

Cambridgeshire Primary Care Trust Management of Attendance Policy

Agreed by Trust JCNP: January 2008
Adopted by CPCT Board: March 2008
Revised:
Reviewed:

Section	Table of Contents	Page
1	Introduction	4
2	Payment during Absence	4
3	IVF Treatment	5
4	Elective or Cosmetic Surgery	5
5	Hospital, Doctors or Dental Appointments	5
6	Employees Responsibilities for notifying absence	5-6
	<ul style="list-style-type: none"> • Self Certified Absence • Certified Absence 	6 6
7	Absence without Permission	6-7
8	Sickness Absence and Annual Leave	7
9	Manager Responsibilities	8
10	Human Resources and Payroll Responsibilities	8
11	Monitoring	8-9
12	Disability	9
	<ul style="list-style-type: none"> • Reasonable Adjustments • Access to Work Scheme 	10 10
13	Other Health Issues	10
	<ul style="list-style-type: none"> • Mental Health Problems • Pregnancy • Drug and Alcohol Misuse Problems 	10 11 11
14	Representation	11
15	Return to Work Procedure	11
	<ul style="list-style-type: none"> • Return to Work Interview • Preparation • During the Interview • Conclusion 	11 12 12-13 13
16	Types of Sickness Absence	13
	<ul style="list-style-type: none"> • Persistent Short Term Absence due to Illness • Long and Medium Term Absence due to Illness 	13 13-14
17	Procedure for Managing Sickness/Absence causing concern	14
	<ul style="list-style-type: none"> • Informal Meeting • First Formal Interview • Referral to Occupational Health • Second Formal Interview • Dismissal/Termination of Employment 	14 15 15-16 16 16
18	Line Managers actions following Occupational Health recommendations	17
	<ul style="list-style-type: none"> • Where the restrictions cannot be accommodated. 	17-18
19	Procedure for Phased Returns to Work	18
	<ul style="list-style-type: none"> • Introduction & Aims • Pay and Occupational Sick Pay during a Phased Return • Authorisation • Process • Component of a Phased Return 	18 18 18-19 19 19 19
20	Alternative Employment/Redeployment	20
21	Ill Health Retirement	20-21
	<ul style="list-style-type: none"> • Process 	21

22	Dismissal/Termination of Employment Procedure	22-23
Appendix 1	Referral to Occupational Health Procedure	24-25
Appendix 2	Occupational Health Referral Form	26-29
Appendix 3	Return to Work Form	30-31
Appendix 4	What to do if you are off Sick	32
Appendix 5	Sample Letter A	33
Appendix 6	Sample Letter B	34
Appendix 7	Sample Letter C	35

1. INTRODUCTION

This procedure applies to all employees of Cambridgeshire Primary Care Trust (hereinafter referred to as the Trust). However, where separately agreed appeals procedures are in place for specific policies, these should be used (eg. appeals against the award of discretionary points).

All employees have a duty to attend work unless they are unable to do so through sickness or injury or their absence has been approved. During periods of absence due to sickness, the Trust operates both statutory sick pay and the occupational sick pay provisions as detailed in the Trusts conditions of service.

This policy provides guidance to employees on the procedure to ensure that they are provided with relevant information.

It also provides Managers with guidance when dealing with employees with attendance issues ensuring that equitable and consistent methods are used and that cases are dealt with sympathetically. It outlines the procedures concerned with sickness absence, ill-health incapability, and it is a guide to good practice.

The policy also formally advises employees on sick leave or with health related problems of the effects and potential consequences for their employment.

The Trust recognises that genuine sickness absence and health problems are not usually attributable to the misconduct of an individual and therefore would normally be dealt with outside of the Disciplinary Procedure.

2 PAYMENT DURING ABSENCE

Payment will be made to employees who are absent from work due to either self or Doctors certified sickness or work related injury.

The maximum period of payment for absence due to sickness or injury depends upon length of service.

Period of continuous service	Period of full pay	Period of half pay
During first year of service	1 months	2 months
During second year of service	2 months	2 months
During third year of service	4 months	4 months
During fourth & fifth year of service	5 months	5 months
Over 5 years	6 months	6 months

Employees will qualify for contractual sick pay for any treatment, which is medically required and provided by the NHS.

Please note that where appropriate the Trust reserves the right to commence the procedure in accordance with any stage of the management of attendance policy before contractual sick pay has expired.

3 IVF TREATMENT

An employee who is recovering from IVF treatment will be entitled to statutory sick pay and contractual sick pay if they present a medical certificate that states that they are not fit to work.

Time off for IVF appointments should be arranged where possible outside of normal working hours, by use of flexible working. *Please see point 5 below.*

4 ELECTIVE OR COSMETIC SURGERY

Employees have the statutory right to paid time off for the purposes of undergoing cosmetic or elective surgery, including laser eye surgery provided a Medical Consultant or Practitioner has certified that such surgery is essential to the employee's health or well-being.

Where surgery is not medically certified as necessary Annual Leave or Unpaid Leave should be arranged in advance and taken.

However, an employee who is recovering from cosmetic surgery will be entitled to statutory sick pay and contractual sick pay provided they present a medical certificate that states that they are not fit to work.

5 HOSPITAL, DOCTOR AND DENTAL APPOINTMENTS

(OTHER THAN FOR ANTENATAL PURPOSES – please see the Maternity, Paternity & Adoption Policy)
Where possible employees are encouraged to arrange such appointments outside normal working hours or alternatively to work their hours flexibly to accommodate any appointments.

Where appointments cannot be arranged outside of normal working hours, consideration will be given to the following paid time off.

- GP or Dental appointments – 1 hour
- Hospital or Out Patients appointments – 2 hours

6 EMPLOYEE RESPONSIBILITY FOR NOTIFYING ABSENCE

Absence is defined as not reporting to work when required to do so.

Employees who are prevented from reporting for duty due to sickness should notify the appropriate manager as soon as possible in line with local reporting procedures. Unless exceptional circumstances exist, employees should speak directly to their manager (or the designated manager) rather than leave messages with colleagues. If it is necessary to use a third party for a message, the employee must make every effort to ensure that the message is passed to someone in authority and, where possible, must ascertain the name of the person with whom the message is left. *Further details of the reporting procedure are detailed in Appendix 4.*

Wherever possible this should be prior to the period of duty and include the reason for absence, when the absence commenced and when a return to duty is expected.

All employees will:

- follow the correct reporting procedure for every period of absence;
- maintain contact with his/her line manager throughout the period of absence;
- undertake treatment as guided by his/her medical practitioner that will encourage and contribute to his/her return to work;
- attend Occupational Health appointments as required; and
- refrain from activities that will delay his/her return to work.

