Absence and Wellbeing Procedure FAQ’s

Below are some draft FAQ’s about absence and the absence management procedure. They are intended as a jumping off point for developing a comprehensive set of questions and responses so feel free to add questions, add answers or amend questions and answers as and when you have time.

1. Who should employees contact if they need to take unplanned leave?

Employees should notify their line manager by telephone as soon as they know they will be unable to attend work for any reason. They should not use text, email or other messaging applications to notify line managers of their absence

1. How, where and when should managers record sickness absences?

All sickness absence should be recorded in iTrent using People Manager. There is a people manager guide available which managers can follow to record the absence

<http://www.intouch.ccc/eLibrary/Content/Intranet/536/671/5053/6001/4203216566.docx>

1. How much sick leave does an employee need to take before it becomes a cause for concern?

Normally, sickness absence becomes a cause for concern after an employee has met the triggers of either had 8 days, or 3 occasions of absence within a rolling 12 month period. At this point, line managers would usually arrange a support meeting with the employee to discuss reasons for the absence, any support the employee may need, and improvement targets. Detailed guidance on the procedure can be found in the Absence and Wellbeing Procedure document on Intouch.

1. If an employee has a disability, is the absence handled differently?

If an employee has a disability the absence is managed in the same way as any other absence, however consideration should be given to the disability and reasonable adjustments. Triggers could be extended to take account of higher levels of absence, and Occupational Health will also be able to provide more specific advice around adjustments for the individual concerned.

1. What is disability leave?

Disability leave is the provision of up to 10 days leave an employee with a disability can take for the following reasons:-

Planned leave – Counselling/therapeutic treatment, recuperation and rehabilitation following an operation/treatment, planning and implementing adjustments to the workplace/job, a phased return to work or period of time off for a newly disabled employee.

Unplanned leave – breakdown of usual arrangements at work, breakdown of usual arrangements which make it difficult to get to work.

Disability leave is recorded through iTrent as sickness absence with the reason being disability leave, and is not counted towards any sickness absence triggers.

1. At what point does a sickness absence become ‘long term’?

Sickness absence would generally be classed as long term after 28 days of continuous absence.

1. How should managers treat a long term absence differently from repeated short term absences?

During a period of long term absence a manager should arrange a series of absence management meetings. The manager can hold as many meetings as needed, but must explore all available options to support the employee before progressing to a case conference. These options are:-

* Return to/continuation in existing post
* Return to/continuation in existing post with reasonable adjustments
* Phased return to work
* Redeployment to another post within the council
* Dismissal on the grounds of ill health – where an employee is dismissed on the grounds of ill health and they meet the qualifying criteria in the LGPS regulations, then they may qualify for ill health retirement
1. When do employees need to complete a self-certification form and when do they need a fit note from a doctor?

An employee should complete a self-certification form to cover the first 7 days of the absence. This can be done on their return to work. Where an absence has lasted for more than seven days, this period would need to be covered by a fit note issued by a doctor.

1. What information should a doctor’s fit note provide?

Initially a doctors fit note will provide information to advise that the employee is not fit for work, the reason they are not fit and the dates of the period the fit note covers (this may be for example 4 weeks rather than specific date). Following a period of absence a doctor’s fit note may indicate that an employee is fit to return to work and the doctor may provide specific advice on the return to work such as a phased return to work or adjustments.

1. When should a manager refer an employee for an appointment

with the Occupational Health service?

For stress, work related injury and/or musculoskeletal injury; a referral to Occupational health should be made straight away. Any other referrals should be made after 3 weeks of absence or at the most appropriate time.

When an employee is due to return to work, the referral should be made in plenty of time **before** the employee is due to return to enable time for them to have an Occupational Health appointment and the manager to receive a report with advice on how to support the employee’s return to work.

1. Do employees need to give consent before an Occupational Health appointment can be made?

An employee must give consent for an occupational health referral to be made. If an employee does not consent then the manager must make it clear that any decisions in relation to that employee’s sickness decisions will only be based on the information the manager has available.

1. How can I access an absence report for my team?

Managers can access absence reports through iTrent. A full explanation of how to do this is available on the Service Centre page on InTouch under iTrent People Manager & MyHR.

<http://www.intouch.ccc/eLibrary/Content/Intranet/536/671/5053/6001/42032165824.docx>

1. When should Ill-health retirement be considered?

Ill health retirement should be considered once all other options have been explored and ruled out. An employee can request a referral for an assessment for ill health retirement, but their manager must then make them aware that by requesting the referral the employee is advising the council that they are not fit to continue in their employment. If the employee does not meet the criteria, they will be progressed to a case conference which may result in their dismissal on the grounds of ill health.

1. When should the AEP be considered?

For long term absence the AEP should be considered after a return to the employees post has been explored and ruled out. The AEP could also be considered if an injury or illness means the employee is no longer able to carry out the duties of their role.

