



Management of Attendance Protocol

July - 2010

v	Trust Policy for approval by Trust Policy Committee
MANAGEMENT OF ATTENDANCE PROTOCOL	
Summary	This Policy is designed to outline the principles underpinning the Management of Attendance.
Purpose	To deal with absenteeism in a fair, consistent and proactive manner by providing clear and effective guidelines on the management of attendance.
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Supersedes previous	All legacy Trust Absence Policies

Date	Version	Author	Comments
July 2010	1	O Burns	

Policy Record

Author (s)	Approval	Date	Version
Director Responsible	Approval		

Approval Process – Trust Policies

Policy Committee	Approval	16.08.10	V1
Executive Team	Authorise	18.08.10	V1
Chief Executive	Sign Off	18.08.10	V1

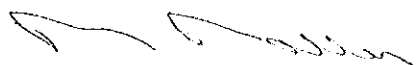
Approval Process – Clinical Standards and Guidelines

Standards and Guidelines Committee	Approval		
Policy Committee	Approval	16.08.10	V1
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Full Description

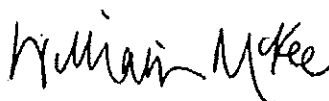
Reference No:	TP057/10
1.	Title: Management of Attendance Protocol
2.	Introduction: The Belfast Health and Social Care Trust recognise that the health and wellbeing of the workforce is critical to the effective functioning of the organisation. The Management of Attendance Protocol is based upon the values of the Trust which are respect and dignity, accountability, openness and trust and learning and development.
3.	Purpose: The Trust is committed to deal with absenteeism in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism
4.	The scope: This Policy will apply to all permanent and temporary staff (without exception)
5.	Objectives: To ensure consistency of approach in this area. To enable staff to take personal responsibility for achieving and maintaining good attendance.
6.	Roles and Responsibilities: The roles and responsibilities of Managers and employees are clearly outlined.
7.	The definition and background of the policy: This Policy was developed in line with the Regional Framework on the Management of Attendance.
8.	Policy / Guideline description:

9.	Policy statements: N/A
10.	Implementation / Resource requirements: This Policy is for implementation across the Trust by all Managers.
11.	Source(s) / Evidence Base: This Policy was developed in accordance with the agreed Regional Framework on the Management of Attendance, relevant employment law, terms and conditions of employment and best practice.
12.	References, including relevant external guidelines:
13.	Consultation Process: This Policy has been jointly agreed by Staff Side and approved by the TJNCF July 2010.
14.	Equality and Human Rights screening carried out: In line with duties under the equality legislation (Section 75 of the Northern Ireland Act 1998), Targeting Social Need Initiative, Disability discrimination and the Human Rights Act 1998, the Belfast Trust has carried out an initial screening exercise to ascertain if this policy should be subject to a full impact assessment. <input checked="" type="checkbox"/> Screening completed <input type="checkbox"/> No action required. <input type="checkbox"/> Full impact assessment to be <input type="checkbox"/> Carried out
15.	Procedures:



Director of Human Resources

Date: 18 August 2010



Chief Executive

Date: 18 August 2010

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SECTION 1 – INTRODUCTION AND KEY AIMS

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1.1 INTRODUCTION

The Belfast Health and Social Care Trust recognises that the health and wellbeing of the workforce is critical to the effective functioning of the organisation. The Management of Attendance Protocol is based upon the values of the Trust which are respect and dignity, accountability, openness and trust and learning and development. It is set in the context of the Regional Policy Framework of Best Practice for Managing Attendance, the Trusts Policy on the Employment of People with Disabilities (under review), relevant terms and conditions and the Agenda for Change Handbook.

In developing this protocol the Trust recognises that it has a duty to support staff when they become ill, facilitating staff in so far as possible to safely return to work as early as they can. The Trust has a responsibility to actively encourage a culture of health and well being within the workforce while equally expecting employees to take personal responsibility for their own health and well being. The Trust also recognises that staff sickness affects the quality of patient care and exacerbates service delivery problems caused by staff shortages and the additional pressure placed upon other staff. Sickness absence also carries a significant financial cost which draws resources away from service delivery and developments in patient care. The management of attendance protocol outlines the responsibility of all staff and provides a framework for staff to be treated in a fair and consistent manner in accordance with the agreed regional attendance framework, terms and conditions, legislation and best practice principles.

1.2 KEY AIMS

The key aims of the Attendance Protocol are:

- To deal with absenteeism in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism.
- To enable staff to take personal responsibility for achieving and maintaining good attendance by making clear their obligations and the importance of good attendance.
- To improve the health and wellbeing of all employees by facilitating and supporting initiatives, where appropriate, which enable staff to return to or remain in work.
- To effectively manage the impact and cost of absenteeism to the Trust.

SECTION 2 - ROLES AND RESPONSIBILITIES

All staff have a fundamental role to play in the management of attendance and it is the expectation of the Trust that all employees undertake their roles and responsibilities in accordance with the management of attendance protocol.

2.1 THE MANAGERS RESPONSIBILITIES

- To manage absence in accordance with the Management of Attendance Protocol – by recording, monitoring and investigating the absence levels of all employees for whom he / she is responsible and by taking appropriate and timely action when required.
- To ensure that all employees are aware of their obligations under the Management of Attendance Protocol and the importance of good attendance.
- To ensure that all employees are aware of the correct notification procedures when reporting sick for work including contact arrangements in the event that the line manager is not available.
- To maintain regular and effective contact with employees who are on sick leave; the frequency of which will be dependent upon the circumstances of the absence.
- To maintain accurate absence records including return to work interviews and the timely processing of certification to Salaries and Wages.

- Engage with Human Resources and Occupational Health to obtain specialist advice and guidance on case management issues and where necessary participate in case management meetings with Occupational Health and Human Resources.
- Arrange and participate in Case Conference Meetings alongside Occupational Health, Human Resources, the employee and the Employees Representative.
- Facilitate and support employees where possible in relation to adjustments and / or rehabilitation programmes as recommended by Occupational Health professionals, ensuring that changes are clear, recorded and communicated.
- Encourage employees and where appropriate provide flexibility to shift patterns to enable employees to have time off to attend internal health preventative initiatives offered by Occupational Health such as influenza immunizations and smoking cessation support programmes or internal events organized by Health Improvement.
- Complete an incident form, forwarding to the Governance Department, 6th Floor McKinney House, Musgrave Park Hospital, when it becomes known that an employee has suffered an injury or other condition associated with their employment with the Trust. Consider at this time if the staff member requires additional support, i.e. Referral to Occupational Health or confidential counseling services.
- Where necessary, initiate action in accordance with the Trust Disciplinary Procedures to deal with poor attendance and failure to comply with the Trust's Management of Attendance Protocol.

2.2 EMPLOYEE RESPONSIBILITIES

- Ensure regular attendance at work.
- Notify their line manager (or appropriate designated officer) of absence in accordance with notification procedures outlined in section 3. Contact must be by telephone or in person. Texts or e-mails are not acceptable.
- Make themselves aware of their obligations under the Management of Attendance Protocol and the consequences of poor attendance.
- Ensure that appropriate certificates are forwarded within the timescales indicated in section 3 and that they cover the whole period of absence. Salaries cannot pay Statutory Sick Pay (SSP) or Occupational Sick Pay (OSP) if sick lines are not received on time.
- Comply with requests to attend the Occupational Health Service. Staff should attend appointments on time and if for some exceptional reason they cannot attend they must contact their Manager who, if deemed appropriate, will reschedule the appointment. Occupational Health cannot reschedule appointments for staff.
- Participate when requested in Case Conference Meetings and assist in the development of return to work and rehabilitation plans with Managers and TU representatives if requested.
- Refrain from any activity (social or sporting) which may be prejudicial to recovery or be likely to bring into question the reason for continued absence.
- Not work elsewhere in paid or unpaid employment whilst on sick leave from the Trust. However, if a member of staff has more than one job within the Belfast Trust and their Doctor considers, due to their condition, this work to be beneficial they must advise their Manager at the outset of their sickness absence, providing documentary evidence from their GP. The Manager may seek a view from Occupational Health to assess the employee's fitness for the other work within the Trust. Staff who are found to be working elsewhere and have not complied with the above requirements may be subject to disciplinary proceedings.
- Understand that the Sick Pay Scheme is for ill-health and not for other purposes such as caring responsibilities. Other Policies are in place within the Trust to provide assistance with these issues, i.e. Special Leave and other Worklife Balance Policies.