Self Certified Absence is absence of SEVEN DAYS OR LESS, Saturday and Sunday included. A SELF-CERTIFICATION FORM must be completed by the employee on their return to work, stating the reason for the absence. (For any absence of seven days or less, a doctor's certificate is not required if the Trust is satisfied that the absence is caused by sickness or work related injury.

Certified absence is for absence of more than seven consecutive days, which must be supported by a medical certificate signed by a qualified medical practitioner.

Employees may not return to work whilst covered by a medical certificate unless they have written confirmation from their GP that they are fit for work. In addition the Trust may require an Occupational Health Assessment before an employee returns to work.

A Sick Leave Notification form (P6) must be completed either manually or electronically for each absence. Original medical certificates should be retained by the manager in the employee's personal file for reference and inspection by the Department of Social Security. Managers should ensure that payroll are notified when an employee returns from sick leave so that sick pay can be adjusted accordingly.

Employees returning to work following a period of sickness should give maximum notice of their intention to their line manager, to ensure that cover is not arranged unnecessarily.

Employees who fail to report for work on time at their planned place of work are considered absent and are not entitled to pay unless they are genuinely sick and have notified their line manager in accordance with the reporting procedures.

Where an employee persistently fails to follow the sickness reporting procedures this may result in the employee being considered absent without permission and disciplinary action may be taken. *(Please refer to section 7 below)*

The Trust reserves the right to request medical certificates at more frequent intervals.

Where an employee attends for work but is unwell and goes home before 12 midday or before working half of their allotted shift this will be recorded as a one whole days sickness. Where the employee goes home after 12 midday or after working more than half their shift, the absence will be recorded as a half days sickness.

7 ABSENCE WITHOUT PERMISSION

If an employee does not return for work and makes no contact, the manager should try to establish contact. This initial contact should be by telephone, however if a response cannot be obtained a letter should be sent. If there are exceptional circumstances and

serious concern for the well being of the employee, a risk assessment should be undertaken if a visit in person is deemed necessary. The line manager should bear in mind personal/domestic circumstances and should be particularly anxious to contact those who live alone or are known to have difficult circumstances.

If you have been unable to make contact with the employee you must advise HR and then:

- Write to the employee (*Sample Letter A*) asking them to contact you to discuss their absence. Send the letter recorded delivery.
- If you do not receive a reply and no information comes to light from other sources, e.g. work colleagues, relatives, etc, consult with HR before sending another letter (*Sample Letter B*). This letter should be sent recorded delivery.
- If the employee returns to work you should carry out a return to work interview to establish the reasons for absence. It may be appropriate to treat the situation as misconduct. In these circumstances it may be appropriate to invoke the Disciplinary Procedure. Please consult HR if you wish to take this action. (*Please refer to the Disciplinary Procedures for further information*).
- If the employee does not return to work and not contact has been made, a letter (*Sample Letter C*) should be signed and sent by a manager with dismissing authority.
- Sick pay may be withheld until you have been in contact with the employee and are aware their absence is due to sickness. Please consult HR if you wish to take this action. You should consider refunding sick pay where there was a genuine reason why the employee could not contact you on the first day of their absence.

It is important to note that the Trust is expected to make every effort to make contact with the individual and to pay due regard to domestic and personal circumstances.

8 SICKNESS ABSENCE AND ANNUAL LEAVE

If an employee becomes ill during a period of annual leave, leave may be re-instated on production of a medical certificate from a doctor. Only days covered by the certificate will be re-instated. If an employee is taken ill whilst abroad, he/she needs to obtain a medical certificate if he/she wishes to have annual leave re-instated. This certificate may be a copy if the original is required for insurance claim purposes.

Where an employee's absence starts in one leave year and ends in the following annual leave year, up to one week of basic contracted hours/days annual leave may be carried forward but must be taken in full by the end of May. Annual leave may not be carried forward from successive years.

If the employee returns to work so late in the leave year that he/she does not have time to notify and take their holiday, then any statutory leave which has not been taken by the end of the leave year will be lost. Up to one week of basic contracted hours/days annual leave may be carried forward but must be taken in full by the end of May.

Where an employee has been absent for a whole annual leave year, no annual leave will be awarded for that year.

If an employee requests annual leave whilst they are on sick leave, then they can take the leave provided that their doctor first signs them back as fit for work and that they actually return to work (even if just for one day).

If an employee takes a holiday either in the UK or abroad they should still notify their line manager that they will not be contactable.

9 MANAGER'S RESPONSIBILITIES

It is important for the Manager and absent employee to remain in touch during the period of sickness in order to facilitate the mutual exchange of information and accordingly both parties should ensure they are accessible and willing to meet for this purpose. Employees should therefore expect their manager to get in touch with them during their sickness absence.

It is essential that Managers review the absence levels of all their employees at regular intervals.

It is often thought that if an employee provides a medical certificate, managerial action cannot be taken. This is not the case and occasions will arise where it will be appropriate to review the attendance record of an employee, because of the effect on the normal running of a department, alongside the difficulties caused for other employees.

See section 11 below on monitoring.

10 HUMAN RESOURCES AND PAYROLL RESPONSIBILITIES

HR staff will be available to discuss problems and give advice when an employee's attendance gives rise for concern. HR **must** be consulted about an employee's sickness absence prior to any formal interview being arranged.

In cases of sickness resulting from work related injury, the Pensions/Payroll Department or your HR Advisor will give appropriate advice on how to access Temporary Injury benefits, if applicable. If employment ceases, Permanent Injury benefits may be pursued in relevant cases.

The Pensions/Payroll Department will provide advice on Pension benefits.

The Trust provide a free and confidential counselling service which can be accessed at any time – Oakdale, free phone 0800 027 7844.

11 MONITORING

It is good management practice and vital to the success of an effective absence management policy to monitor and review the levels and reasons for sickness absence in a consistent way.

Employees should be asked to indicate the reason for absence when reporting unfit for duty. **'Sick' or 'ill' should not be accepted.** This follows the principle contained on all self-certification forms.

Therefore it is the Managers responsibility to ensure that a complete and accurate record is kept of all their employees' attendance, including reasons for absence, and that these are reported so that central records can be maintained.

Managers should take into account the following sickness absence triggers when deciding how to proceed and what action to take in the management of absence. A consistent approach should be adopted across the Trust so that all employees are treated in a fair and consistent way.

- 3 episodes of sickness absence of any duration, self or GP certified in a consecutive period of three months;
- 5 episodes of sickness absence of any duration, self or GP certified in a twelve month period;
- Any recurring pattern of sickness/absence over a long period;
- Or has been absent for 2 weeks or longer.

The HR Department can provide Senior Managers with a report on sickness absence derived from the information submitted to the Payroll Department. The report will provide details of the sickness absence percentage rate by department, hours lost and the lost time cost.

