Lancashire Care NHS
NHS Foundation Trust

MANAGING ATTENDANCE POLICY AND PROCEDURE

Policy Number	HR 029
Date Ratified	October 2010
Next Review Date	October 2013

Policy Statement/Key Objectives

To ensure that Lancashire Care NHS Foundation Trust provide a supportive, safe and inclusive working environment that encourages all employees to manage their health and wellbeing and maintain their attendance at work.

To provide a framework for a positive and pro-active approach to the management of attendance.

To provide the necessary support to employees, ensuring that employees are treated in a consistent and fair manner and to enable Lancashire Care NHS Foundation Trust to deliver quality health care.

Accountable Director: Director of Workforce and OD

Author: Director of Workforce and OD

Executive Summary

Subject	Managing Attendance Policy and Procedure
Applicable to	All employees of Lancashire Care NHS Trust
Key Policy Issues	The policy provides a framework for a positive and pro-active approach to the management of attendance.
Date issued	
Date policy reviewed	October 2010
Next review due date	October 2014
Policy written by	Director of Workforce and Organisational Development
Consultation	Senior Management Team Staff Side Representatives Partnership Forum
Policy reviewed by	Director of Workforce and Organisational Development HR Staff Side Representatives
Lead responsible for policy	Director of Workforce and Organisational Development
Monitoring arrangements	HR is responsible for overseeing the introduction, operation and monitoring of the policy and will report on a regular basis to the Trust Board on absence levels.
Approved by	Staff Side EMT Policy and Governance
Authorised by	EMT Policy and Governance
Signature	Joanne Marshall, Director of Workforce and Organisational Development
Related procedural documents	Disciplinary Procedure Organisational Change Policy Medical Re-deployment Guidance

Contents **Page**

Section 1	Policy Statement	5
Section 2	General Principles	5
Section 3	Definitions of terms	6
Section 4	Duties and Responsibilities	6
Section 5	Absence Notification	8
Section 6	Maintaining Contact During Absence	10
Section 7	Occupational Health Referral	10
Section 8	Monitoring Sickness Absence	11
Section 9	Managing Short Term/Frequent Sickness Absence	11
Section 10	Managing Long Term Sickness Absence	14
Section 11	Appeals against Dismissal	17
Section 12	Process for Analysing Sickness Absence Data and Organizational Overview	17
Section 13	Monitoring	17
Section 14	Review	19
Section 15	Equality Impact Assessment	19
Section 16	Policy Implementation	19
Section 17	Training	20
Section 18	References	20
Appendices		
Appendix 1	NHS sick pay scheme	21
Appendix 2a	Sickness and Absence Notification, Return to Work and Recording Procedures	22
Appendix 2b	Sickness and absence notification Form	24
Appendix 2c	Absence Reporting Structure for Medics	25
Appendix 2d	Guidance Notes to support the Completion of Staff Attendance Records	26

Appendix 2e	Sickness and absence notification flowchart	29
Appendix 3	Self certification form	30
Appendix 4	Occupational Health Referral Form	31
Appendix 5a	Guidance on completing the Occupational Health referral form	34
Appendix 5b	Occupational Health Referral flowchart	36
Appendix 6	Return to work interview Electronic Form	37
Appendix 7	Paper Return to Work Pro-forma	38
Appendix 8	W.A.R.M guidelines	40
Appendix 9	Informal counseling letter	41
Appendix 10	Sickness absence review meeting invite letter	42
Appendix 11	First letter of concern	43
Appendix 12	Final letter of concern	44
Appendix 13	Termination of contract letter	45
Appendix 14	Sickness review meeting guidance	46
Appendix 15a	Flow chart for managing short term absence	49
Appendix 15b	Flow chart for managing long term absence	50
Appendix 16	Equality Impact Assessment	51

1. Policy Statement

The Trust aims to ensure provision of a supportive, safe and inclusive working environment that encourages all employees to manage their health and wellbeing and maintain their attendance at work. The Trust recognises the importance of a positive and pro-active approach to the management of attendance in order to provide the necessary support to employees, ensure that employees are treated in a consistently fair manner and to enable the Trust to deliver quality healthcare to patients.

2. General Principles

The general principles of the Trust's Attendance Policy are:

- To ensure systems are in place to encourage a culture of good attendance; supporting Trust employees to manage their health and well-being and to return to work following or remain in work during periods of ill-health.

- To ensure access to Occupational Health and staff counselling services.

- To set and maintain high standards of work attendance by establishing clear guidance and procedures for ensuring absence is managed fairly and consistently across the Trust.

- Ensure employees whose sickness absence has become unsatisfactory are dealt with in a supportive and compassionate way, whilst ensuring the provision to service users is not adversely affected as a consequence.

- To manage long term sickness absence and incapacity in line with the best practice identified in NICE public health guidance (PH19, NICE March 2009; and PH22 NICE, November 2009). Enabling the Trust and its employees to work together to ensure the right support is available to assist someone on sickness absence to return to work as soon as they are able.

2.1 Trust Values

The Trust has a value statement that signifies a step forward in the journey to create an organisational culture that supports the delivery of high quality care and makes Lancashire Care a great organisation to be part of. These values have been created in partnership with staff and the Council of Governors. These values are:

- **Teamwork** We will strive to be fair, to treat people with respect and dignity and as they would wish to be treated, and to see the services through the eyes of our users

- **Compassion** We expect excellence at all levels and provide opportunities to recognise and reward high performance and to identify and address poor performance

- **Excellence** We will deliver on our commitments and hold ourselves accountable

- **Accountability** Our communication will always be respectful, honest, and clear about its intent

- **Respect**

- **Integrity** Underpinning everything we do

The Trust believes in teamwork and will sustain collaborative work environments that encourage and support our community, enabling each person to be the best they can be and recognising that no one of us is better than all of us.

3. Definition of Terms

3.1 Short Term/Frequent Absence

Short term absence is one day or more but less than four consecutive week's absence. Short-term absence may be self-certificated or medically certificated via a statement of fitness for work (fit note).

Frequent absence is defined as repeated periods of short term absence. This can include unrelated reasons for absence or a reoccurrence of a related medical condition.

3.2 Long Term Absence

This is defined as an absence of four consecutive weeks or more**.**

4. Duties and Responsibilities

4.1 The Trust Board

- Has responsibility to ensure that appropriate policies and procedures are in place to promote the good health and well-being of all staff in order to enable employees to provide regular and effective attendance at work.

4.2 Chief Executive

- Has principal responsibility for ensuring the content of this policy is applied consistently and fairly across the Trust.

4.3 Director of Workforce

- Is the named officer responsible for ensuring the content of this policy is applied consistently and fairly across the Trust.

4.4 Human Resources (HR) Department

- Are responsible for overseeing the introduction, operation and monitoring of this policy and reporting to the Trust Board on absence levels.

- Are responsible for ensuring the provision of training, guidance and support to Line Managers on the implementation of the policy.

- Are responsible for promoting the adoption of consistent and fair application of the policy throughout the Trust.

- Are responsible for monitoring and reviewing the service provided by the Occupational Health Department.

4.5 Line Managers

- Are responsible for the dissemination and implementation of this policy within their teams (see appendix 15a/b for process flowcharts).

- Are responsible for ensuring a safe and inclusive working environment is provided and that health and safety standards are maintained on a day to day basis

- Are responsible for liaising with the relevant HR Advisor to seek professional advice and guidance on the implementation of the policy and to follow advice provided by the Occupational Health Department.

- Are responsible for remaining in contact with absent employees throughout their period of sickness. The frequency of contact will be guided by the individual circumstances of the absence. There needs to be a common sense approach to the regularity of contact.

- Are responsible for ensuring that employees are aware of their responsibilities in relation to the policy and understand what is expected of them with regard to attendance and that they are aware of the support available within the Trust.

- Are responsible for making employees aware of the notification procedures to be followed if an employee is unable to attend work.

- Are responsible for ensuring that all employee sickness absence is recorded on the Staff Attendance Record Sheets (SARs) and that sickness is monitored and regularly reviewed to ensure that problems or patterns are identified at an early stage.

- Are responsible for providing support and advice to employees regarding attendance at work.

- Are responsible for ensuring employees receive a copy of the Occupational Health referral report following referral appointments. Reports must be forwarded to employees in a timely manner, ideally within one week of receipt.

4.6 Occupational Health

- Are responsible for the provision of professional and impartial advice to Line Managers on the health, safety and welfare of employees at work.

- Are responsible for the provision of a support service to all Trust employees.

- Are responsible for the provision of advice regarding reasonable adjustments and adaptations as required under the Equality Act 2010

4.7 Employees

- Have a contractual obligation to attend work to fulfil their contract of employment.

- Are responsible for following the notification procedure when they are unable to attend work due to sickness and for producing the appropriate certification (see section 5 and appendices 2a to 2e).

- Are required to maintain in contact with their Line Manager throughout the duration of their period of sickness absence.

- Are responsible for ensuring episodes of absence are reported and certificated in line with this policy. Failure to do so could result in the delay or loss of sick pay. (See appendix 1 for details of the NHS sick pay scheme)

5. Absence Notification

On appointment, employees will be made aware of the Trusts Managing Attendance Policy. Line Managers must advise employees of the departmental procedure that employees must follow if they are unable to attend work. This includes the name of the person the employee must contact (see appendix 2a to 2e).

Employees who are unable to attend work due must notify their manager of the following:

- The date they become unfit for work

- The nature of the illness/reason for non-attendance. Simply saying “unwell” or “sick” is not sufficient. Line managers are expected to treat information about the cause of an employee’s absence and related matters in the strictest confidence. Information about individual sickness absence must only be shared with designated persons e.g. HR Advisor, Risk Management (for reasons below) and Occupational Health.

- Whether the absence is due to a notifiable disease/industrial injury. In such cases the manager must notify the Risk Management/Occupational Health/Payroll Services as appropriate. If the absence is due to a road traffic accident, the manager must notify Payroll Services.

- How long they expect to be unfit for work

- When there will next be contact between the Manager and the employee.

A Manager may contact the employee to discuss their absence/return to work if they have only received a message and have not had the opportunity to speak directly to the employee.

If an employee does not attend for their shift/period of duty and does not make contact to explain their absence Line Managers must consider the following methods of communication as part of their welfare role:

- Speak with the employees colleagues in case they have already reported their absence
- Try ringing the employee (you may need to contact HR for their contact details)

- Write to the employee (advice can be sought from HR regarding the content of such a letter)
- Undertake a welfare visit to their home address, accompanied by a member of Staff Side, HR or another Manager.

