Sickness Absence Policy

Document Control Sheet

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Unless this copy has been taken directly from the Trust Quality Management site (Q-Pulse) there is no assurance that this is the most up to date version.

This policy supersedes all previous issues.
## Version Control - Table of Revisions

All changes to the document must be recorded within the ‘Table of Revisions’.

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</tr>
</tbody>
</table>

This page should not be longer than one single page.
# Table of Contents

1. Introduction 5  
2. Purpose 5  
3. Scope 5  
4. Duties - Roles & Responsibilities 6  
  4.1 Executive Team 6  
  4.2 Line Managers 6  
  4.3 All Employees 7  
5. Glossary of Terms 8  
6. Sickness Absence 9  
  6.1 Disability Related Absence 9  
  6.2 Pregnancy Related Absence 9  
  6.3 Sickness Absence Reporting Procedure 10  
  6.4 FirstCare 11  
  6.5 Evidence of Incapacity 12  
  6.6 Unauthorised Absence and Patterns of Absence 12  
  6.7 Sick Pay 13  
  6.8 Temporary Injury Allowance (TIA) 14  
  6.9 Sick Leave and Holidays 15  
  6.10 Keeping in Contact during Sickness Absence 15  
  6.11 Medical Assessments 15  
  6.12 Return to Work Interviews 16  
  6.13 Returning To Work From Long Term Sickness Absence 17  
  6.14 Sickness Absence Meetings Procedure 18  
  6.15 Stage 1: First Sickness Absence Meeting 19  
  6.16 Stage 2: Further Sickness Absence Meeting(s) 21  
  6.17 Stage 3: Final Sickness Absence Meeting 22
Sickness Absence Policy

6.18 Adjustments to Procedure for Long Term Absence or Disability Related Absence

6.19 Right to Be Accompanied at Meetings

6.20 Appeals

7. Training Required for Compliance with this Policy

8. Equality and Diversity

9. Monitoring Compliance with and Effectiveness of this Policy

  9.1 Compliance and Effectiveness Monitoring

  9.2 Compliance and Effectiveness Monitoring Table for this policy

10. Consultation and Review of this Policy

11. Implementation of this Policy

12. References

13. Associated Documentation

14. Appendices

  Appendix A - Authority to Act

  Appendix B – Absence Management Process Flowchart

  Appendix C – Contact Telephone Numbers (to report absence)
1. Introduction

The North East Ambulance Service NHS Foundation Trust (the Trust) is a provider of front line urgent and emergency services, patient transport services and 111 non-emergency care. The Trust is committed to supporting its workforce whilst adhering to national targets and maintaining first rate patient care and good levels of attendance are essential to do this. High levels of sickness absence causes additional work pressure on the workforce and are a financial and operational risk to the viability and sustainability of our business.

2. Purpose

Sickness absence can vary from short intermittent periods of ill-health to a continuous period of long-term absence and have a number of different causes (for example, injuries, recurring conditions, or a serious illness requiring lengthy treatment).

We recognise that sickness cannot usually be prevented or controlled. Attendance at work can be managed, or managed with support, and all of the aims of this policy are to ensure that where there is a potential for improved levels of attendance, the options are explored so as to reduce the overall impact of sickness absence on the Trust as a provider of frontline emergency services.

We wish to ensure that the reasons for sickness absence are understood in each case and investigated where necessary. In addition, where needed and reasonably practicable, measures will be taken to assist those who have been absent by reason of sickness to return to work.

3. Scope

This policy applies to all employees. It does not apply to agency workers because their applicable sickness absence management procedures will be managed by their employer. It does not apply to consultants or self-employed contractors and in sickness absence situations, those persons should refer to their service agreements for the reporting and management process.

This policy has been implemented following consultation with the Joint Consultation Committee (JCC) and ratification at the Workforce Committee. Fair application and policy compliance is reviewed as a standard item agenda by the HR Strategy Group.

This policy does not form part of any employee’s contract of employment and we may amend it at any time through consultation with staff side and key stakeholders.

This policy has been prepared to complement the sickness absence provisions within the NHS Terms and Conditions of Service Handbook (currently section 14 (a) of amendment number 38).
Failure to comply with this policy may be treated as misconduct and dealt with under our Disciplinary Procedure.

Further details of how this policy is applied by line managers, applied to employees and managed by the Human Resources Team is contained in the Sickness Absence Policy – Employee User Guide and Management User Guide respectively.

This policy is also supported by a process flowchart which can be found in Appendix C and highlights the key stages of the absence management process.

**4. Duties - Roles & Responsibilities**

**4.1 Executive Team**

Our Executive Team has overall responsibility for the effective operation of this policy and for ensuring compliance with the relevant statutory framework. Day-to-day responsibility for operating the policy and ensuring its maintenance and review has been delegated to the Head of Human Resources in consultation with the JCC.

**4.2 Line Managers**

- Ensuring your health and safety in the workplace and the health and safety of your colleagues and our service users and visitors;
- Promoting attendance by setting standards and monitoring and reviewing absence levels;
- Communicating appropriately with you in respect of any injury, illness, medical condition or disability;
- Communicating appropriately in respect of any absences on a regular basis;
- Managing any absence fairly and in accordance with our sickness absence policy and procedure, including referring you where applicable for support from our Occupational Health Team;
- Understanding the reason for any sickness absence;
- Ensuring you are referred to report your absence to FirstCare; including the reason(s) for your absence and expected return to work date. It is not acceptable to record consent withheld – if ‘consent withheld’ is given as a reason for absence (e.g. if the employee feels uncomfortable to share this with their manager or their absence is reported by an individual other than themselves), this should be escalated to the next level of line management so that the actual reason for absence can be discussed with the employee;
- Exploring the impact of any disability; making reasonable adjustments in the workplace as deemed appropriate, which may support you to return to work or remain in work.
• Facilitating your attendance with Occupational Health services where appropriate;

• Arranging to meet with you following your period of absence to conduct your Return to Work interview, to update your FirstCare record and to review your previous periods of absence to determine whether a trigger point has been reached;

• Scanning all self-certification (SC1) forms and sending to the HR Helpdesk; updating FirstCare records and returning the original SC1 forms to the employee;

• Undertaking any risk assessments, with support from HR where required.

