



**NORTHAMPTONSHIRE OFFICE OF THE POLICE, FIRE AND CRIME COMMISSIONER
ABSENCE MANAGEMENT POLICY**

Policy Version Control			
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ABSENCE MANAGEMENT POLICY

The OPFCC recognises that employees will, from time to time, be unable to come to work because of sickness.

This policy provides a fair and consistent framework for supporting employees who are absent due to sickness. It also applies to employees who are at work but are unable to fulfil their duties and responsibilities in a satisfactory manner and/or fulfil their contracted working hours due to sickness.

The OPFCC is dedicated to maintaining and promoting the health and wellbeing of all its employees. Whilst the OPFCC has a supportive approach, it has to achieve a balance between the needs of the individual and the needs of the organisation. The OPFCC is committed to raising awareness and increasing the understanding of mental health conditions.

All managers are responsible for implementing this policy to ensure the following policy objectives are met.

POLICY OBJECTIVES

- Employees will be treated fairly, consistently and sensitively during times of sickness and are encouraged to use support mechanisms available to them.
- Managers have a structured framework to assist in managing sickness absence with the aim of supporting employees back to work. This includes conducting return to work interviews after every period of absence, monitoring employee sickness in accordance with set sickness triggers (it is the OPFCCs right to adjust these trigger points annually to reflect sickness absence targets), and referring to Occupational Health (OH) where appropriate.
- Employees understand their responsibilities and follow sickness reporting arrangements.
- The highest levels of quality and service are maintained to allow the OPFCC to fulfil its obligations to service users.
- Managers will implement reasonable adjustments for employees, where applicable and appropriate, to enable/sustain attendance at work.
- The procedure aims to support an employee's return to work. Where employees are absent from work for a considerable amount of time or are no longer able to carry out the duties of their role, they will be supported and also made aware that the outcome of this procedure could be dismissal.
- Whilst parts of the absence management process are under a formal stage, in order to minimise unnecessary formality and apprehension, the electronic, audio or video recording by any device of such meetings/hearings will not be permitted. Should an employee think that there are exceptional circumstances where this should be allowed (for instance, due to a disability) this should be raised in advance with the person due to conduct the meeting, the chair of the hearing or the relevant HR Adviser. Due consideration will then be given to the request and the employee will be advised of the outcome of that consideration.

RESPONSIBILITIES

MANAGERS

Three levels of management are involved in specific responsibilities within the Absence Management Policy:

- Line Manager – chairs Stage 1 of the Absence Management Procedure.

- Director – chairs Stage 2 of the Absence Management Procedure.
- Director or Head of Paid Service with authority to dismiss – chairs the Stage 3 Hearing of the Absence Management Procedure.

Recording and Monitoring

Management is responsible for managing absence issues sensitively and compassionately, ensuring they follow the procedure contained in this policy and associated documents, including:

- Ensuring employee sickness absence recorded, including reasons for absence.
- Absences for dental / medical appointments / maternity leave or parental leave should not be recorded as sickness absence.
- Recording and monitoring all activities associated with managing the employee's absences.
- Explaining to employees the Occupational Health (OH) service and referring employees, if appropriate. Seek advice from a HR Adviser if needed.
- Ensuring employees are aware of other supporting policies such as special leave, disability leave and flexible working.
- Where absence results from a work-related accident or disease the absence recorded as such.
- Managers should promote the confidential service of Employee, Support and Counselling to all employees when appropriate.
- Managers must ensure any information associated with the absence management procedure is transferred with the employee should they move positions within the OPFCC.

Trigger Points:

The OPFCC operates the following trigger points:

- 4 or more episodes of absence in a rolling 12-month period and/or
- 9 working days of absence in a rolling 12-month period and/or
- Absences in a short period warranting immediate action, e.g., 3 episodes or 6 working days in 6 months
- A pattern of absence causing concern, e.g., regular Friday or Monday absences or absences regularly occurring on a particular day/week, pre or post annual leave, school holidays, public holidays, pay day.

Trigger points for employees working fewer than 5 days in a week need to pro rata the number of days.

