### Document Title:
Sickness Absence Policy and Procedure

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### Policy Owner:
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- Equality Impact Assessed: 12 May 2017
- JNCC: 26 June 2017
- Implementation date: 1 September 2017
1.0 - PURPOSE

The University is committed to ensuring that staff who are suffering from ill-health, including mental and physical illness and disability are treated with understanding and sensitivity whilst achieving an acceptable level of attendance.

The University will demonstrate a supportive attitude towards staff who incur injury, who have a history of high levels of sickness or who suffer longer-term illness.

Reliable data on sickness absence is vital to informing effective policy and practice. A standard procedure for the reporting and recording of sickness absence is therefore an essential requirement so that the University can take appropriate action to minimize the causes of absence.

Equally important is the need for the University to adopt a fair and consistent approach to the management of sickness absence across all departments and for all categories of staff.

Other objectives that the policy aims to achieve are:
- To ensure the promotion of employees' health, safety and welfare
- To ensure a fair and consistent approach and application to the recording and management of sickness absence across all departments and for all categories of staff
- To identify the causes of sickness absence and recommending, where practical, changes necessary in working practices or environment
- To ensure the University complies with the Equality Act 2010 and relevant legislation
- To ensure effective operational management taking account of the points made above

It should be stressed that the primary objective of this policy is neither to question the legitimacy of sickness absences nor to pressurise staff into returning to work before they are fully recovered. At the same time it recognises that staff absences do have an impact on other staff and their workloads.

2.0 - SCOPE

This procedure applies to all members of staff at the University regardless of the type of contract that they are employed under.

3.0 - DEFINITIONS

<table>
<thead>
<tr>
<th>Authorised staff</th>
<th>Limited to Faculty Dean/Divisional Director, Head of Department, Manager, Departmental Officer, Department Absence Inputter, Human Resources and Occupational Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Assistance Programme (EAP)</td>
<td>An online information and resource library which offers factsheets, self-help guides, podcasts and links for work life, home life and wellbeing and available to all employees, with short term session based counselling where</td>
</tr>
<tr>
<td><strong>Health and Safety Executive</strong></td>
<td>HSE</td>
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<td>-------------------------------</td>
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</tr>
<tr>
<td><strong>Human Resources</strong></td>
<td>HR</td>
</tr>
<tr>
<td><strong>Ill Health Retirement (IHR)</strong></td>
<td>When an employee retires due to ill health. An employee can submit an ill health retirement application which is considered by their pension provider</td>
</tr>
<tr>
<td><strong>Long-term absence</strong></td>
<td>Classified as 28 calendar days or over</td>
</tr>
<tr>
<td><strong>Manager</strong></td>
<td>Employees of the University who have a responsibility for organizing or directing the activities of one or more members of staff</td>
</tr>
<tr>
<td><strong>Next of Kin</strong></td>
<td>The closest living relative or family member to the employee</td>
</tr>
<tr>
<td><strong>Occupational Health (OH)</strong></td>
<td>Focus on how the working environment can affect an employee’s health and equally how an employee’s health can affect their ability to do their job. The emphasis is on preventing ill health at work and promoting good health.</td>
</tr>
<tr>
<td><strong>Phased return to work</strong></td>
<td>Initial period of return to work on less than full duties/hours</td>
</tr>
<tr>
<td><strong>Reasonable adjustments</strong></td>
<td>Making temporary or permanent adjustments to help an employee carry out their role.</td>
</tr>
<tr>
<td><strong>Redeployment</strong></td>
<td>Movement into another role in the University</td>
</tr>
<tr>
<td><strong>Return to Work Meeting</strong></td>
<td>An informal meeting between the Manager and the employee, when the employee returns to work following a period of absence</td>
</tr>
<tr>
<td><strong>Self-certification</strong></td>
<td>Employees are required to record all absences and self-certify (on the Core MyHR portal)</td>
</tr>
<tr>
<td><strong>Short-term absence</strong></td>
<td>Classified for periods of absence, 28 calendar days or less</td>
</tr>
<tr>
<td><strong>Sickness entitlement</strong></td>
<td>Amount of pay an employee is entitled to when absent from work</td>
</tr>
<tr>
<td><strong>Statement of Fitness for Work</strong></td>
<td>Issued to an employee by their GP to provide evidence of the advice they have given about their fitness for work. They record details of the functional effects of their patient’s condition so the patient and their employer can consider ways to help them return to work.</td>
</tr>
<tr>
<td><strong>Statutory Sick Pay (SSP)</strong></td>
<td>Weekly allowance an employee receives if they are too ill to work. It is paid for a maximum 28 weeks, and to qualify an employee must be off work sick for 4 days or more.</td>
</tr>
<tr>
<td><strong>The University</strong></td>
<td>The Employer</td>
</tr>
</tbody>
</table>
4.0 - ROLES AND RESPONSIBILITIES

To ensure appropriate application of the policy, the following responsibilities have been identified.

