

NHS Cheshire CCG Attendance Management Policy

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Effective from *to add*.

This version supersedes previous versions of policies published by NHS Cheshire CCG or the following former CCGs: NHS Eastern CCG, NHS South Cheshire CCG, NHS Vale Royal CCG and NHS West Cheshire CCG.

Applies to all employees of NHS Cheshire CCG.

This document should be read in conjunction with:

- Annual Leave policy
- Disciplinary Policy
- Equal Opportunities Policy
- Grievance and Disputes Policy

Policy Revisions and Amendments	
SECTION	SUMMARY OF KEY CHANGES

Policy Obsolete		
Date	Reason	Approved By

Contents

1. Introduction.....	6
2. Purpose	6
3. Scope	6
4. Responsibilities.....	7
4.1 Responsibilities of the CCG Governing Body	7
4.2 Managers.....	7
4.3 Staff	7
4.4 CCG Human Resources Business Partner.....	7
4.5 Occupational Health.....	8
4.5 Staff Representatives	8
• Involvement in the consultation and drafting of this policy	8
5. Notification Procedure	8
6. Certification and Documenting Sick Leave.....	8
7. Sick Pay	9
7.1 Occupational Sick Pay	9
7.2 Statutory Sick Pay.....	9
7.3 Part Shifts / Working Days	10
7.4 Additional Work.....	10
8. Policy in Practice: Procedure	10
8.1 Right to be Accompanied	10
8.2 Return to Work Discussions	10
8.3 Short Term Absence	10
8.4 Stage 1 - Informal	11
8.5 Stage 2.....	11
8.6 Stage 3.....	12
8.7 Stage 4	12
8.8 Attendance During Review Periods.....	12
9. Long Term Ill Health	12
9.1 Long Term Sickness Absence Management Options.....	13
9.1.1 Phased Return to Work.....	13
9.1.2 Reasonable Adjustments	14
9.1.3 Redeployment.....	14
9.1.4 Dismissal	14
10. Mental Health Concerns	14
11. On-Going Medical Conditions	15
Step 1 – Advice on the Condition	15
Step 2 – Reasonable Adjustments / Redeployment	15
Step 3 – Incapacity Review.....	15
12. Ill Health Retirement Applications	15

13. Appeal Procedure.....	16
13.1 Appeal Against the Process	16
13.2 Appeal Against the Decision	16
14. Injury Allowance	16
15. Specific Types of Absence	17
15.1 Maternity Related Absence	17
15.2 Employees Undergoing Fertility Treatment	17
15.3 Disability Related Absence.....	17
15.4 Planned Surgery	18
15.5 Gender Reassignment	18
16. Sickness Absence	18
16.1 Sickness During Annual Leave	18
16.2 Annual Leave Entitlement	19
17. Medical Appointments	20
18. Unauthorised Absence (AWOL Employees)	20
19. Timekeeping.....	20
20. Monitoring.....	20
Governance.....	21

1. Introduction

The Cheshire Clinical Commissioning Group (the CCG) as commissioners of Health Services is committed to developing a high quality and locally accessible service to the local population. It is committed to the health and wellbeing of its workforce and to developing a pro-active approach to managing attendance at work. The contribution of staff in the provision of quality services to the local community is highly valued and attendance at work is an intrinsic part of this provision.

Whilst the CCG recognises that there will be occasions when employees will be prevented from attending work through ill health, the CCG has a duty to maintain service delivery to its residents and minimise disruption to its working arrangements, while balancing the needs of its employees. High levels of sickness and absence can have an effect on the level of quality of service provision and can increase costs through the use of bank, agency staff and overtime.

2. Purpose

The purpose of this policy is to ensure that sickness absence is managed in a timely, effective, fair and consistent manner across the CCG. It aims to encourage all employees to proactively manage their health and maintain good attendance at work, and for managers to make an effective contribution to service delivery through providing a supportive environment and promoting a healthy workplace.

The CCG commitment to the welfare of employees includes the following initiatives: Occupational Health, staff support and counselling, redeployment where appropriate and training for all employees on health and safety issues. Employees are also encouraged to use the confidential Occupational Health services that can be accessed directly.

In cases where an employee is disabled within the meaning of the Equality Act 2010 or where an employee becomes disabled and wishes to remain in employment, every effort will be made to make reasonable adjustments or find an alternative post to support them.

An employee may be referred to Occupational Health to enable a report to be prepared for the CCG. The CCG may consider making reasonable adjustments to the particular job to accommodate the employee's short term or long-term requirements and consider offering alternative employment, a shorter working week or other reasonable adjustments to their role.

All employees who suffer from ill health or have sustained an injury will be treated sympathetically and any employee who becomes aware that they have an illness is encouraged to inform their Manager at the earliest opportunity.

Any abuse of the CCG's sickness benefits of pay and leave will be regarded as gross misconduct and dealt with as a disciplinary issue and may result in dismissal. The matter may also be referred to the local Counter Fraud Service.

3. Scope

This policy will be applied equally to all staff covered by the policy and in accordance with the CCG Equal Opportunities Policy and in accordance with legislation.

This policy should be read in conjunction with section 14 of the NHS Agenda for Change Handbook and applies to all CCG staff without exception. No individual or group will be disadvantaged during the application of this policy.

4. Responsibilities

4.1 Responsibilities of the CCG Governing Body

The responsibility for the monitoring and provision of this policy rests with the Governing Body of the CCG.

