1. **POLICY STATEMENT**

   1.1 The NHSBSA recognises the contribution of its employees and is committed to providing good working conditions and health and safety standards.

   1.2 It is the responsibility of the NHSBSA to make the most effective use of its employees and the absence management policy contributes to that objective.

2. **PRINCIPLES**

   2.1 This procedure enables managers to address sickness absence issues, both short and long-term, in a fair, consistent and equitable manner. It is recognised however that all cases must be dealt with on an individual basis because of differing circumstances therefore this procedure gives an outline of the principles to be observed.

   2.2 It should be noted that all other types of absence should be dealt with in accordance with the appropriate policy, ie maternity, adoption, career break, stress policy etc. Line managers should consider, and take due account of, individual circumstances and all relevant factors before action is taken eg maternity related absence, stress, disability related absence, work related factors.

   2.3 Confidentiality will be maintained in all aspects of absence management and records will be kept in line with the Data Protection Act.

   2.4 Managers will be fully trained in policies and procedures relating to absence. Staff will be made aware during their induction.

   2.5 The NHSBSA recognises that everybody is sick or subject to emergencies from time to time, however regular attendance at work is a contractual requirement.

   2.6 Short-term absenteeism refers to a series of illnesses, often unconnected, which result in frequent, short periods of absence. The appropriateness of referral to the Occupational Health Service will be discussed between the individual, their line manager and an HR Adviser.

   2.7 It is acknowledged that occasions do arise when people are away from work on a long-term basis as a result of chronic or acute ill health. Although each case will be dealt with on an individual basis this policy outlines certain principles that will always be observed. Long-term absence would normally be classed as at least four weeks continuous absence. However it should be noted that for reporting purposes, reports will show long-term absence as 8 calendar days or more.
In dealing with any sickness absence cases managers must be mindful of obligations that they and the Authority may have under the Disability Discrimination Act (DDA). In identifying whether or not an employee is covered by the Act advice will be sought from appropriate medical professionals.

This procedure applies to ALL staff within the NHSBSA except for those employees currently within their probationary period.

Advice should be taken from the Human Resources Department at all formal stages of this procedure to ensure the consistent application of this procedure throughout the NHSBSA.

Employees may be accompanied by an appropriate person in all discussions with management about their absence.

The policy and procedure will be reviewed periodically by the Human Resources Department and trade unions giving due consideration to legislative changes.

In accordance with the NHSBSA’s Equality & Diversity policy, this procedure will not discriminate, either directly or indirectly, on the grounds of gender, race, colour, ethnic or national origin, sexual orientation, marital status, religion or belief, age, trade union membership, disability, offending background or any other personal characteristic.

3. PROCEDURE

General Points

The NHSBSA’s procedure for managing absence MUST be followed. It is the responsibility of every employee to report any absence and only in exceptional cases should this procedure be carried out by someone else on their behalf.

If an employee knowingly gives any false information, or makes false statements about their sickness, it may be treated as misconduct and may result in disciplinary action being taken. In proven cases of gross misconduct it could lead to dismissal (e.g. absent on sick leave and working elsewhere).

Any employee who unreasonably fails to comply with the NHSBSA’s Absence Management policy and procedure may have their occupational sick pay withheld. Any decision to withhold sick pay must be made in conjunction with the Human Resources Department. Advice may also be sought from the Occupational Health Service.

The NHSBSA has the right to dismiss employees whilst they are receiving sick pay entitlement. Any decision to dismiss on capability grounds will be subject to medical advice.
3.5 The NHSBSA reserves the right to request a Doctor’s Certificate for periods of absence of less than seven calendar days in cases of short-term persistent absence. However this should normally follow an OH referral where there is no medical reason for continued short-term persistent absence. Furthermore, this sanction should only be used for a finite period and should be reviewed on a regular basis. Finally, should the employee incur a cost in obtaining a Doctor’s certificate, then this will be reimbursed by the NHSBSA.

**Employee Occupational Sick Pay Entitlements**

3.6 The amount of paid sickness leave entitlement depends on length of service, as outlined below:

- During 1st year of service: One months’ full pay and two months’ half pay
- During 2nd year of service: Two months’ full pay and two months’ half pay
- During 3rd year of service: Four months’ full pay and four months’ half pay
- During 4th and 5th years of service: Five months’ full pay and five months’ half pay
- After 5th year of service: Six months’ full pay and six months’ half pay

3.7 The period during which sick pay is paid and the rate of sick pay for any period of absence is calculated by deducting from the employee’s entitlement, on the first day of absence, the aggregate periods of paid sickness during the 12 months immediately preceding that day.