4.3 All Employees

All staff within North East Ambulance Service NHS Foundation Trust are responsible for ensuring that the principles outlined within this policy are universally applied by:

• Ensuring good levels of attendance at work, informing us of any problems and requesting our support as necessary;

• Ensuring your own health and safety and those of your colleagues in the workplace;

• Co-operating with us to help us understand the reason for your absence and progress our sickness absence procedure in any sickness absence situation;

• Keeping us informed of any medical issues that may impact upon your ability to undertake your job so that we can consider the impact of these and offer you support when you need it.

• In the event you feel you require support from our Occupational Health Service, you should discuss this with your line manager who will refer you into the service. You may self-refer to the Occupational Health Service for support and in doing so, you must therefore also report this to your line manager within 24 hours of making the referral, to ensure that your manager is aware that you are accessing this support. If you do not feel able to disclose this to your manager, this should be notified to the next level of line management.

• If your absence is associated with a work related issue which is likely to fall under the Dignity at Work policy, you should discuss this with your line manager, HR and the Trust’s Engagement Manager where applicable.

• Reporting your absence and submitting fit notes including self-certification paperwork (SC1 forms) promptly and in line with this policy;

• To notify your line manager as early as possible of your absence from work so that the appropriate arrangements can be made and to minimise the impact of your absence on service provision. Due to the operational nature of our
organisation, there are dedicated numbers for operational staff to call in order to speak to a manager. Staff should be aware of the correct telephone number to contact, which can be found in Appendix D of the policy.

- To notify your period of absence to FirstCare.

- Keeping in touch with us during any period of absence and attending meetings and medical appointments when requested to do so;

- Working with us to explore all of the options available to bring any period of sickness absence to an end, and to facilitate a return to work, including any phased return to work provisions and/or performing alternative duties until you are able to return, where applicable, to your primary role. This will also involve obtaining confirmation from your GP and/or the Occupational Health Consultant that you are fit for work.

- Working with us to ensure compliance with this policy and procedure;

- Ensuring you do not abuse the sickness absence and/or pay provisions.

- Take care of your own health and safety and that of others, observe applicable safety rules and follow instructions for the safe use of equipment. Report any health and safety concerns immediately to your line manager, and in line with the Trust’s Reporting and Investigation of Adverse Events Policy (POL-CCPS-RM-4).

- Co-operate with managers on health and safety matters including any investigation into health and safety concerns, risk assessments and assessment of adjustments in connection with any disability. Failure to do so may be treated as misconduct and dealt with under our Disciplinary Procedure.

We also carry out general workplace risk assessments periodically. The purpose is to assess the risks to health and safety of employees, visitors and other third parties as a result of our activities, and to identify any measures that need to be taken to control those risks. We may arrange a specific risk assessment in connection with any accident, injury, illness, medical condition including pregnancy or disability.

### 5. Glossary of Terms

This policy uses the following terms:

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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<tbody>
<tr>
<td>Healthcare professionals</td>
<td>Occupational Health, Physiotherapist, Consultant, GP or another medical specialist</td>
</tr>
<tr>
<td>Redeployment (Prior Consideration)</td>
<td>Reassignment to another job role as a reasonable adjustment (in cases where staff are unfit to remain in their own role)</td>
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<tr>
<td>Companion</td>
<td>Trade union representative or work colleague</td>
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<tr>
<td>Long term sickness</td>
<td>28 days continuous sickness absence</td>
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### Term | Description
---|---
FirstCare | The Trust’s absence recording/ monitoring system
Equality Act (2010) | Legislation which protects individuals from discrimination in the workplace and the wider society - covers the 9 protected characteristics (Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion and Belief, Sex and Sexual Orientation)
Disability provisions (of the Equality Act) | Requirement for employers to consider all reasonable adjustments when supporting staff with an underlying disability to remain/ return to work
Prior consideration | Status afforded to individuals to review opportunities for redeployment elsewhere in the Trust (where they are unable to remain in their current post for medical reasons) for a maximum period of 13 weeks

### 6. Sickness Absence

#### 6.1 Disability Related Absence

Sickness absence may sometimes result from a disability. At each stage of the policy, consideration will be given to understanding the nature and day to day effects of any disability and whether reasonable adjustments could be made to the requirements of a job or other aspects of working arrangements that will provide support at work and/or assist a return to work, in accordance with the disability provisions of the Equality Act (2010).

If you consider that you are affected by a disability or any medical condition which affects your ability to undertake your work, you should inform your line manager. You should not wait for the sickness absence procedure to be used before doing so.

However, the Trust will work with you to identify a phased return to work plan, including alternative duties, additional training and support required to facilitate your return to work on a timely basis, where available.

#### 6.2 Pregnancy Related Absence

Employees should notify us as soon as possible that they are pregnant to ensure that a risk assessment can be undertaken, to identify any potential adjustments which may need to be made to their role and to address any health and safety concerns. An initial risk assessment will be undertaken and these will be repeated at key stages (as required) throughout the duration of the pregnancy. Further guidance is contained within the Trust’s Family Friendly Policy and New and Expectant Mothers Policy (under development).
Where a period of absence is attributable to pregnancy, sickness absence will not contribute towards the trigger points however, any such sickness will be managed in accordance with this policy to facilitate a return to work as soon as possible with any necessary support or adjustment to duties during the pregnancy. This may lead to formal review meetings being held in line with this policy as a supportive measure.

Employees who are absent due to pregnancy related illness are still required to comply with the requirements of this policy in terms of reporting their absence to their line manager and FirstCare and submitting evidence of their incapacity (self-certification SC1 form or Fit Note issued by their GP) as appropriate.