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2.3 ROLE OF HUMAN RESOURCES

- Provide Directors, Senior Managers and Trust Board with a suite of statistical information on a regular basis to monitor the reduction of absence within the Trust and compliance to Policy.
- Provide meaningful statistics and absence targets to nominated Managers within Service Groups.
- Provide specialist advice and guidance to Managers on overall absence levels and specific complex cases.
- Participate in Case Management meetings with Service Groups to review and progress complex absence cases.
- Participate in Case Conferences with Employee, Trade Unions and appropriate Occupational Health Professional.
- Assist in the development of Absence Reduction Programmes in conjunction with Managers and TU representatives.
- Assist, if necessary, in the development of rehabilitation programmes and reasonable adjustments (recommended by Occupational Health professionals) for staff returning from long-term sick leave.
- Meet with Managers, Staff and, if requested, Trade Union Representatives, relating to the Procedures for ill-health termination and ill-health retirement.
- Arrange Termination (due to ill-health) Appeal Hearings upon the written request of the Employee.
- Develop and implement mandatory training sessions for Managers on all aspects of the Management of Attendance Protocol.

2.4 ROLE OF THE OCCUPATIONAL HEALTH MULTIDISCIPLINARY TEAM

Occupational Health Professionals will liaise with Managers, Staff, Human Resources and other Stakeholders such as General Practitioners, Trade Unions, and Specialist Consultants to :-

- Help resolve work related health, safety and well-being issues affecting employees (the effect of work on staff).
- Provide advice on fitness for work in employees who have health or attendance issues which may be affecting attendance, performance or behavior in the workplace.
- Provide reports to Managers (with the employees consent) following the Employees appointment at Occupational Health.
- Advise Human Resources of cases that require their specialist involvement such as complex health and work situations, ill-health management, termination and redeployment.
- Provide confidential support, counseling, health education and advice to Employees.
- Provide advice to management on sickness absence cases, rehabilitation, redeployment or modification of hours, duties or the workplace.
- Advise on the causation of ill-health in problems in claims for Temporary Injury Benefit.
- Advise about and, where appropriate, support applications for retirement on the grounds of ill-health.
- Provide health awareness / health improvement training as appropriate.
- Participate in Case Management Meetings with Managers and Human Resources.

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- Participate in Case Conferences with Management, Human Resources, employees and their Trade Union representatives.
- The Occupational Health Service will respect medical confidentiality and both the needs of the Trust and the individual employee.
- Provision of integrated Physiotherapy / Mental Health / Occupational Health Service.
- Provision of a pilot scheme to access a number of psychological interventions.
- Provision of a pilot scheme to access independent Psychiatric Consultant Services / opinion.

2.5 ROLE OF TRADE UNION REPRESENTATIVES

- Support the implementation of the protocol and to work in continued collaboration with Management, Occupational Health and other Health Professionals that may be necessary for the benefit of the Employee.
- Encourage employees to comply with the Management of Attendance protocol within the Trust.
- Provide support to the employee encouraging compliance to any recommendations made to assist individuals to obtain the maximum benefits from the agreed arrangements.
- To participate in Case Conferences and rehabilitation reviews at the request of the employee.
- Participate in initiatives and work in partnership with Management to reduce absence levels within the Trust.

SECTION 3 – NOTIFICATION, CERTIFICATION AND RECORDING & MONITORING PROCEDURES

NOTIFICATION PROCEDURES

Both managers and employees have a responsibility in the notification of absence.

3.1 Employees

- Employees must notify their line Manager or appropriate designated officer as early as possible before the scheduled commencement of duty. It is important that this notification is carried out by the employee by telephone. Relatives or other people should make the call only if the employee cannot do it personally. E-mails or text messages are not acceptable communication.
- Employees must indicate the reason for absence, the expected duration of the absence and whether or not a General Practitioner will be seen.
- Throughout the absence the employee must maintain regular contact with their Manager; the frequency of which should be defined by the Manager taking consideration of the circumstances of the sickness. It is not acceptable for employees to send certificates without regular communication. If an employee is absent from work and does not contact their Line Manager, the Manager will make efforts to contact the employee either by telephone or in writing.
- Where an employee fails to provide appropriate certification for their absence, the employee will be advised in writing by their Manager that payment of salary will be withheld. Where an employee fails to maintain contact or to respond to contact from their Manager, disciplinary action may also be considered.

3.2 Management

- Managers must ensure that all new and existing staff are familiar with their responsibilities in terms of correct absence reporting.
- Managers must ensure that all notifications of absence are recorded properly and that the appropriate Sick Leave Notification forms (see appendices) are completed accurately (including the reason for absence and working days lost) and forwarded on time to Payroll for processing. Copies should be kept at department level for monitoring purposes. Information deemed illegible by payroll staff, will be returned to the Manager.

3.3 CERTIFICATION PROCEDURES

Under the terms of the Trusts Occupational Sick Pay Scheme employees are required to submit the following certificates as appropriate to their Line Manager :-

1-3 days

- The Manager must carry out a return to work interview as normal and forward a Sickness Notification form (see appendices) to payroll indicating the duration and reason for absence.

Up to 7 days

- The Trust Certificate (see appendices) must be submitted by the employee within 7 calendar days of the first day of absence, dated from the first day of absence. The Trust Certificate must be forwarded by the Manager, along with the Sickness Notification form, directly to payroll in order for sick pay to be paid. Where necessary the Manager should post a Trust Certificate directly to the employee.

8 days or more

- If an employee is off sick for more than seven calendar days, then they are required to submit a Trust Certificate for the initial absence and a doctor's certificate (fit note) to cover from day eight. If a doctor's certificate is obtained from day 1 then a Trust Certificate will not be required. In all cases, the Manager should discuss certification during initial contact with the employee and should remind the employee of their obligation to provide appropriate certification throughout their absence.
- If an employee has been admitted to hospital, then a hospital certificate can be accepted from the first day of illness.
- It should be noted that failure to provide appropriate certification within seven calendar days of expiry of either a Trust Certificate or of a doctors certificate (fit note) may result in pay being stopped and may also lead to disciplinary action.

New Fit Note

From 6 April 2010 the sick line provided by doctors to employees to cover periods of sick leave has changed to become a fit note. The fit note system means that doctors can advise that the employee is either:

- 1) Unfit for work or,
- 2) May be fit for work taking account of the following advice

When the fit note indicates that the employee is not fit for work, the Manager should treat this in the normal way and ensure that the fit note is processed to Salaries and Wages for sick pay purposes.

If the doctor has indicated that the employee 'may be fit for work taking account of the following advice', the manager must consider the suggestions made by the doctor which may include for example: - altered hours, amended duties or adaptations, and should take the following action immediately on receipt of the fit note:

- 1) Contact the employee to discuss, and where consideration can be given to the advice made by the doctor (or to alternative arrangements which may also aid a return to work), the manager should

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confirm the arrangements with the employee including the return to work date. It should be noted that in most cases this will be about temporary measures and this should be made clear to the employee at the outset.

- 2) Where it is not possible to provide the support for the employee to return to work, the Manager should use the statement as if the doctor had advised 'not fit for work' and should process the fit note to salaries and wages in the normal way. The manager should ensure that they have discussed this with the employee and explained the reasons for their decision. The employee does not need to return to their doctor for a new statement to confirm this.

In all cases, on receipt of a fit note, the line manager must take appropriate action immediately. Whilst the advice on the fit note is not binding it is important that managers give serious consideration to the advice and information provided by the doctor particularly where it would aid an earlier and successful return to work for the employee.

There may be occasions when an employee is able to return to work before the end of a period where the doctor had advised that they were not fit for work. The employee should discuss this with their manager and if there is agreement, it is acceptable for the employee to return to work before the end of the period covered on their most recent fit note. The employee does not require a 'signing-off' line.

In some cases it may be necessary to discuss the doctor's advice on the fit note with an Occupational Health professional. The Manager should contact the lead nurse for their service group so that appropriate advice can be provided. At this stage the OH professional will guide the manager as to whether an OH appointment is required before the employee returns to work. Section 7 provides further detail regarding phased return to work.

3.4 RECORDING & MONITORING PROCEDURES

It is important that a simple and systematic method of recording absence operates throughout all departments. It should not only serve as a recording mechanism but should quickly identify any patterns of absence which may emerge.

In addition to local records, details of numbers of absences, working days lost and reasons for absence are also held by HR and Salaries and Wages Departments. HR also regularly provides Services Groups with statistics on overall levels of absence including both long term and short term figures.