4.2 Managers

The ultimate responsibility for managing attendance rests with the line manager and the key responsibilities include:

- Ensuring this policy is applied fairly to all employees
- Supporting employees to have regular attendance at work and monitor the attendance accurately
- Monitoring attendance of their staff and investigating the reasons behind absences, trends and patterns of absence and attendance and taking measures to alleviate them
- Ensuring that information on sickness absence is reported weekly to the nominated person responsible for recording absences for the CCG to ensure accurate reporting, monitoring and calculations of sick pay
- Carrying out a risk assessment and referrals to Occupational Health where appropriate to ensure employees' safety and wellbeing
- Carrying out return to work discussion with individuals as soon as possible after their return – ideally on the day the employee returns

4.3 Staff

Every employee has a responsibility to attend work on a regular basis including:

- Proactively managing their general health and wellbeing as far as is possible to ensure regular, timely, consistent attendance in accordance with their contract of employment
- Following the notification process in all cases of absence
- Maintaining regular contact with their manager during any period of sickness absence. The frequency should be agreed with their manager depending on the individual circumstances
- Informing their manager of their intended return date as early as possible
- Informing their manager of any condition or illness which may affect their ability to carry out their role safely
- Informing their manager of any illness or condition which they are suffering from or have been exposed to which may present a risk to themselves or others

4.4 CCG Human Resources Business Partner

Human Resources can offer advice on all matters relating to attendance management. Their key responsibilities include:

- Providing initial training and on-going support in the application of this policy
- Providing reports and analysis of employee's sickness absence in line with agreed reporting schedules
- Attending formal stages of the procedure or at the specific request of the manager

Human Resources will provide initial training and on-going support in the application of this Policy.

Human Resources will provide reports and analysis of employee's sickness absence in line with agreed reporting schedules.

A Human Resources Representative will be present at all formal stages of this procedure or at the specific request of the Manager.

4.5 Occupational Health

Occupational Health is a specialist health advisory service which offers impartial and confidential advice and support to staff and managers and signpost staff to additional support services. Their key responsibilities are:

- Provide a report to managers when requested giving advice on the health of an employee and long-term prognosis of the condition which is affecting the employee's ability to carry out their role.
- Advise managers on possible or suitable alternative or modified work activities either temporarily or on a permanent basis
- Assist in an employee's application for early retirement due to ill health where applicable
- Follow all legislation concerning access to medical records on behalf of the CCG

4.5 Staff Representatives

Staff Representatives have an important role to play in providing advice, support and representation to their members and working in partnership with the CCG to implement the policy in a fair and consistent manner. Their key responsibilities include:

- Involvement in the consultation and drafting of this policy
- Providing appropriate advice, support and representation to their members in relation to this policy and attending meetings

5. Notification Procedure

Except in emergency circumstances, or unless previously agreed, employees must telephone their line manager at the earliest opportunity, prior to their start time on the first day of absence, together with reason and (where possible) the likely date of return to work. Contact should be made at regular intervals throughout the period of absence. In very exceptional circumstances, anyone not able to telephone personally should ensure that a relative or friend does so on their behalf.

Employees should contact their Manager with their date of return as soon as possible even if there are non-working days before the return date. Managers must ensure that all full days of absence, due to sickness, are recorded and reported to the nominated person for recording absence for the CCG.

6. Certification and Documenting Sick Leave

Self-certified sick leave is permitted for a maximum of seven consecutive calendar days on any one occasion. Saturdays, Sundays and public holidays count towards the calculation of periods of absence and sick pay. For any period of sickness employees must complete a self-certification form (Appendix 1).

When returning to work employees are required to notify their Manager of fitness to return prior to the date and attend a return to work discussion with their Manager to complete a Return to Work Form, (Appendix 2), agreeing the absence details and any action to be taken if appropriate. Any statement made and recorded on this form must be true and accurate. Any details which are subsequently found to have been false will be dealt with under the disciplinary procedure. The completed form will be kept on the employee's file and in accordance with Data Protection Principles.

It may be appropriate in certain circumstances for this discussion to be conducted over the telephone.

Any sickness/injury absence that lasts beyond the 7th consecutive calendar day must be covered by a medical certificate issued by a medical practitioner. Thereafter consecutive medical certificates must be provided for the duration of the absence. Failure to provide consecutive medical certificates may result in loss of payment as any absences not covered by a self-certificate and/or medical certificate may be treated as unauthorised absence and will be unpaid.

If an employee fails to comply with notification or certification procedures or who otherwise abuses the CCG requirements on sickness absence may be dealt with under the CCG Disciplinary Policy.

7. Sick Pay

7.1 Occupational Sick Pay

Provided employees comply with the notification and certification procedures above, the CCG will pay Occupational Sick Pay (OSP) during periods of sickness absence according to length of service.

An employee’s entitlement to OSP in accordance with NHS Terms and Conditions is based on completed months / years of service including continuous NHS Service with a break of less than 12 months.

The following table sets out the maximum entitlement to OSP

Period of Service	Period of Full Pay	Period of Half Pay
0 – 12 months	1 month	2 months
1 – 2 years	2 months	2 months
2 – 3 years	4 months	4 months
3 – 5 years	5 months	5 months
Over 5 years	6 months	6 months

Entitlement to OSP will be calculated on the first day of any absence due to sickness or injury. Any days of absence due to sickness or injury in the 12 months prior to the first day of absence shall be deducted from the relevant maximum entitlement above.

The CCG reserve the right to withhold payment of OSP where an employee has been found in breach of these procedures under the CCG disciplinary procedure where abuse of the scheme is proven.

7.2 Statutory Sick Pay

SSP is paid to staff who are too ill to attend work and covered by a contract of employment. It is subject to government conditions and can be paid by the CCG for up to 28 weeks.

Provided employees comply with the notification and certification procedures above and subject to the current statutory provisions they will be entitled to receive Statutory Sick Pay (SSP) after 3 consecutive calendar days. However, any payment of OSP will offset any entitlement to SSP due for the same period.

In cases where an employee can claim costs from a third party who caused an absence (e.g. another driver in a car accident) they will be expected to pursue all avenues to recover the cost of their sick pay to be reimbursed to the CCG

7.3 Part Shifts / Working Days

If an employee becomes ill while at work, they should notify their manager before leaving. These occasions will be monitored and may be included in the trigger levels detailed below.

7.4 Additional Work

Employees must not undertake any other paid work for any organisation whilst claiming sick pay from the CCG or engage in activities that are conceivably inconsistent with the nature of their illness without the express agreement of the line manager. Managers are advised to contact their HR Business Partner in these circumstances.