If by the fifth day of absence the member of staff has not made contact and you have, despite undertaking the above, been unable to speak with them. You must contact a member of the HR team, who will advise you further.

Where an employee reports for work and completes **half a shift or more**, but due to sickness is unable to complete the whole shift, this absence will not be recorded on the Staff Attendance Record Sheets. It must however, be recorded on his/her personal file and considered when managing the employee's sickness absence.

If an employee reports for work but due to sickness is unable to complete **less than half of the shift**, the absence must be recorded as half a day sickness absence on the Staff Attendance Record Sheets.

Employees must complete a self-certification form (see appendix 3) in respect of all sickness absence of up to and including seven calendar day's duration (one week). A Statement of Fitness for Work otherwise known as a Fit Note must support sickness absence lasting longer than seven calendar days (one week).

A Statement of Fitness for Work or Fit Note covers a period of absence starting at 00.01am on the day it is issued. Further to the introduction of the Statement of Fitness for Work procedure there is no need to produce a fit to return work note.

If an employee is unfit to return to work within one day of the expiry of the Statement of Fitness for Work the employee must contact his/her line manager immediately.

If the Statement of Fitness for Work describes an employee as 'maybe fit' for work the manager will endeavour to accommodate any reasonable adjustments the Statement of Fitness for Work may indicate and may refer the employee to Occupational Health. In some circumstances however it may not be possible to make such adjustments in which case the status of the employee would revert to 'unfit for work'.

Failure to produce appropriate documentary evidence of sickness i.e. a self certificate or statement of fitness for work within five calendar days of it being due will result in the withdrawal of sick pay from the first day of absence/date of expiry of the previous certification/fit note. The employee will be recorded as being on unauthorised absence and the circumstances will be investigated, which may lead to disciplinary action.

5.1 Sickness, annual leave and statutory holidays

If an employee falls sick whilst on annual leave, the period covered by a fit note will be treated as sick leave, allowing the employee to take annual leave at another time.

In accordance with Agenda for Change Terms and Conditions, employees will **not** be entitled to an additional day off when sickness falls on a bank holiday.

It should be noted that during long-term sickness absence, annual leave will continue to be accrued. The maximum carry-over provision is one week's contracted hours.

During paid long-term sickness an employee is entitled to request a period of annual leave paid at the normal financial rate. If an employee is being paid sick pay and elects to take annual leave he/she will not be entitled to receive both sick pay and annual leave for that period. However, if an employee is in half pay and requests annual leave during long-term sickness he/she will be entitled to full pay for the annual leave period. Decisions to approve such requests can only be given from the Human Resources Department following discussion between the line manager and a senior member of HR i.e. HR Business Partner. An example of when this may be approved is in circumstances such as particular difficult situations, financial hardship or terminal illness

6. Maintaining Contact during Absence

An appropriate level of contact must be maintained between employees and their Line Manager during absence from work. What is appropriate will be determined by the individual circumstance of the absence.

The appropriate frequency of contact must be agreed at the point that the employee contacts their Manager to report their absence.

In the case of long term absence contact must, as a minimum, be at the trigger points as described in section 8.1 and section 10 of this policy.

The purpose of maintaining contact is to ensure employees feel supported and are offered all appropriate assistance.

The Line Manager must maintain a record of contact made with absent employees including when contact was made and a record of the discussion. The record must be retained in a suitably confidential place as identified by the Line Manager. If an employee wishes to have a copy of the contact notes they may request a copy from their Line Manager.

7. Occupational Health Referral

The purpose of referring employees to Occupational Health is to obtain impartial, independent and objective medical advice to enable the employee's Line Manager to manage the absence in a supportive framework.

In advance of making a referral to Occupational Health the Manager must inform the employee to explain the reason for the referral. If an employee is reluctant to give sensitive information relating to the nature of the illness they may wish to discuss this separately with Occupational Health. A referral form **must** be completed for all referrals (see appendix 4).

Self-referrals will also be accepted from individual employees. It is acknowledged that, in the case of self-referrals, the employee may not wish the Occupational Health report to be shared with their Line Manager. In these circumstances the employee will be asked to nominate an appropriate individual to receive their Occupational Health report on their behalf e.g. another trusted manager, Staff Side Representative, HR etc. Please refer to appendix 4 and 5a/b for Occupational Health referral form, guidance and flowchart.

8. Monitoring Sickness Absence

Line managers are responsible for monitoring the attendance of their employees and taking appropriate action.

It is the manager's responsibility to discuss with an employee at the earliest opportunity the support that can be offered by the Trust to ensure an early return to work or to assist an employee to attend work on a more regular basis.

All employees, following a period of sickness absence, irrespective of the length, must have a return to work discussion with their Line Manager. The manager and employee will complete an online return to work interview form (see appendix 6). The purpose of this discussion is to welcome the employee back to work, establish the reason for absence and identify any follow up action/ support required (refer to guidelines, appendix 8).

8.1 Trigger levels

Trigger levels are set to assist in the management of sickness absence and should not prevent earlier management intervention where necessary and appropriate. The current trigger levels are:

8.1.1 Informal management action

- 3 episodes of sickness absence in a 12 month rolling period

  Or

- 4 consecutive weeks absence due to sickness

8.1.2 Formal management action

- Where there has been no significant improvement in attendance following informal action then this may lead to formal action

  Or

- 8 consecutive weeks absence due to sickness

9. Managing Short Term/Frequent Sickness Absence

9.1 Initial counselling

An employee's short-term absence becomes a cause for concern if they have had three separate episodes of sickness absence within a twelve month rolling period. The employee must be informally counselled by their Manager, and consideration will be given to the employee being referred to Occupational Health to establish any underlying issues.

The following must be covered with the employee during informal counselling:

- Review the employee's attendance record

- Discuss with the employee the reasons for unsatisfactory attendance
- Offer any appropriate help. Consider if an Occupational Health referral is required to provide support to the employee.
- Discuss that their contribution has been missed and any operational difficulties that may have arisen as a result of their absence(s)
- Explore ways in which any improvement in attendance can be achieved. Consideration must be given to whether an Occupational Health referral is required.
- Agree a review period - normally three months
- Ensure the employee understands the importance of regular attendance and the serious implications of continued unsatisfactory attendance

Managers must carry out the initial counselling stage of the policy before moving to the formal stages. Informal discussions must be confirmed in writing to the employee to promote openness and transparency (see appendix 9 – informal counselling letter)

9.2 Formal stage 1 – first letter of concern

Should the sickness absence continue following the informal stage a more formal meeting may then be required in order to ensure that the Trust has offered all possible support and advice to the employee.

A manager must give an employee reasonable notice of a formal meeting (see sickness absence review meeting letter, appendix 10). The employee will be informed that the meeting will be held in the presence of Human Resources and of their right to be accompanied by a Staff Side Representative or work colleague.

A formal meeting is designed to identify problems that remain following the informal stage. At this meeting, the following must be discussed with the employee:

- The reason for the absence
- Inform the employee that they will be automatically referred to Occupational Health
- Discuss if any reasonable adjustments are required including redeployment
- Discuss what support and assistance is required to help the employee back to work
- Discuss if support is required due to a disability or a long term condition and what, if any, reasonable adjustments may be needed.
- Agree a review period - normally three months

A first formal letter of concern (see Appendix 11) must be issued, providing the employee with the opportunity to improve their attendance record and an appropriate review period must be set.

The formal notification of concern for formal stage 1 will remain current on an employee's record for a period of SIX months after which time it must be removed.

With this formal stage a common sense approach should be taken by the Line Manager when considering the reasons for any absence that may have occurred whilst under formal monitoring. The Line Manager needs to monitor any absence in a fair and consistent manner during this time of formal review.

9.3 Formal stage 2 - final letter of concern

Where, following the initial formal review meeting with the Manager and a referral to Occupational Health, there is no significant improvement in an employee's attendance, the Manager must give the employee reasonable notice of a further formal meeting (See appendix 10). The employee will be informed that the meeting will be held in the presence of Human Resources and of their right to be accompanied by a Staff Side Representative or work colleague.

A final letter of concern must be issued if the employee is unable to sustain a significant improvement, which will include reference to possible dismissal if the unsatisfactory attendance continues (see appendix 12)

It is important to remember that any action at this stage is based on the employee's unsatisfactory attendance record and non-fulfilment of his/her contractual obligations and not on the sickness itself.

The Manager must arrange a review date to meet again formally with the employee to assess whether or not the required improvement in attendance has taken place within the agreed review period (between 1-3 months.) If an employee has been unable to reach and sustain the required improvement this will lead to the next stage of the process.

The formal notification of concern for formal stage 2 will remain current on an employee's record for a period of TWELVE months after which time it must be removed.

With this formal stage a common sense approach should be taken by the Line Manager when considering the reasons for any absence that may have occurred whilst under formal monitoring. The Line Manager needs to monitor any absence in a fair and consistent manner during this time of formal review.

9.4 Formal stage 3 – potential dismissal

If an employee is unable to reach and sustain the required improvement in attendance by the agreed review date and all options for supporting an employee have been exhausted then termination of employment on the grounds of capability due to ill health can be considered.

The authority to terminate employment is held by the relevant Director. This authority to dismiss can, where appropriate, be delegated in accordance with the levels of delegated authority in the Trust Disciplinary policy. Any decision to dismiss will be taken in light of medical evidence obtained from the Occupational Health Department.

An independent panel will be set up, chaired by a Director or by an appropriate Manager with the delegated authority to dismiss. It should be noted that any action taken within this framework is not on the grounds of misconduct but on the grounds of capability.

A decision to terminate employment will be confirmed in writing by the relevant Director with the authority to dismiss within 3 working days. An employee will be informed of their right of appeal (see Appendix 13).

Where appropriate, employees who are members of the NHS Pension Scheme will be made aware of their possible option to access an Ill Health Retirement Pension and will be assisted with the application process. It should be noted that Ill Health Retirement Pension application is not automatic and any application is subject to Pension Agency approval.

All employees whose contracts are terminated on grounds of capability will be entitled to a notice period according to individual contractual rights and Agenda for Change terms and conditions of employment.

10. Managing Long Term Sickness Absence

Long term sickness absence and capacity must be managed in accordance with NICE guidance. It is important therefore that managers involve HR at the earliest opportunity when dealing with long term sickness absence.