Return to Work Interviews

Return to work discussions must be conducted with employees after every episode of sickness absence. The return-to-work discussion may:

- Identify support mechanisms beneficial following a return to work and any issues which may be affecting the employee's ability to attend work.
- Monitor absence levels and where an employee absence(s) reaches the identified trigger points to manage them accordingly.
- Consider reasonable adjustments for employees (where applicable), including discussing with employees advice given on a Fit Note. When the Equality Act 2010 applies managers must ensure they investigate any possible reasonable adjustments.
- Consider phased return to work (where appropriate) following long term

EMPLOYEES

Employees have a duty under their terms and conditions of employment to be at work and must ensure they adhere to their responsibilities, including:

- Employees must report sickness absence to their Line Manager on the first day of absence and as early as possible, preferably before but no later than, one hour of their normal work starting time, unless other local arrangements have been agreed.
- Employees must make personal contact (not by means of a spouse/family member/friend) and by telephone (not by text or e-mail). A contact number must also be provided in all instances. It is recognised there may be instances where employees are unable to contact Line Managers personally (e.g., admittance to hospital). In these exceptional circumstances the individual who contacts the Line Manager must leave a contact name and number.
- Employees must provide the following information:
 - Employee (or person making contact) must confirm when became ill
 - Broad nature of illness (e.g., migraine, chest infection)
 - whether illness is due to an accident or injury at work
 - whether employee has/will be seeking medical attention
 - the likely date of return (if known)
- Employees unable to speak with their Line Manager must leave a message and a contact phone number, asking that it is passed on to the Line Manager as soon as possible. The employee should expect and be available to receive a return phone call to discuss the above points.
- Employees absent for four calendar days or more or where the absence is going to be longer than originally envisaged, must make contact with Line Managers to update them and thereafter contact to be maintained as agreed between employee and Line Manager.
- Employees must obtain a Fit Note from a GP and submit this to their Line Manager on the eighth calendar day of absence.
- Employees must continue to send in Fit Notes for the duration of the absence and keep Line Managers advised of their health and progress towards returning to work. When a Fit Note expires, employees not returning to work must ensure a new Fit Note is sent to their Line Manager immediately.
- Employees must ensure medical advice and treatment is received as quickly as possible and must follow all recommended medical advice or treatment in order to facilitate a prompt return to work.
- Employees are encouraged to attend any OH appointments, as in accordance with their conditions of service. If employees do not attend these appointments or fail to give consent to release the report, any decisions made regarding their absence from work will be made without the benefit of this information.
- Employees must ensure they are contactable and available to attend absence management meetings and respond in a timely manner to any communications from the OPFCC.
- Employees must advise their Line Manager of any changes to contact details occurring during an absence.
- Employees must advise their Line Manager of any concerns with their job/workplace, which they feel are making them ill or contributing to illness/absence.
- Employees wishing to take time off work who are not sick, must use annual or special leave or other approved leave. All leave of absence must be approved by management. Other types of leave must not be used to avoid sickness absence.
- Employees may request to take accrued annual leave whilst on long term sickness. Employees are not expected to go away on holiday when absent due to sickness unless this is supported by a GP.

- Employees wishing to take annual leave must obtain management authorisation and have the appropriate period of annual leave deducted their entitlement
- Employees either at work or absent due to sickness should not undertake activities that could hinder or affect recovery.
- Employees are encouraged to take advantage of OPFCC initiatives to promote good health where appropriate.
- Employees are responsible for managing sickness and to taking any appropriate action, as determined by any health professional, to minimise any reoccurrence of the sickness

NB Failure to follow these reporting procedures may be managed under the Disciplinary Policy.

HR ADVISERS

Advising managers in the application of this policy and attending meetings/hearings as required by the policy.

TRADE UNION REPRESENTATIVES

The same standards apply to Trade Union Representatives as to all other employees. However, where application of formal action (this includes Stages 1, 2 and 3) is being considered against a Trade Union Official or Representative, managers must first discuss the case with a Senior Trade Union Representative or full time Official. To avoid the action being misconstrued as an attack on the union itself or on its representation and negotiating role and is in accordance with the ACAS Code of Practice.