8. Policy in Practice: Procedure

8.1 Right to be Accompanied

Employees have the right to be accompanied at any formal stage of the procedure by either an accredited Trade Union Representative or work colleague who must be an employee of the CCG.

It would not be appropriate for an employee to be accompanied by a colleague whose presence would prejudice the meeting.

The colleague is allowed to address the meeting to put and sum up the employees' case but not to answer on the employee's behalf or prevent the employee from explaining their case.

If an employee's colleague is unavailable it is the responsibility of the employee to suggest an alternative date which is no more than 5 working days after the original date of the meeting.

8.2 Return to Work Discussions

The manager must hold a return to work discussion following every period of absence on the day the employee returns or as soon as possible after and should include a review of the absence periods in the rolling 12 month period.

These meetings are an opportunity for managers to welcome the individual back, check their fitness to be back in work and understand if there are any health issues they can support the employee with.

If the employee has reached or exceeded the trigger points the manager should advise the employee of this and arrange an absence review meeting.

8.3 Short Term Absence

The aim of this policy is to ensure fair and effective management of absence due to sickness or injury. Absence management is necessary to ensure that full support is provided by the CCG, together with monitoring where necessary.

An employee is entitled to have a Staff Side Representative or work colleague to accompany them to each of the formal stages of this procedure if they so wish. A Human Resources Representative will be present at each formal stage of this procedure.

Managers should manage situations sensitively when there is an understandable reason for the absence or a defined end to the absence period. It is important for managers to ensure that employees do not feel compelled to attend work when they are unwell and must on no account allow employees to work who are obviously in an unfit state of health. This procedure will be used where an employee's attendance record is giving cause for concern.

Levels of absence become a cause for concern when:

- The total number of days or episodes of absence rise sharply
- There are regular and/or intermittent absences

The triggers for the stages of the policy set out below are:

- 3 occasions of absence in a rolling 12 month period
- 12 days absence in the last 12 month rolling period (pro rata for part time staff).
- A regular/intermittent or unacceptable pattern of absence

Managers must ensure that they conduct a Return to Work discussion following each period of sickness absence and consider what support (including Occupational Health advice) may be required to assist the employee to remain healthy and at work.

8.4 Stage 1 - Informal

When an employee's absence meets or exceeds the trigger levels set out above the manager should meet informally with the employee at a stage 1 sickness review meeting to

discuss the employee's absence and their concerns and provide counselling and support where appropriate. The meeting will aim to identify the frequency and reason(s) for the absences ensuring that the employee is aware that their absence record is giving cause for concern.

At this stage it may be appropriate to agree a 'timescale' for improvement and to inform the employee that their attendance is to be monitored. It is recommended the employee will be given an improvement plan which outlines improvement targets. The employee should be made aware that if they fail to meet the improvement target they would be moved onto the second stage of monitoring.

The recommended improvement target is:

- No more than 2 occasions of absence in the next 6 months and / or
- No more than 5 days absence in the next 6 months

At this stage, a referral to Occupational Health may be considered to determine whether there is an underlying reason for the employee's absences.

Managers should complete the review meeting pro-forma (Appendix 3) and provide the employee with a signed copy for their records.

8.5 Stage 2

If the employee does not achieve the improvement targets set out at stage one, the Manager will hold a stage 2 formal sickness review meeting with the employee to discuss the absences. At this meeting, a further improvement plan may be agreed and improvement targets set.

At this stage, a referral to Occupational Health may be considered (if this has not already taken place at stage one) to determine whether there is an underlying reason for the employee's absences.

The employee should be made aware that if they fail to meet the improvement targets they would be moved onto the third stage of monitoring.

Managers should complete the review meeting pro-forma (Appendix 3). The employee should be provided with a signed copy for their records.

8.6 Stage 3

If the employee fails to meet the improvement targets set out at stage two, they will be subject to the third stage of this procedure. At this stage the Manager's next-in-line should formally review the case and chair the stage 3 meeting.

At this point any of the following solutions may be sought:

- Professional counselling
- Further medical advice to be arranged as appropriate
- Consideration for transfer to more suitable duties
- Any course of action deemed appropriate in the circumstances, where there is a clear prognosis that the individual will recover and absence levels improve

A stage 3 sickness review meeting will be held with the employee to consider all the matters above. At this meeting, the employee may be given a final improvement plan and improvement targets set. Employees should be made aware that if they fail to meet or exceed the improvement targets set at stage 3, they may be dismissed.

Managers should complete the review meeting pro-forma (Appendix 3). The employee should be provided with a signed copy for their records.

8.7 Stage 4

If the employee fails to meet the requirements of the Stage 3 Improvement Plan, dismissal will be considered

Prior to this meeting, the CCG should obtain another detailed and updated report from Occupational Health.

At this stage the employee will be invited to attend a hearing in the presence of a Manager with the authority to dismiss. A decision will be taken at this hearing on the continued employment of the employee concerned, after hearing representations from manager and the employee. The meeting will be attended by a Human Resources Representative.

8.8 Attendance During Review Periods

The key outcome of the above procedure will be an improvement in attendance. Wherever possible Managers should facilitate flexible solutions to achieve regular attendance.

Managers may proceed to the next stage of the procedure before the review period is completed if it becomes apparent that the employee's attendance has not improved.

If, at any stage in this procedure, the employee achieves a better attendance record than is required by the improvement plan, that employee shall return to the next lower level stage in which the manager will monitor the level or pattern of absence and take no action unless an employee's absence again becomes a matter for concern.

Improvement notifications will remain as 'live' on the employee's staff file for the duration of the monitoring period. If an employee achieves the required level of improvement the notification will remain on their staff file but will be disregarded for any further action.

9. Long Term Ill Health

Long-term sickness absence is defined as a period in excess of 4 weeks and will result in a referral to Occupational Health. However, Managers need to take an informed decision as to the value of Occupational Health referrals during the period of long-term sickness absence, depending on the reason for the absence.

Following receipt of the Medical Report the employee and their Manager will attend a welfare meeting to discuss its content. At this and subsequent meetings, employees may, if they wish to, be accompanied by their staff-side representative or work colleague. A representative from Human Resources will also be present.