10.1 Informal stage

Where an employee is absent through sickness for a period of four consecutive weeks the Manager must consider this as long term absence. In such cases the Manager must:

- Contact the HR Advisor for advice if necessary
- Maintain appropriate contact with the employee. The regularity of which will be determined by the individual circumstances of the absence.
- Refer the employee to Occupational Health if necessary

10.2 Formal stage

Where an employee has been absent for 8 weeks, following HR advice, the Manager must give the employee reasonable notice of a formal sickness review meeting, which can take place at work or home. The meeting will be held in the presence of Human Resources and the employee will be informed of their right to be accompanied by a Staff Side Representative or work colleague (see appendix 10). Requests to be accompanied by a family member, carer or friend will also be sympathetically considered when managing a long term sickness absence case.

10.3 Sickness absence review

See appendix 14 for guidance on how to conduct a formal sickness review meeting.

The purpose of the meeting will be to:

- Ensure that the Trust has offered all necessary advice and support
- Discuss Occupational Health reports that have been received by the Manager
- Explore the possible reasons for the absence

- Inform the employee of their occupational sick pay position
- Consider options available (reasonable adjustment / redeployment)
- Arrange future review meeting if necessary

Following the meeting the Manager must consider the most appropriate course of action, based on occupational health advice, to facilitate the employee's return to work.

The Manager, with HR, must continue to hold regular meetings with the employee until a return to work date is agreed.

10.4 Options for consideration

10.4.1 Planning and facilitating return to work and workplace adjustments

In the event of a return / future return to work date being agreed, the Manager should consider in light of good employment practice and the Equality Act 2010, reasonable adjustments to facilitate a return to work.

When a date is identified for an employee to return to work following a long period of absence their Line Manager will need to refer the employee for assessment by Occupational Health prior to their return in order to facilitate a proper plan for their return. A return to work plan will be dictated by the circumstance of the individual absence. Workplace controls and adjustments must be included in the plan and consideration must be given to the following in that plan

- The range of duties that will be performed during the return to work period.
- The support that will be provided to the employee
- A date of review for during the return to work.
- The need for further medical review.

Managers with the advice of Occupational Health must consider, if an employee is returning to their current post after being absent for more than 12 weeks, whether any of the following are appropriate:

- Phased return to work for up to 4 weeks - This will usually involve an alteration to normal work patterns and the member of staff will receive full pay during this return period.
- Temporary change of hours
- Temporary change of shift pattern
- Use of annual leave

If the employee is unable to return to their current post with reasonable adjustments, but is capable of other suitable alternative employment, temporary or permanent redeployment must be considered if recommended by Occupational Health (refer to re-deployment guidance available in the Trust Organisational Change policy and Trust Medical re-deployment procedure).

10.4.2 No foreseen return to work

If a return to work is not anticipated in the foreseeable future, all options to facilitate a return to work have been exhausted and/or the employee is unable to give a return to work date within four weeks of the expiry of sick pay then termination of employment on the grounds of capability due to ill health can be considered.

The authority to terminate employment is held by the relevant Director, this authority to dismiss can, where appropriate, be delegated in accordance with the levels of delegated authority in the Trust Disciplinary policy. Any decision to dismiss will be taken in light of medical evidence obtained from the Occupational Health department.

The decision to terminate employment will be considered by an independent panel in line with the Trust's Disciplinary policy. It should be noted that any action taken within this framework is not on the grounds of misconduct but on the grounds of capability.

A decision to terminate employment will be confirmed in writing by the relevant Director with the authority to dismiss within 3 working days, informing them of their right to appeal (see appendix 13).

Where appropriate, employees who are members of the NHS Pension Scheme will be made aware of their possible option to access an Ill Health Retirement Pension and will be assisted with the application process. It should be noted that Ill Health Retirement Pension application is not automatic and any application is subject to Pension Agency approval.

All employees whose contracts are terminated on grounds of capability will be entitled to a notice period according to individual contractual rights and or Agenda for Change terms and conditions of employment.

10.4.3 Long term conditions/terminal illness

Cases involving circumstances such as a long term conditions or terminal illness should be handled with particular compassion and sensitivity to ensure a supportive outcome for the employee concerned. In such circumstance the advice of HR must be sought at the earliest opportunity. Managers, in discussion with HR and Occupational Health, should use their discretion regarding absence in these circumstances in order to evaluate the probability of a return to work.

The Trust is committed to ensuring that an employee who is diagnosed with a terminal illness is given both practical and compassionate assistance with their circumstances. Every effort must be made to ensure that the employee and their family members are given all the support, information and advice appropriate to their circumstances and that their queries and concerns are addressed appropriately and in a timely manner.

Where the employee is suffering from a terminal illness there are a variety of options open to the Manager/employee. The Trust would aim, as far as possible to give the employee's interests serious attention and will try to provide the most financially beneficial result for the employee and/or his/her relatives.

It is imperative that, as with managing all absence, the employee's right to confidentiality is not breached. The Manager must discuss and agree with the employee, which members of staff may be informed. The Manager must ensure that appropriate support is given to the employee's colleagues, if the employee has chosen to share their circumstances with them. It is the

Manager's responsibility to ensure that communication continues appropriately and takes into consideration the wishes of the employee.

11 Appeals against Dismissal

All employees have the right to appeal against the decision of dismissal. Employees must appeal the decision within 14 working days of the decision being communicated. The appeal must be made in writing to the relevant Director and HR Director clearly stating the basis on which the appeal is being made. The Appeals hearing will be held in accordance with the Trust's Disciplinary Appeal Procedure.

12 Process for Analysing Sickness Absence Data and Organisational Overview

Networks must have in place local arrangements to analyse and monitor sickness absence data, in line with the current Trust targets. This includes line management responsibility for:-

- Monitoring overall absence patterns in order to ensure that effective absence management systems are in place.
- Analysing on a regular basis reasons for absence, since these may be symptomatic of underlying causes.

On a monthly basis the Director of Workforce and Organisational Development receives a sickness absence report for the Trust. This data is disseminated to Network Directors to support their local absence monitoring arrangements. On a monthly basis the Director of Workforce has an individual meeting with the Network Directors and their Network HR Business Partner to discuss absence.

The Director of Workforce and Organisational Development will provide assurance to the Trust Board via a quarterly report.

Attendance information is collated by line managers on a monthly basis and captured on the Staff Attendance Record Sheets. These sheets are submitted to Payroll for the purpose of recording sickness absence information on ESR.

13. Monitoring

Non-compliance with the procedures outlined in this policy will be addressed by Human Resources directly with Networks, with appropriate actions being taken.

Workforce Information reports will be produced on a monthly basis for each Network providing information on trigger points, absence rates and absence details. HR Advisors/Business Partners will follow this information up with the relevant Manager.

As part of the follow up of short term and long term absence HR Advisors/Business Partners will check with Line Managers the following points:

- Ensuring contact is maintained with absent employees
- Planning and facilitation of return to work plans/phased returns

- Planning and undertaking workplace and role adjustments
- Follow up of return to work plans

Standard	Time frame/ format	How	Who
Duties	Annual reports to Trust Board	Minutes of meetings.	HR Business Partners
Systems in place to monitor the process for: Maintaining contact with employees And Planning and facilitating return to work plans, workplace controls &adjustments	Monthly managing attendance review meetings with Network Directors Return to work interview compliance rates published in quarterly absence reports Monthly review of absence reports by HR Advisors and HR Business Partners	Review of absence reports Comments on action included/updated on monthly absence reports	Director of Workforce and OD and HR Business Partners HR Business Partners/ HR Advisors
Systems in place to monitor the process for analysing sickness absence data	Quarterly Trust Board report Monthly managing attendance review meetings with Network Directors Monthly network absence reports providing information on trigger points, absence rates and absence details	Monthly and quarterly absence reports	Workforce Information Manager Director of Workforce/OD and HR Business Partners Workforce Information Manager
Systems in place to monitor arrangements for organisational overview of sickness absence	Quarterly Trust Board report Monthly managing attendance review meetings with Network Directors Monthly network absence reports	Monthly and quarterly absence reports	Director of Workforce and OD HR Business Partners HR Advisors

Standard	Time frame/format	How	Who
Systems in place to monitor provision of training, guidance and support for Line Managers on managing attendance policy	Management guidance OLM reports	OLM reports Training programme Policy guidance on Trust intranet	Training/HR
Systems in place for monitoring sickness absence notification procedure	Bi-weekly presentation at Corporate Induction Local induction checklist completed and returned to Training department within 4 weeks of employee start date	Presentation to induction attendees re: absence notification process Compliance reporting/follow up of non-submissions	HR Advisors Induction and Mandatory Training Co-ordinator
Systems in place for monitoring and reviewing Occupational Health Service Provision including completion of referral form for every referral	Monthly service review meetings with Occupational Health Operations Manager	Meeting notes Monthly KPI report provided by Occupational Health	Associate Director of HR HR Business Partner

14 Review

Every 4 years or in light of legislative changes or further national guidance being issued and at Management or Staff Side request

15 Equality Impact Assessment

Please see appendix 16

16 Policy Implementation

The Trust Policy Administrator will upload all Trust policy documents onto the Trust intranet. The Trusts weekly e-bulletin will include details of all new and reviewed Trust policies following approval and ratification.

The Policy will be held in the Trust HR department and on the Trust intranet.

17 Training

The Trust will make the following training provisions:

- New staff will be made aware of the policy as part of the corporate induction programme.
- Training sessions will be arranged for managers as part of an in house management training programme contributed to by Occupational Health and HR.
- Guidance in the form of a quick reference guide is available on the Trust intranet.
- One to one coaching/advice is available from HR Advisors/HR Business Partners for individuals with supervisory/management responsibility as part of their job role.

18 References

NICE public health guidance PH19 (March 2009) and PH22 (November 2009)
Equality Act 2010
Disciplinary Procedure
Agenda for Change Terms and Conditions handbook
Organisational Change Policy
Medical Re-deployment Procedure
NHS Pension Scheme (Ill Health Retirement Pension)

APPENDIX 1

NHS Agenda for Change
Sick Pay Scheme

Entitlement

The Trust operates an occupational sick pay scheme that supplements statutory sick pay to provide additional payment during absence due to illness, injury or disability. Payment during absence is in accordance with Agenda for Change terms and conditions which are based on service with the NHS as follows:

Period of Continuous NHS Service	Full Pay For up to	Half Pay For up to
0 – 12 months	One month	Two months
1 – 2 years	Two months	Two months
2 – 3 years	Four months	Four months
3 – 5 years	Five months	Five months
After 5 years	Six months	Six months

Note: Entitlements are calculated over a rolling twelve-month period.

