Attendance Management Policy & Procedure (HR-003)

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Policies should be accessed via the Trust intranet to ensure the current version is used

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Part 1 - Trust Policy

1. Introduction

Humber Teaching NHS Foundation Trust (the Trust) is committed to developing and maintaining a positive attendance culture. It recognises that poor attendance can have a detrimental impact on essential service provision as well as placing additional pressure upon other employees. In order to support a high level of attendance, the Trust is committed to achieving a safe and healthy working environment, with a caring and supportive approach for those who are absent through illness and recovering from ill health.

2. Purpose

The overall purpose of this policy is to set out the Trust's approach to the management of absence and attendance in the workplace.

This policy enables managers to address sickness absence issues, both short and long-term, in a fair, consistent, and equitable manner. It is recognised however, that all cases must be dealt with on an individual basis because of differing circumstances.

It should be noted that all other types of absence should be dealt with in accordance with the appropriate policy, i.e., maternity, adoption, career break. Line managers should consider and take due account of individual circumstances and all relevant factors before action is taken e.g., maternity related absence, stress, disability related absence, work related factors.

Throughout this policy the Trust aims to promote the following objectives:

- Support staff members who are diagnosed with a terminal illness, providing
 additional support, understanding and avoiding additional stress and worry. We will
 provide our employees with the security of work, peace of mind and the right to
 choose the best course of action for themselves and their families which helps them
 through this challenging period with dignity and without undue financial loss. You
 should refer to Part 2, Section 8.
- The provision of high-quality services to patients, and a high quality of working life for its employees, recognising the need to create an environment that enables everyone to contribute fully through regular attendance at work.
- To ensure that all parties work together to facilitate a return to work as soon as possible following a period of sickness absence.
- To ensure that in all cases of employee ill-health there will be a progressive and thorough review of the employee's circumstances, considering the need to maintain a service to the public, support to individuals and to comply with all employment and equality legislation.
- The right of all employees subject to this managing sickness absence policy and procedure to be treated fairly, equally and with dignity and respect.
- A proactive, consistent, and fair approach to managing sickness absence. To be
 effective it should be read in conjunction with the attached procedure, and other
 relevant organisational policies and procedures.
- Support staff to be well, stay well and improve their overall health and wellbeing through the development of proactive initiatives.
- Agreed and accepted procedures to facilitate the appropriate management of short term and long-term absences.
- The utilisation of the Trust's Occupational Health services in order to support a timely return to good health, and ultimately a return to work.

3. Scope

This is policy and procedure apply to all Employees of Humber Teaching NHS Foundation Trust

4. Equality Statement

In applying this policy, the Trust will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010): age, disability, gender, gender reassignment, gender identity, gender expression, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation. An Equality Impact Assessment can be found at the end of this policy.

5. Duties and Responsibilities

5.1 Chief Executive

The Chief Executive is ultimately responsible for the content of all policies and their implementation.

5.2 Executive Directors

To ensure that this policy is acted on through policy dissemination and implementation in collaboration with senior managers.

5.3 Senior Managers, Managers and Clinicians

- Ensure all staff within their area of responsibility are informed about the contents of this
 and other associated policies and procedures and apply this policy and procedure in a
 fair and equitable manner.
- Consult with the relevant Workforce Advisor for advice and assistance prior to taking any formal action.
- Develop a culture where employees are supported and assisted to understand and maintain the required standards of attendance.
- To record details of all meetings with the employee under this procedure and to keep a copy of such notes.
- Ensure all employees that have a second job, have completed the secondary employment form and must seek assurance of compliance with secondary employment guidelines in the event of non-attendance.
- Engage with their employees to determine if they have undertaken any paid or unpaid time off whilst off sick.

5.4 Workforce and Organisational Development Team (Workforce and OD)

The Workforce and OD Team (namely the Workforce Advisor) will provide appropriate specialist advice to managers and leaders in the operation and application of this policy and its associated procedure.

5.5 Occupational Health

Occupational Health will provide appropriate advice and support to employees and provide the Workforce Advisor and managers with technical advice and guidance.

Occupational Health will advise employees and managers on any recommended adjustments in the workplace (with consideration to the Equality Act 2010 – disability section) to support attendance including rehabilitation, redeployment, retraining, adaptations

to the role or working pattern, and/or ill-health retirement to enable line management to make an appropriate decision.

Following an appointment with Occupational Health a full report will be sent to the manager if the employee consents. Where the employee does not consent to the sharing of this information, Occupational Health will advise of the importance of sharing this information to enable full support, however where the employee does not consent, their wishes in this regard will be observed.

It should be noted that where an employee does not consent to the sharing of clinical information, managers may have to make decisions without full knowledge of the facts which may in turn be detrimental to the employee's employment situation.

5.6 Employees

All staff have a duty to comply with all policies in use at the Trust.

All employees are expected to take responsibility for the maintenance of their health with a view to minimising the time they spend away from work through sickness and will actively engage with this policy and the accompanying procedure.

GMC, NMC and other clinical regulatory bodies (e.g., HCPC) expect staff to uphold their fitness to practice by not putting patients at risk, by maintaining their own health required to safely carry out their role. The regulatory bodies expect staff to alter or stop practicing if their physical or mental health may affect performance or judgement that may put others at risk.

5.7 Trade Union Representatives

Trade unions/professional organisations will be expected to advise and represent their members involved in any sickness absence management.

6. Reporting Absence

6.1 First day of non-attendance

On the first day of any non-attendance the employee must notify their manager that they are unable to attend work. This should be done at the earliest opportunity, but at least one hour prior to the start of the shift or as soon as practical and possible depending on service working hours.

The employee should make the call themselves whenever possible, and not ask someone to make it on their behalf, unless there are exceptional circumstances whereby the employee is not able to make the call.

The employee must explain the reason for the non-attendance and a likely date of return. It should be indicated whether they are intending to seek medical advice and they should provide a contact telephone number that they can be reached on during their period of absence.

The manager reserves the right to explore the absence with the employee and understand whether an earlier return to work is possible.

If the employee has informed you they have been diagnosed with a terminal illness, you should refer to Part 2, Section 8

6.2 Requesting to leave work when unwell

The employee must inform their manager if they need to leave work early because they are unwell. The employee should state the reason for the absence (confirming whether or not the absence is due to a work-related incident/injury) and the likely date of return to work.

6.3 Non-attendance during first 7 days

The employee should telephone and notify their manager prior to commencement of the shift on each and every day of their absence to enable the manager to provide cover.