At this meeting the Manager and the employee should discuss the reasons for the absence and ultimately how the Manager can support the employee back to work. At this stage arrangements should be made for a further meeting to discuss the employee's progress and return to work. The Manager will continue to monitor the situation and arrange further meetings as necessary with the employee and their representative as appropriate.

It may be necessary for the Manager to continue to refer the employee to Occupational Health in order to gain continuing Occupational Health advice for the appropriate management of a particular case. In cases where employees are absent due to stress (irrespective of if the stress is work related or not) or mental health issues an Occupational Health Referral should be sought at the earliest available opportunity. A meeting between the employee, Manager and Occupational Health may be arranged if thought helpful.

Throughout the period of long-term sickness Managers will ensure that they maintain regular contact with employees via telephone, letter or home visits by agreement. Employees on long term sick leave must be kept informed of any department or service developments and should continue to receive any newsletters or briefings as appropriate.

Employees who fail to attend sickness absence review meetings or Occupational Health appointments may be subject to the various sanctions within the Policy. Decisions will be taken in the absence of the employee on the basis of the medical evidence available at that time.

Long term sickness will normally count towards trigger points and an absence review meeting will be held in all cases.

If an employee is diagnosed with a terminal illness advice should be sought from the HR Business Partner.

9.1 Long Term Sickness Absence Management Options

Throughout this procedure, it will be necessary for the Manager to consider the appropriate options and seek advice from their HR Business Partner if appropriate. Following advice from Occupational Health the employee together with their manager and staff-side representative may agree on one of the following options:

9.1.1 Phased Return to Work

The CCG will support staff during a phased return to work following a prolonged period of ill-health, where the Occupational Health Team advice that a phased return is likely to aid rehabilitation and a return to full hours and duties.

To aid rehabilitation Managers have discretion to allow employees to return to work on reduced hours or to work from home if appropriate without loss of pay to aid rehabilitation. Any such arrangements need to be consistent with statutory sick pay rules.

The timescale and basis of a phased return without loss of pay will be determined, in partnership, between the manager and the employee, taking into account the circumstances of the individual case and Occupational Health advice. A phased return to work should not exceed 4 weeks although may be extended in exceptional circumstances, based on Occupational Health advice.

If, at the end of the period determined for phased return, the employee remains unfit to resume full contractual hours and duties, Managers may use their discretion, subject to the needs of the service to agree a further period of reduced hours, with the employee being paid for the hours they work. It is acceptable for employees to request paid annual leave within their entitlement to offset, or partially offset, the reduction in pay.

Where it becomes apparent that there are doubts about the employee's continuing to progress to full hours/duties within this further period, Occupational Health advice will be sought.

9.1.2 Reasonable Adjustments

Following Occupational Health advice, it may be possible for the employee to return to their original post with some temporary/permanent adjustments. Examples of these restrictions could include reduced hours, lighter duties or alternative working patterns.

It may be necessary at this stage to consider the purchase of any specialised equipment that would help the employee to return to their work. In cases where the employee has become disabled during their employment help may be available through 'Access to Work'.

9.1.3 Redeployment

Following appropriate Occupational Health advice, consideration may need to be given to redeploying the employee on a temporary/permanent basis to a suitable alternative post. The redeployment register is held by Human Resources. Human resources will provide guidance on the redeployment process. Redeployment would normally be sought for the period consistent with the employee's notice period and up to the last day of employment.

If an employee moves to a post on a lower band there will be no pay protection or salary or other conditions. However, each case should be fully explored with the employee and their representative.

9.1.4 Dismissal

Where all possible options have been exhausted and there is no likelihood of the employee maintaining regular attendance at work it may be necessary for the Manager to consider dismissing the employee on grounds of incapacity/incapability due to ill health.

Where there is clear medical evidence that an employee will not be fit to return to work a dismissal may be made before the expiry of Occupational Sick Pay at a formal review meeting with a Director with the authority to dismiss.

10. Mental Health Concerns

Mental health problems in the workplace can be very disruptive for individuals and the business. They can affect employee's personal lives, wellbeing and morale and impact on their performance at work. The CCG recognises that approaching a member of staff about their mental health can be very challenging and sensitive.

The first sign that someone may have depression or a problem with their mental health is often in changes in their day-to-day behaviour. This could be uncharacteristic behaviour such as not being able to cope with their work, seeming distracted, a sudden loss in motivation or absenteeism. Managers should look out for these signs as a potential warning that someone may be suffering from the early signs of depression and informally speak to them to check how they are.

Managers should work with employees to complete a Stress Risk Assessment and discuss what can be put in place to support the individual.

A referral to Occupational Health at an early stage will provide additional support for the employee and advice for the manager on supporting them.

11. On-Going Medical Conditions

In some situations, an employee may have an on-going health related problem or develop a condition during the course of their employment which impacts upon their ability to perform the duties of their role. In these cases, a 3-step procedure should be followed:

Step 1 – Advice on the Condition

Refer the employee to Occupational Health for a detailed report and advice on supporting the employee

Step 2 – Reasonable Adjustments / Redeployment

Where the employee's health condition is classed as a disability under the provisions of the Equality Act 2010 the CCG will meet its legal obligations to make reasonable adjustments to their current post or look to find suitable alternative employment for them.

Step 3 – Incapacity Review

If the employee's substantive post is unsuitable due to their on-going medical condition and where it has not been possible to make reasonable adjustments to their current post or to re-deploy them into another post it will be necessary to proceed to an Incapacity Review Hearing to determine the employee's future employment with the organisation. Where termination of the contract of employment on the grounds of incapacity is considered, all reasonable efforts must be made to obtain appropriate medical evidence via occupational health service.

Occupational Health will also advise as to whether the employee is likely to be a candidate for ill health retirement if they are a member of the NHS Pension scheme.