Sickness absence percentage rates will be notified to the Trust Board on a regular basis.

12 DISABILITY

The Disability Discrimination Act 1995 (DDA) (amended 2004) makes it unlawful for employers to discriminate against current or prospective employees with disabilities because of a reason relating to their disability.

The DDA is different from other discrimination legislation as it places positive duties on employers to think carefully about the needs of people with disabilities. Failure to do so leaves employers vulnerable to legal action.

The DDA defines disability as: 'a mental or physical condition, which has a substantial and long-term adverse affect on the employee's ability to carry out normal day-to-day activities'. 'Long-term' means that the condition must last, or be likely to last, for more than 12 months. The employee's ability to carry out normal day-to-day activities can be adversely affected in one or more of the following ways:

- mobility
- manual dexterity
- physical co-ordination
- ability to lift or otherwise move everyday objects
- speech, hearing or eyesight
- memory or ability to concentrate, learn or understand
- understanding the risk of physical danger.'

Discrimination occurs when a disabled person is treated less favourably than a person without a disability and, the treatment is for a reason related to the disability and that reason does not apply to the other person; and cannot be justified.

Reasonable Adjustments

The Trust is under a legal obligation to make reasonable adjustments to ensure that people defined as disabled in law are not put at substantial disadvantage due to their disability. The Trust must fully consider making any reasonable adjustment to working practices, equipment and premises.

Such adjustments could include:

- making adjustment to premises
- allocating some of the disabled person's duties to another person
- altering hours of work
- specific training
- modifying instructions or reference manuals
- providing a reader or interpreter
- providing supervision
- agreeing to a different place of work
- acquiring or modifying equipment
- transferring the person to fill an existing vacancy

A failure, without justification, to comply with this duty will amount to an act of discrimination. The Act allows financial and other costs to be taken into account, together with the extent of the employer's financial resources when considering whether it would be reasonable to make any adjustments.

Managers should not make assumptions about appropriate adjustments for an employee and should consult with, and consider suggestions made by the employee with a disability. Whether an employee has a condition recognised under the DDA should be assessed and confirmed by an Occupational Health Practitioner.

Human Resources and Occupational Health should be involved in cases of employee disability and reasonable adjustment at the earliest opportunity.

Absence due to disability, i.e. attending consultants appointments linked to the disability, attending hospital for regular blood tests, etc., should not be counted as sickness.

Access to work scheme

Specialist advice and support on modification of duties may be obtained from the Department of Work and Pensions Access to Work Scheme. The individual employee is required to apply for assistance although in some circumstances the employer may contact Access to Work. *For further information contact Access to Work via the local Job Centre or website <http://www.jobcentreplus.gov.uk>*

13 OTHER HEALTH ISSUES

Mental Health Problems

If a manager has concerns at any stage regarding an individual's mental health, this should be explored. This may have come to a manager's attention due to the employee's absence record or due to behaviour at work.

Such behaviour is difficult to outline, however, any employee who appears to have excessive use of counselling or medical service, self-harming behaviour, such as attempted suicide, self-laceration or eating disorders should be referred to an occupational health physician without delay.

The Occupational Health Department must be aware of the reason for referral to ensure all concerns are fully investigated.

Pregnancy

Pregnancy is not an illness and any days of absence that are as a result of pregnancy must not be included in the calculations of days of sickness, e.g. anti natal appointments. Sickness that is not either directly related to the pregnancy should be monitored in the normal way.

Once maternity leave has ceased, normal monitoring of sickness should be undertaken, unless the absence is related to the pregnancy, guidance should be sought from Human Resources as appropriate.

Maternity Pay/Leave may commence automatically if an employee is sick due to a pregnancy related reason in the latter stages of the pregnancy. *Please refer to the Maternity, Paternity & Adoption Policy for full guidance on this matter.*

Alcohol and Drug Misuse Issues

Alcohol or drug misuse issues may arise because of a combination of social, work or health factors. Those problems, which affect work performance, will be addressed by the Trust in a sympathetic manner and, as far as possible, as an issue of health rather than conduct. *Please refer to the Alcohol and Drugs policy for further guidance*

However in some cases these issues may be related to misconduct rather and disciplinary action may be appropriate. In this event guidance should be sought from Human Resources. *Please refer to the Disciplinary Procedure.*

14 REPRESENTATION

Employees have the right to be represented by a trade union representative recognised by the Trust or by a work colleague, at any formal interview related to their sickness record or health problems. The employee should be advised of this right in writing.

15 RETURN TO WORK PROCEDURE

On return to work from a period of sick leave absence, managers must ensure the employee signs the relevant section of the P6 Sickness Notification form to verify its accuracy.

Return to Work Interview (see Appendix 3)

A Manager should, as a matter of routine, see an employee upon their return to work from sickness absence to discuss the reason for their absence, ensure they are fit to return to work and complete a self-certification form. Such informal discussions are particularly important where the employee has had any previous periods of sickness absence in the previous six months or has had:

- 3 episodes of sickness absence of any duration, self or GP certified in a consecutive period of three months;
- 5 episodes of sickness absence of any duration, self or GP certified in a twelve month period;
- any recurring pattern of sickness/absence over a long period;
- has been absent for 2 weeks or longer.

The Return to Work interview enables managers to fully understand the situation and determine the level of support required.

Where possible the employee should be interviewed on their first day back at work and no later than five working days following their return to work, by their line manager or nominated person. It is usual for the manager and the employee to meet alone, however in certain circumstances more than one manager may be present at the meeting, this may be as a note taker, a clinical lead, to translate or where a female/male presence may assist with the meeting. In these situations consideration should be given to allowing the employee to be accompanied by a trade union representative or a work colleague.

To maintain consistency and fairness all staff should be interviewed.

Preparation

- Before the interview it is useful to check the individual's attendance record, identify any areas of concern or repetitive patterns of absence and any previous action taken for high absence levels.
- If the individual has a poor attendance record it is useful to have the record of absence available during the interview so that the line manager can show the individual the facts about the absence, rather than asking the individual to recall them.
- It may be the case that the line manager and individual have previously agreed some action points as a result of an absence. For example: simple modification of hours or work, temporary change of job tasks. The line manager should check whether these action points have happened before beginning the interview.

During the Interview

The basic content of the Return to Work interview should be the same for all staff. Clearly, if the individual has a good attendance record it is likely to be a short interview. In either case the interview should cover the following points:

- Welcome the employee back to work.
- Explain the purpose of the Return to Work interview, which is to gain a full understanding of their situation.
- Enquire into the reason for absence.
- Allow the employee to explain their absence.
- Assess whether the reasons offered for absence are consistent with any other reliable available evidence.