The Trust recognises the importance of employee health, but also has to meet operational requirements, and so may not always be able to tolerate the full extent of sickness absence. The contractual sick pay scheme is without prejudice to the Trust's ability to operate a Managing Attendance Policy, which may result in the employee's dismissal before the end of the period of the sick pay scheme. Under these circumstances, and depending upon the terms and conditions of service applicable to an employee's post, financial compensation may be available to the maximum of entitlements under the sick pay scheme.

The Trust reserves the right to require a medical certificate to be produced for absences and to require an employee to submit to a medical examination arranged by the Occupational Health department where deemed necessary following due consideration of all the circumstances associated with any ill-health.

Third Party Claims

An employee who is absent as a result of an accident is not entitled to sick pay if damages are received from a third party. The Trust will advance to an employee a sum not exceeding the amount of sick pay payable, providing the employee repays the full amount of sickness allowance to the Trust, when damages are received. Once received the absence shall not be taken into account for the purposes of the scale set out above.

In such circumstances the employee must inform the Payroll Department so that they may supply them with a pro-forma to sign indicating that wages paid whilst unavailable for work will be treated as a loan and are to be the first priority claim on any damages that might subsequently be recovered.

Sickness and Absence Notification, Return To Work and Recording Procedures

Notification

Employees are required to contact their Line Manager informing them of their absence as far in advance as possible prior to commencement of the shift/period of duty. This will allow Managers to make adequate cover arrangements.

As part of the local induction all employees should have been issued with a Sickness and Absence Notification Form (please refer to appendix 2b) informing them of who they must contact if their Line Manager is not available.

Employees must give a reason for their absence and indicate the likely duration of absence. Employees are required to maintain contact with their Line Manager during their period of absence and inform their Line Manager of their likely date of return to work. Employees must inform their Line Manager when they are fit to return to work even when this falls on a non work day.

Employees must make every effort to report their own absence. Where an employee finds themselves in exceptional circumstances and is not able to meet this obligation, a friend or relative must do so on their behalf.

An employee must complete and submit a self-certification form to their Line Manager to cover periods of sickness up to seven days duration. If the period of sickness exceeds seven days, a fit note must be provided. Failure to produce appropriate documentary evidence of sickness i.e. a self certificate or fit note within five calendar days of it being due will result in the withdrawal of sick pay from the first day of absence/date of expiry of the previous certification/fit note. The employee will be recorded as being on unauthorised absence and the circumstances will be investigated, which may lead to disciplinary action. Self-certificates and fit notes will be treated with the strictest confidence.

Medical Staff must contact both their Line Manager (this may be through the relevant secretary) and their Rota Coordinator. An absence reporting structure for doctors is attached at appendix 2c

Return to Work

When an employee returns from a period of sickness absence their Line Manager must conduct a return to work interview within 3 working days of the employee's return (please refer to the Return to Work Interview Guidelines for Managers in appendix 8). To document this meeting, Managers must complete an online return to work interview form (appendix 6). The return to work pro-forma is stored as an electronic form on the intranet. If for any reason this cannot be accessed the paper alternative should be completed (Appendix 7).This form must be completed to document a return to work interview following all instances of staff sickness absence. Once the online form is submitted a copy of the form will be automatically sent to the HR inbox (LCT.ESRHR@lancashirecare.nhs.uk), the employee concerned, and the employee's Line Manager. It is suggested that managers store these emails to inform future attendance management meetings.

An electronic return to work form should also be completed for medical staff. Documentation for Trainee Doctors will then be forwarded to the relevant lead employer. It is the responsibility of Rota Coordinators to follow up on non- receipt of return to work forms for Medical Staff.

Absence Recording

Employee attendance information must be recorded locally by Line Managers. On a monthly basis this data must be collated on Staff Attendance Recording Sheets (SARs) and submitted to Payroll for the purpose of recording absence information on ESR.

SARs must be completed showing a positive return for each member of staff. It's imperative that managers record the reason for absence on the SARs and attach the relevant Self Certificates and Fit Notes (Medical Certificates). Once completed the SARs must be signed by the designated authorised signatory with the top copy being forwarded each month to the Payroll Services Department in line with the schedule of information submission dates. Please refer to appendix 2d for 'Guidance Notes to Support the Completion of Staff Attendance Records'.

For Junior Doctors in training the LCFT Medical HR team will request details of trainee absence from locality Rota Co-ordinators on a monthly basis and notify the appropriate lead employer to enable this to be recorded effectively on their ESR payroll system. Rota Coordinators must ensure that all self certificates and fit notes for Junior Doctors are forwarded to the LCFT Medical HR team.

APPENDIX 2b

Sickness and Absence Notification Form

On the first occasion you are absent from work you must, as far in advance as possible prior to commencement of your shift/period of duty, telephone

Name of Manager: ……..... Number: ……..……

Or, if the above individual is unavailable, you should ask for

Nominated Deputy: …….. Number: …….....

You must make every effort to report your own absence. If you find yourself in exceptional circumstances and are not able to meet this obligation then a friend or relative must do so on your behalf. If you do not have access to a telephone then you must agree with your manager how you will contact them when you are unable to attend work.

The following information must be communicated at the point you report your absence:

- The time and date you became unfit for work
- The nature of illness/reason for absence (simply saying unwell or sick will not be sufficient)
- How long you expect to be off work
- When you will be in contact again (your manager will agree this with you)

It is expected that you will co-operate in providing an explanation of your absence. If you do not then your Manager will have to make decisions based upon the information available. Any information you provide regarding your absence will be treated in the strictest confidence and only shared with designated persons e.g. Human Resources

Self certification / Fit Notes

If you have been provided with a Fit Note stating you are fit to work in some capacity, you must telephone your Line Manager (or their nominated deputy) as soon possible. This is to ensure that arrangements can be agreed and put in place, wherever possible, for your return.

If you are absent from work due to ill-health for up to 7 calendar days (including off duty days) you must submit a self certification form to your Line Manager or their nominated deputy as soon as you return to work.

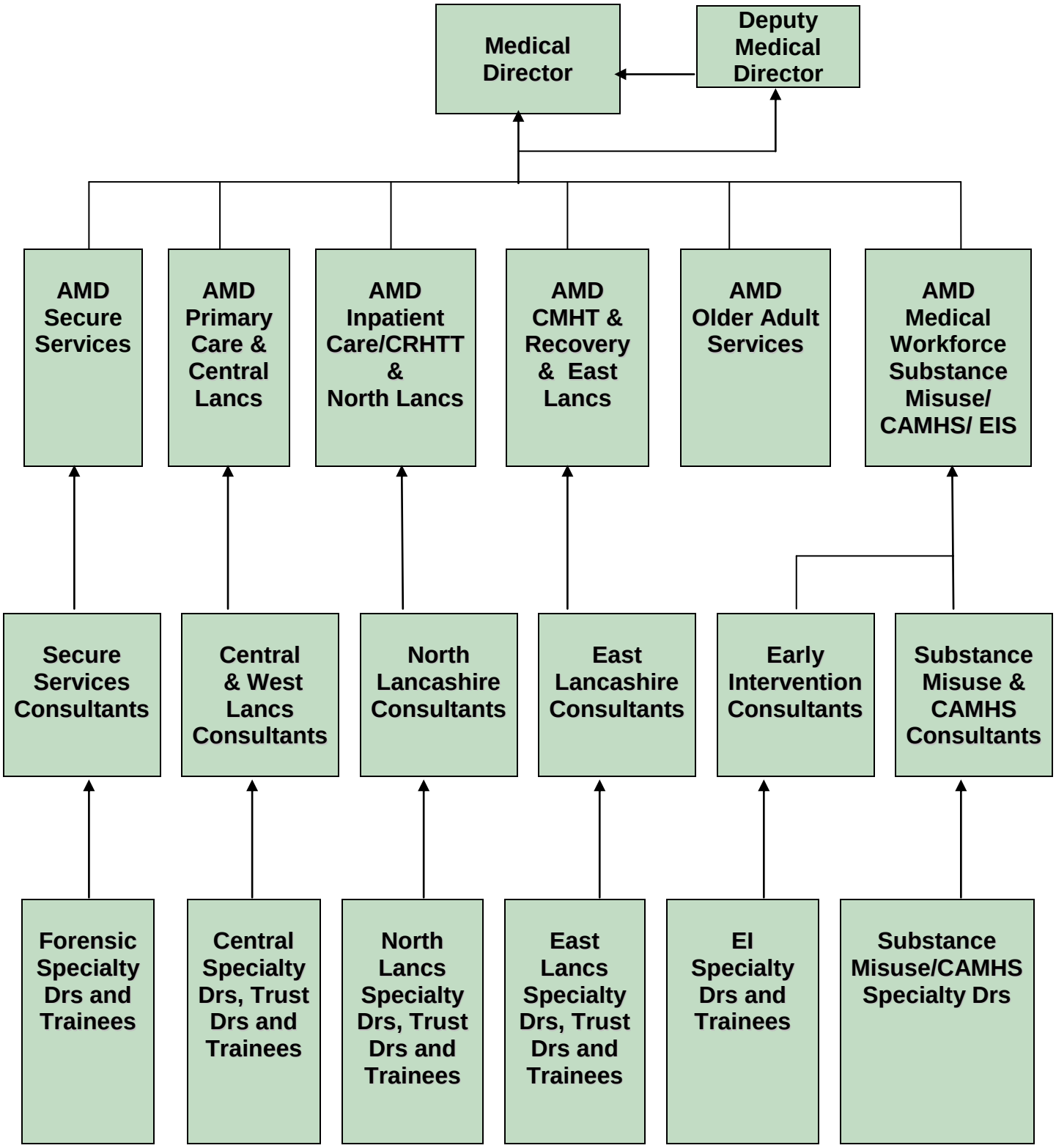
Periods of sickness absence of more than 7 calendar days must be covered by a Fit Note which must be submitted within 5 working days of the start of the Fit Note period.

Failure to produce appropriate documentary evidence of sickness within 5 calendar days of it being due will result in the withdrawal of sick pay from the first day of absence/date of expiry of the previous certification/fit note. You will be recorded as being on unauthorised absence and the circumstances will be investigated, which may lead to disciplinary action.