12. Ill Health Retirement Applications

Employees who are members of the NHS Pension Scheme may decide to apply for ill health retirement benefits. Such applications will be facilitated by Occupational Health. Any application for ill health retirement will trigger a final sickness hearing to consider dismissing the employee on the grounds of incapacity/incapability due to ill health.

There are two tiers of Ill Health benefits:

Tier 1: is entitlement to the retirement benefits you have earned to date paid without any actuarial reduction for early payment. This level of benefit is payable if you are:

- A scheme member accepted by our medical advisers as permanently incapable of doing your current NHS Job; or
- A former scheme member accepted by our medical advisers as permanently incapable of earning an income by doing regular work

Tier 2: is entitlement to the retirement benefits you have earned to date enhanced by two thirds of your prospective membership up to reaching your normal retirement age. This level of benefit is payable to you only if you are a scheme member accepted by our medical advisers as permanently incapable of both doing your current NHS job AND permanently incapable of regular employment of like duration to your NHS job, taking into account your:

- Mental Capacity
- Physical Capacity
- Previous training, and
- Previous practical, professional and vocational experience

The application form once completed must be sent directly to the Pensions Agency together with details of the employee's current job role by either the employee or their medical representative.

The Pensions Agency will contact the employee directly and will ask for permission to obtain further medical advice as to the employee's condition from their doctor(s) or consultant(s) where necessary.

The decision of whether to permit the employee to retire on the grounds of ill-health rests entirely with the Pensions Agency Medical Advisors.

If a member of staff is dismissed on the grounds of medical capability the dismissal will not be dependent on the early release of the pension i.e. a member of staff may still be dismissed even if the application for the early release of their pension is declined.

13. Appeal Procedure

Employees have the right to appeal against any action, notification of unsatisfactory attendance or any decision to terminate the contract of employment under this policy. Any appeal must be in writing to the line manager of the person who made the decision within 10 working days of receipt of the decision.

13.1 Appeal Against the Process

If an employee is dissatisfied about the application of this policy, they may pursue a case under the CCG Grievance and Disputes Policy and Procedure.

13.2 Appeal Against the Decision

Where the appeal is against dismissal employees should address their appeal in writing to the Accountable Officer outlining the reasons for the appeal within 10 working days.

The appeal hearing will take place within 20 days of the lodged appeal. At the appeal hearing the employee has the right to be accompanied by a staff side representative or colleague.

14. Injury Allowance

Injury Allowance (IA) is paid by employers to staff on authorised absence with reduced pay or no pay because of an injury or disease wholly or mainly attributable to their employment. IA tops up the employee's income to 85% of the average they were getting before their pay was reduced as a result of the injury or disease. It is not payable if the employee's income is more than 85% of their average pay, and it stops when they return to work or leave employment. IA is subject to income tax and National Insurance deductions but not pension contribution deductions. IA is payable irrespective of whether or not an employee is a member of the NHS Pension Scheme.

To qualify for IA, an employee covered by the scheme must be on leave of absence and be suffering a reduction in their NHS pensionable pay as a result of an injury or disease that is wholly or mainly attributable to their actual NHS duties.

15. Specific Types of Absence

15.1 Maternity Related Absence

Should an employee be absence due to pregnancy related sickness, these absences should be clearly recorded as maternity related on the ESR system and will be monitored but not be included in absence triggers

It is recommended that an expectant mothers' risk assessment is completed as early as possible and appropriate, reasonable adjustments made.

If an employee is absent due to a maternity related illness during the last 4 weeks before the expected week of childbirth, maternity leave will commence on the 1st day of absence.

15.2 Employees Undergoing Fertility Treatment

The CCG recognises the emotional pressure of undergoing IVF treatment and where possible wishes to support any employee during the process. The CCG will allow the employee to use a reasonable number of days annual leave or unpaid leave during the course of the treatment or where possible to work flexibly in line with the service needs. Any agreement will be made by the Line Manager.

Employees do not have a statutory right to take time off, paid or unpaid, for fertility treatment such as in vitro fertilisation (IVF). Fertility treatment is not a "deemed incapacity" for statutory sick pay purposes.

For the purpose of entitlement to employment rights, a woman undergoing IVF is deemed to be pregnant from the point of implantation of fertilised ova. An employee would therefore be entitled to time off for antenatal appointments from the point of implantation. This right applies to any appointments that are made on the advice of a registered medical practitioner, registered midwife or registered nurse. She will therefore be protected from pregnancy and maternity discrimination and will have the right to time off for antenatal care from this point.

At any stage during the process, the employee may be signed off by a doctor, due to the effects of the treatment. This will be treated like any other sickness absence for any other reason and entitlement to statutory sick pay and any contractual sick pay in accordance with the normal rules.

The employee must notify their Line Manager to advise them of any on-going appointments that they will be required to take due to the treatment.

15.3 Disability Related Absence

If an employee is disabled or becomes disabled during their employment, the CCG is legally required under the Equality Act 2010 to make reasonable adjustments to enable the employee to continue working. This Act broadened the provisions of the Disability Discrimination Act of 1995, for public sector employers.

The Equality Act 2010 s.6 defines disability as a substantial and long term physical or mental impairment that adversely affects the person's ability to carry out normal day-to-day activities.

People diagnosed with the progressive conditions of HIV infection, multiple sclerosis and cancer are deemed to be disabled whether or not the condition has yet begun to have any effect on their ability to carry out day-to-day activities.

Equality law recognises the need to bring about equality for disabled people and suggests that this may mean changing the way in which an individual's role is structured, the removal of physical barriers and / or providing extra support for the disabled employee. This is

considered the duty to make 'reasonable adjustments'. These can be discussed with your HR Business Partner.

Occupational Health provides advice on the 'reasonable adjustments' required to support an employee at work. However, it will be the line manager's decision as to whether those adjustments are also reasonable for the service. Any adjustments made must be discussed with the individual concerned.

When an employee has a disability and is required to attend regular appointments (i.e. regular physiotherapy/ attending on-going treatment) the individual should advise their Line Manager in advance of the appointments. The manager shall consider reasonable adjustments to accommodate the disability related requirements including variation of working hours, flexible working hours or using a combination of unpaid and annual leave or paid time off to attend appointments.