- Identify if there are any support requirements for their return.
- Probe deeper if you have any doubts or concerns about the absence.
- Seek clarification on whether there is an underlying problem.
- Refer to the individual's attendance history/record card (if you feel there are patterns developing in the absence e.g. absence on Mondays and Fridays, absence for the same reason) talk to the individual and establish reasons.
- If the manager is concerned about the information obtained they should contact HR.
- It may be the case that an individual is embarrassed about revealing the nature of the illness. In these cases the line manager can suggest that the individual talks to a member of the same gender who could then in turn talk to the line manager on behalf of the individual. Ensure that the individual has this option available to them if appropriate and also that they realise the line manager will be told the details.
- Following the discussions of the nature of the illness, the line manager and individual should agree some action points (if appropriate) e.g. to talk again in a few weeks time, review modified hours or duties, seek advice from HR. (These should be noted on the Return to Work form.)
- The manager should note any action points and ensure that they are followed up on the date agreed.
- Only if the manager has evidence that the sick payment was fraudulently claimed can payment be withdrawn. In such cases consult HR immediately to discuss the issue.

In Conclusion

You should remind the employee about the importance of good attendance and the standards expected.

Tell the employee that all absence is monitored on a continuous basis.

Where, in the view of Management, an employee may be misusing the concession related to uncertified sick leave, he/she shall be required, after appropriate notice, to furnish a medical certificate, in respect of subsequent periods of sick leave from the first day of absence.

In cases where attendance levels are of concern you must tell the employee that further absence may lead to action being taken in line with this policy or the Trust's Disciplinary or Capability Procedure.

16 TYPES OF SICKNESS ABSENCE

Persistent Short Term Absence through Illness

A range of conditions can cause persistent absence from a series of minor illnesses to a serious long-term medical condition. As such the line manager should obtain

occupational health advice and discuss any adjustments that can be made to allow the employee to attend regularly, e.g. temporary reduction in hours, alternative role etc.

In some cases it may be necessary to consider dismissal / termination of contract but line managers should always involve their HR Advisor before taking further action. (*Please refer to section 16*)

Long and medium term absence through illness

The Trust recognises that employees may suffer illness or injuries, which are so severe that they result in an extended period of absence.

These guidelines are intended to support employees during periods of long absence while providing a framework to manage the service impact of extended sick absence.

Line managers should keep in contact with the employee, to monitor progress, to determine any support required, and to establish a likely date of return. A referral to Occupational Health should be undertaken and/or if there is additional information to add ensure this is put in writing to the OH service.

Employees absent for more than **4 weeks must be referred to occupational health** who will assess fitness for work before they return to work.

Line Manager's should advise employees of the dates of half pay and no pay, which can be provided by Employment Services.

17 PROCEDURE FOR MANAGING SICKNESS ABSENCE.

When the situation gives cause for concern, the Manager should adopt the following procedure:

- Informal Meeting
- First Formal Interview
- Referral to Occupational Health Department
- Second Formal Interview
- Termination of Contract

N.B. Depending on the circumstances of the case, it may be appropriate to hold more than one informal or first formal meeting.

The following details the procedure to be followed. If at any stage it becomes clear the absence is due to a physical or mental impairment that is classed as a disability, the Trust has a legal obligation to consider providing additional assistance to the employee. The manager should refer to Occupational Health and seek advice from the Human Resources Advisor.

At each stage of the procedure it is imperative to ensure that all available options are considered as outlined above.

Informal Meeting

When an employee's absence record gives cause for concern, the Manager should meet with the employee informally to attempt to alleviate the problem at an early stage. The reasons for the absence(s) should be explored and assistance to alleviate the problems

should be offered wherever possible. The guidance in section 15 on preparing for and conducting an interview may prove helpful.

It is usual for the manager and the employee to meet alone. Human Resources should be contacted for advice where the manager has concerns about meetings at this level.

The employee should be advised at the informal meeting that their sickness absence is giving cause for concern and that the manager wishes to gain a full understanding of the situation in order that both parties can agree an appropriate action plan, in order to achieve an improvement in their attendance at work. The outcome of the meeting and any actions should be confirmed in writing to the employee within 5 days.

If, after a review period there has been an improvement, the employee's efforts should be acknowledged. If necessary, a further action plan will be determined. The Trust will not proceed to the formal stage until any reasonable adjustments have been implemented.

First Formal Interview

Whenever a review date is set (following the Informal Meeting stage), if there remains a cause for concern, a formal meeting should be convened with the employee and HR Advisor to discuss their progress.

A letter should be sent in advance of the meeting, to detail the purpose of the meeting and the right of representation, as outlined in section 14.

If there remains a cause for concern, the sickness absence should be discussed, e.g. the effects on service provision and work colleagues. The employee should be given every opportunity to identify any issues, which may be contributing to the sickness absence.

The employee should again be advised that their sickness absence will be monitored over an agreed period and an action plan determined. The employee should also be advised of the requirement of a significant improvement in their attendance record and the consequences of failing to improve, i.e. that their level of sickness may lead to the termination of their employment. The outcomes of the interview should be confirmed in writing to the employee and their staff representative, where appropriate.

Wherever possible, positive feedback should be given throughout the review period to encourage and support the employee with their efforts to improve.

The employee has the right to appeal the outcome of this formal notification in writing, to the manager of the person who issued the review, within 14 days of the meeting.

Referral to Occupational Health

Managers must ensure that referral to the Occupational Health Service is made using recognised processes – i.e. manager referral process. The manager is required to complete the Manager Referral Form (Appendix 2) and discuss the reasons for the referral with the staff member and then ensure that the staff member is provided with an awareness form, which is signed and returned to the line manager. If there is any difficulty in obtaining this the manager should formally write to the employee and copy in Occupational Health Service. They must ensure that the employee is correctly informed of the role of the Occupational Health Service, its legal duty of confidentiality and the advice that the manager requires.

Managers should be aware that information contained in the Manager Referral Form is available to the staff member under the Data Protection Act and other legislation. It may also be appropriate to remind the employee that the Trust is entitled to request them to undergo a medical assessment if there is a justifiable reason.

When the Occupational Health Service receives the referral, an OH Advisor will screen it and if appropriate an appointment made with an Advisor or an OH physician.

If an employee declines to speak to an OH advisor, or if they do not attend the appointment, a further appointment will be made. The manager will be informed of the employee's failure to attend and advised to discuss the referral further with the staff member.

The Occupational Health Service will liaise with relevant medical practitioners to obtain medical advice where appropriate. Medical reports will be obtained from the GP/consultant (where required) in compliance with the Access to Medical Reports Act 1988.

The line manager must ensure that the employee has been advised of the availability Oakdale counselling service.