You must inform your Line Manager or their nominated deputy as soon as you are fit to return to work even when this falls on a non work day. You must let your Line Manager know your actual return to work date as soon as possible, preferably 24 hours in advance. Within 3 working days of your return to work your Line Manager will have a return to work interview with you discuss the reasons for your absence and any on-going support or advice that maybe needed.

APPENDIX 2c

Absence Reporting Structure for Medics



Please note absence management of Doctors may be undertaken with the assistance of appropriate Service Managers

In reporting your absence both your Line Manager & Rota Co-ordinator should be notified

Guidance Notes to Support the Completion of Staff Attendance Record Sheets

Staff Attendance Record Sheets will be produced and issued for each Pay point on a calendar monthly basis with the dates of the month pre-printed along the top of the form.

Employee surname, initials, assignment number, whole time/part time and contracted hours will be pre-printed down the left hand side of the form.

If any of the contracted hours shown are incorrect please ensure that form ESR 5 'notification of contractual change' has been completed and in addition enter the correct contracted hours and effective date on line C.

Recent new starters/transfers may not show in the first month and will require manual entry.

Where an employee is due to or has already terminated employment please ensure a form ESR 3 'notification of termination' has been completed and enter 'leaver' on line C.

If an employee appears on the staff attendance record sheets that is not under your remit please contact the Payroll Services department for removal.

If an employee (other than a new starter) that is under your remit, does not appear on the staff attendance record please contact the Payroll Services department for the name to be added.

COMPLETION NOTES

Line A is to be used to record the attendance [✓] / non-attendance [Code] for each member of staff.
Line B is to be used to record the number of hours qualifying for enhanced rates.
Line C is to be used to provide additional information including the further 'Reason for Absence' code for those staff absent due to sickness.

Additional Hours / Overtime Hours

Line A – any additional hours/overtime hours must be entered in red ink next to the [✓].
Line C – enter in red ink the additional hours/overtime hours authorised for payment.

Overtime and Special Duties Summary
Please leave blank. Section to be completed by Group Payroll Services Department.

On Call / Stand By
Line A – record in the relevant column the number of periods due for payment. Only complete for staff not in receipt of the AFC On Call Rota Percentage Payment.
Line B – record in the relevant column the number of hours worked and due for payment.

The following instructions apply to all Full Time and Part Time Staff.

LINE A

Line A is to be used to record the attendance/non-attendance for each member of staff.

RECORD against LINE A ON the RELEVANT date in the month one of the following CODES:

CODE	REASON
✓	Present
S	Uncertified Sickness
CS	Certified Sickness
I	Industrial Injury
H	Holiday
BH	Bank Holiday
ADL	Adoption Leave
CL	Compassionate Leave
ML	Maternity Leave
PL	Paternity Leave
JS	Jury Service
PU	Planned Additional Unpaid Leave Scheme
LP	Leave with Pay. State Reason on Line C (e.g. Carer/Study Leave, Courses)
L	Leave without Pay. State Reason and Number of Hours on Line C
SP	Suspension with Pay.
SU	Suspension without Pay.
MS	Suspension with Pay (Medical Suspension).
A	Unauthorised Absence. Unpaid. State Number of Hours on Line C

LINE B

Line B is to be used to record the number of hours worked and qualifying for enhanced rates. (Please also record for Suspensions with Pay. Do not record for any other absence).

RECORD AGAINST LINE B ON THE DATE IN THE MONTH THE NUMBER OF HOURS QUALIFYING FOR ENHANCED RATES USING THE FOLLOWING TABLE:

Saturday	Day/Evening Staff Only	Midnight to Midnight
Sunday	All Staff	Midnight to Midnight
Night Duty	Night Staff Only	All hours excluding Sunday/Bank Holiday
Unsocial Hours	Day/Evening Staff Only	Monday to Friday after 8.00pm
Bank Holiday	All Staff	Midnight to Midnight

Unsocial Hours: Please note that where a continuous evening shift on a weekday includes hours <u>before</u> 8.00pm, provided more than half the hours are worked <u>after</u> 8.00pm then record the total hours for the shift.

LINE C

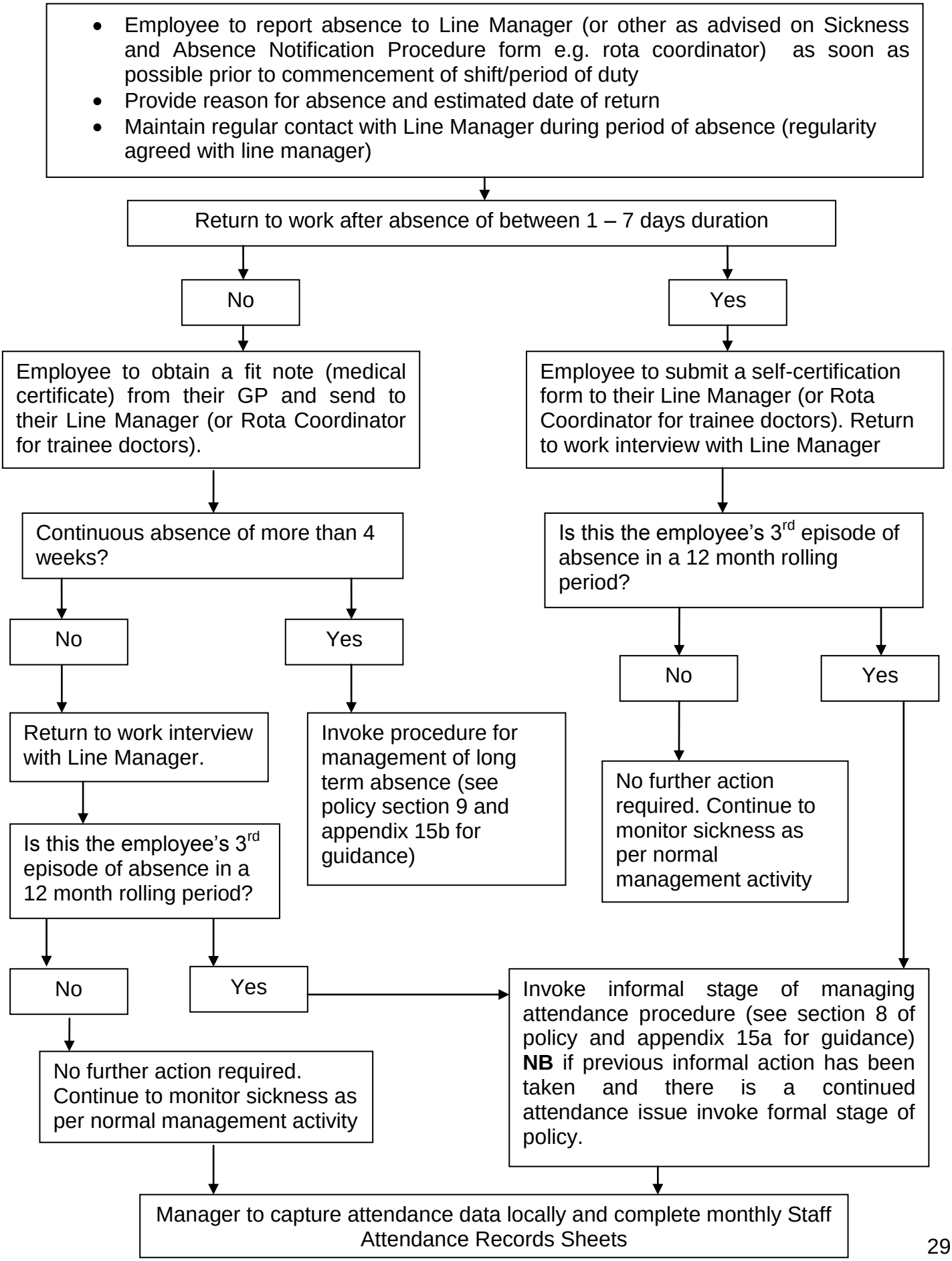
Line C is to be used to provide additional information including the further 'Reason for Absence' code for those staff absent due to sickness.

for employees who are absent due to sickness RECORD against LINE c one of the following reason for absence CODES:

CODE	REASON FOR ABSENCE
B2	Blood Disorder
C2	Cancer
C4	Cardiac/Coronary
C6	Cold
D2	Dental Pain
D4	Dermatological
D6	Diarrhoea/Vomiting
E2	Ears, Nose and Throat
E4	Eyes
G2	Gastro-Intestinal
G4	Genito-Urinary
G6	Gynaecological
H2	Headache/Migraine
H4	Hypertension
I2	Infections
I4	Influenza
M2	Musculo-Skeletal Back
M4	Musculo-Skeletal Neck
M6	Musculo-Skeletal Other Joint, Lower Limb
N2	Neurological
N4	Not Known
O2	Other
O4	Other Mental Disorders
P2	Pregnancy Related
P4	Psychological
R2	Respiratory
S2	Stress/Anxiety
S4	Substance/Alcohol Misuse
S6	Surgery

Once completed the Staff Attendance Record must be signed by the designated authorised signatory with the top copy being forwarded each month to the Group Payroll Services Department in line with the Schedule of Information Submission Dates.

Absence Notification and Recording Flowchart



APPENDIX 3

Self Certification Form
Employee's Statement of Sickness

Please complete and submit this form to your manager for periods of sickness up to 7 calendar days.

ABOUT YOU

Surname: .....
(Please print)

Other names: .....
(Please print)

Position: .....

Directorate/
Ward: .....

ABOUT YOUR SICKNESS

Dates of sickness:

These may include days when you do not usually work ***and will include Saturday and Sunday:***

From: | / / | To: | / / |

Please give brief details of your sickness:

.....

.....

.....

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

APPENDIX 4

PLEASE NOTE THAT NO CONSULTATION WILL BE CARRIED OUT WITHOUT A COMPLETED REFERRAL FORM

CONFIDENTIAL

People Asset Management Ltd Occupational Health Services
REFERRAL TO OCCUPATIONAL HEALTH CLINIC AT
6 Richmond Terrace, Blackburn, BB1 7AT
Tel 01254 311300, Fax 01254 433252, Email blackburn.clinic@people-am.com

PLEASE ENSURE THAT THE EMPLOYEE HAS BEEN MADE AWARE OF THE REASON FOR THIS REFERRAL.