1. What are reasonable adjustments?

These are adjustments in relation to protected characteristics (i.e. Disability, Religion etc.). Associated with the Equality Act. There is no definitive list of reasonable adjustments that can be made. They depend on the case and what is ‘reasonable’ (considered to be appropriate and fair). These are generally permanent adjustments.

1. What are temporary adjustments?

Temporary adjustments are a reduction or amendment to ‘tasks’ required in an employee’s role. These are generally applied for temporary periods, such as when an employee is undergoing medical treatment or rehabilitation following injury/illness.

1. What does it mean if Occupational Health advises that an employee may come under the Equality Act?

In terms of sickness absence, this applies to employees who have declared a disability and whose sickness absence may be related to their disability. In these cases it is important that any return to work/improvement targets take account of the employee’s disability. A fuller explanation of this is given in Appendix 4, section 5 of the Absence and Wellbeing Procedure.

1. If an employee is absent due to an accident at work, how should this be handled?

There is now specific guidance for managers on how to respond to absences resulting from accidents in the workplace. This can be found in the Absence and Wellbeing tab on the People Management section of Intouch. If managers have any doubts about this guidance, they should contact People Management to discuss appropriate responses.

1. What should I do if an employee is AWOL?

The key thing is to contact the employee, firstly to ensure the employee’s wellbeing and subsequently to establish a reason for absence. You could do this through any means possible, including phone calls, text messages and emails. If you have exhausted all possible contact options an you still cannot raise the employee, you should contact People Management to discuss next steps.

1. What do I need to do for a stage 4 meeting?

 Prior to a stage 4 meeting, the manager will need to produce a Stage 4 casefile containing the following documentation (report templates are available from People Management):

1. Absence report: a summary of all absences to date leading to the stage 4 meeting
2. Employee’s Job Description
3. Employee’s Role Profile
4. All correspondence relating to the absence including:
	* Invitations to support/stage meetings
	* Action plans
	* Contact Logs
	* Outcome letters from support/stage meetings
5. Occupational Health Referrals and Reports
6. Any other documentation relevant to the case.

Once this file has been compiled it should be sent to People Management, who will check it to make sure everything is in order before the stage 4 meeting is convened.

1. What do I do if an employee has periods of long term and short term absence without hitting a trigger?

If an employee has periods of both long term and short term absence without hitting a trigger then this may be a pattern or trend which can be progressed through the short term process within the procedure. There may also be lapsed warnings which can be progressed as detailed below:-

If the employee has any of the below then they can progressed to the next stage of the procedure

* 2 lapsed stage 1 warnings in the last 3 years – move to stage 2
* 2 lapsed stage 2 warnings in the last 4 years – move to stage 3
1. What is a reasonable timescale for modified duties/phased return to work and can this be extended?

For grey book employees who undertake operational duty, modified duties should be no longer than 6 weeks (4 weeks on category 2 and 2 weeks on category 1). In exceptional circumstances this can be extended but any modified duties should have a clear timescale for completion and not last any more than 12 months in total.

1. What are the lead times for Occupational health appointments and can someone return to work before they have an appointment?

The timescale for appointments with occupational health are XXXX. However managers should submit the referral as soon as possible. If the referral is not submitted early then it will be likely that the employee will not have had an appointment before their return to work date.

In some cases it may be possible for the employee to return to work ahead of the appointment with Occupational Health. The manager must take advice and every case must be considered on its own merits.

1. What happens if an employee is doing modified duties and then we are told they will not be fit to do operational duties again?

As modified duties are temporary and have a timescale attached to them the employee will not be able to do this in the long term. If the employee is not fit to do their role then they should be placed on the AEP and a referral should be made to Occupational Health so they can be assessed for ill health retirement. When the modified duties have ended then the employee would need to be signed off sick by their GP and the absence and wellbeing procedure should be followed. Advice should be sought from People management in these cases.

1. What happens if an employee has a cycle of long term sick, Short term sick and modified duties which is repeated continuously?

If an employee has periods of modified duties, long term and short term absence without hitting a trigger then this may be a pattern or trend which can be progressed through the short term process within the procedure. There may also be lapsed warnings which can be progressed as detailed below:-

If the employee has any of the below then they can progressed to the next stage of the procedure

* 2 lapsed stage 1 warnings in the last 3 years – move to stage 2
* 2 lapsed stage 2 warnings in the last 4 years – move to stage 3
1. If an employee is on modified duties then goes sick again is this counted as one period of absence or two?

The absence would be counted as one period if the following criteria is met:-

* Modified duties period has been short term
* Absence reason is the same

If the employee has been on modified duties for a long time or the absence is for a different reason then this would be counted as two periods of absence. Every case should be managed on a case by case basis and advice sought from People Management.

1. Is absence recorded as calendar days or working/duty days for the purposes of triggers?

For the purpose of calculating absence in Trent this is recorded as working days lost however for calculating triggers all absence is counted in calendar days. The purpose of this is that the employee is not fit to work irrelevant of if they are scheduled to work or not and as such they are recorded as not available for work due to sickness absence.