Referral to Occupational Health repeated as necessary at any of the stage in the procedure but it is essential to obtain up to date advice from the Occupational Health Physician if considering alternative employment, ill-health retirement or possible termination of employment. No dismissal or termination of contract should take place without the involvement of Occupational Health.

Second Formal Interview

As with the earlier stage, when a review date is set a meeting should be convened with the employee to discuss their progress. Improvement should be positively acknowledged and continuing support and encouragement should be emphasised. Subsequent monitoring may be appropriate to help the employee maintain their improvement.

If no improvement has been seen then an HR Advisor must be present at this meeting and representation as defined above will be allowed. A letter should be sent in advance, as previously detailed.

If the sickness absence has not improved the employee should be advised at the interview that the situation is unacceptable. The same points as identified at the first formal interview should be covered and the failure to improve explored in detail.

The possibility of alternative employment may be considered at this stage. Whilst the Trust is under no obligation to create a post, efforts will be made within a reasonable timescale to find alternative employment if appropriate.

As previously the employee must be told that if there is no improvement within a specified review period that after a further review meeting, it is possible that termination of their employment will result.

The details of the interview should be confirmed in writing.

Dismissal/Termination of Employment

If after the above stages the situation remains unsatisfactory and the sickness absence has still not improved satisfactorily, a subsequent formal meeting should be arranged to consider the termination of the employee's contract. *See Section 21.*

18 LINE MANAGERS ACTIONS FOLLOWING OCCUPATIONAL HEALTH RECOMMENDATIONS

- The line manager is responsible for implementing Occupational Health advice, if it is thought that it is reasonable to implement the recommendations. The line manager should give consideration to the employee's needs and service provision.
- The line manager should keep the situation under review, monitor progress and involve HR, where necessary.
- If at any point during this procedure there is a change in the employee's medical condition, the line manager must discuss this with the employee and then Occupational Health must be informed in writing and a further OH assessment carried out.
- The restriction and the review period should be confirmed to the employee in writing following the standard format.

Where the restriction CANNOT be accommodated

- If the point is reached where the prospect of full recovery and a return to normal working is looking unlikely then every effort should be made to obtain suitable alternative employment for the employee. The employee will need to be made aware that for business reasons their restricted working is no longer possible. Always retain documentary evidence of all discussions, which should be confirmed in writing.
- If no suitable alternative work is available within the Trust and the employee has been on Long Term Sickness Absence, then guidance should be sought from HR and Occupational Health.
- If any other decision is not possible or inappropriate, the line manager is responsible for determining the appropriate course of action, taking into account advice from HR and occupational health.
- When considering dismissal linked to sickness absence, the reason for the Trust's inability, for business reasons, to accommodate the working restriction should be explained to the individual and notes kept of the meeting.
- Ultimately, ill-health retirement or dismissal may be the likely outcome. The grounds for the dismissal would be that the employee is no longer capable of undertaking the duties for which they were originally employed. Before the final dismissal stage is reached, a further search for alternative work would be necessary. Advice should be sought from an HR Advisor. Line managers should ensure that the employee remains on sick leave until a suitable way forward is determined.
- Whilst it may in the best interest of the employee to be dismissed after an absence of this length (in order to claim benefits etc), any dismissal for long-term absence must be handled with the utmost sensitivity.

19 PROCEDURE FOR PHASED RETURNS TO WORK

Introduction and Aims

After a serious illness, major surgery or injury, returning to work can be tiring both physically and mentally for an individual. In these circumstances, Occupational Health may recommend a phased return to work; this is ***temporary*** measure to enable the staff member to build up to their normal hours of work and job tasks over a short period of time, usually 4 weeks and should not exceed 6 weeks. It is not expected that all employees in these categories will require a phased return to work.

The aim of this procedure is to provide a framework for Line Managers and Occupational Health when assisting an employee back to fully effective working in a structured way taking account of:

- the needs of the individual;
- the needs of the job (physical & mental);
- the ability of the ward/department to accommodate an individuals needs;
- the health & safety of the individual and their colleagues.

The line manager is responsible for monitoring the progress of the phased return and ensuring that where required, further information is sought or provided to the Occupational Health Service/HR, as appropriate.

Pay & Occupational Sick Pay during a Phased Return

During a phased return to work, an employee receives full basic pay and occupational and statutory sick pay ceases.

If, during a phased return, an employee works shifts that attract enhancements, e.g. weekends, the employee will be entitled to enhancements as per Agenda for Change terms and conditions.

In certain circumstances an employee may wish to or be requested to; use some of their annual leave to as part of or to support their phased return.

Authorisation

A phased return can only be agreed and instigated on the recommendation of Occ Health.

In determining whether or not a phased return is appropriate, and in consultation with an HR Advisor, the Line Manager will take account of the individual circumstances of the case and Occupational Health advice regarding the individual's needs.

Phased returns are authorised at the Line Manager's discretion, although it should be accepted in principle that, where possible, the manager will accommodate a phased return. For phased return purposes only the Line Manager is the budget holder for the ward/department.

Process

Employees who have had a serious illness, major surgery or injury, or have been absent from work for more than 4 weeks must be referred to Occupational Health so that guidance on the most appropriate phased return plan can be implemented. Employees must be certified as fit to return by Occupational Health.

The Line Manager will discuss the phased return arrangements with Occupational Health Service. The purpose of this discussion is to ensure that:

- the individual's needs are met, and
- the ward/department is able to accommodate the phased return or whether it is more appropriate for the employee to remain absent.

If a self-referral has been made, Occupational Health may discuss this policy with the individual and will reiterate that a phased return may **only** be authorised by the Line Manager and the individual may not return to work until this process has been completed.

Occupational Health will provide the individual, manager and HR with a Health Assessment detailing their recommendations regarding the phased return to work.

The manager will confirm to the employee whether they can accommodate the phased return and discuss and agree the components of the phased return, recording this agreement by signing the Return to Work Form. **Appendix 3**

Length	Typically a phased return will last no longer than 4-6 weeks. It will only be authorised if a return to full duties is expected.
Number of Days Worked	The employee must be capable of working a minimum of 3 or 4 days (shifts) per week or pro rata if part time, although some individuals may be capable of working 5 short days immediately.
Out of House Working	Due to the staffing arrangements in some areas, it is not always possible for individuals who have physical limitations to out of hours as it could put their own and their colleagues' health and safety at risk.
Hours Worked	In many cases an employee will not be able to undertake a full day (shift) immediately. However, an individual will normally be fit to return to work for a minimum of 4 hours on the days worked, building up to their contracted hours (or in some cases revised contracted hours) by the end of their phased return to work. During a phased return, working hours may need to be arranged to suit the individual's needs and/or ward/departments needs, e.g. mornings, mid-days, afternoons, evenings, twilight or night shifts. If an individual is capable of fulfilling their contracted hours by adopting an alternative working pattern they will be expected to do this, e.g. work 7½ as opposed to 11½ hour shifts.
Alternative Duties	During the phased return period an employee who is capable of working their contracted hours, but not capable of undertaking their full range of duties, may be required to undertake alternative duties interspersed with their normal duties to make up their contracted hours. This work will be related to their job and/or their ward/department and could involve administration, project or research work.