Having recorded absence information Managers should regularly review and analyse their statistics to identify any problem areas such as:

Patterns of absence – following weekends, bank holidays or annual leave, excessive periods of short term absence and reasons, frequent periods of certified long term absence and reasons.

SECTION 4 – MANAGEMENT OF SHORT AND LONG TERM

ABSENCE

4.1 Short term Absence

Short Term Absence is a single period of absence lasting less than 20 days. The pattern is usually one, two or three days at regular intervals or excessive use of Trust certification or medical certification which falls below 20 days or, a combination of any of the above.

The Trust has established triggers for short term absence which should give rise to consideration for further action which are:-

- a) Three episodes of absence within a twelve month rolling period
- or
- b) Two episodes of absence totaling 10 working days or 2 calendar weeks within a twelve month rolling period
- or
- c) One episode of 10 days within a twelve month rolling period

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After all periods of absence, a return to work interview should be carried out to discuss the circumstances of the absence and to enable appropriate monitoring and action to be taken. Guidance on how to carry out a return to work interview can be found in the appendices.

Once one of the trigger points is reached, the Manager should consider the circumstances of the case and take action as appropriate. Discretion should be used in every case depending upon the individual circumstances. On reaching a trigger point, discussions at the return to work interview along with previous history / background will determine one of the following 3 courses of action to be taken:-

i) Evidence of Mitigation

- a. To ensure a consistent and equal approach to all employees, Managers should investigate and consider the individual circumstances of each case such as extenuating personal circumstances, previous history and / or job related factors which may be contributing to the absence level. Taking consideration of the circumstances of the absence does not preclude action being taken however a verbal warning under the Disciplinary Procedure may not be considered appropriate at this stage.
- b. Managers should however still emphasise the requirement for improvement in the level of attendance. It may be relevant to discuss with the employee possible options regarding different working arrangements, for example reduced hours or deferred start and finishing times which would help improve attendance. The employee should be reminded that it is expected that they will demonstrate and sustain an improvement in attendance.
- c. If the employee is unable to sustain an improvement and the Manager is satisfied that the circumstances of the case have been addressed sufficiently and that there are no health issues to explore, consideration should be given to taking disciplinary action as detailed within point iii.

ii) Evidence of a Medical Condition / Health Issue

- a. Where there is a common reason for short term absences or where the employee indicates at the return to work interview that they have a medical condition which is contributing to their absence levels, a referral should be made to Occupational Health to determine if there is an underlying health problem.
- b. Where it has been established that periods of short term absence are caused by an underlying health condition, Managers should consider the information provided by Occupational Health and consider adjustments (where appropriate) which would enable the employee to stay in work.
- c. Adjustments may include changes to the employees working pattern, work tasks or work environment and in most cases will be required for a temporary period only. It is important to remind the employee that they are responsible for their own attendance and as such must contribute to finding solutions which will enable them to provide regular service. Again the confirmation of a medical condition / illness does not preclude action being taken and the employee should be advised that it is expected that attendance improves. Any agreed adjustments should be issued to the employee in writing, outlining agreed time periods and the requirement for monitoring.
- d. Should the employee continue to have an unacceptable level of short term absence, discussion at the return to work interview should include reference to previous meetings and action that has been taken to date. Advice should be sought from Occupational Health and if there are no further adjustments that could be made, the employee should be advised that consideration may have to be given to redeployment (see section 8) or termination on the grounds of ill-health (see section 10).
- e. Where there is no improvement in attendance but the reasons for absence are unrelated to the health issue, consideration may be given to taking disciplinary action as detailed within point iii.

iii) None of the above – Proceeding with action under the Trusts Disciplinary Procedure

- a. Where a Manager is satisfied after discussion with the employee that the short term absences are unrelated and there is little or no mitigating circumstances including work related issues, then an

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employee should be advised that a further period of absence may lead to a verbal warning under the Trust's Disciplinary Procedure.

- b. The action taken at this trigger point is to warn the employee that an improvement in attendance is expected and that a verbal warning under the Disciplinary procedure will be considered if there is a further period of absence. A copy of the Trusts Attendance Protocol should be given to the employee and this should be recorded in the Return to Work interview documentation.
- c. Should the employee have a further period of absence, after investigating the circumstances at the return to work interview (including previous history and background), the manager should refer to the previous warning given and advise that a verbal warning is now being considered under the Trusts Disciplinary procedure. The employee should be invited to a separate meeting and given the opportunity to bring a representative.
- d. At the meeting the manager should outline the absences to date and where appropriate refer to previous discussions at return to work interviews. The employee should be advised that a verbal warning is being issued under the Trusts Disciplinary procedure and that they are expected to demonstrate and sustain an improvement in their level of attendance. The verbal warning must be followed up in writing to the employee (see appendices) advising of the right of Appeal (to the next line Manager) and that the warning will be kept on file at department level for 6 months. The employee should be advised that further absences during this 6 month period may lead directly to a formal disciplinary hearing.

4.2 Formal Disciplinary Action

Where there is no improvement in the level of attendance and there is sufficient evidence that informal action has been taken to address the level of absence, it may be necessary to invoke formal disciplinary proceedings. It should be noted that absenteeism is listed as an issue of misconduct under the Trusts Disciplinary Procedure.

Disciplinary action may also be appropriate where there is evidence of non-compliance with the attendance protocol, failure to provide appropriate certification, failure to report absent for work (unauthorised absence) or misuse of sick-pay provisions.

The Manager should ensure that they explain to the employee that formal action is being taken. The employee will be given at least five working days written notice of the hearing and will be advised of his / her right to be accompanied by a representative of his / her Trade Union or work colleague if they prefer. The Manager is responsible for presenting the facts of the case to the disciplinary panel and should provide an account of the levels of absence and the action taken to date.

The Disciplinary panel will be constituted in accordance with the Trusts Disciplinary Procedure. The Line Manager of the employee will present all the facts of the case and the employee and / or his / her representative will have the opportunity to present their response and raise any issues.

4.3 Long Term Absence

Long term absence is defined as continuous absence of 4 calendar weeks or more. Where a member of staff commences sick leave which is likely to be long-term it is important that the Manager establishes the reason for this absence and establishes the frequency and method of contact from the outset. The normal expectation would be that weekly or fortnightly contact is maintained throughout the period of illness dependent upon the circumstances of the sickness.

Early interventions in a period of sickness absence which is likely to be long term are more effective than waiting for the 4 week indicator to trigger action. The management of long term absence may be helped by the efficient medical management of the case and close co-operation (where appropriate) between the Occupational Health Service and the General Practitioner. This may minimise time off and identify at an early stage, the employees capacity to return to work.

It may be appropriate in some cases to make an immediate referral to Occupational Health on the first notification of absence. The following referral timescales are to be used as a guide:

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Stress -	immediate referral
Injury at Work -	immediate referral
Musculo-skeletal -	immediate referral
Absence following maternity leave -	immediate referral

Making a Referral

- In all cases the Manager must carry out an initial assessment of the situation and decide if a referral to Occupational Health is necessary at this time. If an employee is hospitalised for example or has just had surgery, then it may be appropriate to defer making the appointment to a more suitable time.
- The Manager must complete the Trusts official form when referring staff to Occupational Health, and should ensure that they include all relevant details, background information and particular concerns and questions about fitness (see section 6 for further detail). The form must be completed in full otherwise it may be returned by Occupational Health causing an unnecessary delay. Employees being referred to Occupational Health must be informed of the contents of the referral by their Manager and of the questions being asked of Occupational Health about them, prior to sending out written notification of the appointment.
- Managers should also consider referral to Occupational Health even before a period of absence where it would be beneficial to the employee and perhaps prevent a more serious health problem developing.

Maintaining Contact During Absence

- It is also important that the Manager arranges to meet with the Employee during long term sick leave. This is an important way to continue to engage the employee with the workplace and to ensure that the absence is managed in a positive and proactive way.
- Discussion should include their current state of health, the occupational health opinion, the likely date of a return to duty and to agree the way forward. The individual circumstances of each case should be considered when determining when best to carry out meetings.
- Where an employee is off for a long time, it may be necessary to have several meetings over the course of the absence. The involvement of a Human Resource Officer will be dependent on the circumstances of each case and should be when alternative employment (section 8), ill-health retirement (section 9) or termination due to ill-health is being considered (section 10).