EMPLOYEE REPRESENTATIVES

Employees have the right to be accompanied at Stage 1, 2 and 3 Absence Management Meetings/Hearings by a OPFCC work colleague, recognised Trade Union Officer or recognised Trade Union Representative.

GUIDANCE FOR MANAGERS AND EMPLOYEES

Return to Work Interviews

Return to work interviews must be conducted after every period of absence and where possible managers should carry this out on the day an individual returns (or as soon as practicable). This does not necessarily have to take place on a face-to-face basis and can be conducted by telephone, particular where managers/employees cover a wide geographical area or where a face-to-face meeting is not possible within a reasonable timeframe.

Return to work interviews are an important part of absence management and can help identify absence problems at an early stage; they also providing managers with opportunity to start a dialogue about underlying issues, which may be causing absence(s) and allow them to make any changes to support the employee.

The return-to-work interview needs to be separate to any Stage 1, Stage 2 Meetings and Stage 3 Hearing. Return to work interview can take place during supervision, however, the manager must ensure they are treated separately. The manager must ensure the return-to-work interview form is completed and not combined with the supervision notes.

Stage 1, Stage 2 Meetings and Stage 3 Hearings

The purpose of the stage meetings is to provide assistance and support to the employee to improve his/her attendance to a satisfactory level. The aims of the absence management meetings are to:

- Establish reason(s) for the absence; is the employee suffering from a medical condition?
- Discuss possible ways of reducing absence in the future.
- Explore and consider any reasonable adjustments.
- Discuss the possibility of requiring information from OH.
- Explain to the employee about the absence management procedure and inform them of the possible actions if their level of absence is not improved.

Where an employee is absence for one calendar month a Stage 1 meeting should take place after this 1-month absence. If the employee returns to work prior to one calendar month the Stage 1 meeting should be held following their return to work.

Managers should treat individuals in a sensitive manner. Discussions between employees and managers will be kept confidential as reasonably possible. The meetings will be arranged at a suitable venue which will normally be the employee's place of work. However, in some circumstances (depending on the employee's health and well-being) this may be held at the employee's home with their consent.

A referral to OH should not be used as an alternative to carrying out an absence management meeting. A referral to OH is a separate process.

If, because of the nature of their illness the employee is unable to attend the absence management meeting/hearing, advice will be sought from OH on their fitness to attend and any reasonable adjustments which may enable the employee to attend will be considered. Upon receipt of advice from OH and also considering all of the circumstances of the case, management will make a decision as to whether the meeting/hearing should proceed in the employee's absence. If the manager has tried to obtain OH advice but the employee fails to attend or refuses to give consent for the report to be released, then management will go ahead with the

meeting without the OH advice.

If the employee is unable to attend the meeting/hearing for some other reason or their representative is unable to attend the meeting may be postponed and will be rearranged within 5 working days or as soon as is practicable. The employee should be notified of the date in writing and informed that if they are not able to attend on the revised date the meeting/hearing will proceed on this occasion in their absence.

If employees cannot attend a meeting/hearing personally they can put their case either through their representative (OPFCC work colleague, Recognised Trade Union Representative or Trade Union Officer), or submit their case in writing in advance by no later than 5 working days in advance of the meeting/hearing.

Managers' Discretion on Trigger Points

When reviewing absences against the trigger points it may be necessary in exceptional circumstances for managers to use their discretion on what the trigger points are. This particularly applies when an employee has an underlying medical condition that is covered under the Equality Act 2010 and advice is usually obtained from OH.

Any extensions to the trigger points as a reasonable adjustment resulting from OH advice should be regularly reviewed. If management wish to apply discretion to change an employee's trigger point, then this should only be applied in exceptional circumstances. The manager must be able to justify, discuss, record and seek approval with their Senior Manager and HR Adviser.

Unfit for a Prolonged Period / Ill Health Retirement

Advice may be received from OH that the employee is eligible for permanent ill health retirement or alternatively that they are deemed unfit to return to their substantive role for a prolonged period due to an underlying medical condition and redeployment is not recommended. In these scenarios it may be appropriate to escalate to a Stage 3 Absence Management Hearing, without the need for a Stage 1 or/and Stage 2 meeting taking place.