Following a rehabilitation programme that proved unsuccessful, a permanent modification of hours of work or duties may be recommended by the Occupational Health service.

Where a reduction in hours is agreed, or an individual returns for a limited time on a job of lower status, line managers should discuss the issue of pay with their HR representative.

Further Advice/Information

For further advice and/or information please contact the HR Department on 01223 884251 or Occupational Health Department on 01733 316519.

20 ALTERNATIVE EMPLOYMENT/REDEPLOYMENT

If the subsequent report from Occupational Health indicates the employee is incapable of carrying out the duties of their current post but may be able to perform suitable alternative duties, the Trust will support the individual to find such employment for an 8-week period. During this time Human Resources will undertake a skills audit to identify the type of work the employee may be able to undertake within the recommendations made by Occupational Health. Assistance with applications forms and interview preparation will be provided if required.

The Trust will support the employee to identify vacancies however it is the responsibility of the employee to submit an application and there is no requirement for the Trust to create such a post.

If, after a thorough search for alternative work, no suitable work is available then it may be necessary to consider termination of the employee's contract of employment.

Should an employee unreasonably refuse any alternative offers of employment, the implications must be fully discussed with the employee and their representative if requested. If no agreement can be reached on the acceptability of alternative employment, the employee's contract may be terminated on the grounds of incapability.

Where an employee takes suitable alternative work they will be appointed on the salary and terms and conditions of the new post. In these circumstances there will be no protection to salary or compensation for excess mileage should the employee work from a different base and they may be expected to work different days/hours.

If redeployment is due to a workplace disease or accident the employee may have an entitlement to Permanent Injury Allowance. Advice from Human Resources and the Pensions Department should be sought.

21 ILL HEALTH RETIREMENT

If all the preceding modifications and recommendations have been investigated and have proved unsuccessful, then early retirement due to ill health should be considered and involvement sought from Occupational Health.

Ill-health retirement can only be considered in cases where an employee is unable to return to their substantive post and where adjustments to the employee's current post, redeployment and retraining options have been considered.

They must also have been a member of either the NHS or Local Government pension scheme for a minimum period of two years. The Occupational Health Physician must also support the employee in their application.

The Occupational Health Physician will only support applications if it is believed that the health condition is permanent or that the employee will be unable to provide regular and efficient service again in the future.

However, the final decision as to whether an ill health pension will be paid to an individual lies with the pension's agency for the NHS pension's scheme and is subject to an application by the employee; or the Independent Practitioner appointed by the Local Government Pension scheme.

Further details about potential pension benefits and the application process are detailed in the separate NHS or Local Government Pension Scheme rules. Further information regarding this can be sought from the pensions administration team on 0800 027 7844, in the first instance.

If the Pensions Agency or the Local Government Pension Scheme subsequently rejects an application for Ill Health Retirement, and unless there is a significant improvement in health that will enable the individual to return to work, then the Trust will still consider terminating the employee's contract on grounds of ill health.



Process

If Occupational Health supports Ill Health Retirement, the line manager should arrange a meeting with the employee, the employee's representative (if applicable) and an HR Advisor to discuss the report from Occupational Health, the Ill Health Retirement process and the outcome should the application fail. This meeting should be confirmed in writing.

Where an application for Ill Health Retirement is successful, the line manager should meet with the employee to agree a leaving date. Any outstanding annual leave entitlement from the current leave year (and no more than five days carried forward from the previous leave year if applicable) should be paid in lieu.

Where the application for Ill Health Retirement is rejected, a subsequent formal meeting with a manager with dismissing authority should be arranged to consider the termination of the employee's contract, this should be confirmed in writing. (Please see section 26)

If the employee is too ill to attend a meeting, or is not capable of participating, careful and sensitive enquiries should be made to establish if anyone is acting on behalf of the employee and arrangements made to meet with him/her.

Further information can be gained from you HR representative and from the relevant pension department.

22 DISMISSAL / TERMINATION OF CONTRACT

Any dismissal from the Trust on grounds of sickness and/or absence must be handled with sensitivity and will only be considered after all other possible options have been thoroughly investigated. The decision to dismiss should have been discussed as a possible outcome with the employee as early as possible.

Prior to making the decision to dismiss an employee, evidence must be provided that the correct procedure has been followed.

In accordance with the Trust's Policy, the case must be passed to a manager with the authority to dismiss. They will arrange a formal meeting to review the case and consider the final decision as to whether to terminate the employee's contract. A Senior HR Manager or an HR Advisor should accompany them. A letter should be sent to the individual inviting them to the meeting and advising them that one possible outcome of the meeting could be the termination of their contract of employment. This letter must also include their right to representation.

The line manager with the assistance of an HR Advisor should provide details of actions taken, previous discussions and assistance that has been provided (e.g. adjustments, occupational health referrals, trial periods, alternative work etc). These should be discussed and confirmed at the meeting.

Where appropriate the line manager responsible for managing the employee's sickness may be requested to attend the meeting to give an account of the employee's sickness; and the employee may present any factors in mitigation. The employee should be advised of the manager's attendance in writing. Any relevant documents/records can be made available prior to the meeting on request.

The dismissing officer must be satisfied that any reasonable adjustments that are practical have been made to accommodate an employee prior to dismissal, as outlined in Section 11. In addition a referral to Occupational Health has been made within the 3 months immediately prior to the meeting date. If they are not satisfied that all the above have been covered, they should not proceed to dismissal at this stage.

If the dismissing officer is satisfied that there would be no prospect of the employee returning to work in the foreseeable future and all reasonable steps have been taken, following an adjournment, employment may be terminated. In these circumstances employees will receive contractual notice at the rate of pay applicable to their length of sickness absence. E.g. full, half or zero

The decision to terminate an employee's contract of employment must be confirmed in writing as soon as possible after the meeting, outlining the reasons for the dismissal and detailing the individual's right to appeal. An appeal should be sent in writing to the Strategic Lead for Human Resources and Development within 21 days of the outcome being advised.

If the employee is too ill to attend a meeting, or is not capable of participating, careful and sensitive enquiries should be made to establish if anyone is acting on behalf of the employee and arrangements made to meet with him/her.

Further information can be gained from you HR representative and from the relevant pension department.