4.4 OTHER RELATED ISSUES

Episodes of both long and short term absences

Where an employee has absence which includes both long term and short term episodes, the Manager should address this at the return to work interview and explore the reasons for both before taking action. If the short term absences are unrelated to a health issue and the employee has reached a trigger point, it may be necessary to proceed with action under the Disciplinary Procedure as outlined on page 14. Advice should be sought from the attendance management team and in all cases the employee should be reminded of their requirement to provide regular and effective service.

Failure to attend meetings

It should be noted that at any stage of this process if an employee is unable to attend a meeting, contact should be made with their Manager advising of the reason for non-attendance in advance of the meeting taking place. Where failure to attend is due to circumstances outside of the employees control then another date will be offered. Where there is no reason for non-attendance or evidence of repeated cancellations, employees should be aware that decisions may be made in their absence and disciplinary action may be taken.

Having Surgery outside the UK/EU

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Employees who are travelling overseas for surgery may be entitled to Occupational Sick Pay. They should discuss their intention with their Manager to ensure that arrangements for communication are agreed and that they provide appropriate medical certification throughout the period of sickness. Managers should seek advice from HR and Payroll before the employee commences sick leave.

Sickness and Annual leave

- a) Where an employee has booked a period of annual leave and either becomes sick before or during the period of annual leave, they must immediately report sick for work in the normal way and provide certification from their GP as soon as possible so that the annual leave can be returned to them.
- b) If an employee is on sick leave and has been advised by their GP that a holiday would be beneficial to their recuperation then the employee must inform their Manager of their intention to travel.
- c) When requesting annual leave (whether or not the employee is on sick leave) an employee should notify Occupational Health through their Manager if they are travelling to Countries outside Europe, North America or Australia, and their trip is to last at least four weeks. Occupational Health will provide the Employee with a Health Questionnaire and a follow up Health Screening Assessment may be required.
- d) Employees continue to accrue annual leave (excluding statutory days) whilst on sick leave until pay has been exhausted. Employees who return to work with accrued annual leave, should discuss this with their Manager so that the leave can be used appropriately. This may include returning on a part-time basis using the accrued leave. Where an employee remains on sick leave and the new leave year commences, the employee can carry over 1 working week. In all cases the Manager should review the circumstances of the case.

Sickness as a result of Sports Injury / Secondary employment

Employees should seek to refrain from any secondary employment or activities that may affect their capacity to provide regular and effective employment. Where an absence has been attributable to a sports injury or secondary employment, Managers should remind employees of this at an early stage. Where there is evidence of recurring frequencies or excessive amounts of absence due to either of the above, this may prevent the employee from receiving occupational sick pay in the future. Statutory sick pay will continue to be paid.

Sickness during Pregnancy

Periods of sickness during pregnancy which are directly related to that pregnancy should not be counted towards the trigger points for managing short term absence. The absence should be recorded as normal and the Manager should carry out a return to work interview to discuss and explore options that will support the employee. It may be necessary to temporarily adjust the employees work tasks or work environment for an agreed period of time to enable the employee to remain in work.

Going Home Sick

Where an employee reports for work but then has to leave due to sickness, this should be recorded as a sick day in local records. If this happens on a 3rd occasion within 12 months of the first episode, the employee should be advised that the absence will be reported as sick leave.

New Employees

When an employee commences in the Trust, all aspects of their performance should be monitored closely, including attendance. The importance of regular attendance should be addressed within the Induction programme and employees should be reminded at the outset of their obligations under the Attendance Protocol.

SECTION 5 – DISABILITY DISCRIMINATION ACT (DDA)

5.1 Disability Discrimination Act (DDA)

In accordance with discrimination legislation the Trust has a legal requirement to make reasonable adjustments which would enable an employee with a disability to remain in work and provide reliable and effective service. Serious consideration must be given to making temporary or permanent adjustments to working practices or premises and in all cases advice and guidance should be sought from the Occupational Health Service and HR. Reference should also be made at the outset to the Trusts Policy on the Employment of People with Disabilities and associated guidance on reasonable adjustments which can be found on the Intranet.

The Occupational Health Service cannot confirm whether or not an employee has a disability. Equally the employer and/or the employee may not be able to determine this and in these cases it is important that all parties consider the definition and establish whether it is likely that the employee would meet the definition.

The act defines a disabled person as **someone who has a physical or mental impairment that has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.**

Examples of reasonable adjustments may include:-

- Allowing absence during working hours for assessment or treatment.
- Allocation of some duties to others.
- Making adjustments to premises.
- Acquiring or modifying equipment.

Adjustments made for the purposes of retaining staff will require managers to make a judgement as to whether or not the adjustment is reasonable. Factors to be considered in this circumstance are:

- Disruption to service and other colleagues.
- How effective the adjustments are in preventing the disadvantage.
- How practical it is.
- Its financial and other costs.

5.2 Managing absence

Periods of sickness which are directly related to a disability should be recorded as normal. Whilst it is not appropriate to deal with absence related to a disability under the Disciplinary Procedure, the Manager should ensure that levels of absence are addressed directly with the employee at the return to work interview and that the employee is aware of their responsibility to contribute to finding solutions which will enable them to provide regular service.

Where the employee would have reached a trigger point in respect of their level of short term absence (or before this if absences can be prevented) action must be taken. The Manager should discuss and explore options with the employee that will support the employee and enable them to provide regular and effective service. It may be necessary to adjust the employees work tasks or work environment and advice should be sought from Occupational health in relation to any proposed adjustments and whether the adjustment would sufficiently support the employee. This should be confirmed to the employee in writing and again the employee reminded that it is expected that they demonstrate and sustain an improvement in attendance.

Where adjustments have been made and where there is evidence that there are no further adjustments which could be reasonably made and the employee remains unable to provide regular and effective service, consideration may be given to termination on the grounds of ill health (section 10) or retirement due to ill-health (section 9)

SECTION 6 - REFERRALS TO THE OCCUPATIONAL HEALTH SERVICE

6.1 The role of Occupational Health is to assess the effects of health in terms of fitness for work and the effects of work on health. This is with an aim to assist management and employees in making plans to get back to work.

Staff should be aware that attending Occupational Health appointments is a requirement under their Contract of Employment, and therefore must make every effort to attend these appointments on time. Repeated failure to attend will result in Disciplinary action being taken for Breach of Contractual Obligations.

Consent and confidentiality are taken very seriously by the Occupational Health Service and procedures within Occupational Health will involve seeking the employee's informed written consent to continue with an assessment and to provide a report to Management.

The Trust is committed to supporting their staff when ill and using interventions at their disposal to assist the employee to remain in gainful employment. In order for this to be successful and to enable Occupational Health Professionals to undertake case triage and make a detailed assessment providing appropriate advice to management, the Manager must submit a detailed and complete referral form. On the basis of this information, case triage will be undertaken following receipt of referral and an appointment will be offered with the most appropriate member of the multi-professional Occupational Health Team. Managers who are unsure about referring particular employees can discuss with OH prior to an actual referral being made.

6.2 Completing a Referral

The Manager should ensure that the reason for referral is made clear on the referral form (see appendices) and that all relevant current / background information and questions are recorded.

Managers should include a full sickness record for the previous 5 years (including reasons) and details of any action or adjustments that have been offered / accommodated to date.

Managers must advise the employee at the time of submitting the referral form to OH that an appointment is being made for them to attend Occupational Health, prior to the employee receiving confirmation by post. The manager should contact the employee within two working days of receipt of the appointment to confirm the date and time. This information can be provided initially by telephone but must be followed up in writing. Managers must ensure that the employee is notified promptly of the appointment to ensure that attendance is guaranteed. The staff member should be made fully aware of the reasons for referral and the questions being asked.

6.3 The Report

Whilst at Occupational Health, the employee will be told the content of any report to management and the likely consequences of the report. They will be offered the opportunity to see the written report before it is sent to their manager and may choose to withdraw their consent at any stage to forward the report. Employees should, where possible, take advice from their representative if they are considering withdrawing consent as managers will then take action without medical guidance and based on the information they have. Managers should contact the Management of Attendance team to discuss the best way forward in such cases.

If on receipt of a report anything is unclear, managers should ring, email or write to Occupational Health professional who provided the report.

6.4 Self-referrals

Employees can 'self-refer' to the Occupational Health Service at any time for advice about their own health at work. The initial assessment will be carried out by an OH Nurse advisor. Self-referral appointments are confidential, however if a self-referral is made and the Manager also refers the employee, both appointments will be linked and the employee asked to give consent to OH to provide a report to management.