3.8 Full pay will include regularly paid supplements, including recruitment and retention premia, payments for work outside normal hours and high cost area allowances. Sick pay is based on what an individual would have received had they been at work.

3.9 Full pay is inclusive of any statutory benefits. Half pay plus statutory sick pay will not exceed full pay.

3.10 For the purpose of calculating entitlement to sick pay, a previous period or periods of NHS service will be counted towards the employee’s entitlement to sick leave with pay where there has been a break, or breaks, in service of 12 months or less.
3.11 In the event of employment coming to an end, entitlement to sick pay ceases from the last day of employment.

3.12 Absence for planned elective medical treatment, which is for cosmetic reasons alone, must be taken as annual leave and not sick leave. Where planned medical treatment has both a cosmetic and health improvement purpose, absence should be reported as sick leave.

**Occupational Sick Pay Conditions**

3.13 The conditions for sick pay are financial provisions indicating an entitlement to occupational sick pay and in no way indicate the amount of absence to which an employee is entitled.

3.14 If sick pay entitlement is exhausted before a Final Review Meeting takes place, and where the failure to undertake the Final Review is due to delay by the manager, sick pay will be reinstated at half pay as follows:

- Employees with more than 5 years reckonable service – sick pay will be reinstated if the entitlement is exhausted before the Final Review meeting takes place.
- Employees with less than 5 years reckonable service – sick pay will be reinstated if the entitlement is exhausted and the Final Review meeting does not take place within 12 months of the start of their sickness absence.

Reinstatement of sick pay in these circumstances will continue until the Final Review meeting takes place. It is not retrospective for any period of zero pay in the preceding 12 months of service.

3.15 The period of full or half sick pay detailed in 3.6 may be extended:

- where there is the expectation of a return to work in the short term and an extension would materially support a return and/or assist recovery. Particular consideration will be given to those staff without full sick pay entitlements.
- where it is considered that individual circumstances mean that an extension will relieve anxiety and/or assist recovery.

When an extension to sick pay is being considered for any reason this must first be discussed with an HR Adviser.

3.16 Sick pay is not normally payable for an absence caused by an accident due to active participation in sport as a profession, or where contributable negligence is proved.

3.17 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. Under these circumstances the
employee will be advanced a sum not exceeding the amount of sick pay payable under this scheme providing the employee repays the full amount of sickness allowance when damages are received. Once received, the absence will not be taken into account for the purposes of the scale set out in 3.6 above.

**Temporary Injury Allowance**

3.18 Employees on sick leave, and receiving either reduced pay or no pay, as a result of an injury or illness that is wholly or mainly attributable to their NHS employment will be eligible to apply for Temporary Injury Allowance. Applications should be made by the employee to their line manager who will make the decision on whether payment should be made, in conjunction with an HR Adviser. Further guidance may be sought from OHS or NHS Pensions.

3.19 Employees do not need to be members of the NHS Pension Scheme to apply for Temporary Injury Allowance.

3.20 Temporary Injury Allowance will stop when the individual returns to work or leaves their employment.

**Employee Responsibilities**

3.21 Employees are expected to:

- ensure regular attendance at work;
- communicate appropriately with their manager when absent from work;
- co-operate fully in the use of these procedures.

**Reporting Absence**

3.22 All employees must contact their line manager on the first day of absence as early as possible, and no later than 11.00 am or 2 hours before the shift starts. The employee must make this call. The only exception is where it is clearly not possible for employees to ring personally, such as admission to Hospital.

3.23 Employees must talk directly to their line manager and not leave messages with anybody else. If the line manager is unavailable, then the employee should contact an alternative nominated manager.

3.24 If an employee does not have a telephone at home alternative arrangements for reporting sickness must be made.

3.25 When reporting absence employees must give the following information:
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- the reason for the absence (if known);
- the expected length of absence (if known);
- whether a visit will be made to their GP, and if so, the date of the appointment.

Where possible the manager should be advised of any outstanding work that may require urgent attention during the period of absence. This will enable managers to better plan and allocate work.