Absences due to a disability or long term condition will be monitored and taken into consideration when determining whether a period of monitoring and an improvement plan are appropriate. Where it has been determined not to apply absence triggers, arrangements for reporting absence and return to work will continue to apply as per this policy, to ensure that staff can be properly supported by their line manager.

The decision should only be made once Occupational Health advice has been obtained and there is attendance review meeting. The reference period will apply in line with the relevant stage of the policy.

15.4 Planned Surgery

Planned surgery (including non-elective cosmetic surgery) will be classified as sickness absence and monitored under the usual triggers, as will any time off for recovery and recuperation.

However, elective cosmetic surgery without medical referral will not be classified as sickness absence. In these circumstances, either annual leave (or unpaid leave through mutually agreed flexibility) should be agreed with the line manager prior to any individual undergoing surgery. Where it is unclear if such surgery is elective or non-elective, Occupational Health advice must be sought.

15.5 Gender Reassignment

Once an employee has decided they wish to undergo gender reassignment it is essential that the employee is asked what assistance is required to support their transition. The line manager will need to discuss with the individual how they wish to handle the transition including absences from work. Further advice can be sought from the HR Team of the Equality and Inclusion Business Partner.

An employee is protected under the Equality Act 2010 as 'transgender' once they have proposed to change their gender or have done so. The manager shall consider reasonable adjustments to accommodate the equality related requirements including variation of working hours, flexible working hours or using a combination of unpaid and annual leave or paid time off to attend appointments.

16. Sickness Absence

16.1 Sickness During Annual Leave

If an employee falls sick during a period of annual leave either in this country or overseas, and the period of incapacity seriously interrupts the period of leave, then they may count the absence as sick leave provided they;

- Notify their line manager either in writing or by telephone at the earliest opportunity, in line with the Cheshire CCG procedures and no later than the fourth continuous day of illness; and
- Provide a statement by a qualified medical practitioner; the statement should cover the period of the illness and the nature of the illness and be written in English.

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

If an employee is absent due to sickness and has pre-booked annual leave they must notify their manager as soon as possible that they are sick or it will be assumed that the annual leave is being taken.

If the employee intends to spend more than one night away from their normal place of residency whether it be overseas or in the UK as part of their recovery, they must provide a written statement from a medical practitioner advising that the holiday would be beneficial to their condition or recovery, and in no way would aggravate or cause detriment to the illness / injury. Where necessary, the CCG will reimburse the cost of such letters.

In addition, the CCG may also choose to obtain a medical opinion from Occupational Health. If the leave is supported by a medical practitioner the employee will have the option to continue with sick leave and have the annual leave credited back or take the time as annual leave, in which case sick pay, occupational and/or statutory as appropriate, will cease for the period of annual leave. If an employee is physically unable to return to work after a holiday they must submit a medical certificate which covers them from the day on which they were expected to return to work. Should the employee take the leave as sickness, then entitlements to sick pay both occupational and statutory will be in line with the normal eligibility rules.

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

Employees will not be entitled to an additional day off if they are sick on a statutory or public holiday.

16.2 Annual Leave Entitlement

Employees will continue to accrue annual leave during periods of sickness. There will be no entitlement to a bank holiday, or to carry forward, should one fall during a period of absence.

Where an individual is able to take leave whilst sick, this should be agreed in the normal way with the line manager. In circumstances where a holiday is being recommended by a medical advisor, this should also be brought to the attention of the line manager.

In accordance with the CCG Annual Leave Policy, it is possible to carry forward annual leave and this should be discussed and agreed with the line manager.

If an employee on sick leave does not have the opportunity to take their annual leave entitlement because of illness, within the current holiday year, they may have the opportunity to carry their statutory holiday entitlement (currently 20 days for full time employees) over to the next holiday year. This will only be agreed in exceptional circumstances, by their line manager and any outstanding leave must be taken at the end of the sickness period. Where possible any outstanding holidays should be used as part of any phased return to work plan.

17. Medical Appointments

Routine appointments for example to a GP, dentist, clinic or regular hospital appointment should wherever possible be made in the employee's own time. Working arrangements may be changed to allow the employee to make the hours up however if this is not possible time off without pay or annual leave will be given.

18. Unauthorised Absence (AWOL Employees)

All absences should be notified by the employee. Unauthorised Absence is where an employee fails to attend work without notifying their Line Manager or with an unacceptable explanation/reason being provided. Unauthorised absence is also referred to as 'absence without leave' (AWOL).

The line manager and HR must make all efforts to contact the individual. Where no contact has been made and no justified explanation/reason has been provided by the employee, the manager reserves the right to suspend the employees pay. The employee must be notified in writing of any action to cease the payment of salary.

If an employee is absent from work without good cause or fails to properly notify their Line Manager of their absence formal action may be taken in accordance with CCGs' Disciplinary Policy.

19. Timekeeping

Lateness occurs where an employee fails to be available at work to commence their shift/working day on time. Every employee of CCG has a contractual obligation and duty to arrive punctually for work, as lateness can impact upon service delivery.