6.5 Failure to attend Occupational Health

If an employee is unable to attend Occupational Health they must contact their Line Manager in good time to provide a reason for this. If no reasonable explanation is given, the manager should advise the employee of their contractual obligation to attend and arrange for a new appointment. This should also be addressed in writing (see appendices) when confirming the new appointment date.

Failure to attend again may lead to disciplinary action being taken and the Manager should contact the Employment Law team in Human Resources where there is sufficient evidence of repeated non-compliance despite previous warnings.

Where an employee fails to attend Occupational Health and fails to make contact in relation to their non-attendance, the Manager should immediately make contact with the employee to ascertain the reasons for this. Again they must be reminded of their contractual obligations and a new appointment date provided. The employee should be advised in writing that disciplinary action will be considered and pay stopped if this is repeated.

6.6 Failure to return to work if found fit by Occupational Health

There may be occasions when the opinion of an employee's GP may differ from the Occupational Health Professional in terms of fitness for work. On these occasions the Manager should advise Occupational Health who may communicate with the GP (with the employee's consent) to ensure all factors are taken into consideration in decision making. The final advice should be taken from the Occupational Health Professional rather than the employee's GP. Steps should be taken by the Manager to address this issue immediately to avoid prolonging the absence further.

SECTION 7 - RETURN TO WORK ARRANGEMENTS INCLUDING PHASED RETURN

Where possible staff will be assisted in their return to work, particularly where the absence has been for a protracted period of time. Phased rehabilitation allows the employee to start contributing to the workplace at an earlier stage and is also aimed at aiding recovery.

7.1 Phased Return recommended by Occupational Health

- a. An employee returning from long term sickness absence on a rehabilitation programme with a phased return, recommended by Occupational Health (and agreed with management) will receive no loss of normal pay during the rehabilitation period.
- b. The employee will return to work on an agreed phased rehabilitation programme for a period not exceeding six weeks. The phased return will generally include reduced working hours and may also include some adjustment to tasks. This should be clarified and agreed with Occupational Health and the member of staff prior to the return to work. It should also be clear how working hours will increase throughout the phased return so that by the end of the agreed period the employee is ready to commence normal working (this should be agreed between the Manager and the employee). During the phased return period the employee will receive normal pay. It is important to note that a phased return may be recommended for a period less than 6 weeks.
- c. It is important that during the phased return that the manager monitors the arrangement. Before the end of the phased return the Manager should meet with the employee to review progress and confirm the return to normal working arrangements.
- d. If it is clear that the employee requires more time, this should be discussed and a further time limited period agreed. It should be made clear to the employee that this further period does not attract full pay (if it is beyond 6 weeks) and will be paid either at the reduced hours or using accrued annual leave.

- e. This should be recorded and confirmed in writing to the employee and the appropriate documentation forwarded to salaries and wages to adjust pay where necessary. The employee should also be reminded that it is expected that there will be a return to full duties and working hours. If at the end of the agreed extension the employee feels that they would like to continue working reduced hours, the Manager must decide if this can be granted on a permanent basis and should confirm any decision in writing. Where an employee indicates that they cannot carry out the full range of duties associated with their post, the Manager should contact Occupational Health for further guidance.

7.2 Request for Phased Return

- a. Where a phased return has not been recommended by Occupational Health but has been requested by the employee or on the new Med3 fit note issued by a GP, consideration should be given to granting this request as it may enable the employee to return to work earlier.
- b. Any adjustments to working pattern, hours or alternative duties should be discussed, agreed and confirmed in writing. Staff can use accrued annual leave to reduce hours or should be paid according to the reduced hours.
- c. Managers should also consider if re-training is required and should be guided by the employee and their rate of progress when they return to work. It should be noted that training includes "on the job" training and may not always mean formal training programmes.
- d. It may be useful to enable the employee to shadow / spend time with colleagues rather than expect them to commence work immediately.
- e. The extent and length of reintegration will depend upon the requirements of the service balanced against the needs of the employee.
- f. In all cases Managers are responsible for monitoring arrangements and again employees should be reminded that this is for a temporary period only and it is expected that they will return to normal working.

SECTION 8 - REDEPLOYMENT ON HEALTH GROUNDS

8.1 On occasions the Occupational Health Department may recommend redeployment as a means of retaining an employee in useful employment. This may be on a permanent or temporary basis depending on the circumstances of the case. The employee can, on health grounds, be transferred to another vacant post in another department within or outside of their Service Group if it is deemed suitable in terms of improvement to their health and to help to sustain employment for the individual without the loss of essential skills to the organisation.

Where alternative employment is being sought for an employee who is found permanently unable to return to their post as a result of a health related problem, a search will take place during a time limited period of no longer than 8 weeks from the point when it was agreed that the search would begin.

Consideration for redeployment is limited to vacant posts which the Occupational Health professional deem suitable on health grounds. The employee must meet the basic criteria or have equivalent experience, and be deemed suitable for the post being considered for redeployment.

It is expected that the employee will show some flexibility in the posts being considered. Alternative employment at the same grade or hours cannot be guaranteed and protection of pay will not apply. Payment will be made at the appropriate level for the new role.

Whilst operational requirements remain paramount, it is the responsibility of all Managers within the Trust to support the redeployment processes by giving due consideration to redeployment cases presented to them.

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Management Responsibilities

On receipt of a report from Occupational Health which recommends either permanent or temporary redeployment (if this is unclear the manager must contact the professional who completed the report to ascertain) the Manager must promptly take the following action in accordance with the timescales indicated below:-

1. On receipt of report, clarify with OH if unclear about what duties the employee would be fit to do and / or to clarify permanent / temporary arrangement.
2. On receipt of report, contact the employee (either by telephone or arrange to meet) to discuss the report, to confirm that they understand what it will mean, to discuss duties and to advise of the action you will now take. Record all discussions including the date on which the search will begin to ensure that the 8 week timescale is followed.
3. The Manager must carry out an initial search over a 2 week period for a suitable vacancy within their own department/areas of responsibility. Whilst every effort should be made to redeploy at the same band, suitable vacancies at lower bands may be considered and the employee should be advised of this accordingly.
4. On receipt of a vacancy or number of vacancies, the employee should be invited to a meeting to discuss the options and to agree suitable redeployment.
5. Managers should seek advice and guidance from the Attendance Management team and where appropriate a representative from the team will attend the meeting with the employee.
6. All discussions and agreements should be documented and issued to the employee and their representative where appropriate, in writing.
7. The appropriate documentation should be forwarded to Employee Relations and Salaries and Wages to record any relevant change such as cost centre for example.
8. Where the employee challenges the suitability of the options presented and where the manager is satisfied that the options are reasonable, this should be made clear to the employee and if necessary advice sought from Occupational Health about his / her suitability to carry out the duties. The employee should be reminded that refusal to accept a suitable alternative offer may lead to termination of contract.
9. Where there are no suitable vacant posts within your department/areas of responsibility, the Manager must broaden the search to all departments within the wider Service Group. This search should be conducted promptly within a further 2 week period.
10. Where the Manager has been unable to find suitable alternative employment within their service group, contact should be made with the management of attendance team who will broaden the search to include all service groups within the Trust for a further period of 4 weeks. This does not preclude the Manager continuing to look for alternative posts within their own Service Group. The Manager should also discuss this with the employee in an attempt to identify other areas of work which may be suitable.
11. Throughout the 8 week process it is vital that the employee is regularly updated. Meetings should take place where necessary so that the employee is given an opportunity to consider their options.
12. The same processes should be followed for seeking temporary redeployment on health grounds. Documentation should clearly record the relevant time periods involved and the employee should be reminded that it is expected that they return to their original post / duties.

8.2 Where alternative employment cannot be found

The Trust will endeavour to meet the needs of the employee to assist them to remain in useful employment. However, if at the end of the 8 week period suitable alternative options cannot be found, consideration may be given to termination on the grounds of ill-health (see section 9) or retirement on health grounds (section Trust Policy - Belfast Health and Social Care Trust Management of Attendance Protocol – January 2011

8). In this circumstance it is vital that all searches have been carried out or that there is evidence of the employee failing to consider alternative reasonable options before termination is considered.

In all cases of redeployment, Managers should note that the employee **remains** the responsibility of their service group and every effort should be made to seek appropriate alternative employment within that service group.

8.3 Review of Redeployment

Where employees have been redeployed, the suitability of the redeployment must be formally reviewed after 4 weeks. The purpose of the 4 week review period is to enable both the employee and the new Manager to assess the suitability of the redeployment and the employee's capability to carry out the duties of the post.

