bromsgrove District Council, Burcot Lane, Bromsgrove, B60 1AA

Managers name if different from above:

b) Employee Details

Name: **Date of Birth:**

Job title: **Work base:**

Hours worked: per week **Work pattern:**

Employed by Authority since: **Employed in current job since:**

Contact address:

Member of the local government pension scheme?
Has the individual been referred to the OH Physician before?

c) Details of Illness/Medical Condition

Absence record

Date	Reason

First date of current sickness absence:

Stated illness, symptoms or presenting condition:

Has the individual seen their GP and/or specialist? Is the individual awaiting the results of any treatment/tests? What has the GP/specialist advised? What treatment/medication has been prescribed?

If the illness or injury is caused by, or made worse by work, please provide details, including a copy of the accident report form and risk assessments.

d) Impact on Work

Please indicate the environment in which the individual works and any requirements that could impact on the individual's medical condition.

Please indicate whether the individual has experienced or anticipates any difficulties in managing the requirements of their job.

Bromsgrove District Council

Please indicate whether adjustments/adaptations have already been made to help the individual undertake their job.

e) Possible Options to Pursue

Has the individual made any suggestions as to what options they wish to pursue (e.g. phased return, redeployment, ill health retirement, etc)?

What is the authority's view on these options?

Bromsgrove District Council

Part 2 – Information requested of the OH Nurse (Please tick those for which information is required)

- What is the prognosis?
- Is this prognosis permanent or temporary?
- Could the condition be covered by the Disability Discrimination Act?
- Is the employee's medical condition caused or made worse by work?
- If recovery is anticipated, what is the likelihood of recurrence in the foreseeable future, what nature might this take and what impact may it have on attendance and performance? Are there any steps that the authority can take to reduce the risk?
- What is the likely timescale for the employee to return to work/recover from their condition?
- Is there any additional support that the authority could provide to the employee?
- Would a phased return to work be appropriate? If so, over what period and what measures should be put in place (e.g. reduced hours, change of duties, etc)?
- Are there any more permanent adjustments that could be made to the employee's job (e.g. reduced hours, change of duties, etc)?
- If the employee is unable to return to their current job, should medical redeployment be pursued? Please provide details of potentially suitable areas of work and whether this is a permanent or temporary change.
- If the employee is permanently incapable of returning to their current job and can not perform any comparable¹ job, should ill health retirement be pursued?

Other (please detail)

Authorisation:

I confirm that I have discussed the reasons for this referral with the employee concerned

The employee **has/has not** received a copy of this referral form.

Signed:

.....Date:.....

Printed:.....HR Advisor.....

Invoice Address: BDC PO Box 11546, Bromsgrove, B60 1YW

¹ "Comparable employment" means employment in which, when compared to the employee's current employment:

- a) the contractual provisions as to capacity either are the same or differ only to an extent that is reasonable given the nature of the employee's ill health or infirmity of mind or body, and
- b) the contractual provisions as to place of work, remuneration, hours of work, holiday entitlement, sickness or injury entitlement and other material terms do not differ substantially from those of the employee's current employment.

Rehabilitation Checklist: Is Rehabilitation within the current job feasible?

When considering rehabilitation within the current job, the general points below should be considered as well as specific issues related to the adjustment being pursued:

- ❑ Is rehabilitation a reasonable and practical option for the Council? If not, then the Council needs to have very clear justification particularly if the employee could be disabled and therefore subject to the requirements of the Disability Discrimination Act to make reasonable adjustments.
- ❑ If considering a *reduction in hours*, have all options been considered? For example, it may be possible to put in place job sharing arrangements instead of traditional part time working hours.
- ❑ If considering *changes to working practices*, has appropriate consideration been given to employing another person to undertake specific parts of a job?
- ❑ Is this a practical and cost-effective option? Is appropriate technology available to support an individual, for example, whilst home working?
- ❑ If the *adjustment is only for a specific period*, have review mechanisms been agreed and implemented? Are the Council and employee clear about the timescales? Have contingencies been worked out should plans fail? Will the review take place between the manager and the employee, or will advice also be sought from Occupational Health at appropriate points?
- ❑ If the *adjustment is permanent*, does the employee understand and agree to the implications of this, such as the impact on duties they will undertake and any changes to employment terms, i.e., reduced holiday entitlement, reduced pay, reduced pension contributions, etc.,?
- ❑ Is there documentation that needs to be completed to confirm the arrangements including confirmation for the employee? Has a variation of contract letter been issued to the employee?
- ❑ Have payroll and pensions been informed of any contractual changes to hours and/or pay?
- ❑ Will the employee require any additional support from the Council to aid their rehabilitation?
- ❑ Are there any external support mechanisms that can be investigated to help the employee or to help the Council in implementing the arrangement, for example, funding from Access To Work (see section 20.0 of policy)?
- ❑ Has the Council consulted fully with the employee and their trade union representative, if appropriate, throughout the process?