1. INTRODUCTION

Occupational Health have a very important role to play in the handling of cases involving sickness absence and on-going health related problems. They provide advice and guidance to both the employee and to the employee's Manager. However, the final decision about the employee's continued employment is the responsibility of the appropriate Manager. He/she will reach the decision having taken into account all relevant information, including the advice from Occupational Health.

2. WHEN TO REFER TO THE OCCUPATIONAL HEALTH DEPARTMENT

Generally, referrals to Occupational Health fall into one of the following categories:

Self-referral - the individual employee may approach the Occupational Health department direct for confidential help and advice regarding a specific condition or problem. In such cases, no report will be sent to management unless circumstances are identified which may have serious implications for the health and safety of the employee, fellow employees or patients. Any information conveyed to the Manager will first be fully discussed with the individual employee.

Arising from short/medium-term sickness absences - an individual whose sickness absence is giving cause for concern and who has been formally interviewed regarding such absence may be requested to attend for a medical consultation and assessment to determine if:

- there is any underlying medical condition
- there is a need to consider alternative employment
- treatment or help is recommended to alleviate the situation, etc.

Arising from long-term sickness absence or health problem - an individual who has been on continuous sickness absence for 4 weeks (or more) or has been undertaking restricted duties for a limited period as a means of rehabilitation may be requested, in accordance with their Terms and Conditions, to attend a medical examination and assessment to determine, as appropriate:

- the medical condition causing the sickness absence.
- a date when the employee will be fit enough to return to work/full duties.
- if able to return, whether there will be any restrictions on duties and/or if they can give regular attendance
- whether alternative employment is recommended and what type.
- whether treatment or help is recommended, etc.

3. PROCESS OF REFERRAL

Referral to Occupational Health for any of the reasons above should be made by the appropriate Manager in conjunction with a HR Advisor.

The purpose of the referral must be previously fully discussed with the individual concerned and their representatives if appropriate.

The referral paperwork should provide Occupational Health with factual information on the employee and the health issues, and include the following:

- an up to date job description/person specification
- details of the duties expected of the employee and the environment the employee works in
- additional information or questions, which you wish Occupational Health to answer. You should ensure that questions are specific.

Occupational Health will send a response to the Manager/HR Advisor within one week of seeing the employee, giving as full a reply as possible. A further report may be necessary when additional information has been received from the employee's GP/Consultant, which enables specific questions to be answered.

4. FAILURE TO CO-OPERATE IN PROVIDING MEDICAL INFORMATION

If an employee refuses to co-operate in helping management to establish any medical condition, the employee should be advised in writing that in the absence of a medical report, management will eventually have to reach a decision on the information available to them.

5. REPORTS FROM OCCUPATIONAL HEALTH DOCTOR

Reports from the Occupational Health Department Doctor will normally fall within one of the following categories:

Fit to continue in present job – this may include a phased return

Will be fit to return in foreseeable future/at given date

The employee is incapable of carrying out the full duties of their current post, but may be able to perform or will give more regular attendance if performing suitable alternative duties/hours within the organisation - whilst the Trust is under no obligation to create a specific job for an employee who becomes permanently unfit to undertake the duties he/she was employed to do as a result of ill-health, efforts will be made to search for alternative employment which is compatible with the medical limitations of the person involved and any specific recommendations made by the Doctor.

Due to serious illness or injury the employee concerned is incapable of any work in the foreseeable future - the employee should, be asked to attend an interview with the appropriate Dismissing Officer, where the medical report should be discussed and the employment terminated on grounds of incapability due to ill-health as detailed in Section 24-26.

Date:

PRIVATE & CONFIDENTIAL

Addressee Only

Employee Name

Employee Home Address

Mobile Number

Work Number

Home number

Date sent to employee

Managers Name

Full Work Address

Email

Work telephone number

Mobile number

Dear [*Employee Name*]

Re: Occupational Health - Manager Referral for *Employee's name & dob*
Position/Job Title
Base

As previously discussed on [*Date*] I am referring you to the Occupational Health Service. The reason for this referral is due to *short-term absence/ absence over 28 days/Health issues or concerns/ your performance at work.*

For long or short term absence from work

At our meeting you informed me that you *are/have been* absent from work due to [*insert reason for absence*]. We discussed this further and you informed me of the following [Insert details of case i.e. nature of condition, if under GP, date of next GP appointment, what medication taking, waiting for further treatment from other AHP e.g. physiotherapist, whether waiting for consultant appointment, how condition is affecting home life]

For other health reasons

We discussed the health issues you are experiencing at present [*detail issues and how they are affecting the employee/ workplace*] and agreed to seek to Occupational Health opinion for the following reasons [*give reasons*]

We discussed how your illness is affecting your ability to carry out your role as [*insert job title*]. You confirm the following reasons. *i.e. back problem makes it difficult to move and handle patients, difficult to maintain contracted hours due to nature of condition.*

[*Delete as necessary*] We have already looked at the following adjustments to your role [*Give detail of the adjustments and if they have been successful*]
And have put these supportive measures in *place i.e. regular 1-1's, clinical supervision, and team meetings*

I explained that I would be providing Occupational Health with the following information regarding your work environment and sickness absence.

Please provide details of the job and the conditions under which it is performed. Do not just send job title and a job description but include the following information as necessary:

- The demands of the job, *e.g. is it physically, mentally or intellectually challenging*
- The working environment, *e.g. Clinical, client group, in the community, office based, layout of work area etc, Working with dust, chemicals, at heights, walking between buildings, stairs, travel.*
- Any details of the team *i.e. work covers a large geographical area so requires driving.*
- Regular shifts
- Regular night contract
- Internal shift rotations
- Sleep-in shifts
- Waking nights
- Management/supervisory duties
- Exposure prone invasive procedures
- Driving passenger carrying vehicles, large goods vehicles [*please specify*]
- Handling patients/equipment – *Please specify how often, average weights and length of time*
- Control and restraint training
- Breakaway/scip training
- Using DSE over 1 hour a day
- Food handling
- Contact with natural rubber latex
- Other health surveillance
- Exposure to hazardous substances [*please specify*]

I am also including the following risk assessments (*please include any relevant risk assessments related to the job role or individual that have been carried out*)

[Name of Employee] has had the following pattern of sickness absence for the period

From date – To date

:

Date from - to	Number of days absent	Reason for absence	Un-certified/Self certified/Certified by Dr

At our meeting we discussed that I would be seeking the following information from Occupational Health:

[Delete as necessary]

a) Cumulative short-term sickness absence to assess whether: -

There is an underlying medical problem contributing to these absences. If so, would any change to the work environment, work duties or other referral advice help? If so, what would these changes be?

b) Long term sickness absence or health issues/concerns

Is *Full name*: -

Please only include the questions that are appropriate to this referral, delete questions that are not relevant

- 1. *Now fit to return to their normal duties and full contracted hours?***
- 2. *Fit to return to work within [please specify a time frame i.e. 2 months] and be able to work effectively thereafter?***
- 3. *Would any change to the role or working environment help facilitate an early return to work? If so please advise?***
- 4. *Are there any other restrictions? If so what restrictions and for how long.***
- 5. *Should alternative employment be considered?***
- 6. *If so what sort of role/duties would be suitable to look for?***
- 7. *Are there any other specific recommendations you could make to the employee to assist with their return to work, if so what?***
- 8. *Is this employee covered by the DDA?***
- 9. *Fit to attend a meeting/hearing as part of trust policy***
- 10. *Would you support an application for ill health retirement?***
- 11. *Other***

Finally I explained that this letter would act as the referral and will be forwarded to the Occupational Health Service for assessment. The Occupational Health Service will contact you directly to either further discuss the referral on the phone or arrange an appointment with you.