When an employee has been absent due to pregnancy, managers must contact the Occupational Health Team as soon as possible to discuss whether a referral would be appropriate, prior to any referral being made.

If a staff member is absent due to pregnancy related illness on or after the fourth week before the expected week of confinement, their ordinary maternity leave will commence the day after their first completed day of sickness absence.

Where a staff member who is pregnant suffers from non-pregnancy related sickness absence, these absences will be counted as a trigger in the normal way in accordance with this procedure.

6.3 Sickness Absence Reporting Procedure

If you are taken ill while at work you should report this to your line manager or on call duty manager as soon as possible. Due to the operational nature of our organisation, there are dedicated numbers for operational staff to call in order to speak to a manager. Staff should be aware of the correct telephone number to contact, which can be found in Appendix D of the policy.

If you are injured whilst at work, you should report this to your line manager or duty manager (as above) at the earliest opportunity and ensure that the form formally known as NEAS07 (Incident Reporting Form (FM-CCPS-RM-1)) is completed either by you or your line manager as early as possible after the incident. The NEAS07 (Incident Reporting Form (FM-CCPS-RM-1)) will be reviewed as part of any formal stage meetings held under this policy and failure to complete a NEAS07 (Incident Reporting Form (FM-CCPS-RM-1)) may result in the incident not being regarded as work related. It is therefore not acceptable for a NEAS07 (Incident Reporting Form (FM-CCPS-RM-1) to be completed retrospectively (e.g. several weeks or months after the incident has occurred). Staffs are also advised to refer to the Trust’s Reporting and Investigation of Adverse Events Policy (FM-WOD-HR-8) which details fully the responsibilities of all employees when an adverse event arises.

If you are taken ill or injured whilst at work, your manager will also make arrangements for your welfare and in the case of an injury at work, to commence an investigation into the events which have taken place. If you cannot attend work because you are ill or injured you should normally telephone your line manager as early as possible, no later than 30 minutes after the time when you are normally expected to start work.
The following details should be provided:

- The nature of your illness or injury, its impact on you and the prognosis for recovery;
- The expected length of your absence from work;
- Contact details;
- Any outstanding or urgent work that requires attention.

These arrangements apply in addition to and regardless of whether you make use of the reporting monitoring facility in use by the Trust at that time. For individuals undertaking a patient facing role, you are required to discuss your case as outlined above with your line manager prior to this requirement being satisfied You must record the reason for your absence with FirstCare (the same as discussed with your manager) and it is not acceptable for you to advise consent withheld, other ailment etc.

If over 50% of the working day has been worked prior to you reporting sick then consideration will be made to discount this occasion from the sickness absence triggers. However should the absence continue to the next working day the sickness occasion would count as normal. Where a trend is identified associated with employees taking leave under this provision on a regular basis, then the period (hours) of sickness will be recorded as absence on the employee record.

6.4 FirstCare

Currently, FirstCare is used as the Trust’s central absence recording system.

FirstCare is not a replacement for effective communication with your line manager. You must notify your line manager of your absence in the first instance when you will then be directed to notify FirstCare. This will ensure that your absence is properly recorded and that any support or adjustments we can offer to you to help facilitate your return to work can be undertaken.

Managers should ensure that:

- Any sickness absence that is notified to them is recorded and reported to the reporting monitoring partner by the employee (currently FirstCare)
- Arrangements are made, where necessary, to cover work and to inform colleagues of the absence (whilst maintaining confidentiality);
- Agree with the employee how and when contact will be maintained during the period of absence, to gain updates on their progress and any expected return to work.

It is your responsibility to keep your personal information up to date via your line manager including your telephone number, home address, etc.
Where appropriate, your manager may refer you to our Occupational Health Team, using the FirstCare system to understand any support which you require regardless of whether this need is identified by yourself or as part of the absence review process.

6.5 Evidence of Incapacity

For sickness absence of up to seven calendar days you must complete a self-certification (SC1) form which is available from the HR Helpdesk or via the intranet. For absence of more than a week you must obtain a certificate from your doctor (a "Statement of Fitness for Work") stating that you are not fit for work and the reason(s) why. This should be forwarded to your line manager as soon as possible (who will copy it, scan it to the HR Helpdesk and return the original to you). If your absence continues, further Fit Notes must be provided to cover the whole period of absence to ensure a continuous sickness record is maintained.

Failure to either complete an SC1 form or to provide an appropriate fit note may result in your contractual sick pay ceasing to be paid, unless there are valid reasons as to why you are unable to do so (e.g. if you are admitted to hospital). In this situation, employees will have the right to appeal against the decision to withhold pay. Sick pay may also cease to be paid if you fail to comply with the requirements of this policy by failing to maintain appropriate contact with your line manager during your period of absence.

Should a Fit Note subsequently be provided retrospectively, covering the period of otherwise unauthorised absence, consideration will be given to reinstating any sick pay which has been withheld. In these cases, reinstatement of outstanding sick pay must be authorised by the appropriate Director, together with an explanation of the reason for the delay.

If your doctor provides a Fit Note stating that you "may be fit for work" you should inform your line manager immediately. We will discuss with you any additional measures that may be needed to facilitate your return to work, taking account of the advice received. This would take place at a return-to-work meeting in advance of your return. If appropriate measures cannot be taken, you may need to remain on sick leave and we will set a date to review the situation. Wherever possible, we will accommodate any suggestions or explore alternatives with you.

Where we are concerned about the reason for absence, we may require a Fit Note for each absence regardless of duration. In such circumstances, we will cover any costs incurred in obtaining such Fit Notes, for absences of a week or less, on production of a doctor's invoice.

6.6 Unauthorised Absence and Patterns of Absence

In all cases of absence we expect you to make reasonable attempts to contact work. Cases of unauthorised absence cause serious disruption to the efficiency of our service and may be dealt with under our Disciplinary Procedure.

Absence that has not been notified according to the sickness absence reporting
procedure will be treated as unauthorised absence (without pay or reinstatement of pay), which could amount to possible disciplinary action in accordance with the Trust’s Disciplinary policy and be referred to third party bodies, where applicable.