Alternatively, once the reason for absence has been established on day one, and if both parties are agreeable, the level of contact can be agreed in the first contact.

6.4 Certificates explaining why you are unable to attend work

If the non-attendance lasts more than 7 calendar days, the employee must provide a doctor's 'fit note' (previously known as a medical certificate) to cover any non-attendance from the eighth day onwards.

The 'fit note' is the employee's property, and they should keep the original, providing a copy to their manager.

If the employee cannot return to work when their 'fit note' expires, they must obtain another one to cover any further non-attendance. Employees must contact their manager to inform them of the reasons for not submitting a 'fit note' certificate.

Retrospective 'fit notes' will only be accepted in exceptional circumstances and therefore failure to provide a 'fit note' within a reasonable timeframe may result in an employee not being paid for that period.

'Fit notes' are required to cover the total length of absence. Any day where the employee has not complied with the obligations under this procedure will be treated as a day of unauthorised non-attendance and therefore may not be paid in-line with contractual sick pay.

Any changes to fit notes can be found on the gov.uk website. Fit note - GOV.UK (www.gov.uk)

6.5 Notice to Return

If during the first 7 days of non-attendance, the employee believes they are fit to return to work, they must telephone their manager as soon as possible in order to give notice of their intention to return.

Should an employee become fit for work before the 'fit note' expires, the individual should speak to their manager to determine if this is possible.

7. Maintaining Contact

When an employee is absent from work long term, the line manager will contact them on a regular basis (advised minimum is every seven days) and the employee also has a responsibility to maintain regular contact with their manager.

The most appropriate method of contact will be agreed. This approach is to ensure the employee is supported during the period of absence, kept up to date with any relevant changes within the Trust and the manager is aware of the expected length of absence where known.

Where appropriate a home visit may also be made by the manager and the employee will receive prior notice of this. Agreement from the employee must be sought prior to any home visit.

8. Accidents involving a third party

When reporting sickness absence, the employee must inform their manager if it is as a result of an accident involving a third party. If this is the case, the employee, at the commencement of their absence (or as soon as feasible thereafter), must notify their manager if they intend on making a claim against the third party. The manager should notify the Payroll team of this fact via email (https://example.com/hrs.net).

In the circumstances whereby the employee has made a claim against the third party, any payments made to the employee by the Trust will be recoverable.

9. Disability Related Absence

Sickness absence may sometimes result from a disability. At each stage of the policy and procedure, consideration will be given to understanding the nature and day to day effects of any disability and whether reasonable adjustments could be made to the requirements of a job or other aspects of working arrangements that will provide support at work and/or assist a return to work, in accordance with the disability provisions of the Equality Act (2010). This may include a phased return to work plan; including alternative duties, additional training and support required to facilitate a return to work on a timely basis.

If an employee considers that they are affected by a disability or any medical condition which affects their ability to undertake their work, they should inform their line manager. Employees should not wait for the sickness absence procedure to be used before doing so.

If the employee has informed you they have been diagnosed with a terminal illness, you should refer to Part 2, Section 8. There will be no formal attendance review process.

10. Treatment for medical reasons

Sickness absence may be planned, where it is known that an employee will be undertaking a programme of clinical treatment that will be debilitating for a recognised period of time, for example, to undertake an operation or chemotherapy.

In this instance the employee must meet with their manager prior to the absence and discuss the following:

- The likely period of time the employee will be absent.
- Agreed dates and times for maintaining regular contact, to update each other on work and progress of recovery.
- Agreed date and time for a formal meeting to start to plan a return to work.
- Any other issue of concern for either party.
- A mutually agreed plan must be drawn up and a copy kept by both parties.
- Appropriateness of making a referral to Occupational Health prior to or post the surgery to facilitate a report including recommendations for a return-to-work plan and any recommended adjustments to the employee's job.

If the employee has informed you they have been diagnosed with a terminal illness, you should refer to Part 2, Section 8. There will be no formal attendance review process.

11. Treatment for Non-medical Reasons

If an employee is planning to undertake any treatment for voluntary non-medical reasons (e.g., cosmetic surgery) within work hours (unless undertaken whilst on annual leave) they will be referred to Occupational Health for advice.

Unless it is confirmed that such treatment will be beneficial to their health and wellbeing, they will not receive occupational sick pay and may be refused the time off work (outside of annual leave) to undertake the procedure. In addition, any infections or post treatment complications connected with such treatment will also be unpaid unless recommended otherwise by OH. However, if they have a 'fit note', they may still receive statutory sick pay.

12. Surgery or Treatment for Gender Reassignment

For any employee undergoing Gender Reassignment treatment (including surgery) they may require time off to adequately recover or adapt, depending on their specific needs. Due to the sensitivity of gender reassignment treatment and surgery, we would advise employees to contact Occupational Health for ongoing support during this transition.

As per all ongoing medical treatment, employees are encouraged to arrange appointments outside of working hours however there is an understanding that this is not always possible and reasonable time off would be allowed for appointments. If employees are unable to reschedule appointments, we would advise that reasonable notice is given to managers to be enable them to provide cover.

As a matter of good practice, managers should offer flexibility to individuals who may need to take holiday or rearrange working hours in order to attend additional appointments, for example, electrolysis.

It should be noted that gender reassignment surgery may require more than one surgical procedure.

Managers should remember that it will constitute unlawful discrimination if they treat an individual undergoing gender reassignment less favourably then someone who is absent for some other medical reason.

13. Sickness non-attendance and holidays

13.1 Falling sick during holiday

If an employee falls ill whilst on annual leave and they wish to take the leave as sickness absence, the Trust requires the employee to produce a 'fit note' prior to reinstating their annual leave entitlement.

13.2 Requesting paid holiday during sickness non-attendance

If employees are absent on long-term sickness, they can apply to take some or all of their outstanding holiday entitlement. This should be requested in the usual way.

13.3 Carry over of annual leave

All employees accrue and can take annual leave during sick leave. If an employee is absent due to sickness and has not had the opportunity to take their annual leave in the current leave year, they are entitled to take any untaken annual leave when they return to work, which might be in the next leave year. The amount of leave that can be carried forward into the next leave year is the statutory minimum, which is limited to 20 days (pro-rata for part time employees), minus any leave that has been taken. The 20-day limit is inclusive of public holidays.