4.1 - Head of Department

- Establish and maintain a culture that promotes employee’s health, safety and welfare
- Ensure accurate monitoring and recording of sickness absence within the department

4.2 - Manager

- Ensure a fair and consistent approach to the recording and management of sickness absence across the department and for all categories of staff
- Minimise the impact of sickness absence on the department’s operations and workload of staff members e.g. cover arrangements
- Forward the Statement of Fitness for Work provided by employees to the relevant HR Advisor as soon as possible after receipt
- Seek the authorisation of the Head of Department (or equivalent) as required
- Follow the policy and procedure when monitoring and managing sickness absence
- Identify causes of sickness absence and recommending, where practical, changes necessary in working practices or environment taking into account advice from Occupational Health and HR
- Seek advice and support from HR and other services such as Occupational Health, EAP and Access to Work

4.3 - Human Resources

- Provide guidance and advice to employees, Managers and Heads of Department regarding the monitoring and management of sickness absence and the relevant legislative requirements
- Liaise with Managers on the support available e.g. EAP, Occupational Health, Access to Work
- Liaise with the relevant pension scheme, in cases of ill health retirement
- Monitor and review the working of the policy, including monitoring for diversity impact, and identifying patterns and trends to spot underlying causes

4.4 - Employees

- To contact their Manager, normally by telephone and within one hour of the normal start time on the day of the first day of absence. Exceptionally it may be necessary for the next of kin to contact the University on an employee’s behalf on the first day of absence only
- To keep their Manager informed of the circumstances of their absence and
remain in touch throughout. All such information will be treated in the strictest confidence

- To record and submit certification of sickness absence:
  - Submit self-certification for absences of up to seven calendar days, including half day sickness on Core MyHR immediately on return to work
- Obtain and submit a valid Statement of Fitness for Work signed by a Doctor for absences in excess of seven calendar days as soon as possible after issue to the relevant Manager
- Adhere to the notification and certification procedures as failure to do so may result in ineligibility to receive sick pay
- Monitor and consider the impact of any changes to pay as a result of sick pay entitlement
- Respond to requests for further information and with regard to arrangements for meetings
- Inform their Manager when they are fit to return to work, even if this is not one of their normal working days to ensure that absence is recorded accurately

4.5 – Trade Union Representatives

- To support their members at the formal stage of the process, attending meetings and advising on process
- The same standards will apply to Trade Union Representatives as to all other employees. However, where application of formal action is being considered against a Trade Union Representative, the case must first be discussed with a Senior Trade Union Representative or full time Official

5.0 - CONFIDENTIALITY

It should be emphasised that employees have the right to confidentiality regarding ill health. Such records constitute sensitive personal information under the Data Protection Act 1998 and considerable care must be given to the security of records. Whilst recognising the need for confidentiality, the best support can only be put in place with full knowledge of the condition.

Those responsible for maintaining sickness records must ensure that absence records are held in a secure place and made available only to authorised staff.

6.0 - SICKNESS ENTITLEMENT

Sickness entitlement is based on the length of accrued service on the first day of absence, taking into account any periods of sickness absence in the 12 month period before the start date of the latest sickness absence:
### Table:

<table>
<thead>
<tr>
<th>Period</th>
<th>Full Pay</th>
<th>Half Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td>During first five months of service</td>
<td>one month</td>
<td>no entitlement</td>
</tr>
<tr>
<td>During 6th to 12th month of service</td>
<td>one month</td>
<td>one month</td>
</tr>
<tr>
<td>During second year of service</td>
<td>three months</td>
<td>three months</td>
</tr>
<tr>
<td>During third year of service</td>
<td>four months</td>
<td>four months</td>
</tr>
<tr>
<td>In fourth year and beyond</td>
<td>six months</td>
<td>six months</td>
</tr>
</tbody>
</table>

For periods of incapacity the University will continue payment of full salary as set out above. If the incapacity is due, or believed to be due until proven, to the negligence of a third party, then the payment will be by way of a loan repayable in whole or in part from any damages which may be recoverable from the negligent party.

### 7.0 - REPORTING AND RECORDING OF SICKNESS ABSENCE

Members of staff must keep their relevant Manager informed of the circumstances of their absence and provide such certification as is necessary.