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- ❑ Has a risk assessment review indicated any health and safety implications for the individual or their work colleague? Are further controls required?
- ❑ Has the Council maintained accurate records of the action they have taken in trying to enable the employee to return to work?

The Officer to contact regarding this matter is

Direct Line (01527) 88

Your Ref:

My Ref:

Personal and Confidential

[Insert title, name, surname]

[insert address]

[insert date]

Dear [name],

Phased Return to Work after Sickness Absence

Further to our recent discussion, I am writing to confirm the arrangements for your return to work from sick leave.

Providing your GP agrees that you are well enough to return to work, we have agreed that you will return on [date] on a part-time basis for up to [number] weeks from the date of your return. Initially, you will work [time] gradually increasing the hours worked as you feel better. If you feel that the arrangement is either too much or too little, please let me know.

There are a number of conditions regarding your return to work on this basis which need to be specified:

1. You will return to work on [date] on a part-time basis. During your first week back I will meet with you to discuss your working arrangements and we will then meet on a regular basis to review your progress.
2. From [date] until the date you resume full-time working, you will receive your full salary irrespective of your actual work commitment.
3. Under the Benefit Agency Regulations, a person is either fit or unfit for work. Consequently, your return to work, albeit on a part-time basis, will disqualify you from receiving any State Sickness Benefit. You will of course, need to obtain a medical certificate from your GP allowing you to return to work on [date]. You will also need to complete a Self-Certification Form to confirm your actual date of return to work. The medical certificate and the Self-Certification Form should be passed to me in the usual way for signature at your return to work interview.

I am sure that everything will go smoothly in the transition back to full-time working which we hope will result in your working full time by [date]. I will meet with you on [date] to review your progress.

I trust that the contents of this letter are clear. If you have any questions or concerns relating to the conditions of your return, please do not hesitate to contact me. I should

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be grateful if you would confirm that you understand and accept the arrangements detailed above by signing and returning the attached duplicate copy of this letter.

With best wishes.

Yours sincerely

[Name]
[Position]

I confirm my acceptance and understanding of the arrangements for my return to work as set out above.

Signed:..... Date:.....

Case Review Hearing Checklist:

Points to consider when determining whether to dismiss:

- Has the Council followed its policies and procedures?
- Has medical advice been sought on issues such as the nature of the illness, the likelihood of it recurring or some other illness arising and the length of the absences and the periods of good health between them?
- Has the Council shown that the employee's health situation is having an adverse effect on their ability to perform their duties efficiently?
- Has the Council shown that the employee's health situation is having an adverse impact on work colleagues?
- Have alternative options been investigated to attempt to retain the employee in employment, such as reasonable adjustments, redeployment, phased returns etc?
- Is the Council clear what benefits (if any) the employee is eligible for under the Local Government Pension Scheme?
- Has the Council fully consulted with the employee and their representative if applicable?
- Has the employee been made aware that if their ill health does not improve the Council may need to make decisions about their continuing employment?

Points to consider following the decision to dismiss:

- Is the employee aware of the appeal procedures in place?
- Has the employee been provided in writing with the correct period of contractual notice of termination of employment?
- Has the Council determined whether any annual leave is due to the employee?
- Has the Council completed the necessary paperwork to ensure that pay is stopped following the employee's final date of employment?
- Have the appropriate leaver forms been issued to the pension section of the administering authority?
- Has a LGPS leaver option form been issued to the employee (if this is not done on behalf of the employer by the pension fund administering authority?)
- Will the employee require any additional support from the authority?
- Are there any external support mechanisms that can be investigated to help the employee?
- Have there been any changes in the employee's medical condition or circumstances during the notice period that may affect the Council's decision to dismiss, which should therefore, be considered before the end of the notice period?
- Has the Council maintained a record of the actions they have taken?