If an employee's employment is terminated before they have had the opportunity to take their annual leave entitlement due to sickness, they are entitled to a payment in lieu of the normal rate of pay.

14. Medical Suspension

When an employee is deemed unfit to work by their manager due to reasons of ill-health, the manager has the right to enforce a short period of absence (also known as Medical Suspension) for no longer than 7 days, in which time the member of staff will seek advice from their GP regarding their fitness to work. This will be communicated to the employee in writing.

This absence will be counted as suspension from duty with pay for medical reasons. Where the employee's GP advice conflicts with that of Occupational Health, the Trust will rely on its Occupational Health advice, ideally following discussions between the GP and Occupational Health wherever possible.

15. Stress at Work

A good level of mental health and wellbeing of staff is vital to ensure the safe and effective provision of healthcare services. The Trust therefore recognises its responsibility to identify and manage work related stress in the same way as any other work-related risk.

Management of stress in the workplace requires the committed collaborative involvement of the whole organisation. This includes prevention, recognition and early detection, and support and rehabilitation.

Employees should notify their manager of any situation within their workplace which they perceive as being stressful. Where it may be hard for someone to discuss their issues with their manager, the employee has the option of discussing these with a member of the Workforce and OD Department or a Staff Side Representative.

The Trust offers a number of benefits to support employees who are experiencing issues with their mental health and wellbeing including Occupational Health; please see Staff Benefits Intranet page.

16. Absence due to Diarrhoea and Vomiting (D&V)

Any employee who is off sick due to D&V must be excluded from attending work for a period of 48 hours after they have been symptom free. This applies if the employee is absent with one of the symptoms i.e., Diarrhoea or Vomiting.

This applies equally to all staff regardless of whether they work in a clinical or non-clinical area, as all staff may come into contact with other employees and/or service users. However, where appropriate, at the discretion of the manager, in some circumstances the employee may be able to work from home to cover this period.

All absences of D&V will be counted towards the monitoring of trigger points as per the Attendance Management Policy. The 48 hours infection control absence measures will not count as an additional trigger towards attendance monitoring.

17. Pregnancy Related Absence

Employees should notify the Trust as soon as possible that they are pregnant to ensure that a risk assessment can be undertaken, to identify any potential adjustments which may need to be made to their role and to address any health and safety concerns. An initial risk assessment will be undertaken, and these will be repeated at key stages (as required) throughout the duration of the pregnancy.

Where a period of absence is attributable to pregnancy, this will not contribute towards the trigger points however, any such sickness will be managed in accordance with this policy to facilitate a return to work as soon as possible with any necessary support or adjustment to duties during the pregnancy. This may lead to formal review meetings being held in line with this policy as a supportive measure.

If an employee is absent due to pregnancy related illness, they are still required to comply with the requirements of this policy and procedure in terms of reporting their absence to their line manager and submitting evidence of their incapacity where applicable.

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

If an employee is pregnant and suffers from non-pregnancy related sickness absence, these absences will be counted as a trigger in the normal way in accordance with this procedure.

18. Phased return to work

Employees that have been absent long term (an absence of 28 days or more) would ordinarily engage in discussions around a phased return to work to help with their reintroduction into the workplace.

During a period of reintroduction, if a reduction in hours/duties has been agreed, it is expected that as a minimum, employees will be required to fulfil 50% of their contractual hours / duties when they initially return to work.

It is expected that the employee will resume their normal contractual hours/duties within a four-week period.

Employees with long term debilitating illness may need longer to phase back to work. Occupational Health will advise on the duration of the phased return, which, depending on the condition may advance beyond 4 weeks.

The phased return to work programme will be developed by the manager, with support from Occupational Health and a Workforce Advisor, if required, and agreed in consultation with the employee and their representative.

During this period, employees will receive full basic pay and will be treated for pay purposes as if they are working their full contractual hours. For more details on phased return, please see Occupational Health Intranet page (link).

Guidance on phased return arrangements will be provided by Occupational Health, however the final decision on accepting any arrangements lies with the line manager, including whether to agree to a phased return over 4 weeks.

19. Secondary Employment during Sickness Absence

Employees must seek guidance initially from their Line Manager, regarding the prospect of continuing their secondary employment where they are unfit for work with the Trust. Working elsewhere whilst on paid sick leave from the Trust, without having obtained permission from the Trust beforehand, could be regarded as fraud, and/or a disciplinary matter and will be dealt with accordingly. Employees would normally be required to refrain from their secondary employment if they are on sick leave from the Trust and the secondary work is of:

- The same nature
- A similar nature; or
- Where attending their secondary employment would be detrimental to their recovery.

Not foregoing the above, if employees have two different types of work with the Trust enabling an employee to work in one post whilst absent in another, the employee will not be entitled to Statutory Sick pay but will receive any Occupational sick pay for the post they are sick within in line with HMRC regulations.

Payroll must be notified if an employee has two employments to avoid overpayments of sick entitlements or any other implications. If the second employment is with another employer, then, when absent from the Trust, statutory sick pay will be payable upon the production of the original Fit Note. If an employee's absence is being managed in accordance with this policy, a review of the secondary employment arrangements must be undertaken, and advice sought from Occupational Health as to whether the secondary employment should continue under the circumstances

20. Right to be accompanied

There is no right for the employee to be accompanied at any return to work and/or informal meeting/discussion between the manager and employee. There may be exceptional circumstances in which the employee may wish or need, to be supported at a meeting by their trade union representative or colleague. Where this is the case, this should be discussed in advance and all parties agreeable.

All employees have the right to be accompanied at all formal meetings by a work colleague or a member of their trade union/professional organisation or employee representative. It is the employee's responsibility to obtain accompaniment on any reasonable date set for any meeting/hearing.

The unavailability of an employee's preferred representative should not delay formal sickness meetings taking place, as long as a suitable alternative representative is available.

An employee can request to reschedule an informal or formal meeting once for up to seven calendar days from the original date of the meeting to allow more time for preparation and/or due to the availability of their companion.

If the employee is unwilling or unable to attend a rescheduled meeting, the appointed manager will use the available evidence to make their decision and confirm this in writing to the employee. This includes appointments with OH.

21. Training

The relevant Workforce Advisor will provide training and support on the application of this policy and its associated procedure.

22. Confidentiality

All cases dealt with under this policy will be conducted in the strictest confidence.

Confidentiality will be maintained in all aspects of record keeping and will be kept in line with GDPR.

This applies equally to all parties involved in the process.