If OH recommend redeployment, the employee will be offered a formal period of time in Line with this policy, to find an alternative role within the OPFCC. This process is described within the Redeployment Policy. It may be appropriate to escalate to a Stage 2 or 3 meeting, without the Stage 1 or 2 meeting taking place. Managers should be aware that an employee who has been found unfit to continue in their substantive post and who fails to secure alternative employment will face dismissal from the OPFCC. A positive approach will be taken to redeploy the employee. Managers should be aware of the requirements of the Equality Act 2010 and the need to make reasonable adjustments to assist an employee to continue in work. Additionally, under the Positive about Disability Scheme, the OPFCC is committed to retaining employees who become disabled.

The above would need to be discussed with a HR Adviser and a manager with the authority to dismiss. At the Stage 3 Hearing the Chair will give consideration to dismissing the employee with notice on the grounds of 'Some Other Substantial Reason' or 'Capability' (where underlying medical condition is identified).

Employee's Failure to Maintain Contact

Employees have a responsibility to respond in a timely manner to any communications from the OPFCC and attend absence management meetings as required. This includes submission of

medical fit notes on time. If the Line Manager is receiving no correspondence from the employee, i.e., via telephone or in writing, then the Line Manager should seek advice from their HR Adviser. Employees who continually fail to respond to communication may result in their circumstances being escalated to a Stage 3 Hearing, without the Stage 1 or Stage 2 Meetings taking place.

This would need to be discussed with a HR Adviser and a manager with authority to dismiss. At the Stage 3 Hearing the Chair will give consideration to dismissing the employee with notice on the grounds of capability (where an underlying medical condition is identified) or 'Some Other Substantial Reason' (SOSR).

Review Periods

A default review period is normally 2 months. It is recognised there may be exceptional circumstances where a longer review period is needed, up to a maximum of 4 months. Contact a HR Adviser if unsure of how long the review period should be. Management should seek Senior Manager approval for longer review periods.

Where a decision is taken to extend a Stage 1/2/3 review period the above timeframes will also apply. However, for the purpose of extended review periods managers also have the discretion, where appropriate, to set an extended review for a period of less than 2 months.

At the end of the review period the manager will complete the review the circumstances and will make a decision based on the evidence gathered.

Managing Combined Absences of Short Term and Long Term

If an employee has reached the absence trigger and a meeting is to be arranged, management do not need to wait until the absence has been continuous for one calendar month for the meeting to go ahead, management can arrange the meeting as the employee has already reached the trigger prior to the recent period of continuous absence. This meeting can then discuss the short-term absences as well as refer to the current long-term absence.

Where an absence period changes from short term to long term or vice versa, the relevant chair will need to consider giving a further time period to consider the reason for the absence and to allow for new medical advice if appropriate.

Abuse of Sickness Scheme

Where abuse of the sickness policy is suspected, which may include failure to report sickness absence at the appropriate time; non-attendance at OH appointments without reasonable cause; failure to submit GP Fit Notes at the appropriate time; submission of forged or false Fit Notes; deliberate conduct prejudicial to recovery from sickness/injury; or due to the employee's misconduct or neglect, sick pay may be suspended and consideration given to disciplinary action. HR Adviser advice must be sought in these cases.

Annual Leave Entitlement in Relation to Sickness Absence

Employees absent due to sickness accrue annual leave and may request to take annual leave during a period of sickness absence. However, employees are not expected to go away on holiday when absent due to sickness unless this is supported by their GP. Employees who go on holiday during sick leave and have not requested annual leave will automatically have the period of time taken off their annual leave entitlement.

Employees wishing to take leave during sickness absence must request this in writing via their Line Manager. The annual leave will be deducted from an employee's leave entitlement and the employee's sickness will still be recorded on the payroll system as being absent.

Employees who have reduced to half or nil pay and wish to use annual leave to continue to receive payment, need to be agreed with their Line Manager.

Employees who advise they are not contactable or available to attend meetings whilst they are absent, should have the required time deducted from their leave entitlement unless non-attendance at the meeting is as a result of professional medical advice.

