

# HINCKLEY HOMELESS GROUP

## Sickness Absence Management – Definitions & Guidance

### Definitions

Absence Triggers	8 days or more <u>or</u> 3 instances or more of absence in a rolling 12 month period
Return to Work Discussion	Employee & Project Manager discussion following any period of sickness absence
Recognised Trade Union Representative	A full time official employed by a Recognised Trade Union or any other Trade Union Representative that an independent Union has certified as having experience of, or having received training in, representing an employee during the stages of the Sickness Absence Management Procedure
Fellow Colleague	An employee of Hinckley Homeless Group who accompanies an employee who is subject to the Sickness Absence Management Procedure

### Reference Documents

- Staff Handbook.

### Guidance Documents

The guidance documents are for guidance only and may be amended by the Company from time to time. They are not and not intended to be, incorporated into individual contracts of employment.

- Guidance Document 1 – Checklist for Return to Work Discussions
- Guidance Document 2 – Checklist for Employees
- Guidance Document 3 – Managers checklist for Formal Process
- Guidance Document 4 – Record Keeping Guidance

## Outline of Forms

The following forms will be used as part of the sickness absence procedures:

- Self Certification of Sickness Absence, records reason and duration of any absence of a half day or more – to be completed upon return to work and attached to any subsequent doctor's certificates
- Return to Work Discussion Form – to be completed by the First Line Manager upon employee's return to work to record agreed outcomes of discussion
- Authorisation for Release of Medical Information Form – The Line Manager should arrange for completion of this form by the employee

## Checklist for Return to Work Discussions

Some suggestions on areas Line Managers may wish to cover during return to work discussions. It should be recognised that information arising out of this discussion may be sensitive and should be therefore be treated confidentially.

- Clarify the cause of the employee's absence
- Ascertain if the employee feels well enough to return to work and that there are no reasons why this is ill-advised
- Discuss if the employee has been signed back to work by their GP, if appropriate
- Has the absence been part of a trend or recurring problem
- If necessary discuss any adjustments that can be made in the workplace
- If the employee's fitness for work is in doubt, would medical advice be helpful to agree on options such as a phased return to work or adjusted/restricted duties for a period of time
- If the level of absence has started to be a cause for concern, advise the employee and generally ensure all necessary support is being provided to improve attendance levels
- Discuss any medical advice that has been received

## **Checklist for Employees**

Employees are required to:

- Report their absence from work to their Line Manager on Day 1 within 1 hour of their normal start time, along with the reason and expected return date
- If unlikely to return the next day, agree when next to call in & at a minimum this must be on Day 3 of absence
- Call in themselves, unless in exceptional circumstances when a family member or friend can call instead
- Complete a Record of Absence form on return to work
- Arrange to see Line Manager for a Return to Work Discussion
- If absent for longer than 5 consecutive days, submit a Doctors Certificate as soon as possible
- Agree with Line Manager any subsequent release of Medical Reports if appropriate
- Throughout any periods of sickness absence, maintain contact with Line Manager to provide regular progress updates

## Manager's Checklist For Applying Formal Process

### General Guidance on Conducting Formal Interviews

- Prior to Interview, establish:
  - number of days absence in the last 12 months
  - number of periods of absence
  - nature of each illness
  - is there a pattern to absences, i.e. Monday/Friday, attached to holidays?
  - Are absences medically or self certified?
  - What information is available setting out the reasons for previous absences?
  
- Advise arrangements for the interview in writing, including the right to be accompanied.
  
- During the Interview:
  - explain purpose of the interview, i.e. concern over high level/frequency of absences
  - inform employee of extent of absence and reasons for period being reviewed
  - give assurance that the genuine nature of the absence is not in question, but poor attendance level gives concern
  - ask for comments from the individual
  - remember that the interview is a two-way process and you should listen and note the employee's explanations and concerns
  
- examine each absence in detail to discover:
  - is the problem fully resolved?
  - has the employee received/still receiving treatment/medication?
  - are there any duties the employee is unable to undertake?
  - Does the employee have personal/family problems?
  - are there any work related problems?
  
- Explain reasons why attendance level is causing problems, i.e. impact on operation, overtime, missed deadlines, additional burden on colleagues
  - agree actions/support to improve attendance
  - complete forms for MC referral where appropriate
  - agree standards, where relevant.
  - set review period for three months (or longer if appropriate)
  - confirm support available

- After the Interview:
  - make clear and concise notes of discussion
  - make a diary note of the review date and ensure review takes place
  - confirm discussions in writing to the individual
  - follow-up any agreed actions

Always hold the review, even where there has been no absence since the previous interview. The review session can be used positively to record appreciation for improved attendance.

### **SPECIFIC POINTS TO COVER:**

#### **Short Term, Frequent Periods of Absence**

- Stage 1 (absence at or over trigger point of 8 days or 3 occasions of absence in a rolling 12 month period)
  - notification that absence is causing concern.
  - explain operational difficulties absence causes.
  - explore practical steps to improve attendance, on both sides.
  - if the employee's sickness absence is 10 days or more certified absence, can request that current self certification forms received need to be replaced by a Doctor's Note and also advise whether this will apply for future periods of absence. Actual costs will be reimbursed.
- Stage 2 (further sickness absence whilst in Stage 1 Sickness Review).
  - ongoing discussion that absences cause concern, taking into account the rolling 12 months absence levels.
  - jointly explore practical steps for improvement, including re-training or redeployment.
  - notification that unless improvement is achieved and sustained, then next stage is either a Hearing / Meeting or possibly a Stage 3 Review, with a number of options in respect of future employment (see stage 3).
- Stage 3 – at discretion of Project Manager / Management Committee (further sickness absence whilst in Stage 2 Sickness Review)
  - medical advice must be available.
  - continued employment to be considered.
  - consider appropriateness of redeployment or re-training.
  - where no other option appropriate, employment to be terminated on ground that the organisation cannot sustain the employee's level of absence, with notice.
  - employee has right of appeal against a decision to terminate employment.