Whilst redeployment will not be overturned on the basis of the employee not liking the new post, there may be occasions when redeployment is unsuccessful. In these circumstances advice should be sought from Occupational Health and a decision taken to pursue a further redeployment, consider termination of the contract due to ill-health or pursue ill-health retirement.

SECTION 9 - ILLHEALTH RETIREMENT PROCESS

9.1 Ill-health retirement is available to employees who are members of the HSC Pension (two or more years membership is the qualification). There is no automatic right to receive early ill-health retirement benefits from the HSC Superannuation Scheme. The decision to apply remains the employee's and may be an option where there is a chronic ongoing medical condition which affects an employee's ability to provide a regular and effective service. In order to apply, medical evidence will be required from an Occupational Health Physician. It is important to note that the success of an application rests with the HSC Pension Medical Advisors.

If the employee has contributed to the HSC Pension Scheme and has made a decision to apply for ill-health retirement, Human Resources are responsible for processing the application and providing the administrative link with HSC Superannuation Branch. As most employees who apply for ill-health retirement will already be attending Occupational Health, the Occupational Health Physician should be already aware of the employees decision to apply and will assist with the completion of form AW33.

The application will be considered by the HSC Pension Medical Advisors taking into consideration such factors as the medical condition, the prognosis at the time of application, their ability to carry out the duties of their job and ability to effectively and reliably carry out any type of work of like duration. There are now two levels of eligibility.

- Tier one – Unable to do **current** job due to permanent ill health.
- Tier two – Unable to carry out **any** regular employment of like duration due to permanent ill health.

There are two possible outcomes following the application process :

- ① The Employee satisfies the requirements of the Scheme for either tier 1 or tier 2 or,
- ② The Employee does not satisfy the requirements of the Scheme.

In the event of a successful application, Human Resources will make contact with the Employee to process their application for benefits (AW6).

Where the employee does not satisfy the requirements of the Scheme the Trust will arrange a Final Review Meeting where consideration will be given to terminating the employees contract on health grounds (section 10). This will not affect the employees right to appeal the decision of the HSC Pension. The appeal process is a matter between HSC Pensions and the employee, and the Trust thereafter will only have a link through the administrative role. HSC Pensions will advise the individual of the appeal process

SECTION 10 - TERMINATION ON THE GROUNDS OF ILL-HEALTH

10.1 This may be applicable where an employee has not paid into the HSC Pension or where an application to retire due to ill-health has been unsuccessful. It should be noted that there is not an automatic entitlement for an employee to exhaust his / her entitlement to sick pay before a decision is taken to terminate the contract of employment on health grounds. The Manager and Human Resources must apply the following principles pending a decision to terminate on grounds of ill-health and must:-

- Seek a current opinion from an Occupational Health Professional on how long the employee is likely to remain unfit for work and the likelihood of resuming duties in the foreseeable future or indefinite future.
- Have sufficient evidence of engaging in a full consultative process with the employee.
- Review and assess the impact the absence is having on the service and the ability to sustain further absence.
- Confirm that it has been established whether or not the employee has a disability under the definition within the DDA and provide evidence of reasonable adjustments made or considered including redeployment to another post.
- Ensure that all matters relevant to a decision to terminate have been considered and investigated, and that the employee has been advised and consulted throughout the process.
- Consider if the employee has been rejected for ill-health retirement.

10.2 Final Review Meeting

Having gone through the stages indicated above and where there is no further action that could be taken to support the employee, the manager must arrange to meet with the employee and his / her representative and a HR Officer from the Attendance Management team, to carry out a Final Review Meeting. The employee should be advised that the expected outcome of this final review will be termination due to ill-health.

The final review should be arranged by the Manager within 2 weeks of receipt of a report from Occupational Health where it is clear that the employee is unfit for work and / or where the Manager is satisfied that there is no further action that can be taken which would enable the employee to provide regular and effective service.

At the final review meeting, the Manager should refer to the level of absence, outline the action taken to date, and explain why it is necessary to terminate the contract of employment. Reference should be made to the latest Occupational Health opinion.

The employee should be advised that they are entitled to receive one weeks paid notice for each year of continuous employment subject to an overall maximum of twelve weeks. The employee has the right to appeal the decision. The HR Officer will ensure that this is communicated to the employee in writing following the meeting.

It should be noted that there may be occasions when new information is provided at the final review meeting which may mean that termination is not appropriate at that time. In these circumstances the employee should be advised that the final review meeting will be adjourned to consider the new information and to seek further advice and guidance. It is vital that the Manager remains in contact with the employee to keep them updated and that a decision to either reconvene the final review meeting or to explore other options in view of the new information, is taken promptly.

10.3 Appeal Process

- Employees wishing to appeal the decision to terminate their employment on the grounds of ill-health should write to the Director of Human Resources, stating their grounds of their appeal, within seven days of the letter containing the decision.

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- Two Co-Directors(or nominated deputy) not previously involved, will review the circumstances of the case (as presented by the Manager and employee concerned or his/her representative) and will make a joint decision accordingly.
- The employee will be informed in writing by the Panel of the outcome including reasons for their decision, within seven days of the Hearing taking place.
- If the decision is made to overturn the original termination of Contract, then the employee will be reinstated onto the payroll with effect from the date of termination. The Service Group Co-Director must notify Salaries and Wages and Human Resources of this decision.

SECTION 11 - HSC INJURY BENEFITS

The HSC Temporary Injury Benefit Scheme (T.I.B) provides benefits for all employees, whether or not they are members of the HSC Pension, who have been absent on certified sick leave because of an injury, disease or a condition wholly or mainly attributable to the duties of their HSC employment and have suffered a consequential loss of earnings. The regulations do not apply to any person whose condition is wholly or mainly due to other causes or is caused by or seriously aggravated by his / her own culpable negligence or misconduct.

Only those employees who meet the definition above and whose earnings reduce i.e. when an employee has gone on to half pay/no pay, can submit an application. On receipt of an application, the HR Officer will contact payroll to confirm that there is a loss of earnings in accordance with the T.I.B Scheme. The relevant Temporary Injury Benefit Panel will consider the case in line with the guidance provided. This will include requesting further evidence from the line Manager, Health and Safety, e.g. Incident forms, Occupational Health opinion etc.

For further information on T.I.B and applications please contact the Management of Attendance Team at [redacted] or call to 4th Floor, McKinney House, Musgrave Park Hospital, Stockmans Lane, Belfast.

Following the implementation of the Protocol it is essential that a formal method of monitoring compliance, user satisfaction and success is established.

The Trusts Management of Attendance Steering Group will meet on a quarterly basis and will review the effects of the protocol on staff and the Organisation. The group will also agree and progress new initiatives which support the well being of staff. The Group includes key Stakeholder representatives such as Human Resources, Occupational Health, Health and Safety and Service Group Senior Managers. It may be necessary to form smaller focus groups throughout the year to carry out specific pieces of work, research or pilot schemes.

11.1 MONITORING OF POLICY AND OPERATING PROCEDURES

Following the implementation of the Protocol it is essential that a formal method of monitoring compliance, user satisfaction and success is established.

The Trusts Management of Attendance Steering Group will meet on a quarterly basis and will review the effects of the protocol on staff and the Organisation. The group will also agree and progress new initiatives which support the well being of staff. The Group includes key Stakeholder representatives such as Human Resources, Occupational Health, Health and Safety and Service Group Senior Managers. It may be necessary to form smaller focus groups throughout the year to carry out specific pieces of work, research or pilot schemes.

11.2 EQUALITY AND HUMAN RIGHTS CONSIDERATIONS

This policy has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998. Equality Commission guidance states that the purpose of screening is to identify

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those policies which are likely to have a significant impact on equality of opportunity so that greatest resources can be devoted to these. Using the Equality Commission's screening criteria, no significant equality implications have been identified. The policy will therefore not be subject to an equality impact assessment.

Similarly, this policy has been considered under the terms of the Human Rights Act 1998, and was deemed compatible with the European Convention Rights contained in the Act.

11.3 ALTERNATIVE FORMATS

This document can be made available on request in alternative formats, e.g. plain English, Braille, disc, audiocassette and in other languages to meet the needs of those who are not fluent in English.

11.4 REVIEW OF THE PROTOCOL

This protocol should be reviewed periodically in consultation with recognised Staff Side representatives via the HSC (NI) Joint Negotiation Forum.

SECTION 12 - ATTENDANCE MANAGEMENT TRAINING REQUIREMENTS

To ensure that the Protocol is fully implemented and in the manner intended, it is essential that Managers with responsibility for attendance management are fully trained. Training for Managers in this area of responsibility is mandatory.