3.26 In cases of continued absence, employees must contact their line manager again on the fourth day of absence to provide them with up to date information. Should the absence continue then the employee and the manager must decide upon the frequency of further/continued contact and the form that this will take. It is not sufficient to provide medical certificates as a means of maintaining contact. It should be noted that failure to maintain contact as per the agreement with the line manager, may result in the payment of occupational sick pay being delayed or withheld. Any decision to withhold or delay payment of occupational sick pay must be made in conjunction with an HR Adviser.

**Sickness Certification**

3.27 For absences lasting seven calendar days or less, on the first day back at work, employees will be required to complete a Sickness Self-Certificate. This should include the reason for absence. The Certificate will be countersigned by a manager and subsequently will be kept in a confidential file.

3.28 If an absence exceeds seven calendar days a doctor's medical certificate must be submitted to the line manager, no later than the tenth day of absence, covering the absence from the eighth day. The medical certificate is normally retained by the line manager and the absence recorded on the appropriate staff absence record form.

3.29 If an absence continues beyond the period covered by the initial medical certificate, further medical certificates must be submitted to give continuous cover for the period of absence. On eventual return to work employees must complete the NHSBSA’s Sickness Self-Certificate in respect of the first seven days or less not covered by a doctor's medical certificate.

3.30 If the doctor’s medical certificate does not specify the period of absence covered, it will be taken as covering a period of seven calendar days only.

**Sickness During Annual Leave**

3.31 If an employee falls sick during a period of annual leave either in this country or overseas, and the period of incapacity seriously interrupts the period of leave, then they may count the absence as sick leave provided they;
• Notify their line manager either in writing or by telephone at the earliest opportunity, and no later that the fourth continuous day of illness; and

• Provide a statement by a qualified medical practitioner; the statement should cover the period of the illness and the nature of the illness.

For information, a serious interruption of annual leave would be deemed as four or more days of continuous illness.

3.32 If an employee is absent on sick leave and has pre-booked annual leave then they must notify their manager as soon as possible of the nature of the leave, otherwise it will be assumed that the annual leave is being taken. If the employee intended to spend time at their normal place of residency then the leave may be credited back upon receipt of appropriate medical statements/Doctors notes.

3.33 If the employee intends to spend more than one night away from their normal place of residency whether it be overseas or in the UK, then the employee must provide a written statement from a medical practitioner advising that the holiday would be beneficial to their condition or recovery, and in no way would aggravate or cause detriment to the illness/injury. Where necessary, the NHSBSA will reimburse the cost of such letters. In addition, the NHSBSA may also choose to obtain a medical opinion from the Occupational Health Provider. If the leave is supported by a medical practitioner then the employee will have the option to continue with sick leave and have the annual leave credited back or take the time as annual leave, in which case sick pay, occupational and/or statutory as appropriate, will cease. If an employee is physically unable to return to work after a holiday they must submit a medical certificate which covers them from the day on which they were expected to return to work. Should the employee take the leave as sickness, then entitlements to sick pay both occupational and statutory will be in line with the normal eligibility rules.

3.34 Employees may, in exceptional circumstances, apply to carry over in excess of the normally agreed 5 days annual leave from one leave year to the next. The carry over of annual leave in these circumstances must be approved by the line manager in conjunction with Human Resources.

3.35 Where the request to continue with a pre-booked holiday is not supported by a medical practitioner, then annual leave should be taken.

3.36 Employees will not be entitled to an additional day off if they are sick on a statutory holiday.
Return To Work Meeting

3.37 On their return to work, employees will be required to attend a return to work meeting with their line manager to discuss their absence. If the employee has been absent with a highly sensitive condition he/she may ask for a manager of the same gender to manage the absence. The meeting is separate to an absence review meeting and will take place at an agreed time and in a private place.

3.38 The discussion should allow for an exchange of information and be as frank and as open as possible as this will prevent any misunderstandings concerning the nature of the absence. Managers should also take this opportunity to discuss any patterns or trends of absence that may emerge.

3.39 This will also enable the line manager to discuss any assistance, help, counselling or action on work-related issues that may be provided to enable an employee to return to work or prevent further absence occurring.

3.40 Notes and outcome of the meeting will be agreed and retained on file.

Short-Term Persistent Absence

Consultation and Discussion

3.41 The NHSBSA operates an accurate method of recording and monitoring levels of absence. If the amount of time being taken off for illness is giving cause for concern, managers will discuss this with employees at the return to work interview and provide them with a record of all absences from work. The individual will have the opportunity to explain any personal or work-related issues which may be a factor in the absence.