23. Equality Impact Assessment

An Equality and Diversity Impact Assessment has been carried out on this document using the Trust's approved EIA (appendix 2).

This policy is regarded as equitable to all and as a result of its implementation no individual will suffer any form of discrimination, inequality, victimisation, harassment or bullying.

24. Dissemination and Implementation

This policy will be disseminated by the method described in the Document Control Policy. The implementation of this policy requires no additional financial resource.

The Workforce and OD Committee is responsible for formal approval and monitoring compliance with this policy. Following ratification, the policy will be disseminated to staff via the intranet.

The policy and procedure will be reviewed periodically by Workforce and OD and Trade Union representatives where applicable. Where review is necessary due to legislative change, this will happen sooner.

25. Monitoring

Monitoring of sickness absence will be carried out routinely by the Workforce and Employee Relations Team.

Part 2 - Trust Managing Attendance Procedure

If the employee has informed you they have been diagnosed with a terminal illness, you should refer to section 8.

1. Return to work meeting

The return-to-work meeting is an important element in the management of sickness absence, and it is imperative that it is undertaken consistently and appropriately after every period of absence. It is strongly recommended that the return-to-work meeting be conducted on the first day of return or if that is not possible, as early as possible after the employee's return. It is the responsibility, and in the interests of both parties, to ensure that this meeting takes place within 7 calendar days of the return date.

Managers will hold return to work meetings when the employee returns from any period of absence. They will use these meetings to:

- help identify absence problems at an early stage
- provide an opportunity for managers to discuss any underlying issues
- consider any relevant adjustments they can make to support the employee

The manager will monitor absence levels and discuss these with the employee, they will identify when the employee has reached, or are close to reaching, a trigger point.

When the employee returns to work, it does not always mean that their health and wellbeing has entirely improved. A return-to-work meeting is an opportunity to discuss these matters with their manager. The manager will try to provide any appropriate support for when the employee returns.

It is recommended to utilise technology, such as Microsoft Teams, to facilitate a timely return to work interview between the manager and employee. If this is not possible, initial conversations via telephone may be conducted, where a face-to-face discussion may not be viable.

A return-to-work form will need to be completed by the manager and logged on ESR.

It is expected return to work interviews will take place after every episode of sickness absence, whether it be absence of just a few hours, a few days or longer term.

Return to Work Interview compliance will be reported on the Workforce Scorecard which reports into the Workforce & OD committee and is shared monthly with Managers and Executive Directors to ensure compliance

2. Short Term Absence / Episodes of absence

Monitoring attendance is intended to make sure that all employees are treated fairly and consistently. Trigger levels are a tool to assist managers in keeping track of the frequency of an employee's absences and to highlight at the earliest stage when management intervention is needed. If the line manager is concerned about the level of an employee's attendance or they have reached one of the trigger points outlined below the matter will be addressed as follows.

The line manager will hold a meeting with the employee if their attendance record falls into one of the following categories:

- 4 periods of sickness absence in any 12-month rolling period or
- 15 or more days within a total of 12 rolling months (pro-rata for part time employees), or

Any other patterns of sickness which are cause for concern.

Consideration will be given to staff with a disability at any stage of the informal or formal procedure to make a request for a reasonable adjustment and this will be considered.

3. Monitoring and Reviewing Absence: Long Term Absence

If an employee has a continued absence which is for more than 28 calendar days it will be considered as a Long Term Absence.

The line manager will arrange a well-being meeting to discuss;

- Additional support the Trust may be able to provide.
- The possibility of returning to work.
- Help and support to facilitate a return to work.
- Departmental / Trust communications to keep the employee included with any updates or changes which may have taken place.

Wellbeing Meetings will be held on a regular basis (e.g., every month). Employees have the right to be represented by an accredited Trade Union representative or workplace colleague at the meeting. Once an employee has been absent for 12 weeks, a W&OD representative will be in attendance.

It is important that employees attend both Wellbeing Meetings and Occupational Health appointments, as failure to do so could result in the withdrawal of Occupational Sick Pay.

If an employee remains absent for a prolonged period, the Trust will consider with the advice and support from Occupational Health in relation to the following;

- The nature of their illness.
- The likely prognosis for the recovery and/or re-occurrence.
- The employee's absence record, including spaces between absences.
- Any special circumstances.
- Whether additional support or adjustments to the work place and/or role would help facilitate a return to work.
- If an employee remains absent for a prolonged period and they require additional support in the form of an extension beyond the normal sick pay arrangements. This can be applied for by the employee. The decision of all applications will be assessed fairly and equitably and will be discretionary and are not a contractual right. Contractual provisions are those explained within section 14 of Agenda for Change.
- If after considering all the above the Trust feels that redeployment or termination of employment is necessary, the employee will be invited to a Stage 3 Formal Attendance Review Hearing (Capability) as outlined below.

4. Informal Review Meeting

The purpose of this meeting is to:

- Examine and confirm the recorded absences.
- Identify any underlying reasons for the absences.
- To agree any support that may be required. This may include a referral to Occupational Health.
- To agree an action plan to support improved attendance.

The line manager will write to the employee and confirm what has been discussed.

If the employee has further absence during the following 12 months, the line manager will review the employee's absence levels and if this is over Trust target then they will proceed to the first formal stage (stage 1 formal attendance review meeting).

5. Formal Attendance Review Meetings

Employees have the right to be represented by an accredited Trade Union representative or workplace colleague at any stage of the formal process.

Stage 1 Formal Attendance Review Meeting

This meeting will follow the same format as the informal attendance review meeting. Where appropriate and dependant on the facts of the case, the discussion will include consideration of any reasonable adjustments that can be made to improve attendance. Employees may be asked to attend a medical assessment with Occupational Health.

As an outcome of this meeting the employee may be issued with a first written warning. This will remain live for a period of 12 months from the date the employee returned to work following the most recent episode of sickness absence.

If employees have further absence during the 12-month period, the line manager will review the employee's absence levels and if this is above the Trust target then they will proceed to the second formal stage (stage 2 formal attendance review meeting).

The manager will write to the employee detailing the content and outcome of the meeting and provide details of their right of appeal. Any appeal should be sent to the Deputy Director of Workforce and OD as detailed within the outcome letter from the attendance review meeting.

Stage 2 Formal Attendance Review Meeting

The Stage 2 Formal Attendance Review Meeting will be held with a more Senior Manager and a Workforce and OD representative and will follow the same format as a Stage 1 attendance review meeting. Where appropriate and dependant on the facts of the case the discussion will include consideration of any reasonable adjustments that may improve attendance.