FAILURE TO PROVIDE ALL NECESSARY INFORMATION MAY CAUSE DELAY IN ARRANGING REFERRAL APPOINTMENT

FOR PAM OFFICE USE ONLY

Client Name	**Lancashire Care NHS Foundation Trust**
Consultation Date/Time	
Face-to-Face Referral	
Telephone Referral	

EMPLOYEE DETAILS (MUST BE COMPLETED IN FULL)

Full Name		**Date of Birth**	
Home Address		**Job Title**	
		Start Date	
		Contact Tel No	
E-mail address		**Mobile Number**	

Is this a self-referral?	**Yes / No**

Working shift pattern:	**Mon**	**Tue**	**Wed**	**Thurs**	**Fri**	**Sat**	**Sun**

Hours of work	**Mon – Sun**	**Days**		**Nights**		**Rotating shifts**	

REASON FOR REFERRAL

	Long term sickness absence (at 4 weeks or expected to be continuous sickness)
	Short term sickness (frequent or sporadic sickness -please attach details to referral)
	Medical/Assessment
	Other (Please add details, continue on a separate sheet if required)

RECENT / CURRENT ABSENCE DETAILS

Date absence began	
Reason/History surrounding absence (Please take absence reason from sick note)	
Has employee returned to work following the above absence	

ABSENCE HISTORY

	Dates of absence	**Reason for absence**
1.		
2.		
3.		
4.		

ADVICE REQUIRED FROM OCCUPATIONAL HEALTH (PLEASE TICK APPROPRIATE BOX/BOXES)

	What is the employee's current state of fitness for work?
	Likely date of return to work?
	What effect will this condition have on the employee's ability to carry out his/her current position?
	Are there any modifications/adjustments which would alleviate the condition or aid rehabilitation?
	Are there any particular duties the employee will not be able to carry out?
	Is the condition likely to reoccur in the future?
	Any other relevant information/advice sought:

It is important to add as much information as possible as this will assist with the referral (i.e. attendance records for the last 12 months, copies of sick notes or any other relevant correspondence). The more information you provide, the more thorough we are able to be in dealing with the referral. **Please ensure that the employee has been made aware of the reason for this referral.**

COMPLETE FOR MANAGEMENT REFERRALS - REFERRING MANAGER DETAILS

Name of referring Manager	
Contact Address	
Tel No	
Mobile No	
E-Mail address	

COMPLETE FOR SELF REFERRALS – INDIVIDUAL NOMINATED TO RECEIVE REFERRAL REPORT

Name of nominated individual	
Relationship to referring employee	
Contact Address	
Tel No	
Mobile No	
E-Mail address	

Signature: ..... **Date: .....**

EMPLOYEE CONSENT (To be signed/agreed verbally during first appointment with People Asset Management OH Consultant)

I understand that relevant information regarding health/work will be passed to the Location Manager and that my Occupational Health record is stored confidentially by People-Asset Management Ltd.

..... **Signature/Verbal consent of referred employee**

FOR PAM OFFICE USE ONLY

Client Name		**Consultants Name**	
Account No		**Price**	
Referral Reference		**Invoice No**	

Guidance on Completing Occupational Health Referral Form

Introduction

This guidance note details the questions that should be considered when completing an Occupational Health Referral Form. This is in order to elicit specifc information regarding an employee's current medical condition from the Occupational Health Physician and aid the management of absence.

When completing the form it is recommended that managers should consider including some of the questions listed below, depending on the particular circumstances of the individual.

Questions to consider

- This employee has a high amount of short-term sickness absence, can you advise of any underlying medical problem that may be affecting his/her attendance record?
- If there are any underlying medical problems, can you advise what support/assistance may be of use to facilitate this emloyee to stay in work?
- What is the employee's current prognosis in relation to the medical conditions under consideration? Is the prognosis permanent or temporary?
- Is the health problem likely to recur or affect future attendance?
- Are there any other medical conditions present? If so, what are their effects?
- Has treatment been undertaken? If so, how successful has this been and will further medical intervention be required in the future?
- Is the employee currently on any medication that will affect their attendance or performance at work?
- Is there any future requirement for medical support or intervention?
- How does or will the employee's diagnosis affect their ability to perform the duties required of their post, can this change in ability be expected upon a temporary or permanent basis?
- Are there any workplace factors contributing to the employee's ill health?
- In light of the employee's current state of health, do you perceive there to be any Health & Safety risks posed to the safety of the employee; their colleagues or the service users? If so, are there any steps that we could take to reduce this risk?
- Do you consider that the employee will be able to make full recovery, if so, 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?
- Is the employee currently fit to attend work on full hours and duties?

- Will the employee be able to return to the work he/she is employed to do within a reasonable time period?

- If the employee is able to return to the job he/she is employed to do, please advise of the likely time period/return date?

- If the employee cannot return to the work he/she is employed to do, please indicate the types of alternative employment (if any) within the Trust that would be suitable for this employee. taking into account their medical condition, would this alternative employment be on a temporary or permanent basis?

- In your medical opinion is the Equality Act 2010 likely to apply? If so, how?

- Please advise of any reasonable adjustments that could be made to the employee's workplace/current post in relation to the medical condition to facilitate a return to work?

- What rehabilitation programmes are available that may be of assistance for this employee?

- If the employee cannot return to the job he/she is employed to do within the forseeable future, do you recommend ill health retirement given that reasonable adjustments/redeployment does not appear appropriate

- Can you recommend any other help or support that we may provide to the employee?

Occupational Health Referral Flowchart
(Management and Self Referrals)

Referral form completed and emailed (preferable), faxed or posted to Client Services in Blackburn. A referral form **must** be completed for all referrals.
Incomplete referral forms will be returned for full completion

blackburn.clinic@people-am.com
Tel 01254 311 300, Fax 01254 433252
6 Richmond Terrace, Blackburn, BB1 7AT

↓

Referral triaged by the OH Clinician
Telephone consultations will be offered where appropriate. In exceptional circumstances home visits may be arranged (if a home visit is to be requested HR must be involved at referral stage)

↓

People Asset Management (PAM) contact employee directly (by phone/e-mail) regarding appointment time. If unable to contact the employee / employee does not respond to message left by PAM the referral will be sent back to referring manager for them to speak to the employee.

Appointment date will be given for employee to be seen within 3-5 working days of receipt of referral at a clinic site most convenient for the employee.

↓

Referral report sent by PAM to the referring manager on the day of the employee's appointment in 95% of cases.

If referral is a self-referral then the employee must have nominated on their referral form an individual to receive their report.

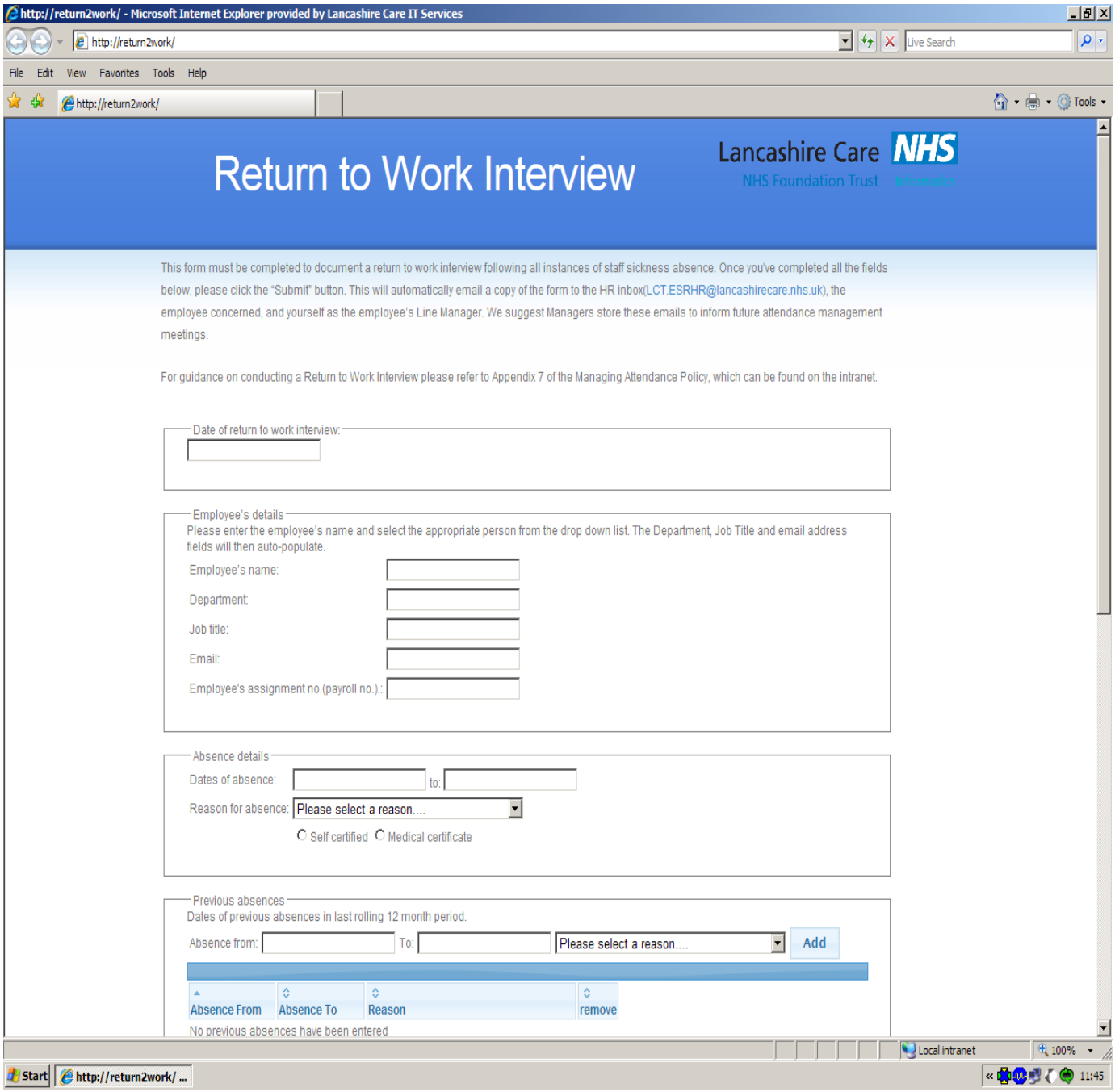
↓

Any queries regarding the content of the referral report must be discussed for clarification with the Clinician who produced the report.

Return to Work Interview Electronic Form

This form must be completed for all sickness absence at the return to work interview, which should be held within 3 working days of the employees return to work. This form must be completed to document a return to work interview following all instances of staff sickness absence. Once the form is submitted a copy of the form will automatically be sent to the HR inbox (LCT.ESRHR@lancashirecare.nhs.uk), the employee concerned, and the employee's Line Manager. It is suggested that managers store these emails to inform future attendance management meetings.