3.42 If absence levels continue to cause concern, then employees may be referred to the NHSBSA’s Occupational Health Service for an independent medical examination to determine whether there is an underlying medical reason for the absence. The Occupational Health Service is available to give both general and specific advice on the fitness of an employee for work, adjustments to the workplace where appropriate and likely return dates. Depending on the nature of the condition, further medical information may be sought by OHS from either the employee’s GP or Specialist.

3.43 Managers will discuss the findings of the report with the employee and will also consider any reasonable adjustments, These may include rehabilitation, job re-design, adaptations or adjustments for employees with a disability, redeployment, changes to the job or retraining. Workloads will be assessed and corrective action taken if overwork is putting an employee at risk of health problems.
3.44 Managers must arrange to conduct regular absence review meetings where levels of short-term absence remain high. The meetings should be recorded and notes given to the employee concerned. The frequency of such meetings will depend upon the circumstances of the individual case. As part of the review process, employees will be given the opportunity to improve their attendance.

3.45 Where the levels of short-term absence are such that they can no longer be sustained, and all reasonable adjustments have been considered, then the Authority may take steps to dismiss the employee.

3.46 Where the absence is the consequence of an underlying medical condition, and all options and adjustments have been pursued, dismissal on capability grounds may be identified as the only reasonable option. In this case the employee will be invited to attend a Final Review meeting with their line manager and a Human Resources Adviser. The employee will have attended at least three absence review meetings before the Final Review meeting takes place.

3.47 The employee has the right to be accompanied by a Trade Union Representative or a work colleague at all absence review meetings.

3.48 Prior to the Final Review meeting the employee will have attended a number of absence review meetings. They will receive a copy of the report, detailing the case history to date and considerations taken into account (e.g. DDA implications, redeployment, ill-health retirement) together with all other relevant documents, made to the person authorised to dismiss.

3.49 At the meeting, the employee will have the opportunity to present their case and submit supporting evidence.

3.50 Following the meeting the employee will be given a letter confirming the reason for dismissal, the date of dismissal, their right of appeal, any payment in lieu of contractual notice and any other outstanding payments to which they are entitled e.g. annual leave.

3.51 Where no underlying medical condition can be identified, then the employee may be subject to disciplinary action in line with the Disciplinary Policy. It should be noted that action can take the form of either a verbal, written or final warning, and could ultimately lead to dismissal. As part of the disciplinary process employees will be given the opportunity to improve their attendance.

3.52 Prior to formal disciplinary action being taken advice must be sought from Human Resources.
3.53 In cases of long-term absence line managers must arrange to conduct regular review meetings to discuss possible courses of action should the absence continue. These may include rehabilitation and return to work requirements, redeployment, ill-health retirement etc. The meetings should be recorded and notes sent to the employee concerned. Employees may be accompanied by a Trade Union Representative, a friend or family member. The line manager may also be accompanied. The frequency of such meetings will depend upon the circumstances of the individual case.

3.54 These meetings should be held at mutually convenient locations, with due regard made to the employee’s circumstances. If an employee is too ill to travel, the line manager may arrange to conduct a home visit at a mutually convenient time, if the employee agrees. However it should be noted that, as part of the return to work process, it may be more relevant to hold the meetings at a business location, or a suitable alternative venue.

3.55 Review and decision dates should be arranged taking into consideration the individual’s sick pay entitlements and there must be a review meeting before their sick pay ends.

3.56 In cases of long-term absence, managers are expected to exercise discretion in referring such absences to the Occupational Health Service and the following principles should be applied:

- The Occupational Health Service can be consulted for advice when the likelihood of a return to work or cause of absence is not known.
- A member of staff should be referred to the Occupational Health Service at an early stage in the absence if it considered that a referral may benefit the employee or the NHSBSA.
- The Occupational Health Service is available to give both general and specific advice on the fitness of an employee for work, adjustments to the workplace where appropriate and likely return dates.
- An employee may request an OHS referral, via their manager, for advice and support on the best way of seeking a return to work.

3.57 Where there is doubt regarding an employee’s ability to return to work on a permanent basis advice must be sought from the Occupational Health Service. Employees may be eligible to ill-health retirement benefits if they have two years continuous membership of the NHS Pension Scheme. Ill-health retirement should be discussed with the individual during the review meetings. Further information is available in the Retirement Policy.
3.58 Employees must make themselves available to attend Occupational Health referrals (this may include home visits by an Occupational Health representative or the attendance at an Occupational Health Office). However, due regard should be made to the accessibility of the location in relation to the nature of absence. Following the referral, Occupational Health Unit will then provide a written report to management, a copy of which will also be sent to the individual. In most cases management will meet with the individual to discuss the content of the report.