If you do not report for work and have not telephoned your line manager to explain the reason for your absence, your line manager will try to contact you, by telephone and in writing if necessary. This must not be treated as a substitute for reporting sickness absence. During such periods, the absence will be counted as unauthorised absence which is without pay or reinstatement of pay and will be dealt with in accordance with the relevant Trust policy. Patterns of absence that give rise to concern may be referred to third party bodies, where applicable.

**6.7 Sick Pay**

You will be entitled to receive enhanced sick pay in accordance with the NHS Terms and Conditions of Service Handbook provided you have complied with this policy and procedure in all respects and subject to the conditions set out. Enhanced sick pay is inclusive of any statutory sick pay (SSP) that may be due for the same period.

Please refer to the NHS Terms and Conditions of Service Handbook (which takes precedence over any terms set out in your contract of employment) for your entitlements and conditions for payments of enhanced sick pay benefits.

Once you have exhausted your entitlement to enhanced sick pay you will continue to receive any SSP due to you.

If a period of sickness absence is, or appears to be, attributable to negligence, nuisance or breach of any statutory duty on the part of a third party, in respect of which damages are or may be recoverable, you must immediately notify your line manager and HR of that fact and of any claim, compromise, settlement or judgment made or awarded in connection with it and all relevant particulars that we may reasonably require.

If we require you to do so, you must co-operate in any related legal proceedings and refund to us that part of any damages or compensation you recover that relates to lost earnings for the period of sickness absence as we may reasonably determine, less any costs you incurred in connection with the recovery of such damages or compensation, provided that the amount to be refunded to us shall not exceed the total amount we paid to you in respect of the period of sickness absence.

Failure to comply with this rule may be deemed as an attempt to defraud the Trust and NHS and may be treated as gross misconduct. Any employer and employee pension contributions will continue subject to the relevant scheme rules during any period of enhanced sick pay or SSP.

Consideration to an extension of enhanced sick pay provisions will only be considered if:

- you are not in receipt of the NHS full sick pay entitlement; and
- you have/will exhaust the sick pay entitlement you do receive; and
• there is evidence of ongoing treatment; and

• your healthcare professional can provide a report which supports your return to work in the short term and an extension would materially support a return and/or assist recovery; or

• the Trust fails to implement reasonable adjustments (for those protected under the Equality Act) and this prevents an employee working, and/or contributes to the sickness

Applications to extend enhanced sick pay provisions must be made by the line manager to the appropriate Director who will arrange for the application to be considered by a panel consisting of HR, Occupational Health, Finance and the employee’s line manager, where applicable.

Extensions of enhanced sick pay entitlement will be reviewed on a monthly basis and the Trust has the right to cease the enhanced payment if the employee’s situation should change. In circumstances where it is known at the outset of the review, that a further period of paid leave (half pay or full pay) that a longer duration will be required (up to 3 months maximum per review period), a request will be considered for authority to extend the arrangement for up to a 3 month period prior to the next review taking place (e.g. in exceptional circumstances such as cancer treatment).

6.8 Temporary Injury Allowance (TIA)

Temporary Injury Allowance (TIA) is an addition to an employee’s contractual sick pay entitlements. Payment of TIA will be in accordance with the NHS Terms and Conditions of Service Handbook.

If an employee is on authorised sickness absence, with reduced or no pay because of an injury/disease they incurred that is wholly or mainly attributable to their actual NHS duties they may be eligible for TIA payments.

TIA is paid by the Trust and tops up the income of an employee, e.g. pay, NHS pension and certain social security benefits, up to 85% of the average pay they were receiving immediately before pay was reduced due to the injury/disease. TIA is not payable if income is more than 85% of average pay. When the employee returns to work or leaves employment the TIA stops. It is subject to income tax deductions, but not NI or pension contribution deductions.

There is no minimum qualifying length of employment to be considered eligible for TIA.

TIA may not be considered if a person is injured travelling on a normal journey to and from work, goes off sick as a result of investigations or disciplinary action or is an NHS reservist who is injured whilst serving with the armed forces.

If an employee sustains an injury or disease mainly due to or seriously aggravated by their own culpable negligence or misconduct, they may not be eligible for TIA.
6.9 Sick Leave and Holidays

If you become sick or injured while on annual leave such that you would be unfit for work you may ask us to treat the period of incapacity as sick leave and reclaim the annual leave.

To be able to claim sick pay you must notify your manager of your sickness or injury immediately, and the usual requirements for medical certificates, etc. will also apply, even if you are abroad.

If you are on sick leave you may choose to cancel any pre-arranged annual leave that you are no longer able to proceed with and would otherwise coincide with your sick leave. In particular this refers to any annual leave period where you are out of the country and are unavailable to remain contactable and attend meetings as required under this policy. Should you proceed with this period of annual leave it should be confirmed by our Occupational Health department that it would not exacerbate your condition and prolong a return to work. You should notify your manager as soon as possible that you wish to do this.

If your period of sick leave extends into the next holiday year, or if there is not enough time left in the current holiday year to make it practicable to take your remaining statutory holiday entitlement, you can carry any unused statutory holiday entitlement (currently up to a maximum of 28 days including public holidays on a pro-rata basis) over to the following leave year to be used within three months of your return to work. Any carried over annual leave not taken within 15 months of the end of the holiday year in which it accrues (whether or not you have returned to work) will be lost.

6.10 Keeping in Contact during Sickness Absence

If you are absent on sick leave you should expect to be contacted on a weekly basis (unless agreed otherwise) by your line manager in order to discuss your wellbeing, expected length of continued absence from work and any of your work that requires attention. Such contact is intended to provide reassurance, encourage good communication and ensure that we deal with your absence from work properly and promptly. Contact will be kept to a reasonable minimum and will usually be via telephone. In the event you are non-contactable, you must call your manager as a matter of urgency. Failure to do so may result in your entitlement to sick pay ceasing.