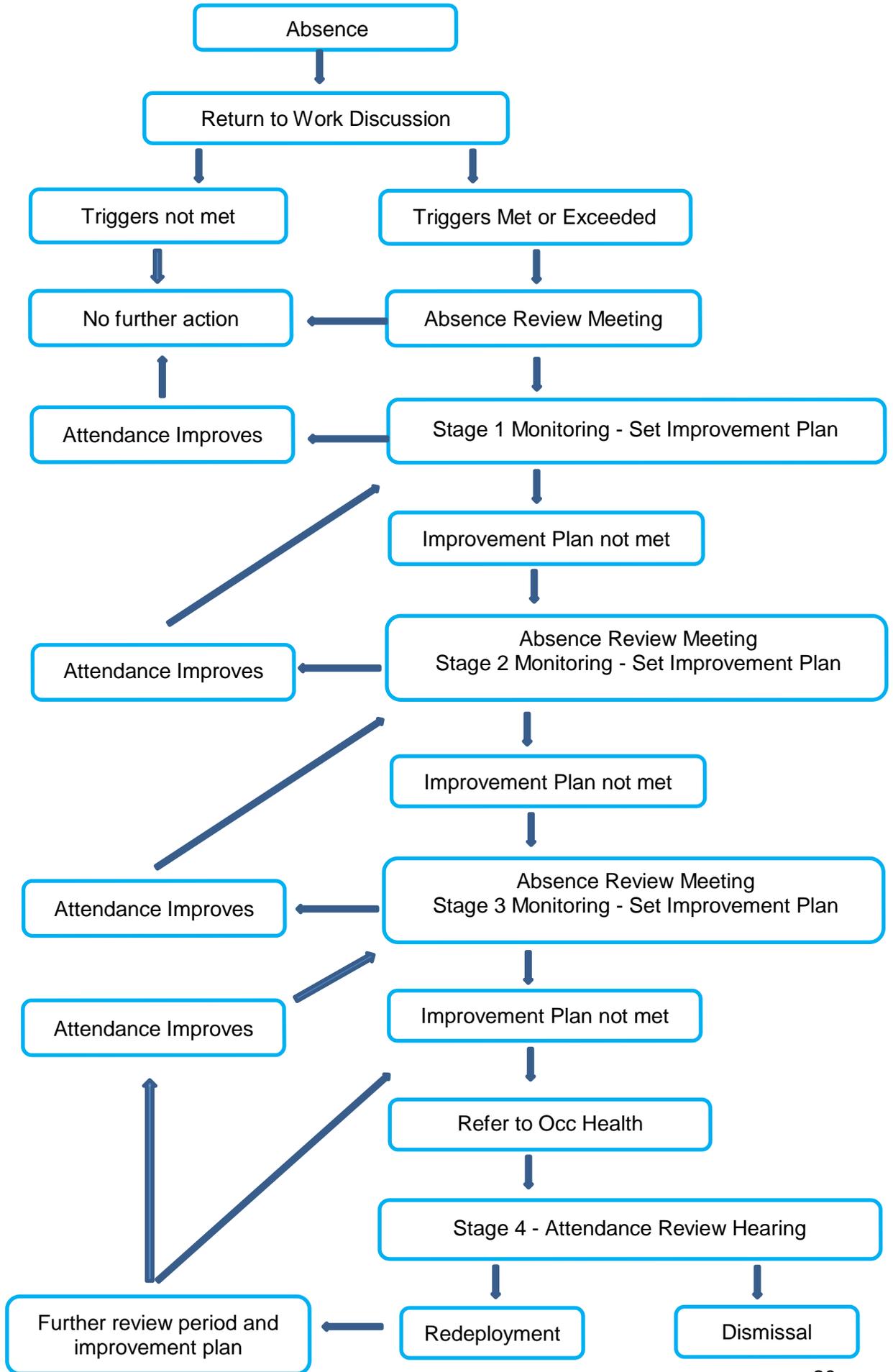
It is recognised that occasionally unforeseen circumstances may occur which prevent an employee from arriving at work on time; however, where there is persistent lateness (or a one-off occurrence with no satisfactory explanation) this should be discussed with the employee to understand the cause and appropriate more flexible working should be explored. However, if the issue is a matter of misconduct this could result in disciplinary action being taken against an individual in accordance with CCG's Disciplinary Policy.

20. Monitoring

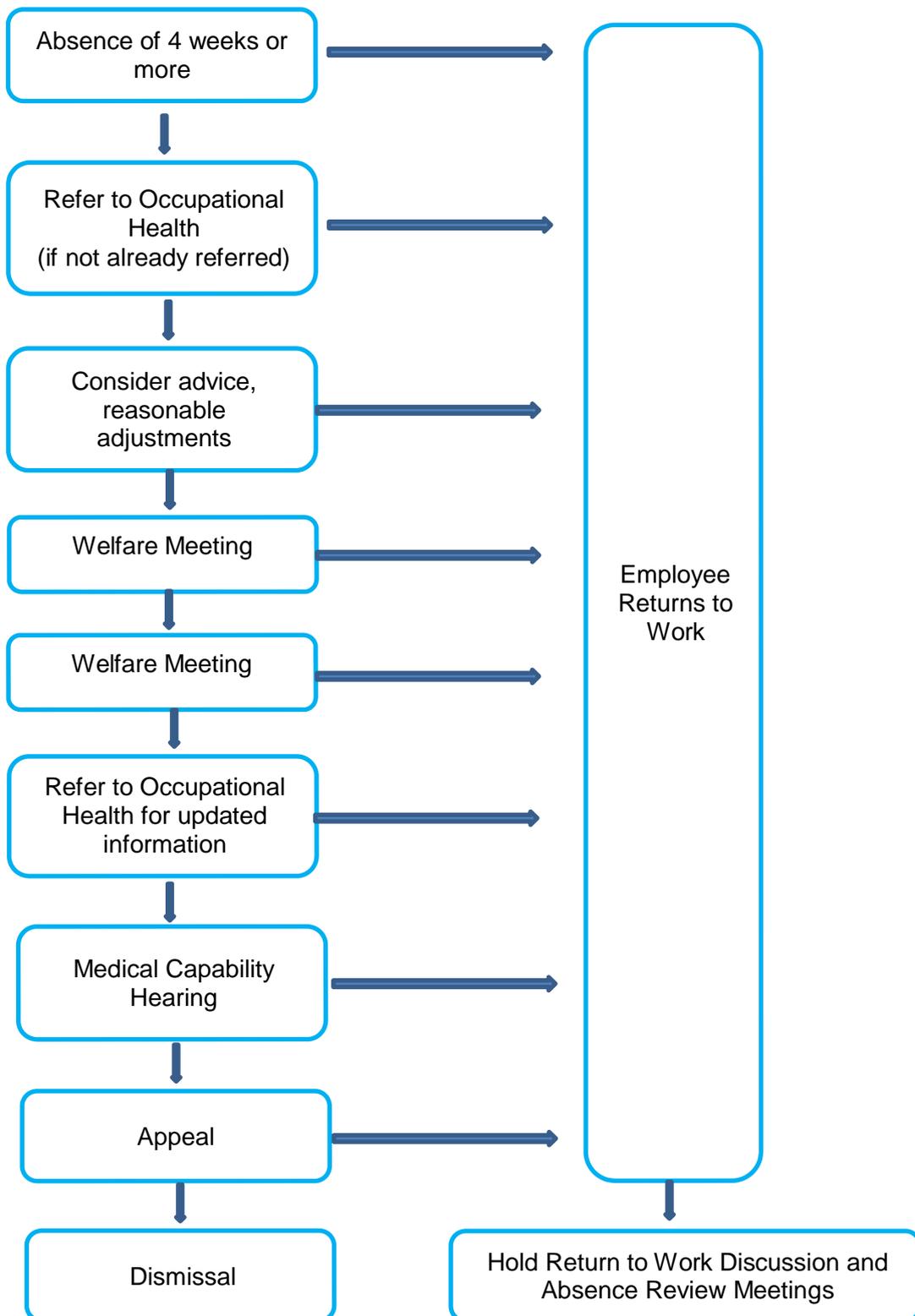
Human Resources in conjunction with the CCG will;