It is advisable that Managers follow the guidelines in Appendix 8 whilst conducting a return to work interview and that a summary of the discussion is documented on the online form shown below. This can be found on the Trust intranet in the Human Resources section.



Return to Work Interview Form (Paper Alternative)

Date of return to work interview	
Employee's name	Department and Job Title
Dates of absence (first day and last day)	Actual return to work date
Reason for Absence	
Dates of previous absences in last rolling 12 month period	
Summary of discussion (to include; issues that employee needs to be aware of from their absence, any issues which the employee wishes to raise regarding their absence and any support required on returning to work)	
Action(s) discussed and agreed	
Signed by Employee	**Date**
Signed Manager / Supervisor	**Date**

Cc Manager, Employee and LCT.ESRHR@lancashirecare.nhs.uk

APPENDIX 8

Return To Work Interview Guidelines for Managers
W.A.R.M
(Welcome, Absence, Reinforce, Move on)

Current literature on the subject of managing absence purports that a good return to work interview is the most effective way of helping to reduce sickness absence levels. The guidelines below are intended to assist managers in conducting that 'good' return to work interview.

1. The welcome phase

During the welcome phase you welcome the employee back, tell them that they were missed and you must check that they are fit to return.

2. The absence phase

This is the core of the interview, where you discuss the absence and explore the reasons for absence. Sometimes, you may uncover a problem that either caused or contributed to the absence and you may or may not be able to help solve it. If the problem was caused by, or exacerbated by work, then you must be prepared to discuss it and help solve it.

In the meantime, here are some guidelines for the absence phase of the interview:

- Seek to establish the facts as to why the employee has been absent by asking in an understanding way why the employee was absent and listening to the reply.

- Place the absence in the context of any previous absence and where appropriate seek an explanation for any apparent patterns or trends.

- Be sensitive to the employee's feelings where personal problems and illnesses are involved.

- Consider if a referral to the Occupational Health service is necessary and/or if the employee would like to attend as a support mechanism.

- Be constructive throughout. Avoid confrontation. Stick to the facts.

- Be prepared to challenge any explanation offered by the employee on the basis of the facts, but avoid interrogation.

- Don't make assumptions.

- Be prepared to offer solutions to any problem that is uncovered.

- Discuss the effect of the absence. Explain to the employee what the effect of their absence was on their colleagues.

- Avoid permitting unsatisfactory behaviour. You must not simply accept absences, as to do so would be unfair on other employees. Agree a plan that will lead back to full attendance.

3. The reinforce phase

In this part of the meeting, you reinforce the following with the employee:

- The standard of attendance that is expected
- The needs of the service
- The monitoring and reviews that would be carried out
- The support that would be provided

Each employee has a contractual obligation to attend work every single day, for which they are employed, and for which they are not on authorised leave. If they are absent for one day, it is a breach of this obligation.

A reasonable employer understands that people are affected by events and illnesses that prevent them from discharging this obligation.

During this phase of the interview, you must place the responsibility for coming to work where it belongs with the employee. This includes ensuring that the employee understands his/her responsibility to help identify and solve any problem that underlies their absence.

If there is a continuing problem, or there is the possibility of an ongoing problem then:

- Explain to the employee their contractual obligation to attend work
- Ask them to accept this responsibility and do everything that they reasonably can to discharge their responsibility
- Ask them what they are going to do to improve their attendance

4. Move on phase

It is important to leave the meeting on a positive note, with confidence in the employee's ability to attend in the future.

Brief the employee on events that have occurred during their absence and discuss the work that needs to be done to catch up and that should be treated as a priority.

If the absence has been of any length, it is a good opportunity to update the employee on issues/changes within the workplace

APPENDIX 9

<insert date>

Private and Confidential

Name
Address

Dear

Re: Initial Counselling

I am writing further to our meeting of **<insert date>** in which I counselled you regarding your attendance record.

As we discussed, you have had a total of **<insert number>** episodes of sickness absence (a total of **<insert number>** working days) within a 12 month period **<insert date> – <insert date**> which in accordance with the Trust Managing Attendance Policy, is considered to be a cause for concern.

At our meeting, we reviewed your attendance record and discussed the reasons for your absence. **<insert summary of discussion>** I explored with you any support that could be provided to help you improve your attendance at work and we agreed the following **<insert action(s) agreed>**.

You are aware from our discussion that if you are unable to improve your attendance at work this may lead to further action in line with the Trusts Managing Attendance Policy, a copy of which was given to you.

As a valued member of the team I hope that you are successful in improving your attendance however if you have any concerns regarding this letter or anything else please feel free to discuss these with me at any time.

Yours sincerely

<INSERT MANAGER NAME>
<INSERT JOB TITLE>

Cc: Human Resources Advisor

APPENDIX 10

<insert date>

Private and Confidential

Name
Address

Dear

Re: Sickness Absence Review Meeting

I am writing invite you to a review meeting to discuss your **<delete as appropriate>** absences from work on **<insert dates>** / continued period of absence from work which commenced on **<insert date>**. The meeting will also be an opportunity for us to discuss any support that the Trust can provide.

The meeting has been scheduled for **<insert time>** on **<insert date>** at **<insert venue>. <Delete if not appropriate>** *Alternatively, if you would prefer, a home visit can be arranged or a suitable alternative date should you not be able to attend.*

I will be accompanied at the meeting by **<insert name>**, HR Advisor. In accordance with the Trust's Managing Attendance policy you may be accompanied to the meeting by a Staff Side Representative or workplace colleague.

Please find enclosed a copy of the Trust's Managing Attendance Policy for your information.

I would be grateful if you would contact me on **<insert telephone number>** to confirm your attendance at the meeting or to arrange an alternative date.

I look forward to hearing from you.

Yours sincerely

<INSERT MANAGER NAME>
<INSERT JOB TITLE>

Cc: Human Resources Advisor
Cc: Personal file

APPENDIX 11

<insert date>

Private and Confidential

Name
Address

Dear

Re: First Letter of Concern

I am writing to confirm the outcome of the meeting held on **<insert date>** to discuss your absence record in the presence of **<insert those present>.**

At this meeting it was highlighted to you that you had been absent for a further **<insert number>** days over **<insert number>** occasions, that your level of attendance is unsatisfactory and that it is having a negative impact upon service delivery.

We discussed whether there is an underlying problem contributing to your sickness absence and your response was **<insert summary of response>**.

We agreed to put the following support mechanisms in place to facilitate an improvement in your attendance **<insert support mechanisms>**.

As your attendance has failed to improve after a reasonable opportunity for improvement following initial counselling, I confirm that I have issued you with a first letter of concern.

I will continue to monitor your attendance over the next 6 months to ensure that it meets with the expected standard of a significant improvement. If you are unable to sustain an acceptable level of attendance, you may be issued with a final letter of concern and your continued employment with the Trust may be placed at risk.

We have arranged to meet again, in **<insert number of months>** time, to review your attendance on **<insert date>, <insert time> and <insert venue>.**

I hope that the mechanisms that have been put in place will be of support to you and will enable you to improve and sustain an acceptable level of attendance. However, if you have any concerns regarding this matter please feel free to discuss these with me at any time.

Yours sincerely

<INSERT MANAGERS NAME>
<INSERT JOB TITLE>

Cc: Human Resources Advisor
Cc: Personal File

APPENDIX 12

<insert date>

Private and Confidential

Name
Address

Dear

Re: Final Letter of Concern

I am writing to confirm the outcome of the meeting held on **<insert date>** to discuss your absence record in the presence of **<insert those present>.**

At this meeting it was highlighted to you that you had been absent for a further **<insert number>** days over **<insert number>** occasions since the first letter of concern had been issued to you on **<insert date>.**

We discussed whether there is an underlying problem contributing to your sickness absence and your response was **<insert summary of response>.**

We agreed to put the following support mechanisms in place to facilitate an improvement in your attendance **<insert support mechanisms>.**

As your attendance has failed to improve after a further reasonable opportunity for improvement and your level of attendance continues to be unsatisfactory, I confirm that I have issued you with a final letter of concern.

I will continue to monitor your attendance over the next 6 months to ensure that it meets with the expected standard of a significant improvement. If you are unable to improve or sustain an acceptable level of attendance, you are warned that your continued employment with the Trust will be placed at risk and further action may be taken against you not excluding dismissal.

We have arranged to meet again, in **<insert number>** months time, to review your attendance on **<insert date>, <insert time> and <insert venue>.**

I hope that the mechanisms that have been put in place will be of support to you and will enable you to improve and sustain an acceptable level of attendance. However, if you have any concerns regarding matter please feel free to discuss these with me at any time.

Yours sincerely,

<INSERT MANAGERS NAME>
<INSERT JOB TITLE>
Cc: Personal File
Cc: Human Resources Advisor

APPENDIX 13

<insert date>

Name
Address

Dear

Re: Termination of Contract

I am writing further to the sickness absence review meeting held on **<insert date>**, in the presence of **<insert those present>.**

At the meeting you confirmed that you felt that there were no reasonable adjustments that could be made to your current post that would enable you to return to work. We discussed the option of redeployment and it was confirmed that we have been unable to secure suitable alternative employment for you within a reasonable timeframe.

<insert only if appropriate> It was highlighted at the meeting that your *application to the NHS Pensions Agency for ill health retirement benefit had been successful/applied for/ pending a decision <delete as appropriate>*

Therefore, after careful consideration of all the available options I therefore confirm the termination of your employment on the grounds of incapability due to ill health. I notified you that you are contractually entitled to **<insert number>** weeks notice. **<insert only if appropriate>** *We agreed that this notice would be paid in lieu at full pay as a lump sum settlement of the required contractual notice provisions*. Your employment with the Trust will therefore take effect as from **<insert last day of service>**

In addition you are also entitled to payment of **<insert number>** days outstanding annual leave that you have accrued during this leave year.

If you wish to appeal against this decision, please do so in writing to **<insert name>** within 14 working days of receipt of this letter. You must clearly state the basis on which you wish the appeal to be made.

Please do not hesitate to contact me should you have any queries regarding your termination of employment.

Finally may I take this opportunity to thank you for your service with the Trust and wish you well in the future.