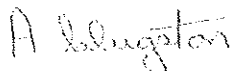
The Attendance Management Team (AMT) will co-ordinate a series of training sessions throughout the year and it is the responsibility of service groups to ensure that appropriate staff receive this training.

In some circumstances the AMT will also provide training sessions to Managers when requested by the service group or when new initiatives are developed or if there are changes in Legislation.

This document can be made available on request in alternative formats, e.g. plain English, Braille, disc, audiocassette and in other languages to meet the needs of those who are not fluent in English.

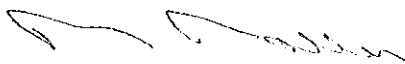
11.4 REVIEW OF THE PROTOCOL

This protocol should be reviewed periodically in consultation with recognised Staff Side representatives via the HSC (NI) Joint Negotiation Forum.



Signed on behalf of Staff Side

Date : 01/02/2011



Signed on behalf of Trust

Date: 01/02/2011

SECTION 13 – APPENDICES

Trust Self Certificate

Sick leave Notification

Occupational Health Referral Form

Return to Work Form

Guidance on Carrying out a Return to Work Interview

Letter – Failure to attend OH

Letter – Request to attend Absence Meeting

Letter – Verbal Warning



Belfast Health and Social Care Trust

BELFAST TRUST SELF-CERTIFICATE

(for absences lasting 4-7 days)

PERSONAL DETAILS:

Name: _____ Grade: _____

Location: _____ Staff No: _____

National Insurance No: _____

DETAILS OF CONTACT MADE BY YOU WITH YOUR DEPARTMENT:

Date contacted: _____ Time contacted: _____

Name of person contacted: _____

Contacted by whom (if not you): _____

If contact made by someone other than you give reason why: _____

ABOUT YOUR ABSENCE

Reason for absence: _____

What date did your sickness begin?

What date did your sickness end? (leave blank if you don't know):

What date did you resume work? (if applicable):

Do you anticipate being off for more than 7 days?

Are you visiting your doctor?

Yes

No

What date did you last work before your sickness began?

What time did you finish work on that date?

ABSENCE RELATED TO ACCIDENT AT WORK:

Yes

No

I declare that this is a full and accurate account explaining the necessity for my absence. I note that disciplinary action may be taken against me if this is found to be a false statement.

SIGNATURE: _____

Date: _____

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Belfast Health and Social Care Trust

SICK LEAVE NOTIFICATION
TO BE FORWARDED TO SALARIES AND WAGES

Unit	Block	Staff No.	Mr / Mrs / Miss etc.	Initials	Surname	
Band :			Service Group :			
Department :			Location :			
Is this the first notification of Present Absence : YES / NO						
Enter Appropriate Information		Date Certificate Received by Manager	From	To	No. of Working Days	Date Resumed Duty
	Code					
Uncertified Absence	(U03)					
Trust Certificate Attached	(U04)					
Doctors Certificate Attached	(U05)					
Hospital Certificate Attached	(U05)					
Long Term Open Certificate	(U06)					
Notification Date :			Time : am / pm			
Became Unfit for Work :			Last Worked :			
Date :			Date :			
Reason for Sickness :						

Signed : _____ Date _____
(Manager)



**MANAGEMENT REQUEST FOR ADVICE FROM THE
OCCUPATIONAL HEALTH SERVICE**

*Please send only **ONE** form to Occupational Health Service
(Completed form can be sent via post or email.
Forms sent via email are not required to be signed)*

*Please complete **all** sections to avoid a delay in being offered an appointment with an Occupational Health Professional.*

1. EMPLOYEE'S PERSONAL DETAILS

Surname:		Maiden Name:	
Title:	PROF/DR/MR/MRS/MISS/MS/OTHER		
Forename:		D.O.B.	

Job Title:		Weekly Hours of work:	
Department:		Service Group:	
Work Location:		Superannuable:	YES / NO

Home Address:			
Tel No:		Mobile No:	
Employee's email			

Does this employee have any other job in the BHSCT or elsewhere?	YES / NO		
Details:			
Commenced employment on:		National Insurance No:	

2. REASON FOR REFERRAL

Date sick leave commenced (if currently off work)		
Currently Off:	<input type="checkbox"/>	
Returned to Work:	<input type="checkbox"/>	Return date:
Not off work:	<input type="checkbox"/>	
Please give details of nature of illness/absence:		
Does the member of staff attribute the illness/absence to an accident/incident at work?		YES / NO

3. SUPPORTING INFORMATION (Background, discussions with employee, identified work issues) – this information is vital:

<p>Please provide background information, including any questions you would like the Occupational Health Professional to answer (please note if you do not include background information <u>and</u> questions, the referral will be returned to you for completion) – continue on a separate page if necessary:</p>
Specific questions you would like answered:

4. SICKNESS ABSENCE RECORD (ESSENTIAL INFORMATION)

IF NO PAST ABSENCES PLEASE TICK BOX	<input type="checkbox"/>
-------------------------------------	--------------------------

The absence record for the past **5 years** is summarised as follows (please indicate working days lost and reasons for absence), include spells when sent off duty:

From:	To:	Working Days absent	Nature of Incapacity (if known)
N.B. Alternatively, please attach a copy of the individual's sickness absence record (with details of causes of absence)			

5. PREVIOUS REFERRALS

Has this person been referred to Occupational Health previously?	YES / NO
If Yes, please specify the number of occasions:	
Name of Occupational Health Professional(s):	

Please specify recommendations which were made by the Occupational Health professional in previous reports or adjustments which you as her Line Manager have already put in place:

--

Have these recommendations been actioned?	YES / NO
Please give details (including reasons why recommendations have not been actioned):	

--

6. CONFIRMATION OF THE EMPLOYER'S AWARENESS OF REFERRAL TO THE OCCUPATIONAL HEALTH SERVICE

I confirm that the <u>contents of this form</u> have been discussed with the employee, including the background information and questions which have been asked.	<input type="checkbox"/>
I recognise that the service group will be responsible for the fee for any G.P./ Specialist reports requested by an Occupational Health professional.	<input type="checkbox"/>

In the event that the Referring Manager may not be contactable please nominate a 2nd manager.

Manager's Name:			
Manager's Work Address:			
Job Title:		Service Group:	
Manager's Contact Tel. Nos:	Landline:	Mobile:	
Manager's Email:			
Report to be sent to:			

2nd Contact

Manager's Name:			
Manager's Work Address:			
Job Title:		Service Group:	
Manager's Contact Tel. Nos:	Landline:	Mobile:	
Manager's Email:			
Report to be sent to:			

Signed:		Date:	
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Please send completed form to: occupationalhealth@ [REDACTED]

OFFICE USE ONLY

Date referral form received:	
-------------------------------------	--

Date referral submitted for triaging:	
--	--

Referral letter triaged by Nurse Advisor?	YES / NO
If Yes, Date	
If No, Please specify:	

Referral letter triaged by Doctor?	YES / NO
If Yes, Date	
If No, Please specify:	

Appointment to be made with:	
Date of appointment:	
Date appointment booked:	
Date appointment sent:	

Appointment sent by:	Letter/Phone/email
Appointment changed by:	OHD / Client / Manager

Date of new appointment:	
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Belfast Health and Social Care Trust

Return to Work Interview Form

This form must be completed immediately on return to work

1. Personal Details:

Name :

Grade / Band :

Location :

Staff Number :

2. Details of this absence from work (including partial days absence)

From	To	Reason	Total Days lost (hours lost if partial absence)

Please tick if the absence is related to the following

Pregnancy

Disability

Accident / Incident at work

3. Details of all sickness related absences within last 12 months

From	To	Partial day	Full day	Reason for absence	Working days lost	Management action

Please note : If a sickness absence record is unsatisfactory it is necessary for a Manager to take the necessary steps to improve the situation to ensure a satisfactory attendance record.

4. Notification of Absence:

Did you notify your department on the first day of absence? Yes No

If yes, who did you speak to?