As an outcome of this meeting the employee may be issued with a final written warning. This will remain live for a period of 12 months from the date the employee returned to work following the most recent episode of sickness absence.

If employees have further absence during the 12-month period the line manager will review the employee's absence levels and if this is above the Trust target then they will move to the third formal stage (stage 3 formal attendance review hearing), where their continued employment with the Trust will be considered.

The manager will write to the employee detailing the content and outcome of the meeting and provide details of their right of appeal. Any appeal should be sent to the Deputy Director of Workforce and OD as detailed within the outcome letter from the attendance review meeting.

Stage 3 Formal Attendance Review Hearing

Employees will be given 7 days' notice of the hearing in writing. The purpose of the hearing will be to consider the employee's absence record and whether they are capable of maintaining reasonable attendance in the future.

The hearing manager (8B or above) will consider all the information and facts regarding the absence(s), the opinion of Occupational Health and the support the Trust have provided to the

employee. All the facts of the case and possible outcomes will be fully considered in a fair and unbiased manner. Where appropriate and dependant on the facts of the case the discussion will include consideration of any reasonable adjustments that can be made to sustain attendance.

It is possible that an employee may be dismissed at this stage of the process if they are unable to maintain reasonable attendance.

In the event of an employee being dismissed they will be paid in lieu of their contractual notice as well as outstanding annual leave accrued up to the last date of employment. All benefits under the contract will come to an end on the date of termination. The employee will be notified of the outcome of the hearing in writing within 7 working days and provide details of their right of appeal. Any appeal should be sent to the Deputy Director of Workforce and OD as detailed within the outcome letter from the attendance review meeting.

6. Stage 3 Formal Attendance Review Hearing (capability long term)

If the employee has informed you they have been diagnosed with a terminal illness, you should refer to section 8.

Employees will be given 7 days' notice of the hearing in writing. The purpose of the hearing will be to consider the employee's absence record and whether they are capable of maintaining reasonable attendance in the future.

The hearing manager (8B or above) will consider all the information and facts regarding the absence, the opinion of Occupational Health and the support the Trust have provided to the employee. All of the facts of the case and possible outcomes will be fully considered in a fair and unbiased manner. Where appropriate and dependant on the facts of the case the discussion will include consideration of any reasonable adjustments that can be made to facilitate a return to work and to maintain attendance.

It is possible that an employee may be dismissed at this stage of the process on the grounds that they are not capable of performing their role on the grounds of ill-health.

In cases where the employee has applied for III Health retirement and/or if they agree that termination of employment is appropriate, they, or their representative, can submit their request in writing for consideration of termination of employment on the grounds of ill health without their attendance at a Stage 3 Attendance Review Hearing

Where the employee is suffering from a terminal illness there are a variety of options that can be considered by the line manager and/or employee. The Trust would aim, as far as possible, to give the employee's interest immediate attention and would try to provide the most financially beneficial result for the employee and/or his/her relatives.

Special pension arrangements are available to NHS Pension members who are terminally ill. Line managers should liaise with Workforce and OD or the Trust's Payroll Department for guidance in individual cases. An Ill-Health retirement application should be made immediately if terminal illness is confirmed.

In the event of an employee being dismissed, they will be paid in lieu of their contractual notice as well as outstanding annual leave accrued up to the last date of employment. All benefits under the contract will come to an end on the date of termination. The employee will be notified of the outcome of the hearing in writing within 7 working days and provide details of their right of appeal. Any appeal should be sent to the Deputy Director of Workforce and OD as detailed within the outcome letter from the attendance review meeting.

7. Appeals

Any employee has the right of appeal against any Formal Written Warning sanction or Dismissal. Appeals against dismissal will be heard by a panel including an Executive Director or a Deputy Director, supported by a senior member of W&OD.

An appeal must be made in writing within 10 working days of receipt of the letter detailing the disciplinary outcome and must include the grounds upon which the appeal is made. The Chair of the disciplinary panel will respond to the grounds of appeal in writing and provide copies to the appeal panel and employee, ensuring reasonable time for all parties to review prior to the hearing.

Appeal Hearing

The purpose of the appeal hearing is to consider the decision made by the Chair of the previous panel. An appeal hearing is not a re-hearing of the original case. The member of staff must submit their appeal in writing within 10 working days of receipt of the outcome letter. This letter must clearly state the grounds upon which the appeal is based.

The date of the appeal will be set within 28 calendar days of receipt of the letter of appeal, where possible and practical and will be heard at the earliest possible convenience.

The member of staff has the right to appear personally at the appeal hearing either alone or accompanied by a Trade Union Representative or a Work Colleague.

If the member of staff or their representative fails to attend the appeal hearing the appeal will be considered in their absence except where an adjournment is agreed by the chair of the panel.

In all cases the manager hearing the appeal must not have been directly involved in taking the action, which is being appealed against.

The Chair of the previous panel will prepare an Appeal Pack which should include the following:

- The letter of appeal.
- The outcome letter from the previous hearing.
- Notes from the original hearing.
- Key evidence that the manager feels is applicable to support the decision made and in response to the grounds of appeal

This pack will be provided to the appeal panel members and the member of staff as soon as possible, but no later than 48 hours before the appeal hearing.

8. Unauthorised Absence:

Unauthorised absence applies to all employees if they fail to;

- comply with the Trust's attendance management reporting procedure,
- attend work,
- attend work for any other reason without authorisation.

If an employee is absent from work without good cause and/or fails to notify the Trust of their absence, this may be dealt with formally and may result in disciplinary action.

Action on first day of unauthorised absence

On the first day of the employee's unauthorised absence, the line manager will attempt to contact them, making a note of the means used (telephone or email) and keeping a record of the time. If the employee does not answer the telephone, the manager will attempt to leave a voicemail

message asking them to return the call. If the manager is unable to contact the employee, they may attempt to contact the employee's next of kin or listed emergency contact. The line manager must then inform the Payroll Department that pay is to be withheld until further notice.

Action on second day of unauthorised absence

On the second day of the employee's unauthorised absence, if the manager has again been unable to contact the employee and or the employee's next of kin or emergency contact, the manager will write to the employee detailing their absence and the attempts that have been made to contact them. The letter will state that no satisfactory explanation for the absence has been received, their pay has been withheld and it is required that the employee contact the manager as soon as possible, but no later than three days after the date of the letter. The letter will advise the employee that, if they fail to make contact by the given deadline, the Trust will invoke the disciplinary procedure.