Monitoring absence facilitates the early identification of an employee’s health problems and can reduce levels of absence. It also enables the University to identify working practices or environments which may be contributing to absence through ill health.

Managers must record, monitor and manage the attendance of all their staff. This involves monitoring levels and patterns of absence, maintaining a reasonable level of contact during periods of absence, conducting Return to Work Meetings and taking appropriate action in accordance with the sickness absence policy and procedure.

Staff must, wherever possible, normally telephone their Manager within one hour of their normal start time on the first day of absence and maintain a reasonable level of contact during periods of absence as detailed in section 4.4.

Each department or division must have a nominated person who is responsible for maintaining an accurate record of sickness absence. Sickness absence should be recorded via Core MyHR and a Sickness Absence Inputting Manual is provided to guide users through the process.
8.0 - COMMUNICATION

Contact during an absence
During periods of absence both Managers and employees are required to maintain a reasonable level of contact to ensure appropriate support is received. The Manager and employee should agree the frequency of communication however this should be no less than on the receipt of each Statement of Fitness for Work. For Statement of Fitness for Works which are for an extended period of time such as 3 months or more, contact should be agreed at a minimum of every 4 weeks, giving due consideration to the reason for absence.

9.0 - MONITORING PROCEDURE

The University has a responsibility to ensure that all its staff are aware of their responsibilities in respect of the sick pay scheme and that the sick pay scheme is operated effectively.

Monitoring absence in a systematic manner also facilitates an early identification of an employee's health problems and instances of working practices or environments, which may be contributing to sickness absence.

In dealing with sickness absence, the University must ensure a consistent approach between departments and various categories of staff. HR will, therefore, play a major role in advising departments how to manage a particular case.

The Manager will regularly review the sickness records of employees, exercising their discretion in determining what action is appropriate in each case.

The following indicators may be used to prompt a review and decision in each case:

- 6 or more working days' absence in the previous three months;
- 10 or more working days' absence in the previous twelve months.

10.0 - APPROACHES TO SICKNESS ABSENCE

High levels of sickness absence can be categorised in one of the following ways.

If departments are concerned about any case that does not meet the categories, the matter should be discussed with their HR Advisor.

10.1 - A one-off absence
In these cases, for example a minor operation, a period of recuperation, and possible therapy, following the operation will usually be sufficient to enable a successful return to work and no further action should be necessary other than having a Return to Work Meeting in accordance with section 12.0.

10.2 - A series of absences due to one diagnosed cause
Absences falling into this category may require Occupational Health advice and/or the Disability Service as to the advisability of reasonable adjustments or exploration of the possibility of redeployment of an employee into another job, or job re-design as described in section 15.0. These types of absences will normally be dealt with in accordance with the procedures set out below for dealing with long term sickness.
10.3 - Long term illness
Absences falling into this category may require Occupational Health advice and/or the Disability Service as to the advisability of reasonable adjustments or exploration of the possibility of redeployment of an employee into another job or job re-design as described in section 15.0.

Where every effort has been made to accommodate adjustments, job re-design, or redeployment, and there are no other feasible options, ill-health early retirement (IHR) or termination of employment will need to be considered and will be dealt with in accordance with section 16.0.

During periods of long term absence, both Managers and employees are required to maintain a reasonable level of contact to ensure appropriate support is received. The Manager and employee should agree the frequency of communication however this should be no less than on the receipt of each Statement of Fitness for Work. For Statement of Fitness for Works which are for an extended period of time, contact should be agreed at a minimum of every 4 weeks, giving due consideration to the reason for absence.

Managers and employees should also arrange to meet face to face in an informal setting to ensure a reasonable level of support continues throughout the absence. These meetings should take place on a regularly agreed basis, giving due consideration to the reason for absence.

10.4 - Absences due to minor unrelated illnesses
Where there have been a number of absences due to minor and unrelated illnesses Managers must share their concerns with an employee about their level of sickness absence during the Return to Work Meeting.

It should be stressed that the aim of any discussion and resulting actions would not be to cast doubt on the legitimacy of absences, but to indicate that they were having adverse operational effect and that improvement in attendance levels is required.

In cases where there is no improvement as a result of such discussions, this could potentially lead to formal action in accordance with section 11.0 of the Capability Procedure.

10.5 - Absences due to disability, maternity/pregnancy or a work place accident
Where absences fall within this category, Managers should seek advice from Human Resources to obtain information on whether a referral to Occupational Health is appropriate, provision of reasonable adjustments, conducting risk assessments and whether support from Access to Work is viable.