Yours sincerely,

<INSERT NAME ACCOUNTABLE DIRECTOR>
<INSERT JOBTITLE>
Cc: Personal File
Cc: Human Resources Advisor

APPENDIX 14

Guidance for Managers on Conducting Sickness Review Meetings

Ensure you have discussed all issues with you HR Representative during your pre-meet to avoid any misunderstanding and to help you stay focused during the sickness review meeting.

Part 1 Introduction (Manager)

- Introduce those present in the meeting.
- Confirm to the employee that the meeting is confidential
- Find out how the employee is feeling and confirm that it is nice to see them again
- If the employee is not accompanied, ask if happy to go ahead on his/her own (mention that they had the opportunity to bring a TU representative or workplace colleague with her) – if not happy then will need to reconvene but will need to be done fairly quickly.
- Go through outline of the meeting
- Explain that a letter will be sent to them as confirmation of the meeting.
- Ask the employee if they have any questions or concerns

Part 2 Explain that the purpose of the meeting is to: (Manager)

- Establish the reason for the sickness absence
- Outline to the employee that we would like to support the employee during their sickness absence to aid his/her return to work in accordance with the Trust Managing Attendance Policy.
- That this is the standard process used when an employee has been absent for either; 8 consecutive weeks or longer, 3 episodes in a 12 month rolling period.
- Ensure the employee has a copy of the Managing Attendance Policy and explain the stage that we are at. The policy recognises that sickness absence impacts on Trust's ability to provide services to patients and therefore has a responsibility to manage absence.
- Ask the employee if they have any questions or concern

Part 3 Review the employee's current state of health: (Manager)

- How long have they been off sick?
- When does his/her sick note expire?
- When is she/he due to see the GP?
- What support have they accessed from the GP?
- What about other sources of support i.e. counselling, complementary therapy, Occupational Health?
- Is the employee receiving support from friends, family?
- What medication are they on, does it have any side effects (this is important if the employee is required to drive or operate equipment during work hours)?
- Find out if there is anything else we need to know that is or has affects the employee's health.

- Ask if the absence is work related and explore if yes inform the employee that you will look into the points raised separately and if they wish for the matter to be addressed formally, in accordance with any relevant policy and procedure. (The aim of today's meeting is to address and manage the sickness absence).
- Ask the employee if they have any questions or concerns

Part 4 Occupational Sick Pay and Annual Leave (HR)

- Discuss when the employee is due to go into half pay or zero pay
- If necessary, discuss with the employee their annual leave position.
- Ask the employee if they have any questions or concerns

Part 5 Discuss the OH report (Manager)

- Emphasise any positive information contained within the report.
- Discuss any necessary reasonable adjustments
- Ask the employee if they have any questions or concerns

Part 6 Return to work – if applicable consider the possible options available

Note: If an Occupational Health referral has not been made, ask the employee what support and help they feel they need which will enable a successful return back to work (remember this needs to be reasonable and phasing in will initially be for 4 weeks maximum). Seek advice from Occupational Health.

Temporary change of hours

- Ascertain what the employee's likely return date will be and the hours she/he is capable of doing.

Returning to work on restricted duties

- This is applicable if the employee has been off sick and it has been recommended that for a temporary period they will need to undertake lighted duties.

Use of annual leave

- Advise that annual leave can be requested as part of a phased return to work.

Part 7 Trust Managing Attendance Policy (HR)

- Remind the employee that the policy is there to support his/ her return to work.
- Unfortunately, it is also necessary (in line with the Trust's policy on managing absence) that before the expiry of sick pay, discussions may need to take place to consider his/her her continued employment with the Trust if she/he cannot return to work.
- Ask the employee if they have any questions or concerns

Part 8 Way Forward (Manager)

- Agree if further appointment with Occupational Health is needed / when it is. Inform the employee that she/he can discuss his/her return to work date again with them and any further adjustments which she/he may find helpful
- Confirm that on receipt of OH report you will write to confirm date of return and also confirming phase in period and adjustments agreed.
- Remind the employee to arrange to see own GP to discuss return to work
- Remind the employee to maintain contact – appreciate it's difficult when you're not well but it's really important to stay in regular contact

Part 9 Conclude the meeting (Manager)

- Summarise the discussions you have had.
- Ask the employee if they have any questions or concerns.

APPENDIX 15a

Flow Chart for Managing Short Term Sickness Absence

Employee notifies Manager of sickness absence

Employee and manager keep in regular contact.

A self cert form must be submitted for absences up to and including 7 calendar days. A Fit Note (medical certificate) must be submitted for absences over 7 calendar days

Employee returns to work. Manager conducts a return to work interview after every absence.

Informal – Initial Counselling
Triggers when an employee has had 3 episodes of sickness absence in a 12 month rolling period. Manager meets with employee. Consideration should be given to the employee being referred to Occupational Health to provide support to the employee and/or establish any underlying issues.

If absence continues to be a cause for concern following the informal stage the manager should escalate the issue to formal stage of the sickness absence management.

Formal stage 1 – First letter of concern
Employee invited to formal sickness review meeting. Meeting designed to identify problems that remain following the informal stage. A first formal letter of concern, is issued, an opportunity for improvement in attendance given and a review period set.

Employee referred to Occupational Health. Occupational Health report(s) considered/ discussed during review meeting

If absence longer than 3 days and is due to a notifiable disease or industrial injury employee or manager must complete an incident form.

Formal stage 2 – Final letter of concern
If there is no significant improvement in attendance, employee is invited to a further formal sickness review meeting. A final letter of concern must be issued, which will include reference to possible dismissal if the unsatisfactory attendance continues. A review date must be set to meet again formally with the employee to assess whether or not the required improvement in attendance has taken place within an agreed review period (between 1-3 months).

APPENDIX 15b

Flow Chart for Managing Long Term Sickness Absence

Employee has absence of 4 continuous weeks

Employee and manager keep in regular contact. Employee submits fit note(s) from GP to line manager as required

Informal stage
Manager must contact HR at earliest opportunity and make a referral to Occupational Health if necessary and/or as requested by the employee.

Employee has absence of 8 continuous weeks

Formal stage
Employee absent for 8 consecutive weeks. Manager seeks HR Advice. Give employee reasonable notice of formal sickness review meeting. Refer to Appendix 14 for guidance. Make a referral to Occupational Health if appropriate/necessary. Consider most appropriate course of action. Continue to hold regular meetings until either a return to work date has been agreed or there is no anticipated return to work in the foreseeable future.

Return /Future return
Consider reasonable adjustments and the appropriateness of a phased return, temporary change of hours etc.

Fit to return to work but not in current post, consider:
1. Current post with temp/perm adjustments
2. Redeployment based on Occupation Health recommendation (refer to redeployment guidance)

Unable to facilitate return to work after consideration of temp/perm adjustments and/or redeployment

No foreseeable return to work.
If appropriate consider ill health retirement and contact the Pension's Officer

All reasonable adjustments considered and exhausted and /or no return to work date given within four weeks of expiry of sick pay

Termination of employment on grounds of capability due to ill health considered.

Director or manager with delegated authority will dismiss the employee in line with the Trust Disciplinary Hearing Procedure

Termination of employment confirmed in writing within 3 working days. Employee informed of right to appeal in line with Trust Disciplinary Appeal Procedure

Appendix 16

LANCASHIRE CARE FOUNDATION TRUST
INITIAL EQUALITY IMPACT ASSESSMENT

Department/Function	Human Resources
Lead Person	Director of Workforce and Organisational Development
Contact details	Sceptre Point, Preston
Name of policy/procedure/service to be assessed	Managing Attendance Policy & Procedure
Date of assessment	August 2010
Is this a new or existing policy/procedure/service?	Replaces existing Attendance Policy
1. Briefly describe the aims, objectives and purpose of the policy/procedure/service?	To ensure that Lancashire Care NHS Foundation Trust provide a supportive, safe and inclusive working environment that encourages all employees to manage their health and wellbeing and maintain their attendance at work. To provide a framework for a positive and pro-active approach to the management of attendance. To provide the necessary support to employees, ensuring that employees are treated in a consistent and fair manner and to enable Lancashire Care NHS Foundation Trust to deliver quality health care.
2. Who is intended to benefit?	All employees of Lancashire Care NHS Trust
3. What outcomes are wanted?	That the Trust has a robust yet supportive policy in place to manage attendance. That staff receive appropriate support to enable them to attend work and are treated in a consistent, fair and sympathetic manner. That sickness absence levels are monitored to minimise the level of sickness and promote a healthy workplace.
4. Who are the main stakeholders?	All employees of Lancashire Care Trust

5. Who is responsible for implementation?	Trust Managers and HR		
6. Are there concerns that there could be differential impact on the following groups and what existing evidence do you have for this?	**Y**	**N**	
People from a Black or minority ethnic background		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally.
Women or men Including trans people		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally. Women or men who also have other issues in their lives such as childcare, domestic violence, study etc. and are juggling work and life balance could be more vulnerable to absence from work. However they will be treated consistently, fairly and sympathetically in line with the policy. Managers may utilise carer's leave rather than sick leave as appropriate to avoid sickness absence being taken when absence is due to other reasons.
People with disabilities or long term health conditions		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally. Section 10.4.3 of the policy covers management of absence where there is a long term condition, disability or terminal illness. Line managers must be sensitive to existing conditions. If a member of staff is covered under the Equality Act 2010 due to a long-term condition they may need workplace adjustments and/or a higher level of sickness absence would be tolerated, as a reasonable adjustment due to the long-term health condition. Managers must avoid discrimination on grounds of disability.

People with or without a religion or beliefs		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally.
Lesbian, gay, bisexual or heterosexual people		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally.
Older or younger people		**N**	No the policy must be applied consistently and all staff are required to follow the process for reporting sickness absence. If due to the level of absence the formal process needs to be followed this is applied consistently and applies to all staff equally.
7. Could any differential impact identified above be potentially adverse?		**N**	As the policy is consistently applied this should be avoided.
8. Can any adverse impact be justified on the grounds of promoting equality of opportunity?		**N**	There are no obvious areas where adverse impact can be deemed to be justified.
9. Have you consulted with those who are likely to be affected?	**Y**		This policy has been circulated for consultation within the Trust prior to ratification and will be reviewed on a regular basis
10. Should the policy/procedure/service proceed to full impact assessment?		**N**	No

I understand the impact assessment of this policy/procedure/service is a statutory obligation and take responsibility for the completion of this process.

Names of assessors: **Kathy Heyes and Bethany Waller**

Signature of assessors:

Date of assessment **August 2010**

Date of next review: **August 2011**