Employees returning to work in the current leave year, should be encouraged to take their accrued annual leave entitlement to assist with their rehabilitation back to work. Should they be unable to take all of the leave, they are allowed to carry it forward into the next leave year.

Employees returning to work in a new leave year, have the right to the annual leave they have accrued during their sickness absence in the previous leave year and should, therefore carry this forward into the new leave year. Such employees should be encouraged to take most or all of this leave in a block in the first month after their return-to-work date or to assist with extending a phased return to work.

Employees who fall sick prior to commencing pre-booked annual/flexi leave will be able to reclaim their annual/flexi leave, as long as they comply with sickness reporting procedures, are still available for contact and meetings when absent and supply a Fit Note to cover the period they wish to reclaim.

Employees who falls sick whilst on annual/flexi leave and return wishing to reclaim a proportion of that leave, they will be required to comply with sickness reporting procedures (where practical) and provide a Fit Note to cover the period they wish to reclaim.

Employees who become fit for work whilst still on leave, must confirm the date on which they became fit to work, on their return from leave.

Sickness during the Working Day

Employees who leave work during the working day due to illness:

- Must first report this to their manager
- Will be classed as absent on that day (for sick pay and recording purposes)
- Will be required to self-certify and attend a return-to-work interview.
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Managers should determine what proportion of an employee's normal working hours have been worked and decide whether a full or half days sickness absence should be recorded. Where such schemes are used, employees will be credited with the time actually worked for flexi purposes. Such absences of ½ a day or more should be recorded on the sickness system and will count towards trigger points. If the absence is less than half a day, the manager may ask the employee to make the time up with flexi rather than record it as sick leave.

Accident or Injury at Work - for non RIDDOR Specified injuries to employees

Employees who consider their illness/absence arises from an incident/accident or injury at work must notify their Line Manager as soon as reasonably practical.

Employees absent from work due to accident or injury at work should be treated in the same way as if their absence was due to sickness and therefore the Absence Management Procedure must be followed.

Employees absent from work as a result of an accident or injury are not entitled to sick pay if damages may be receivable from a third party. The OPFCC may at its discretion pay sick pay provided the employee agrees to refund the amount paid from any damages awarded.

Fit Notes

The Fit Note is a form employees will receive from a GP, which confirm whether the employee is either: (a) not fit for work or (b) maybe fit for work. In option (b) cases the GP will make recommendations for reasonable adjustments to help the return to work. It is for management to determine whether they can be implemented. It has been acknowledged that GPs are not Occupational Health experts and they do not have a detailed knowledge of either the work undertaken or the workplace of their patients. Where the changes cannot reasonably be made, and the employee cannot return to work, the Fit Note can be used to cover their sickness absence. Where the GP has stated they do not need to assess the employee again, this means that the employee should be able to return to work at the end of the period stated.

If an employee wants to return to work prior to the Fit Note expiring, the manager will need to ask the employee to return to their GP to seek a new Fit Note reflecting the timescales in which the employee feels they are able to return to work on. If the manager has concerns regarding an employee's return to work due to their health or with the recommendations that are on the Fit Note, the manager should carry out a risk assessment to assess their concerns.

Employers Liability Insurance does not require employees to be 100% fit for work but there is an expectation by the OPFCC's insurers that the risks of those returning to work will be managed effectively, both for their wellbeing and safety and that of other employees and members of the public who may come into contact with them during their duties.

Further advice may be sought from OPFCC HR Lead, Health and Safety Adviser or OH as appropriate.

Fit for Work

A new government initiative was brought into place in September 2015 called Fit for Work. Fit for Work's aim is to help employers with getting their employees back to work as soon as appropriate.

They do this by offering – free health and work advice and free referrals for an occupational health assessment.

Fit for Work intends to plug the gap in occupational health advice and support for small to medium enterprises (SME), Fit for Work can also work alongside existing employer occupational health provision as it focuses on many different aspects preventing an employee's return to work,

including social and financial factors.

In certain situations where employees meet the criteria for referral to Fit for Work, an employer or GP can refer the employee to Fit for Work's occupational health provider for advice. Following this, Fit for Work may issue a Return-to-Work Plan giving suggestions on adaptations which may allow the employee to return to work. The Line Manager will need to consider these adjustments in the Return-to-Work Plan, as they are advisory and subject to operational requirements.