Once your period of absence has extended to 28 days, you will be invited to attend a Long Term Review Meeting every 28 days, with your manager. An HR representative may also attend the meeting. Failure to provide the appropriate evidence of your incapacity may also impact on your sick pay being paid (Section 6.5). If you have any concerns while absent on sick leave, whether about the reason for your absence or your ability to return to work, you should contact your line manager as a matter of urgency.

6.11 Medical Assessments

We may, at any time in operating this policy, require you to consent to an appointment with our Occupational Health Service.
This may include being assessed by the Occupational Health Consultant. You will be asked to agree that any report produced in connection with the aforementioned appointment may be disclosed to us and that we may discuss the contents of the report with our advisers.

You may be asked by the Occupational Health Service for consent to approach your GP and/or treating Specialist for a report. In doing so, the latter will be for the attention of the Occupational Health Service only and will not be shared with your Line Manager or HR unless you give written consent.

In the event you fail to attend any medical appointment where the Trust has incurred a charge for your attendance, the Trust may recharge this expense to you. Consideration of the reason(s) for your non-attendance will be taken into account before any final decision is made.

Failure to attend medical appointments or to share medical reports with the Occupational Health Service (where the Trust will reimburse the employee for any costs incurred) may lead to any entitlement you have to sick pay ceasing, unless there are exceptional circumstances (e.g. in hospital). In this situation, the employee will have the right to appeal against this decision.

You can also request via your line manager to be referred to Occupational Health so they can review your medical condition and/or provide any advice required. Please be aware that should you self-refer to the Occupational Health Service, your FirstCare record will not be updated and may therefore be non-compliant with this procedure. You must therefore notify your line manager of any self-referral within 24 hours to ensure that your FirstCare record can be updated accordingly and that you remain compliant with this policy.

6.12 Return to Work Interviews

If you have been absent on sick leave we will arrange for you to have a return-to-work meeting with your line manager within 14 calendar days of your return to work.

A return-to-work meeting enables us to confirm the details of your absence and check whether there are any measures or adjustments (in disability situations) that we need to put in place on either a temporary or permanent basis to ensure your safety and welfare at work. It also gives you the opportunity to raise any concerns or questions you may have, and to bring any relevant matters to our attention.

Managers and employees are strongly encouraged to make effective use of those meetings to communicate about the employee's needs. A return to work form should be completed. The questions within the form are a useful point for consideration but the meeting should not be confined to those issues alone.

Where your doctor has provided a certificate stating that you "may be fit for work" we will contact you (in advance of your return) and hold a return-to-work interview to discuss any additional measures that may be needed to facilitate your return to work, taking account of your doctor's advice, including a phased return to work programme where applicable. During your phased return, you may be required to undertake a period of ‘alternative duties’ until Occupational Health confirm your fitness to return to your normal duties.
This period will be as short in duration as possible (typically 4 to 13 weeks).

In the event you are deemed unfit to return to your role after this period, any entitlement to receive Unsociable Hours Payments (if you are not working on a shift basis) will be withdrawn. Consideration will be given to your redeployment to another role within the Trust depending upon the time required to become fit, with reviews undertaken on a case by case basis.

Wherever possible, employees will be given the choice of whether to pursue alternative duties (where these are available) on the basis that their entitlement to Unsociable Hours Payments will cease, or to return to sick leave rather than medical suspension and this will be at the appropriate remuneration. This will be communicated to staff prior to commencing the period of alternative duties.

Operational staff, who are in receipt of enhanced sick pay, will be invited to attend a return to work interview prior to commencing your first shift. Should there be a change in circumstance between the return to work interview and the actual shift, it is your responsibility to contact your line manager to update them and discuss the impact of any change on the original plans.

If a return to your substantive position is not possible, discussions will commence associated with your transfer to Prior Consideration status or possible Ill Health Retirement.

6.13 Returning To Work From Long Term Sickness Absence

We are committed to helping employees return to work from long-term sickness absence. As part of our sickness absence meetings procedure we will, where appropriate and possible, support returns to work by:

- obtaining medical advice
- making reasonable adjustments to the workplace, working practices and working hours and by considering temporary or permanent redeployment;
- agreeing a return-to-work programme

If you are unable to return to work in the longer term, we will consider whether you are entitled to any benefits under your contract (enhanced by the NHS Terms and Conditions of Service Handbook) and/or any insurance schemes we operate, in addition to or as an alternative to your continuing employment. In complex cases, where there is not a clear likelihood of a return to work, a case review meeting will be held with all parties to determine the most appropriate way forwards.

All employees involved in such cases, will be offered the opportunity to transfer to Prior Consideration status to review opportunities for redeployment elsewhere in the Trust for a maximum period of 13 weeks. If at the end of the (up to) 13 weeks, suitable alternative employment within the Trust is not identified, the decision may be taken to move to a final review meeting. This will also be the case where an employee declined the opportunity to be redeployed. In such cases, other options such as Ill health retirement may be considered.
In the event you have been identified as being unfit to return to your normal duties during this period and have already undertaken a period of alternative duties, any entitlement to receive Unsociable Hours Payments, if you are not working on a shift basis, will be withdrawn.

Where an employee declines the opportunity to be redeployed, the decision may be taken to move to a final review meeting where other options such as Ill Health Retirement may be considered.

6.14 Sickness Absence Meetings Procedure
We will apply this procedure whenever we consider it necessary, including, for example, if:

- You have been absent due to illness on three occasions in a rolling 12 month period (looking at the 12 months immediately prior to the first day of absence);
- You and your line manager have discussed matters at a return-to-work interview that require investigation;
- You have been absent for an overall total of 10 working days or more in a rolling 12 month period; and/or
- There is a clear pattern of absence. Some examples of this could be where an employee is:
  - regularly absent on a certain day,
  - regularly absent adjoining annual leave,
  - regularly absent when rostered to work Christmas/Bank Holiday,
  - regularly absent on dates when annual leave has been refused or during school holiday periods,
  - regularly absent in the four weeks following completion of an improvement action plan
  - regularly absent at the same time every year

It is important that the Trust understands patterns as they are essential to identifying underlying issues where additional support could be given. As such, the full absence history for an employee may be reviewed to understand all of the circumstances involved with the case.