Further action after the deadline

If, following the deadline, the employee has still not contacted the manager; the manager will send the employee a letter inviting them to attend a disciplinary hearing to explain their unauthorised absence. The letter should advise the employee that the lack of an adequate explanation may result in formal action under the Trust's Disciplinary Policy.

Disciplinary action as a result of unauthorised absence

If the manager contacts the employee and/or the employee returns to work, the manager should conduct an immediate investigation into the reasons for their absence and their lack of contact with the Trust.

Pay will be reinstated from the employee's return to work date.

If the manager is satisfied with the explanation for the employee's absence and lack of contact with the Trust, the manager can conduct a return-to-work interview and document the conversation as a recorded conversation.

If the employee is unable to provide a satisfactory explanation for their unauthorised absence and lack of contact with the Trust, the manager may invoke the Trust's Disciplinary Policy.

9. Staff diagnosed with a Terminal Illness

A. Introduction

Sadly, it is inevitable some employees during their employment at the Trust will be diagnosed with a terminal illness. That person will undoubtedly face a time of emotional stress, fear and uncertainty. These principles and steps are intended to ensure the person feels they are treated with dignity, respect and compassion and are supported to make their own choices regarding their employment.

B. Definition of a terminal illness for the purposes of this policy

A terminal illness is a condition that is life limiting, cannot be cured or adequately treated and there is a reasonable expectation that the person will die within a relatively short period of time.

Marie Curie campaigned successfully to have the definition of terminal illness extended to 12 months life expectancy. As a result, in the UK someone must have twelve months or less to live to claim fast track access to a number of benefits at the highest rate under the Special Rules for Terminal Illness in the UK. It is therefore deemed reasonable for that definition to be adopted for the purposes of this policy.

C. Principles

The principles the Trust have pledged to uphold are as follows and in accordance with the TUC Dying to Work Charter https://www.dyingtowork.co.uk/wp-content/uploads/2017/09/Example-Charter.pdf

- We recognise that terminal illness requires support and understanding and not additional and avoidable stress and worry.
- Terminally ill employees will be secure in the knowledge that we will support them following their diagnosis and we recognise that, safe and reasonable work can help maintain dignity, offer a valuable distraction and can be therapeutic in itself.
- We will provide our employees with the security of work, peace of mind and the right to choose the best course of action for themselves and their families which helps them through this challenging period with dignity and without undue financial loss.
- We support the TUC's Dying to Work campaign so that all employees battling terminal illness have adequate employment protection and have their death in service benefits protected for the loved ones they leave behind.

D. The Process

Where an employee has notified the manager of a terminal illness as described above, the process found in appendix 1 should be followed. The process intends to ensure;

- Initial line manager employee conversation(s) provide the employee with the necessary reassurances, information, advice, support and positively encourage consent to seek occupational health advice and support. Ensure the employee is aware they will not be subjected to any procedure that places their employment at risk against their wishes. See the 'Notification of a Terminal Illness' guidance available on the intranet.
- Colleagues in the team affected are supported, if it is the desire of the employee for colleagues to be aware.
- Empower and support the employee to make their own choices regarding their employment depending on their individual circumstances and desires. This can include;

Remain employed at work in current role

Remain employed at work in an alternative role

Remain employed not at work

Ill Health Retirement (at the request of the employee)

Termination of Employment on the Grounds of III-Health (at the request of the employee)

Voluntarily Leave Work (Resignation)

To support the employee to make their own choice and remove financial barriers, irrespective of the terminally ill staff members length of service, the Trust will provide occupational sick pay, subject to the same terms and conditions, as equivalent to a long serving staff member (i.e. five completed years of service).

•	Bereavement Support and Workshops: Occupational Health provide any team affected by the bereavement of a colleague with a tailored support plan. See the 'Support from Occupational Health Following a Bereavement Guidance' document which can be found on the intranet for more information and other resources and advice available.

Appendix 1: Terminal Illness Process

A. Notification of a Terminal Diagnosis

Step 1: In most instances an employee will first inform their line manager they have been diagnosed with a terminal illness. This can potentially be a distressing conversation for both.

All staff have access to counsellors through occupational health. This is a confidential service. All counsellors are trained in all aspects of trauma counselling and are the first point of call for trust staff suffering mental ill-health.

As a line manager your first step should be to notify the HR Operations Team. Your Workforce Advisor will be able to provide you with advice and notify the Occupational Health Manager, preferably verbally, as soon as is reasonably possible. This is to ensure this case is speedily dealt with as this does not require a referral to be made before support is given.

- The Employee will be assigned a senior member of the Occupational Health team as a dedicated case handler, typically this will be the Occupational Health Manager. This allows for consistent employee support, senior clinical input and fast tracked support.
- The Line Manager will be assigned a senior member of the Occupational Health Team We appreciate this can also be a distressing time for the line manager. At any time the line manager is able to access the dedicated case for support and be directed to resources and support available.
- It is important Occupational Health support is sought as soon as is reasonably possible. Occupational health services have a vital role to play in supporting staff through a terminal illness and, crucially, in helping line managers perform their duties in a compassionate and safe manner. Occupational Health are also important to support the choices the employee makes, including processes which could be time sensitive such as ill-health retirement applications.

The Occupational Health team and the assigned dedicated case handler are the best point of contact for counselling support for the employee, line manager and any affected colleagues. They are able to provide consistent, personalised and local support. Any staff member who is having difficulties out of the Occupational Health Team hours can also access 24/7 our confidential Employee Assistance Programme 0330 380 0658 for fully qualified counsellors and support specialists.

Step 2: Holding the initial line manager – employee conversation(s);

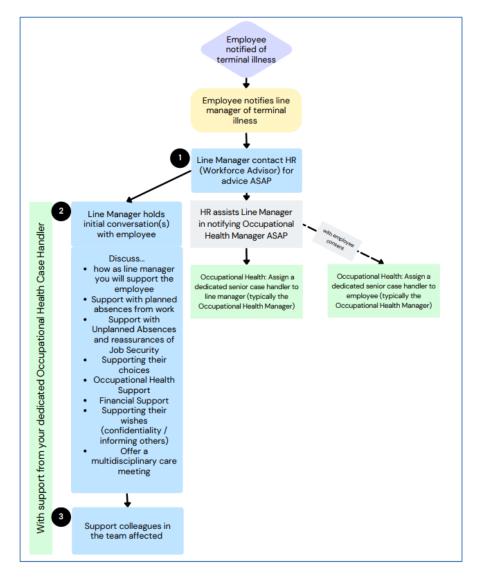
You should talk through the 'Notification of a Terminal Illness Guidance' with the staff member available on the intranet. This guide helps both manager and employee through the conversation, information and the support available.