3.59 In some cases it may be more appropriate for Occupational Health to contact a third party for a medical opinion e.g. GP, Consultant etc. and consent must be obtained from the employee concerned. In these cases, any information provided by a third party is always disclosed to Occupational Health and not to management. Occupational Health will then provide management with a written summary of information provided which is pertinent to the employee’s ongoing employment. Employee consent is not required for the release of this report.

3.60 Occupational Health may recommend appropriate treatment, such as physiotherapy or cognitive behavioural therapy, in supporting staff to remain in work, or return to work, at the earliest opportunity.

**Returning To Work**

3.61 Wherever possible the NHSBSA will aid a return to work on a permanent basis. To establish the most effective way of doing this the NHSBSA may seek further medical advice.

3.62 This may include making reasonable adjustments to the employee’s job, allowing a phased return to work, or by allowing the employee to return to work on a reduced or alternative hours basis.

**Phased Return**

3.63 Where a phased return to work is recommended by the Occupational Health Unit, or a medical practitioner, the employee will be able to return to work on a part-time basis whilst receiving their full pay. This will be for a maximum period of four weeks, thereafter the employee must either substitute their annual leave for days not worked or receive payment only for the hours worked.

3.64 Where an employee requests a phased return to work themselves, they must take annual leave for days not worked or receive payment only for the hours worked.
Redeployment

3.65 If medical opinion is that an employee is unfit to return to their former employment, the possibility of alternative employment must be considered. (Please refer to the Redeployment Policy).

3.66 Where an employee’s pay reduces because of ill-health or injury, and they have the required membership of the NHS Pension Scheme, or the New NHS Pension Scheme, their membership at the higher rate of pay will be protected.

Ill Health Retirement

3.67 Throughout the absence management process all options, such as rehabilitation, redeployment, part time working, job redesign etc must be considered in conjunction with the employee. Where the medical opinion indicates that an employee is permanently unfit for employment, the individual has the option of applying for early retirement on the grounds of ill health, in line with the provisions of the NHS Pension Scheme. This option is only available to employees who have at least two years continuous, pensionable NHS employment. This option should be discussed with an individual in full at the appropriate time and as much information as possible will be provided to enable the employee to make an informed decision. For more information regarding this procedure please contact Human Resources.

Resignation

3.68 At any time during the process an employee may choose to resign from their employment. They are required to give their contractual notice and any outstanding accrued holiday entitlement will be paid in lieu.

3.69 Payment in lieu of notice may be agreed by the line manager in conjunction with the Human Resources Department.

Dismissal On The Grounds Of Capability

3.70 Before dismissal is considered, all other options as outlined above must have been discussed with the employee during the regular meetings that have taken place throughout the absence. Managers must be satisfied that all relevant information has been obtained and all relevant facts investigated. Documentation supporting this must be provided to the employee. In cases of long-term sickness, managers must also be mindful of the cessation of occupational sick pay entitlements in conjunction with the long-term prognosis.

In cases of short-term absence, managers must also consider the potential loss of specialist knowledge/experienced member of staff, the cost of replacing the employee, whether or not any flexible working arrangements could be agreed etc.
3.71 Should the dismissal of an employee be identified during the final care and concern meeting as the only appropriate option (i.e. all other options as outlined above have been investigated and found to be inappropriate) a Final Review meeting must be held with the employee in question, their line manager and a Human Resources Adviser.

3.72 Prior to this meeting the employee will receive a copy of the report, detailing the case history to date and considerations taken into account (eg DDA implications, suitable alternative employment, ill health retirement) together with all other relevant documents, made to the person authorised to dismiss.

3.73 At this meeting the employee will have the opportunity to present their case and submit supporting evidence. They have the right to be accompanied by a Trade Union Representative or a member of their family, a friend or work colleague. The employee has the right to appeal this decision.

3.74 Following the meeting the employee will be given a letter confirming the reason for dismissal, the date of dismissal, their right to appeal, details of any payment in lieu of contractual notice and any other outstanding payments to which they are entitled eg annual leave.

3.75 Where an employee is dismissed during the paid sick leave period they will be entitled to payment equivalent to their total occupational sick pay entitlement (full and half pay), plus payment in lieu of contractual notice and any outstanding annual leave.