10.6 - Absences due to stress or other mental health conditions
It is important to recognise the symptoms of, and absences that may be due to, mental health conditions, stress, or otherwise to be reported to be caused by work. In these instances, the Manager must communicate with the employee to establish the cause, address any identified stressors/triggers, and assess the risk, normally doing so by completing a stress risk assessment.
Exploration of reasonable adjustments, the possibility of redeployment or job re-design as described in section 15.0, should be considered where appropriate.

Managers should seek advice from their HR Advisor for support when completing a stress risk assessment.

It may also be necessary for Managers to arrange an early referral to Occupational Health and/or encourage the employee to seek support from their GP, and to contact the EAP.

11.0 - APPROACHES FOR DEALING WITH HIGH LEVELS OF ABSENCE

Where there is any concern for a staff member’s attendance, every effort should be made to deal with increasing levels of sickness absence by informal discussion in the first instance, to provide any early support and avoid the need for formal action wherever possible.

11.1 - Informal action

When a member of staff meets the trigger points as detailed in section 9.0, at the Return to Work Meeting (section 12.0), the Manager must discuss with the employee their level of sickness absence and confirm that the employee has met one of the trigger points.

This should be an informal discussion between the manager and employee, where the Manager would normally review the member of staff’s sickness record, highlighting any concerns and offering support where appropriate. The Manager should give the member of staff the opportunity to raise any mitigating circumstances and/or contributing factors for the levels of absence, allowing the Manager to act upon the information received.

An outcome of the meeting would normally include the setting of an attendance target in line with section 9.0, in an attempt to improve the employee’s attendance at work. A referral to Occupational Health should also be considered to ensure the employee is supported in sustaining their attendance, and the Manager may also wish to consider implementing appropriate temporary adjustments, prior to any targets being set. An improvement in attendance should normally be expected within 1-3 months.

Where informal action has been exhausted and there has been a failure to keep a satisfactory and/or sustained improvement in attendance, formal action should then be instigated. This will be in accordance with section 11.0 of the Capability Procedure, where appropriate action should be invoked and followed at the relevant stage.

Further advice on this section can be sought from your HR Advisor.
12.0 - RETURN TO WORK MEETINGS

Managers should discuss a period of absence with an employee on the day of their return to work. This meeting should be informal and carried out face to face where possible, in a supportive manner and in private.

The aims of the discussion should include confirming the cause of the absence and ascertaining whether the employee needs any further support in making a successful return to work; welcoming them back into the workplace, confirming they are well enough to return to their duties, and updating them on any changes during their absence. Concern for the welfare of the employee should be addressed, and Managers must ensure the situation is being monitored to minimise further absences and impact on the department. If the employee has a Statement of Fitness for Work, the details of this should be discussed to ensure the Manager is aware of any health concerns, so they can consider the advice of the GP and act on this as appropriate.

As an outcome of this meeting, a referral to Occupational Health may be required for further assessment and/or support, in accordance with section 13.0.

12.1 - Phased return to work

In some instances after a prolonged long term absence, an employee may not be fit to return to full duties and working hours immediately, but are able to return on a phased basis, to ensure rehabilitation back into the workplace. A phased return to work should be considered in cases whereby a staff member would benefit from a reintroduction into the workplace after a period of absence, gradually increasing their hours and/or duties.

Phased returns are not appropriate or guaranteed in every circumstance, and will normally be implemented on the advice of Occupational Health and/or a GP, who will take account of the circumstances surrounding the situation. Managers should be aware of, and remain compliant with, HSE guidelines at all times.

The University will usually support a maximum of four weeks of a phased return at no financial detriment to the employee.

Should an employee request an extension to a 4 week phased return without medical advice, this should be agreed with the Head of Department/Service. The employee will receive normal pay for the hours they actually work, and the shortfall in hours should be taken as annual leave, unpaid leave, or a combination of the two.

In exceptional circumstances where an extended phased return is recommended by a GP and/or Occupational Health, the loss in pay to the employee should be taken into consideration. A decision on whether the employee will be granted an extended phased return with no financial detriment will need to be agreed with the appropriate Dean/Director in advance.

Phased returns should be documented and reviewed regularly, with timeframes set, and signed in agreement by both the Manager and employee.
Where phased returns are deemed appropriate, every effort will be taken to ensure accommodation of the recommendations however it must be recognised that due to the needs of the service, this may not always be possible or practical.

Advice on the conduct of such conversations can be obtained from your HR Advisor.