It is important to note that the Return-to-Work Plan can be accepted by a Line Manager as evidence of sickness absence as a fit note will not be issued. The OPFCC will continue to refer employees to its own occupational health provider, as usual. Further advice may be sought from a HR Adviser.

Further information on Fit for Work can be found on the government's website – Fit or Work.

Display Screen Equipment (DSE) Assessment

An employee would be defined as a 'DSE' user if they:

- Normally use DSE for continuous or near-continuous spells of an hour or more at a time.
- Use DSE in this way more or less daily.
- Have to transfer information quickly to or from the DSE

Please follow the DSE online workstation assessment guidelines before referring to occupational health if they feel any health issues are related to the DSE operations.

Medical Appointments

Employees must make medical/dental appointments outside of their normal working hours. Where this is not practical, they must be made to cause minimal disruption to the working day, i.e., lunchtime, early, late appointments and may be required to make up the time, either by staying late or by using flexi time where this scheme is operated.

Hospital / Consultant / Specialist Clinic appointments are considered authorised absence and time off will be paid. Managers will use their discretion to allow a reasonable amount of time off to attend appointments. Advice should be sought from a HR Adviser.

Employees must provide managers with proof of their appointment (e.g., an appointment card or copy of the appointment letter) when requesting time off to attend hospital appointments.

Necessary paid time off will be given for the purpose of appropriate medical screening.

Time off to accompany dependents to medical appointments is not sickness absence and must be taken as annual leave or flexi time unless management considers there are exceptional circumstances and authorised leave of absence.

Time off for cosmetic surgery must be taken from employees own leave entitlement or flexi time unless the GP confirms the employee is unfit and should refrain from work. If the cosmetic surgery is linked to a disability related condition, please speak to a HR Adviser.

Leave to undertake IVF treatment must be expected to be taken as Special Leave for Family or Personal Reasons.

Planned Operations

Employees absent due to planned operations may reach the OPFCC's trigger points. Managers should discuss contact arrangements with employees before the start of their planned absence and make them aware that they should still expect the Line Manager to contact them at the appropriate time to arrange the relevant Stage Meeting. This is likely to take place after one month's continuous absence unless the employee returns to work at an earlier date in which case, if the trigger has been met, the relevant Stage Meeting would take place following their return. Managers will need to use discretion as to the timing of this meeting to ensure employee is well enough to attend.

Managers should use this meeting to discuss with employees how they might best be supported (e.g., referral to OH, any reasonable adjustments) to enable them to return to work when they are well enough. An appropriate review period should also be set following this meeting as set out in this procedure.

Time off for being a Donor (Egg/Bone Marrow/Organ Donor)

Consistency needs to be applied to advice in relation to employees who have to take time off to undertake treatment which may be supporting others. Any pre-testing relating to being a donor should be treated as a hospital appointment. Special leave for the procedure could be applied if it is an emergency and requires only one day but if the treatment means that the employee is unwell and not able to work due to a result of the treatment it should be recorded as sickness absence.

Pregnancy Related Sickness

Pregnancy related sickness should be recorded on MFSS but will not be counted towards the trigger points.

OH Appointments

Employees absent from work due to sickness are expected to be available to attend any OH appointments, as required. Employees refusing to attend OH appointments need to understand that without such a report, management decisions will be made using the information available to them.

Medical Redeployment

There will be occasions when the OPFCC will need to consider redeploying employees within the OPFCC. The Redeployment Policy outlines the process for redeployment when an employee has an underlying medical condition and the employee has been deemed unfit to return to their substantive post for a prolonged period and/or no reasonable adjustments can be put in place, following medical advice. Advice must be sought from OH regarding whether redeployment should be considered.

Redeployment is a positive act, which can enable the OPFCC to maintain the skills and experience of valued employees, as well as meeting its legal obligations.

Medical Suspension

In certain circumstances it may be appropriate to medically suspend an employee, e.g.:

- Where employees and their GPs consider they are fit to return to work (with or without

adjustments) and the manager, in conjunction with a Senior Manager and OPFCC HR Lead, believe they are not and therefore require OH advice before allowing the employee to return back to work. If the GP recommends any adjustments which, having undertaken the necessary risk assessment, the manager cannot accommodate, employees will remain off sick for the period specified on the Fit Note.