In considering whether you have reached a trigger point, all absences which have taken place within the previous 12 month period will be considered, including those associated with accidents at work which will still be taken into account as part of this process as they relate to an absence from work. In these circumstances, a NEAS07 (Instant Reporting Form (FMCCPS-RM-1)) must be completed as soon as possible after the incident (by either the employee or line manager). Failure to complete a NEAS07 (Instant Reporting Form (FMCCPS-RM-1)) may result in the absence not
being treated as an accident at work.

The above triggers will be calculated on a pro rata basis if you work part time.

You will receive a minimum of 7 calendar day’s written notice of the meeting. You will also be provided with details of your absence history for discussion at the meeting. The meeting will be conducted by your line manager and may be arranged to coincide with your return to work, in the event you have hit any trigger points during your period of absence. You may be accompanied by a workplace colleague or staff side representative to the meeting.

You must take all reasonable steps to attend a meeting. If you or your companion are unable to attend at the time specified you should immediately inform your line manager who will seek to agree an alternative time, provided this does not result in an unreasonable delay to the meeting being held.

A meeting may be adjourned if your line manager is awaiting further medical advice, needs to gather any further information or give consideration to matters discussed at a previous meeting. You will be given a reasonable opportunity to consider any new information obtained before the meeting is reconvened.

Confirmation of any decision made at a meeting, the reasons for it, and of the right of appeal will be given to you in writing along with the agreed Action Plan within 7 days of a sickness absence meeting taking place.

The effective date of any warning being issued will be the date on which the meeting is held or when the hearing manager advises you of the outcome of the hearing (if they have adjourned to undertake additional investigation/review). The formal review meeting will be held within 14 calendar days of the return to work unless in exceptional circumstances. Any delays to this meeting being held must be communicated to the employee and must be clearly documented in the outcome letter following the meeting, including the reason for the delay.

Should a sanction be issued at a formal review meeting when the meeting is held outside of the 14 calendar days of return to work, this will be offset against the length of the sanction however the effective date of the sanction will remain as the date of the meeting, e.g. if the employee returns to work on 1 June, and the formal review meeting is held on 1 July (at which a 6 month sanction is issued) the effective date of the sanction will be 1 July, however the length of the warning will be for 5.5 months to take account of the delay.

Your line manager will arrange for you to attend an appointment with our Occupational Health Team, prior to you attending an absence meeting, should this be required

6.15 Stage 1: First Sickness Absence Meeting

This will follow the procedure set out in paragraphs 6.19 on the arrangements for and right to be accompanied at sickness absence meetings.

The purposes of a first sickness absence meeting may include:
• Discussing the reasons for absence and a review of your absence history over the last 12 months, including any patterns or trends in absence.

• Where you are on long-term sickness absence, determining how long the absence is likely to last.

• Where you have been absent on a number of occasions, determining the likelihood of further absences.

• Considering whether advice from Occupational Health and/or other medical advice is required (if this has not already been actioned).

• Considering what, if any, measures or reasonable adjustments might improve your health and/or attendance.

• Agreeing a way forward and a timescale for review and/or a further meeting under the sickness absence procedure.

• Review pay arrangements in line with the NHS Terms and Conditions of Employment Handbook.

• Considering whether formal action is required: If formal action is taken you will receive a 6 month warning (along with an Action Plan detailing the improvement expected in that period). Breach of this Action Plan may result in you being invited to a Stage 2 meeting.

The formal review meeting will be held within 14 calendar days of the return to work unless in exceptional circumstances. Any delays to this meeting being held must be communicated to the employee and must be clearly documented in the outcome letter following the meeting, including the reason for the delay.

Should a sanction be issued at a formal review meeting when the meeting is held outside of the 14 calendar days of return to work, this will be offset against the length of the sanction however the effective date of the sanction will remain as the date of the meeting, e.g. if the employee returns to work on 1 June, and the formal review meeting is held on 1 July (at which a 6 month sanction is issued) the effective date of the sanction will be 1 July, however the length of the warning will be for 5.5 months to take account of the delay.

The effective date of any warning being issued, will be the date on which the meeting is held or when the hearing manager advises you of the outcome of the hearing (if they have adjourned to undertake additional investigation/review).

If exceptional circumstances exist associated with your period of absence and following discussion with the HR Team, your line manager may decide not to proceed to invite you to a Stage 1 meeting (e.g. post operation and house-bound, cancer treatment). Should this be the case, they will document this information and issue this to you in the form of a letter as well as updating the reason on your FirstCare record. In the event you have a further period of absence within the forthcoming period, you will automatically hit a trigger point and will be invited to attend a Stage 1 Meeting, where a warning and action plan may be issued.
6.16 Stage 2: Further Sickness Absence Meeting(s)

Depending on the matters discussed at the first stage of the sickness absence procedure, a further meeting or meetings may be necessary. Arrangements for meetings under the second stage of the sickness absence procedure will follow the procedure set out in paragraphs 6.19 on the arrangements for and right to be accompanied at sickness absence meetings.