If no, please state who did notify and the reason why :

Reporting Procedure carried out? Yes No

Did you submit a Trust cert? Yes No

Did you submit a Doctors cert? Yes No

Discussion Points :-

5) Action to be taken by Manager (if any):

Reason/s for Absence: Managers should differentiate between short and long term absences. Managers should initiate appropriate action and ensure they record main discussion points on additional comments section

Short Term

Long Term

No Action <input type="checkbox"/>	No Action <input type="checkbox"/>
Referral to occupational Health <input type="checkbox"/>	Referral to occupational Health <input type="checkbox"/>
Return to work arrangements <input type="checkbox"/>	Agreed Adjustments <input type="checkbox"/>
Stress risk assessment <input type="checkbox"/>	Stress risk assessment <input type="checkbox"/>
Informal Warning <input type="checkbox"/>	Return to work arrangements <input type="checkbox"/>
Formal Disciplinary Action recommended <input type="checkbox"/>	Informal warning <input type="checkbox"/>

Additional Comments :-

Manager's Signature : _____ Date : _____

Employee's Signature : _____ Date : _____

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CARRYING OUT A RETURN TO WORK INTERVIEW

Purpose

A return to work interview is one of the most important tools in reducing and controlling both long and short term absence from work.

The purpose of the return to work interview is:

- To make the employee feel welcome and valued upon return.
- To ensure that the employee is really fit to return.
- To discuss the cause of the absence.
- To address any problem that may be causing or contributing to the absence.
- To discuss advice/recommendations from OH where appropriate.
- To improve attendance.
- To update the employee on work issues.

Environment

The return to work interview often involves discussion of a sensitive and confidential nature. To ensure the interview is conducive and can facilitate such discussions Managers should:-

- Hold the interview in private and respect the confidentiality of issues discussed.
- Create an atmosphere of trust and support.
- Explain the purpose of the interview

A return to work interview should be carried out on the same day that the employee returns and as early as possible so that discussions and clarification around such as adjustments, phased return, reporting procedures or attendance levels can take place. Also, so that the employee can be updated on any relevant and important work related issues. Where a Manager is unable to carry out the return to work interview on the day of return the employee should be advised of this and arrangements made for the interview to take place within 2 days of the return date.

Preparation

In the majority of cases the return to work interview will be short involving a brief discussion about the absence and the reason for absence. However there may be occasions when a more detailed interview will be necessary where for example a trigger point has been reached, or where an employee is returning after a long period of sick leave or where there are OH recommendations to discuss.

Before beginning an interview, the Manager must **prepare** so that all aspects of the case can be discussed in full. It is important that all background information has been gathered including previous history, reasons for absence, patterns, reference to previous discussions/warnings where appropriate, OH opinion, personal circumstances etc.

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It is also recommended that reference is made to the Trust Attendance Protocol before and during the interview for guidance in relation to managing the case.

Structure

Welcome

Absence

Responsibility

Move on

The Welcome phase

An employee may have been absent from work for a long time or may have gone through a particularly difficult period in their life. As a Manager it is vital that you welcome the employee back to work and at the outset note their absence and the impact this may have had on them.

The Absence phase

This is the core of the interview. This is where you must discuss the recent period of absence including reference to previous absences where necessary. You should refer to the Trust Management of Attendance Protocol for guidance in the management of the short or long term absence.

On occasions the employee may present you with information relating to their personal circumstances that you may want to consider before initiating more formal action. If you consider the information to be mitigating then you must advise the employee that formal action will not be taken but that an improvement in attendance is still required. If the employee refers to issues caused by, or exacerbated by, work then you should be prepared to discuss it and help solve it. Here are some guidelines for the absence phase of the interview:

- Ascertain why the employee was absent and where appropriate explore what treatment if any they have taken/are undertaking.
- Place the absence in the context of any previous absences and, where appropriate, seek an explanation for any apparent patterns or trends.
- Be sensitive where personal problems and illnesses are being discussed and refer to the services of OH where appropriate or to recommendations made.
- Ask for further information/evidence if you are unclear about the reasons for absence. If you do have facts that appear to contradict the employee's statement, discuss these and give the employee an opportunity to explain.

- Offer and discuss solutions that will enable reliable and effective service or advise the employee that you will seek further advice.

- If an employee has a problem that is going to cause persistent absence, you must refer to the Trusts Attendance protocol and specifically to the section on managing short and long term absences. Any action taken should be done in accordance with the Protocol.

The Responsibility phase

Although the absence phase is the core of the interview, the responsibility phase is the part that has the greatest influence on improving attendance.

The responsibility phase is not always necessary or appropriate. Its purpose is to manage absence and to improve attendance in the future. If the absence is unlikely to recur, then you may well decide that a responsibility phase serves no purpose and to move directly to the final phase.

However where there is concern about the ability to provide regular service in the future or where the employee has a high level of absence, you may want to advise them that they must accept responsibility for their attendance and contribute to finding solutions that will enable them to provide regular service.

Move on

It is very important to leave the meeting on a positive note where all parties are clear about what was discussed and agreed. Express confidence in the employee's ability to attend in future and then move on to brief the employee on the events that occurred during their absence and what is now expected of them in terms of work.

Conclusion

The purpose of the return to work interview is to manage absence effectively and to support the employee to remain in work and provide regular and effective service. Most interviews will be straightforward and short however there may be occasions when the interview is difficult both for the Manager and the employee. In all cases the return to work interview should be used positively to manage absence effectively and the employee should leave the interview clear about what has been discussed and the way forward.



FAILURE TO ATTEND OCCUPATIONAL HEALTH
OR, REPEATED SHORT NOTICE CANCELLATION

Date

Name & Address

Dear

Job Title & Location

I refer to your employment in the above post and your current absence from work since
DATE

(Use 1 or 2 as appropriate)

- 1) I have been informed by our Occupational Health Department that you failed to attend an appointment on DATE and that you also failed to provide any reason or explanation for your non attendance.

or

- 2) I have been informed by our Occupational Health Department that you cancelled your appointment on DATE at short notice. I would remind you that Occupational Health appointments are a valuable resource and where possible prior notice must be given so that appointments can be re-allocated appropriately.

A further appointment has been made for you to attend the Occupational Health Department on TIME and DATE.

Attendance at Occupational Health is a contractual obligation and I would ask that you contact me MANAGERS NAME, at Tel: NUMBER, immediately to confirm your attendance at the new appointment and to advise me of your reason for not attending/cancelling (delete as appropriate) the appointment on Date.

Failure to attend this further appointment or failure to give good reason for your non-attendance may result in your pay being stopped and disciplinary action being taken.

I look forward to hearing from you.

Yours sincerely

DRAFT - MANAGER ARRANGING MEETING WITH EMPLOYEE ON
LONG TERM SICKNESS ABSENCE FROM WORK

DATE

PRIVATE & CONFIDENTIAL

NAME & ADDRESS

Dear

I refer to your current absence from work since _____ and wish to advise you that I would like to meet with you at **Location, date and time.**

Please let me know if you wish this meeting to take place in another location.

The purpose of our meeting is to discuss your absence from work and options that may be available to you in order to aid your return when you are well enough to consider doing so. You may also want to consider taking this opportunity to raise any concerns you may have regarding your future employment options.

If you wish, a relative, friend or your Trade Union representative can accompany you to the meeting. If you wish a Trade Union representative to be present, you must arrange this directly with your representative.

Please confirm that this date and time are suitable by contacting me at **TELEPHONE NUMBER.**

Yours sincerely

Manager

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Belfast Health and Social Care Trust

Date
Name
Address

Dear

Re: Issue of Verbal Warning

I refer to our meeting held on _____ at which you were represented by _____ (or) at which you confirmed you did not wish to have representation. (delete as appropriate)

The meeting was held to discuss your unsatisfactory attendance record, please see below:-

(LIST ALL RELEVANT EPISODES OF SICK LEAVE)

(THE FOLLOWING PARAGRAPH IS OPTIONAL DEPENDING ON WHETHER YOU HAVE REFERRED THE EMPLOYEE TO OH TO DETERMINE IF THERE IS AN UNDERLYING HEALTH CONDITION)

An Occupational Health report dated _____ advised that there were no underlying health issues which have contributed to your high level of absence.

I discussed with you during the meeting that this level of absence is unacceptable and warranted informal disciplinary action.

As such, I issued you with a verbal warning which will remain on your file for a period not exceeding 6 months from the date of issue of this letter. During this time your attendance will continue to be monitored. Should your attendance not improve over this period, you may be the subject of formal disciplinary action which could ultimately lead to your dismissal from the Trust.

I hope that the issuing of this verbal warning will address to you the serious need to improve your attendance and that going forward this improvement will occur.

You have the right to appeal the issue of this verbal warning and must do so in writing stating the grounds of your appeal, within seven days of receipt of this letter to the next line manager (NAME AND CONTACT DETAILS).

Yours sincerely

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