Following your appointment with the Occupational Health Service you will receive a copy of the report and this report may also be copied to Human resources and to your GP if this is appropriate.

Should you have any questions regarding this letter please do not hesitate to contact me on *[give contact number and forward any relevant additional information you receive from the employee to the Occupational Health Service]*.

Yours sincerely

Managers Name
Job title
Employing Organisation

Cc:
ASP Occupational Health Service
Swan House
Gloucester Centre
Morpeth Close

Orton Longueville
PETERBOROUGH
PE2 7JU

Tel: 01733 316519

Fax: 01733 362809

Email: ASPoccupationalhealth@asp.nhs.uk

HR Representative Name

Title

Work Base

Work telephone number

Mobile phone number

Email address

These recommendations are made on an advisory basis only and it is understood that they will be implemented only at the discretion of the Manager, if there will be benefit to the service as a whole. Members of staff should not return to work before contacting their Manager to discuss and agree arrangements. Please contact ASP Occupational Health as soon as possible if you require further clarification.

If relevant, employee informed that NHSP shifts / and or overtime cancelled for the next seven days.
If not informed, give reasons:

SUMMARY OF DISCUSSION (to include),

- Past sickness record and feedback on their sickness record.
- Is a referral to Occupational Health appropriate? If so, discuss reasons with the employee. If under Occupational Health referral, are further appointments due?
- Is there a potential impact on pay?
- Is Employee fit to return to their role?
- Are any reasonable adjustments required under the Disability Discrimination Act 1995
- Remind member of Oakdale Services if appropriate. (Tel 0800 027 7844)
- Agree way forward.

Signed (Employee)..... Date.....

Signed (Manager)..... Date.....

.....

What to do if you are off Sick

<p>If you are sick or likely to be sick for 1-7 days</p>	<ul style="list-style-type: none"> • Let your manager know immediately and no later than your expected starting time • Speak to your manager yourself unless exceptional circumstances exist, telling them why you are off and when you are likely to return • If your manager is unavailable you should advise a senior employee. It is not acceptable to leave a message with anyone else (except in exceptional circumstances). • Keep your manager informed of any changes to your health status or return date • On your return to work you must meet with your manager and complete and sign a self-certification form. A copy of the certificate will be placed on your personal file and the original is sent to Payroll. • You do not normally need a medical certificate from your doctor until your 8th day of absence • Statutory Sick Pay is paid from day 4 will be paid with your salary, you may also be entitled to contractual sick pay.
<p>If you are sick, or likely to be sick for more than 7 days</p>	<ul style="list-style-type: none"> • Keep in touch with your manager confirming your health status and when you are likely to return. You should ring your manager every few days and inform him/her of any changes. • It is not acceptable to leave a message with anyone else (except in exceptional circumstances). • See your doctor who will give you a medical certificate as necessary • Complete a self-certificate to cover the first seven days of your absence. If you expect to return to work shortly complete this certificate on your return. If you expect your absence to continue for some time, ask your manager to send you a form. You should complete and return this form to your manager as soon as possible. Your manager who will copy it to your personal file and forward the original to Payroll • Complete the medical certificate as soon as possible, by adding your dept/ward and payroll number, if known, and send to your manager. Your manager will place a copy of the certificate on your personal file and send the original to Payroll. Any further medical certificates issued should be dealt with in the same manner. • On your return to work you must meet with your manager for a return to work interview. Your manager will notify Payroll of the last day of your absence. • The appropriate Statutory Sick Pay will be paid with your salary • You may be required to attend Occupational Health to ensure that you are fit to return to work.

In All Cases

- 4 Let your manager know immediately why and how long you expect to be off work. If you do not, your absence may be recorded as unauthorised absence and therefore will be unpaid.
- 4 If you are in any doubt about what to do - consult your manager
- 6 Do not delay in seeing your doctor if you need medical advice or treatment
- 6 Do not falsify certification of sickness absence as this will be dealt with under the Trust's disciplinary procedure, which could lead to dismissal

NB: Occupational Sick Pay and Statutory Sick Pay will be withheld or reclaimed if appropriate certification is not received.

SAMPLE LETTER A

Sample Letter to Employee Absent Without Permission

Date

RECORDED DELIVERY

Address

Dear Mr/Mrs/Miss/Ms

On you went absent from work and you did not inform me of the reason for your absence. At the time of sending this letter I have been unable to contact you by (*state phone, visit and date and time*) and I am concerned about your continued absence. If I do not hear from you by, your absence will be taken as unauthorised and as such you will not be paid.

Please contact me on receipt of this letter to discuss your absence from work and to let me know when you may be able to return.

I look forward to hearing from you by return.

Yours sincerely

Name
Position

cc HR representative

SAMPLE LETTER B

Sample Letter to Employee Absent Without Permission - Warning of Termination of Contract

Date

RECORDED DELIVERY

Address

Dear Mr/Mrs/Miss/Ms

I wrote to you on concerning your absence from work since and asked you to contact me.

To date you have not been in contact with me to discuss your absence from work and to let me know when you may be able to return.

I am now extremely concerned about your absence and would ask you to contact me within the next five days, as I have been unable to contact you by letter/phone/visit (*as appropriate*). If you do not contact me within 5 working days I will assume you wish to terminate your contract of employment with the Trust.

I hope to hear from you within the next five days.

Yours sincerely

Name
Position

cc HR representative

SAMPLE LETTER C

Date

RECORDED DELIVERY

Address

Dear

You have been absent since and Mr/Mrs/Ms has tried contacting you on several occasions and has written to you on and requesting you contact him/her regarding your absence. To date you have not responded.

In light of your unauthorised absence and failure to contact us I am assuming you have terminated your employment with the Trust. Your last date of work was and payroll have been requested to pay you up to that date.

Yours sincerely

Name

cc Manager

PS: to be signed by a dismissing authority in accordance with the Trust's Disciplinary Policy & Procedure