The purposes of further meeting(s) may include:

- Discussing the reasons for and impact of your ongoing absence(s).
- Where you are on long-term sickness absence, discussing how long your absence is likely to last.
- Where you have been absent on a number of occasions, discussing the likelihood of further absences.
- If it has not been obtained, considering whether a referral should be made to Occupational Health and/or whether other medical advice is required. If it has been obtained, considering the advice that has been given and whether further advice is required.
- Considering your ability to return to/remain in your job in view both of your health related capabilities, our business needs and any adjustments that can reasonably be made to your job to enable you to do so, including the potential for temporary or permanent re-deployment opportunities and whether any adjustments can reasonably be made to assist in redeploying you.
- Considering whether placing you on the redeployment register would be appropriate.
- Agreeing an appropriate return-to-work programme where necessary
- If it is considered that you are unlikely to be able to return to work from long-term absence, whether there are any benefits for which you should be considered, such as Ill Health Retirement, redeployment, etc. and agreeing a way forward and timescale for review and/or a further meeting(s). This may, depending on steps we have already taken, include warning you that you are at risk of dismissal.
- Reviewing sick pay arrangements in line with the NHS Terms and Conditions of Employment Handbook.
- Considering whether formal action is required: If formal action is taken you will receive a 12 month warning (along with an Action Plan detailing the improvement expected in that period). Breach of this Action Plan may result in you being invited to a final stage meeting and, depending on steps we have already taken, include warning you that you are at risk of dismissal.
The formal review meeting will be held within 14 calendar days of the return to work unless in exceptional circumstances. Any delays to this meeting being held must be communicated to the employee and must be clearly documented in the outcome letter following the meeting, including the reason for the delay.

Should a sanction be issued at a formal review meeting when the meeting is held outside of the 14 calendar days of return to work, this will be offset against the length of the sanction however the effective date of the sanction will remain as the date of the meeting, e.g. if the employee returns to work on 1 June, and the formal review meeting is held on 1 July (at which a 6 month sanction is issued) the effective date of the sanction will be 1 July, however the length of the warning will be for 5.5 months to take account of the delay.

The effective date of any warning being issued, will be the date on which the meeting is held or when the hearing manager advises you of the outcome of the hearing (if they have adjourned to undertake additional investigation/review).

If exceptional circumstances exist associated with your period of absence and following discussion with the HR Team, your line manager may decide not to proceed to invite you to a Stage 2 meeting (e.g. post operation and house-bound, cancer treatment). Should this be the case, they will document this information and issue this to you in the form of a letter as well as updating the reason on your FirstCare record. In the event you have a further period of absence within the forthcoming period, you will automatically hit a trigger point and will be invited to attend a Stage 2 Meeting, where a warning and action plan may be issued.

6.17 Stage 3: Final Sickness Absence Meeting

Where you have been warned that you are at risk of dismissal, we may invite you to a meeting under the third stage of the sickness absence procedure. Arrangements for this meeting will follow the procedure set out in paragraphs 6.19 on the arrangements for and right to be accompanied at sickness absence meetings.

You will be issued with a Management Statement of Case and the associated appendices which will be referred to through the meeting (letters, occupational health reports etc.), at least 7 calendar days prior to the meeting taking place.

You will be invited to attend an Occupational Health review prior to the meeting taking place to ensure you are mentally and physically fit to attend the meeting as well as to provide the latest information associated with your medical condition.

The purposes of the meeting will be:

- To review the meetings that have taken place and matters discussed with you.

- Where you remain on long-term sickness absence, to consider whether there have been any changes since the last meeting under stage two of the procedure, either as regards your possible return to work or opportunities for return or redeployment.

- To consider any further matters that you wish to raise.
• To consider whether there is a reasonable likelihood of you returning to work or achieving the desired level of attendance in a reasonable time.

• To consider the possible termination of your employment and any alternatives;

• To review pay arrangements including ill-health early retirement

If exceptional circumstances exist (e.g. post operation recovery, cancer treatment) associated with your period of absence and following discussion with the HR Team, your line manager may decide not to proceed to invite you to a Stage 3, Final Review meeting. Should this be the case, they will document this information and issue this to you in the form of a letter as well as updating the reason on your FirstCare record. In the event you have a further period of absence within the forthcoming period, you will automatically hit a trigger point and will be invited to attend a Stage 3 Final Review Meeting, where your employment may be terminated;

Termination will normally be with full notice or payment in lieu of notice. The effective date of dismissal will be the date on which the meeting is held or when the hearing manager advises you of the outcome of the hearing (if they have adjourned to undertake additional investigation/review).

6.18 Adjustments to Procedure for Long Term Absence or Disability Related Absence

In long term absence or disability related absence, we may adjust the procedure to include more than three meetings. In particular, we will invite you to a meeting when you have been continuously absent for 28 days or more and thereafter, to attend at least monthly meetings with us.

The policy is flexible to take account of disabilities and in particular, serious illnesses. For example, where an employee is terminally ill, it is unlikely that we would rigidly enforce our procedures and managers are encouraged to work with the employee to manage the process sensitively.

In disability related situations, the absence triggers may be increased as a reasonable adjustment after consultation with Occupational Health, prior to inviting you to attend a sickness absence review meeting.

6.19 Right to Be Accompanied at Meetings

You may bring a companion to any meeting or appeal meeting under this procedure. Your companion may be either a trade union representative or a colleague.

Employees are allowed reasonable time off from duties without loss of pay to act as a companion. However, they are not obliged to act as a companion and may decline a request if they so wish.

We may at our discretion permit other companions (for example, a family member) where this will help overcome particular difficulties caused by a disability, or difficulty understanding English.
A companion may make representations, ask questions, and sum up your position, but will not be allowed to answer questions on your behalf. You may confer privately with your companion at any time during a meeting.

6.20 Appeals

You may appeal against the outcome of any stage of this procedure and you may bring a companion to an appeal meeting (see paragraph 6.19).

An appeal should be made in writing, stating the full grounds of appeal, to the Head of Human Resources at Bernicia House, within 14 calendar days of the date on which the decision was sent to you using the Sickness Absence Policy – Appeal Pro-forma (FM-WOD-HR-8)

Unless it is not practicable, you will be given one week’s written notice of the appeal meeting date. In cases of dismissal the appeal will be held as soon as possible, within 28 days of the dismissal taking place. Any new matters raised in an appeal may delay an appeal meeting and/or outcome if further investigation is required.

You will be provided with written details of any new information which comes to light before an appeal meeting. You will also be given a reasonable opportunity to consider this information before the meeting.