- Have responsibility to monitor the effectiveness of this policy on an annual basis.
- Make recommendations to the Governing Body.

Short Term Absence Process



Long Term Absence Process



Self-Certified Sickness Notification

To certify up to 7 calendar days sickness absence

Name	
Post Title	
Team	

Date you became unfit for work	
Date you expect to return to work (if known)	
Give brief details of the reason you are unfit for work	
Is your absence as a result of an accident at work?	YES / NO
If yes, Date and time of accident? Whom did you notify? Has an Accident Report Form been completed?	
	YES / NO
Did you fall ill abroad?	YES / NO
If yes, which country were you in?	

I declare that during the period stated, I have been unfit for work and that information given is complete and correct. I claim any sick pay to which I may be entitled.

Signed _____ Date _____

When completed and signed, this form should be sent to your Manager as soon as possible and not later than 7 calendar days from the first day off sick.

FOR COMPLETION BY MANAGER

Additional information

To the best of my knowledge, the information given above is correct.

Manager Signature _____ Date _____

Print Name _____

RETURN TO WORK FOLLOWING A PERIOD OF SICKNESS ABSENCE FORM

This form should be completed by the employee's line manager during a back to work discussion following every period of sickness absence

Name		
Team/ Dept		
Date manager notified of absence		
First date of absence		
Last date of absence		
Reason for absence		
Total number of <u>calendar</u> days absent (including non-work days)		
Total number of working days absent		
Total number of days absent in previous 12 months		
Total number of occasions absent in previous 12 months		
Trigger reached?	Yes	No
Is absence due to an injury at work?	Yes	No
Has the employee provided a self certificate?	Yes	No
Has the employee been seen by a doctor?	Yes	No
Has the employee provided a medical note?	Yes	No
Is the employee fit to return to their duties?	Yes	No
Detail any action taken to date		
Proposed course of action to be take eg monitoring, improvement plan		
Is an Occupational Health referral required?	Yes	No
Additional information		
I understand that knowingly providing inaccurate or false information relating to my absence it may result in disciplinary action.		
Employee Signature	Date	
Manager's Signature	Date	
Print Name		

ABSENCE REVIEW MEETING – All Stages

Meet with the employee and complete this form shortly after the employee returns to work after a period of sickness absence

If you are unsure of any aspect of the policy or the meeting contact your HR Team for support

Member of Staff	
Post Title	
Manager	
Post Title	
TU Rep or workplace colleague (if accompanied)	
Trade Union	
HR Team Rep (stage 4 only)	
Post Title	

Date of meeting	
Stage within process	

FORMAT of MEETING			
Introductions			
If unaccompanied, is the employee happy to proceed?	Yes	No	N/A
Explain that notes will be taken to summaries the discussion			
Explain the reason for the meeting – to gain an update as to the health and wellbeing of the employee and any support that can be provide			
Start date of recent absence			
End date of recent absence			
Dates of and reasons for absences in the previous 12 month period from day 1 of the most recent absence			

Number of occasions of absence	
Total number of working days absence	
Total number of calendar days absence	
Date of previous Absence Review Meeting	
Has improvement target been met?	Yes No N/A

How is the employee is currently feeling after their recent absence?	
Has an underlying medical condition been identified?	Yes No
If yes, provide details including the support they are receiving eg OH, GP, counselling, Specialist/Consultant, physio etc.	
Is an Occupational Health referral required?	Yes No
Detail an agreed phase return if appropriate	
Detail any agreed reasonable adjustments to support the employee	

Is ill health retirement an option? Yes No

If yes, contact your HR Team for advice

If no underlying health condition has been identified, advise the employee of the following:-

1. An improvement target (normally 6 months) will be set, during which their attendance will be monitored, and a marked improvement in attendance is required
2. If, during their review period, their attendance remains a concern and/or is unacceptably high, further and progressive absence review meetings will be conducted in line with the Attendance Management Policy.
3. Re-emphasise their obligations as per the Attendance Management Policy

Detail any concerns they raise in relation to these points

Confirm that the employee has understood the purpose of the meeting and that a way forward has been clarified

Will the employee exhaust full or half pay if they have a further period of sickness absence? Yes No

Have there been any issues with timely and accurate sickness absence reporting? If yes, clarify their responsibilities Yes No

Is an improvement target required? Yes No

If yes, confirm the number of days and/or occasions and the review period in months

If no improvement target is set, explain the rationale

Any further comments / questions discussed

APPEAL – advise the employee the right to appeal as per the Attendance Management Policy giving the timescales and who the employee should address their appeal to.

Employee Signature	
Manager Signature	

Provide the employee with a copy of this form.

Place the original in the employee's staff file.

Governance Backpage

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Author: Midlands and Lancashire Commissioning Support Unit (MLCSU)