13.0 - OCCUPATIONAL HEALTH

Where advice from Occupational Health is required, the Manager must make formal contact with the employee to discuss their intention of referring them to the University’s Occupational Health Advisor/Physician. This referral could request the following information:

- A prognosis of the employee’s illness in terms of when they are likely to be fit to return to work
- Whether adaptation of the job, working hours or environment might facilitate an early return to work
- An early indication of whether a return to any form of work is unlikely
- Whether the terms of the Equality Act 2010 are likely to apply
- An opportunity for the Occupational Health Advisor/Physician to liaise with the treating doctors

The Access to Medical Reports Act 1988 requires an employee’s consent to be given prior to a medical report being made available to the University and this consent will be sought prior to referral. Should an employee refuse to give consent, any decision that the University might have to take will then be taken on the facts that are already available.

Suitable and appropriate action will be determined following the receipt of the report, depending on the content, and will be agreed by the employee and Manager, with involvement from HR and Trade Union representatives where applicable.

Further guidance on Occupational Health can be found on the HR webpages or via your HR Advisor.

14.0 ACCOMMODATION OF DISABILITY

As a matter of policy and in accordance with the provisions of the Equality Act 2010, the University will strive to make reasonable adjustments by accommodating an employee in their current post if they are suffering from ill health or disability. This may involve re-designing the individual's job, adapting the working environment or changing the hours of work, on a temporary or permanent basis.

In pursuing its policy of attempting to accommodate staff, the University will make full use of the advice and assistance of Occupational Health and provide information on external agencies such as Access to Work.

Employees should also be fully involved in these discussions and identifying appropriate solutions.

Further advice on this section can be sought from your HR Advisor.
15.0 REDEPLOYMENT, ADJUSTMENT AND JOB RE-DESIGN

If reasonable adjustments (accommodation) of a role, the re-design of an employee’s job, or adaptation of the working environment, or changing the hours of work, on a temporary or permanent basis cannot be made, every reasonable attempt will be made to redeploy the employee into a position for which they are capable.

The University will make full use of the advice and assistance of Occupational Health when seeking to redeploy staff into other suitable alternative roles, in addition to GP and/or specialist advice. Throughout this process, the employee should be fully consulted with regarding such options, and meetings will be held between the employee, Manager and HR, and a Trade Union representative or work colleague.

When placed on the redeployment register, the employee will receive guidance on their responsibilities from their HR Advisor during this period.

Where this results in the redeployment of a member of staff, any training identified as necessary to undertake the new role will be provided.

Where redeployment is deemed necessary, Managers should refer to the Redeployment Policy for further guidance.

Further advice on this section can be sought from your HR Advisor.

16.0 ILL HEALTH RETIREMENT

Where a member of staff is unable to return to their role, other options as above (section 14.0 and 15.0) are not viable, and there is no probable improvement in the foreseeable future, ill health retirement or termination of employment should be considered.

HR and Occupational Health must be involved from an early stage before any action is contemplated and employees should also be fully involved in these discussions.

Where an employee is a member of a pension scheme and medical evidence suggests they are permanently incapable of performing their normal job duties, the Manager, with agreement from the employee that they wish to be considered for ill health retirement, and following Occupational Health advice; will refer a case for ill health retirement with associated pension benefits to the trustees of the appropriate pension scheme. Whilst the decision is pending, the employee will normally remain under the University’s employment.

Ill health retirement is not an automatic right, and is only granted after approval is obtained from the employee’s pension provider. This decision is based on the medical evidence provided to them.

For employees who are ineligible for an ill health pension under the terms of either LGPS or USS, the sole option in the absence of redeployment or accommodation possibilities will be termination of employment.

Further advice on this section can be sought from your HR Advisor.
17.0 TERMINATION OF EMPLOYMENT

Where a member of staff continues to have a high level of sickness absence, or in cases where they are unable to return to their role, and/or other options as above (section 14.0, 15.0 or 16.0) are not viable, then termination of employment may be the sole option.

No decision to pursue this option will be made without first reviewing the medical evidence, and consulting personally with the employee, and their Trade Union representative or work colleague.

Should it be deemed necessary that termination of employment is the only remaining option, a Dismissal Meeting will be convened in accordance with section 11.3 of the Capability Procedure.

Further advice on this section can be sought from your HR Advisor.

REVIEW

This policy and procedure will be kept under regular review and may be amended or withdrawn following appropriate consultation with campus trade unions to reflect changes in legislation or changing University requirements.

SUPPORTING DOCUMENTATION

- Return to Work Meeting template
- Managing staff Mental Health and Wellbeing documentation, on Health and Safety webpages of the HR Intranet
- Phased return to work plan
- Capability Procedure
- Redeployment Policy