It is important the line manager is aware every person and situation can be unique. The employee may feel any one or a mixture of emotions e.g., shock, fear, anger, resentment, denial, acceptance, sadness, happiness, frustration, relief or loneliness. Those emotions can also change over time. The employee may not know how they feel at this stage.

It is not possible to predict how that first discussion will take place. However, it is important to provide reassurances to the employee from the outset to remove any avoidable additional barriers, stressors or worries at such a difficult time.

Step 3: Support colleagues in the team affected

If the employee consents to colleagues being informed, this news can be difficult and distressing for colleagues who are aware of the situation. The manager should keep in regular touch with the team, how they are feeling about the news. If any colleague is finding the situation difficult for any reason, the line manager should ensure they are aware how they can access our Occupational Health Team for counselling support. The Team can also direct you to other resources and support available to you. Whilst our Occupational Health Team are best placed to provide support to our employees, the team can also access 24/7 our confidential Employee Assistance Programme 0330 380 0658 for fully qualified counsellors and support specialists.



B. Employee Choices

The persons choice may change over time and as the persons situation changes.

(i) Remain at work in current role

If an employee chooses to stay at work after diagnosis, in the first instance all efforts will be made to enable them to stay in their own job.

Regular Keeping in Touch; It is important that line managers engage in regular supportive
welfare discussions with the employee with regard to their health and wellbeing whilst in
work.

 Reasonable Adjustments to existing role: All reasonable and practicable adjustments should be explored with the employee and Occupational Health. The staff members GP and/or specialist may be contacted for further information.

It is understandable for line managers to be concerned for the health and safety of the employee remaining in work, however in some cases the condition may not in the immediate future prevent an employee from attending work and may simply require reasonable adjustments to their role / working hours / working pattern / environment / allowances to expectations that would accommodate the persons health circumstances. Occupational Health advice should be sought regarding reasonable adjustments.

Regular Review of Reasonable adjustments

The line manager should regularly review the reasonable adjustments in place to ensure they are successful in allowing the individual to remain at work safely and the adjustments remain practicable and reasonable to provide.

(ii) Remain at work in an alternative role (redeployment)

Despite all parties' best efforts, the situation maybe that no reasonable adjustments exist and/or reasonable adjustments have been provided but were unsuccessful in facilitating the individual to remain, and safely, at work in their existing role.

In this event the Trust are committed to finding a suitable alternative role (vacancy) or suitable alternative work (no vacancy is required but where suitable work is available) that would accommodate the persons circumstances and allow them to remain comfortable and safely at work.

This involves exploring a current vacancy and/or exploring alternative work that may not be a part of a current vacancy but is available and would allow the person to participate and remain in the workplace. This maybe with or without reasonable adjustments.

Any such redeployment would be subject to a review after 6 months, or sooner where advised by Occupational Health or following a change to the persons health circumstances or where difficulties in the role are experienced by the employee. The possible outcomes of that review are;

- **continue** with the redeployment
- make reasonable adjustments to accommodate the persons health circumstances
- **(re) refer to occupational health** for further information regarding reasonable adjustments to accommodate the persons health circumstances.
- cessation of the redeployment if it is felt no longer practicable to provide that role / work and/or the reasonable adjustments available were deemed unsuccessful in allowing the person to remain, and safely, at work.

In the event no reasonable adjustments and/or alternative work are available, or adjustments were unsuccessful

Despite the best efforts of the line manager, employee, and with the support of Occupational Health and the Trust, a situation might develop that the person wishes to remain at work but no reasonable adjustments exist, and no alternative work / role can be found, that would allow the person to be capable and able to participate and remain in the workplace.

In this event, the employee would be considered as being absent from work due to sickness absence (incapacity). If the employee still wishes to remain at work, the line manager and Trust will remain committed to exploring reasonable adjustments, alternative vacancies and/or alternative work available throughout any spell of absence due to a terminal illness.

(iii) Remain employed not at work and Death in Service

Some employees may have reason to believe remaining employed for benefits payable through death in service is the best option available to them, their family, loved ones and/or circumstances although do not wish to spend their remaining time at work.

The person may choose to remain employed and although be otherwise fit and able to attend work, be regarded as absent from work due to sickness absence for purposes of occupational sick pay under this policy.

This maybe because they wish to spend their time with friends, family or doing something they enjoy or for any personal choice.

Employees are encouraged to seek expert financial advice in considering the options available to them and obtain pension's estimates with regard to the benefits they may expect to receive if they take this option.

If Death in Service is still the employees wish, in accordance with the spirit of the policy, the Trust will support that decision. If the employee is a member of the NHS Pension, they are able to ask for help from their line manager or their Trade Union Representative to liaise with the NHS Pension Scheme to obtain such estimates.

(iv) III Health Retirement

An employee may from the outset of diagnosis of a terminal condition, or over time, choose to give up work to spend time with family, friends or simply spending their time on anything else they would like. Therefore, they may feel ill-health retirement is the best option available to them

Employees are encouraged to seek expert financial advice and should be encouraged to avoid any impulsive and/or ill-informed decisions by only making this decision when all other options have been considered.

If III Health Retirement is still the employees wish, in accordance with the spirit of the policy the Trust will support that decision. If the employee is a member of the NHS Pension, they are able to ask for help from their line manager or their Trade Union Representative to liaise with the NHS Pension Scheme to obtain such estimates.

If an employee is diagnosed with a terminal illness and the Independent Medical Advisor acting on behalf of Occupational Health indicates the life expectancy of the employee is less than 12 months, the employee will be provided with the option to commute their pension to a one-off lump-sum.

(v) Termination of Employment on the Grounds of III-Health

A fundamental principle of the policy is to provide our employees with certainty their employment is secure, and they will not be dismissed by the Trust because of a terminal illness as described in this policy against their wishes.

This provides security of work, peace of mind and the right to choose the best course of action for themselves and their families which helps them through this challenging period with dignity and without undue financial loss.