**Long Term Absence due to Sickness or Serious Injury**

- Stage 1 (After 8 days absence )
  - gain understanding of medical position.
  - may the absence be covered by the Equality Act 2010.
  - establish possible date for return to work.
  - GP involvement may be appropriate to expedite medical treatment/investigations.
  - referral to MC may be appropriate.
  - reasonable recovery time should be allowed.
  - phased return to work, including temporary reduced hours and modified duties may be appropriate.
  
- Stage 2 (a further sickness absence whilst in Stage 1 Sickness Review)
  - medical advice essential to provide fitness for work and rehabilitation advice.
  - issue Access to Medical Reports Act 1988 - Summary of Rights (p. 10) to employee when requesting details of doctor.
  - establish possible return to work date.
  - explore possible options for return to work, i.e. own job or alternative working patterns, phased return.
  - where no return to work is possible, consider termination of employment.
  
- Stage 3 or Hearing/Meeting (a further sickness absence whilst in Stage 2 Sickness review)
  - medical advice essential, including GP and specialist reports.
  - ensure all possible future employment options are explored.
  - consider termination of employment on capability grounds.
  - employee has right to appeal against termination of employment.

**GENERAL GUIDANCE**

- Contact must be made with the Management Committee for advice and assistance to ensure consistent approach at the final notification / termination stages.
  
- Employees should be advised of their right to be accompanied by a Fellow Colleague (an employee of Hinckley Homeless Group) or represented by a Recognised Trade Union Representative.
  
- All formal stages to be confirmed in writing.
  
- All correspondence to be retained on the employee's main personal file.
  
- Appropriate regard must be taken of legislation, including the Equality Act 2010. Further advice can be sought from the ACAS website ([www.acas.org.uk](http://www.acas.org.uk)) and the HM Revenue & Customs website ([www.hmrc.gov.uk](http://www.hmrc.gov.uk)).

## Record Keeping

For any of employee procedures, records will be inclusive of the following, as appropriate to the procedure being followed:

- Written letters;
- Completed forms;
- Checklists;
- Signed witness statements;
- Meeting/hearing notes (from both informal and formal stages);
- Managers report;
- Third party correspondence;
- Any other relevant information.

All records must be kept in accordance with the Data Protection Act 1998. The following points will ensure this is achieved:

- All records must be kept confidential and only relevant information should be retained.
- The employee must be advised that records are being kept and once the case is closed, they will be placed on their main employee personal file. If they request access to information, generally it will have to be released, although in some circumstances it may be withheld (e.g. if there is a need to protect the identity of a witness in line with our obligations to them under the DPA – this will be rare).
- Any witness statements need to be signed by the witness.
- Transcripts of any interviews should be typed up as soon as possible and signed. If a witness is not prepared to sign again the original hand written document can be relied upon.
- Any statements need to be a true account of events.
- Record any statements in the form of questions and answers.
- Record the account of events in chronological order.
- When amending any statements, cross out the mistake and initial any amendment.
- During the application of any employee procedures, the Line Manager needs to keep all relevant records in a case file, safely locked away, maintaining confidentiality and security. When the case is closed, this case file must be placed on the relevant employee's main personal file.
- When completing records, bear in mind that the employee has a right to see that record. The record should accordingly be a factual account, and opinions should be expressed carefully

**The above may seem prescriptive, however relevant information can be included in an Employment Tribunal, so care needs to be taken in maintaining records.**





## **Access to Medical Reports Act 1988 - Summary of Rights**

Under the Access to Medical Reports Act 1988, you have the following rights:

- ***You can see the report.***

**If you decide to see it, your doctor cannot send the report until:**

- i) **you have seen it and agreed to it; or**
- ii) **until 21 days have passed.**

**It is your responsibility to liaise with your doctor before the lapse of the 21 days.**

- ***You can change your mind.***

**If at first you decide that you do not wish to see the report but change your mind before your doctor has sent the report, you can tell your doctor and then have 21 days to view it.**

- ***You can ask for the report to be changed.***

If you view the report and see any information that you believe to be inaccurate or misleading, you can ask your doctor to change the report. Your doctor does not have to make any changes, but if he refuses you can ask your doctor to include a separate statement with the report indicating the reasons you consider it to be inaccurate or misleading.

- ***You can see the report later.***

You can see any medical report your doctor has supplied about you in the previous 6 months if you ask your doctor.

- ***It may not be appropriate for you to see all of the report.***

Your doctor can refuse to let you see any part of the report which may cause you or others physical or mental harm, or any part of the report that may reveal information about another person, unless that person gives permission or has cared for you in a professional capacity.

- ***You can stop the report.***

If, before the report has been sent, you change your mind about the report, you can instruct your doctor not to send the report.

### ***Please note***

If you request to receive a copy of the medical report yourself, your doctor may charge a reasonable fee to cover the cost of supplying it.