Where practicable, an appeal meeting will be conducted by a manager senior to the individual who conducted the sickness absence meeting.

The final decision will be confirmed in writing as soon as possible after the appeal meeting. There will be no further right of appeal.

The date that any dismissal takes effect will not be delayed pending the outcome of an appeal. However, if the appeal is successful, the decision to dismiss will be revoked with no loss of continuity of service, reckonable service or pay.

7. Training Required for Compliance with this Policy

All line managers and HR Team members who work with this policy have attended the ‘Sickness Absence Policy – A Practical Guide for Managers’ training event prior to conducting any discussions with employees associated with their absence from work. Further information has also been provided at the training events in terms of the issuing of ‘A Practical Guide for Managers’ and ‘A Practical Guide for Employees’ which are both accessible under the HR & Training Section of the Trusts intranet site.

8. Equality and Diversity

The Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on the grounds of any protected characteristic (Equality Act, 2010).
An equality analysis has been undertaken for this policy, in accordance with the Equality Act (2010).

Details of this assessment are stored within the central register for Equality Analysis Assessments maintained within the Equality and Diversity team within the Communications and Engagement department.

9. Monitoring Compliance with and Effectiveness of this Policy

9.1 Compliance and Effectiveness Monitoring

Arrangements for the monitoring of compliance with this policy and of the effectiveness of the policy are detailed below.
### 9.2 Compliance and Effectiveness Monitoring Table for this policy

<table>
<thead>
<tr>
<th>Process in the policy</th>
<th>Key Performance Indicators (KPI)/Criteria</th>
<th>Method</th>
<th>Who By</th>
<th>Committee</th>
<th>Frequency</th>
<th>Learning/Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sickness levels, appeals against warnings, fairness and appropriateness of the application of this policy</td>
<td>HR Business Partner</td>
<td>Workforce Committee via the HR Strategy Group</td>
<td>Monthly</td>
<td>Sharing of best practice through HR team meetings and HR provision meetings with managers.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
10. Consultation and Review of this Policy

This policy has been reviewed following consultation with the recognised Trade Unions and Joint Consultative Committee (JCC).

11. Implementation of this Policy

This policy has been implemented following consultation with the recognised Trade Unions and Joint Consultative Committee (JCC).

12. References

NHS Terms and Conditions of Service Handbook:-
http://www.nhsemployers.org/tchandbook

13. Associated Documentation

This policy refers to the following Trust documents:

- Disciplinary Policy (POL-WOD-HR-7)
- Family Friendly Policy (POL-CE-ED-3)
- Application and Processing Temporary Injury Allowance (SOP-WOD-HR-3)
- Reporting and Investigation of Adverse Events Policy (POL-CCPS-RM-4)
- Incident reporting Form (FM-CCPS-RM1)
- Sickness Absence Policy – Appeal pro-forma (FM-WOD-HR-8)

14. Appendices

Appendix A - Authority to Act

Appendix B - Absence Management Process Flowchart

Appendix C – Contact Telephone Numbers (to report absence)
Appendix A - Authority to Act

In normal circumstances, authority to act and compilation of the panel will be as follows:-

- For managing sickness absence at Stage 1 or Stage 2 (usually Band 7 or above) - 1 Manager (usually the line manager) and 1 HR representative (usually the designated HR Advisor), if deemed appropriate.
- For managing sickness absence at Stage 3 – 1 next line manager to the one who managed the case at stages 1 and/or 2 and 1 HR Representative.
- For appeals against a stage 1 or 2 warning – 1 next level manager to the one who made the original decision and 1 HR Business Partner
- For appeals against dismissal – 1 Director, 1 next level senior manager (one must be from a different directorate to the employee) and 1 HR Business Partner.
- The manager and/or HR representative involved in issuing the previous last warning will be required to attend the Appeal Hearing to provide details of their reason for reaching the decision and issuing the warning/the HR advice provided.

The chair of any panel may request a third panel member to be present. This could be in the case of expert or additional advice needed by the chair in order to make a decision on the case.
Sickness Absence Policy

Appendix B – Absence Management Process Flowchart

SICKNESS ABSENCE MANAGEMENT PROCESS FLOWCHART

Manager receives notification of sickness from employee – ask for estimated length of absence and brief details of reason for absence

Employee directed to contact First Case with details of absence

If required, manager to refer employee to appropriate Occupational Health service

Employee returns to work within 7 calendar days

Absence lasts longer than 7 calendar days

On returning to work, employee to complete SC1 (self-certification) form and pass to line manager who will enter on to First Case and send scanned copy to HR Helpdesk

Manager to arrange return to work interview and update details on First Case

Has the employee triggered a stage meeting?

Yes

Stage meeting arranged

No

No further action required

Has employee indicated they are fit to return to work?

Yes

Consider referral to Occupational Health, phased return to work plan and whether triggered for stage meeting

On 90th day of absence, employee to provide Fit Note from GP; Manager should enter details on to First Case and send scanned copy to HR Helpdesk

Manager and employee to maintain contact as agreed during period of absence – usually weekly – and Manager to update First Case as record of discussions held

Manager to arrange long term review meeting at 28 day intervals. Details to be recorded on First Case
Appendix C – Contact Telephone Numbers (to report absence)

All staff are now required to contact their line manager, or appropriate Duty Manager, prior to reporting an absence from work to FirstCare.

Due to the operational nature of our organisation, and issues with managers not being located in one fixed location, there are dedicated numbers for operational staff to call in order to speak to a manager, as shown below:

- **Call Handlers**: 0191 4302210
- **ECS North**: 0191 4599058
- **ECS Central**: 0191 4599046
- **ECS South**: 0191 4599048
- **PTS Northumberland**: 0191 4302704
- **PTS Newcastle**: 0191 4302710
- **PTS North Tyne**: 0191 4302488
- **PTS South Tyneside**: 0191 4302480
- **PTS South of Tyne Dialysis**: 0191 4302703
- **PTS Durham**: 0191 4302486
- **PTS Tees**: 0191 4302705