- Medical suspension may also apply where the manager believe employees are not fit to attend work, but they refuse to go on sick leave. The manager may medically suspend the employee until OH advice is received.

Wherever possible, prior to medical suspension, alternatives such as temporarily adjusting the employee's duties, reducing/changing hours of work, temporary redeployment to another role/location or working from home should be carefully considered using any advice from the GP contained on the Fit Note where appropriate. In such circumstances it would be appropriate to undertake a risk assessment, workplace assessment and/or DSE assessment.

Decisions to medically suspend must be based on sound health and safety justification and managers must be able to demonstrate this through risk assessment. Having considered the employee's views the manager should be able to clearly explain the reasons for the decision.

If it is considered there are sufficient grounds to suspend, written approval must be given by a manager with authority to dismiss. Managers should convene a suspension interview as soon as possible after the decision has been made, which should be followed up in writing. The employee has a right of representation at the suspension interview. However, the unavailability of a representative must not delay convening the suspension interview or the suspension itself. If the need to medically suspend is urgent and it is not possible to convene a face to face meeting the manager may telephone the employee to inform them of the medical suspension and follow up the discussion in writing.

NB: Medical suspension is on contractual pay and does not impact on sick pay. It is also not a period of sickness absence and must not be recorded as such.

Review of medical suspension must take place once the required medical information is provided by OH. If OH advice that the employee is able to return to work, the medical suspension will be lifted.

If the employee is still unable to perform their duties, once the medical suspension is lifted managers will need to clarify if this is due to a medical condition the employee has and follow the guidance in the Underlying Medical Condition – Employee still at Work section of this policy. If not due to a medical condition managers may decide whether to invoke the capability procedure. HR advice should be sought in these cases.

Terminal Illness

Managers should deal with such situations compassionately taking into account the wishes of the employee and their financial situation as well as the needs of the organisation. Each case will be considered on its own circumstances and advice must be sought from the pensions department (LPGS), OH and HR.

There are occasions when employees with terminal illnesses wish to be dismissed and may be eligible for early release of pension benefits if they are a member of the Local Government Pension Scheme. Factors to consider include the medical condition and how long the employee is

expected to live, as these may be critical in establishing the most beneficial course of action.

In extreme cases employees will be kept on the payroll, even though they have exhausted their sick pay entitlement. This elevates distress by formally dismissing someone who is dying where it is to the employee's advantage to remain in service due to their entitlement to benefits such as death in service.

Underlying Medical Condition – Employee still at Work

Some employees have underlying medical conditions which affect how they carry out their roles. They may not be absent from work, but they may be unable to carry out their duties and responsibilities to a satisfactory level and/or fail to fulfil their contractual working hours due to the underlying medical condition.

In such cases managers need to refer them to OH to seek advice about the underlying medical condition. If OH confirms their performance and/or ability to undertake the full duties/hours of their substantive post is affected by their underlying medical condition, the manager is advised to organise a Stage 1 Meeting.

If an employee has already been managed under this policy and that action is still active, i.e., within the 12 months live period, the manager can return to the same point in the procedure. Managers must ensure that reasonable time has been given to consider the employees underlying medical conditions and how it these affect the employee's performance. Management may consider a further time period might be appropriate to provide any reasonable adjustments prior to escalating to the next stage of the procedure. It is recommended in these cases that advice from a HR Adviser is obtained.

At the Stage 1 Meeting the OH report should be considered, including any, reasonable adjustments. Managers should follow the Absence Management Procedure although it is recognised that not all of the points require discussion, as the aim of the Absence Management Procedure is to focus on employee absences from work. HR Adviser advice should be obtained for these cases, including obtaining appropriate template letters.

Reasonable adjustments can assist employees to carry out their roles. Any such adjustments need to be reviewed on a regular basis to assess the effectiveness

If reasonable adjustments are not sustainable or assist the employee to fulfil their responsibilities, alternative reasonable adjustments may need to be considered or redeployment may be explored.

If an employee is suffering with stress-related illness, anxiety or depression, as determined on the Fit Note, it is essential that support is provided. If work-related issues are felt to be contributing to ill health, managers must discuss these with a HR Adviser so appropriate and reasonable action(s) can be taken swiftly. Managers have a duty of care to employees to take reasonable steps to avoid putting them in situations that might impair their health. Managers also have a responsibility to the OPFCC to protect it from litigation.

SUPPORTING DISABLED EMPLOYEES

The Equality Act 2010 prohibits discrimination because of disability and places a duty on employers to make reasonable adjustments to working practices and premises in order to accommodate the needs of individual employees and job applicants who have a disability. This

means that an employee with a disability must not be treated less favourably than any other employee without justification.

The Equality Act 2010 defines the protected characteristic of disability as applying to a person who has a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.

If there are problems with an employee's attendance and an underlying medical condition or disability is identified, the manager must have an open discussion with the employee and if appropriate seek advice from OH. OH, may be able to suggest reasonable adjustments that could be made to either the physical place of work, or the work itself.

Please be aware that in some cases a short-term absence pattern could be related to a disability or a long-term condition can become a disability in the long term.

Reasonable Adjustments

When supporting a disabled person in the workplace, the Equality Act 2010 requires the organisation to consider and make 'reasonable adjustments' to ensure the disabled employee is not put at a substantial disadvantage and is able to perform in their role and ensure their safety in the workplace. A number of factors influence whether it is reasonable for an employer to make changes, including:

- The effectiveness of the adjustment – will it remove or reduce the difficulties the employee is experiencing?
- Any health and safety implications – is there an impact in regard to health and safety of the individual or colleagues?
- What (if any) impact will this have on other employees/team members/colleagues?
- The practicalities of the adjustment – what effects will it have on the organisation?
- The cost – funding options may be available such as through Access to Work/Shawtrust.
- Other help available – look to source other methods of support for the individual?

All reasonable adjustments should be recorded to provide an accurate source of information on what has been agreed.

It is difficult to specify the amount of variation required for reasonable adjustments as each individual's disability is different. Making the same adjustment for all may not remove the disadvantage. Where adjustments are made, the employee should be given time to readjust (usually 3 months). However, if after this period they are unable to meet the levels of attendance expected and further adjustments are deemed unreasonable, refer to the Redeployment Policy.

Review of Reasonable Adjustments

- Regular review should take place between the employee and manager to ensure that the adjustments put in place, which includes extension of trigger points resulting from occupational health advice, continue to be effective.
- Specialist advice from third parties, such as OH, Access to Work or IT specialists may be needed before changes can be agreed and implemented. Reasonable adjustments may be reviewed:
 - At any regular one-to-one meeting, supervision, or appraisal.
 - At a return-to-work interview following a period of sickness absence or treatment.

- Before a change of job or duties or introduction of new technology or ways of working.
- Before or after any change in circumstances for either party including a change in the nature of the disability.

Reasonable adjustments must be reviewed formally on an annual basis as a minimum.

Absences Relating to an Employee's Disability

The Equality Act 2010 does not require absence relating to the employee's disability to be automatically discounted for trigger points; nor does it require an employer to retain someone indefinitely if they are frequently absent due to a disability. However, when counting disability-related absences towards trigger points for unacceptable attendance procedures, Line Managers must be able to demonstrate that:

- All reasonable adjustments have been considered to the number of day's absence which trigger a review under the procedure.
- All reasonable adjustments have been made to reorganise a job around functions that the employee can perform, and that
- All reasonable adjustments have been made to working practices, the workplace and its location that place the disabled person at a significant disadvantage.

Where the combination of both disability-related and general sickness absence exceed the trigger points, the Line Manager should seek advice from OH on any reasonable adjustments that should be considered.

Disability Leave

Disability Leave is to enable paid time away from work for pre-planned appointments or treatments, related to an employee's disability, that help maintain health and wellness.

Disability Related Sickness Absence

Disability related sickness absence arises where the employee's sickness absence is related to their disability. Such absences should be recorded by Line Manager using the same method they use to record other types of sickness.