It is acknowledged that not all employees are members of the NHS Pension Scheme. If the employee are not members of the NHS Pension Scheme and they may not have options such as ill-health retirement financial benefits available to them

The employee may, in some individual situations, feel a termination of employment on the grounds of ill health, managed in a compassionate, respectful and dignified manner, is of financial benefit to access other streams of financial support.

Again, employees are encouraged to seek expert financial advice and should be encouraged to avoid any impulsive and/or ill-informed decisions by only making this decision when all other options have been considered.

If the employee still believes Termination on grounds of ill-health is in their best interests, in accordance with the spirit of the policy, the Trust will support that decision subject to statutory legislation and any relevant steps within the ill-health capability procedure. Any such process should be conducted in the most compassionate and sensitive manner.

(vi) Voluntarily Leave Work (Resignation)

The employee may, in some individual situations, wish to leave voluntarily through resignation.

Again, employees are encouraged to seek expert financial advice and should be encouraged to avoid any impulsive and/or ill-informed decisions by only making this decision when all other options have been considered. Given the support provided under the other options including occupational sick pay, typically the employee should be positively encouraged to reconsider resignation and make use of the other options available to them.

C. Bereavement Support and Workshops

Occupational Health and our Workforce Wellbeing Team provide support following the loss of a friend or work colleague.

There is no right or wrong way to feel when a friend dies. Everyone reacts differently. You may feel shocked, numb, or as if everything is unreal. Or you may feel relieved that they are now at peace. Experiencing the loss of someone close to us through death is an inevitable part of life but that does not make it any easier when we experience it, even if the death was expected. Most people find the help of family and friends is enough to support them through the experience of bereavement. However, sometimes it can be helpful to talk with people who have gone through a similar experience or with someone who is trained in supporting people who are bereaved.

Occupational Health will contact any team affected the bereavement of a colleague and offer a tailored support plan. See the 'Support from Occupational Health following a Bereavement Guidance' document which can be found on the intranet for more information and other resources and advice available.

Appendix 2: Document Control Sheet

This document control sheet, when presented to an approving committee must be completed in full

to provide assurance to the approving committee.

Document Type	Attendance Management Policy and Procedure		
Document Purpose	To ensure sickness absence is monitored and addressed in a supportive		
	and constructive manner.		
Consultation/ Peer Review:	Date:	Group/Individual	
List in right hand columns	EMT	March 2022	
consultation groups and dates	TCNC	March 2022, 19th June 2	23, and 10 th August
		2023.	
	EMT	29th August 2023	
Approving Committee:	EMT	Date of Approval:	29th August 2023
Ratified at:	Trust Board	Date of Ratification:	27 September 2023
Training Needs Analysis:		Financial Resource	
		Impact	
(Please indicate training			
required and the timescale for			
providing assurance to the			
approving committee that this has been delivered)			
Equality Impact Assessment	Yes [✓]	No []	N/A []
undertaken?	165 [1]	INO []	Rationale:
Publication and Dissemination	Intranet [✓]	Internet []	Staff Email []
Master version held by:	Author []	HealthAssure [✓]	Stan Eman []
master version field by:	Addioi []	i icaitii/ioouie [,]	
Implementation:	Describe implementation plans below - to be delivered by the author:		
implementation.	Bosonia implementation plans below to be delivered by the author.		
Monitoring and Compliance:			

Document Cha	Document Change History:			
Version Number / Name of procedural document this supersedes	Type of Change i.e., Review/Legislation	Date	Details of Change and approving group or Executive Lead (if done outside of the formal revision process)	
1.0	Review	Oct 2017	HR-003 Managing Sickness Absence Policy. Approved at EMT October 2017, ratified at Trust Board 27 November 2017	
1.0	Extension	Nov-20	Policy under review and confirmed fit for purpose- expiry date extended to April-2023.	
2.0	Review	March 2022	Policy title updated to Attendance Management Policy and Procedure, with complete review and major changes Approved at EMT 28 March-22 and ratified at Trust Board 27-Apr-22.	
2.1	Minor change	June 2023	Part 1, 5.1: To bring wording in-line with other WOD policies. Part 2, 5.6 To bring wording in-line with other WOD policies. Part 2, 2: change to the short-term absence management trigger of 'number of occasions' Pro-rata has been removed. This is to ensure part time employees are treated consistently with full time employees. Approved by Director sign off 16 June 2023	
3.0	Change	Sep 2023	Major amendments 1. Reference to separate process for terminally ill employees made at sections Part 1 (2), (6.1) (9) (10) Part 2 (6). 2. Added new section at Part 2 (8) 'Staff Diagnosed with a Terminal Illness. 3. Added new appendix (1) Notification of a terminal diagnosis. Provides managers and employees with a dedicated process and support.	

			Approved at EMT 29 August 2023 with Board ratification 27 September 2023
3.1	Minor amendment	Nov 2023	Minor change to remove the directing of appeals to the disciplinary appeal procedure. Added appeal procedure to this policy that mirrors what is already in place. (1) Adding wording "and provide details of their right of appeal. Any appeal should be sent to the Deputy Director of Workforce and OD as detailed within the outcome letter from the attendance review meeting." to Part 2 - Trust Managing Attendance Procedure (i) 5.Formal Attendance Review Meetings > Stage 3 Formal Attendance Review Hearing (ii) 6. Stage 3 Formal Attendance Review Hearing (capability long term) (2) Added new section 7: appeals Approved at Director sign-off (Karen Phillips – 03/11/23).

Appendix 3: Equality Impact Assessment (EIA) Toolkit

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

- 1. Document or Process or Service Name: Managing Sickness Absence Policy
- 2. EIA Reviewer (name, job title, base and contact details): **Donna Chambers,** Workforce Strategy, Policy, and Improvement Manager
- 3. Is it a Policy

Main Aims of the Document, Process or Service

This policy aims to promote the following objectives:

- The provision of high quality services to patients, and a high quality of working life for its employees
 recognising the need to create an environment that enables everyone to contribute fully through regular
 attendance at work.
- To ensure that all parties work together to facilitate a return to work as soon as possible following a period of sickness absence.
- To ensure that in all cases of employee ill-health, there will be a progressive and thorough review of the employee's circumstances, considering the need to maintain a service to the public, support to individuals and to comply with all employment and equality legislation.
- The right of all employees subject to this sickness and absence procedure to be treated fairly and equally and with dignity and respect.
- A proactive, consistent, and fair approach to managing sickness absence. To be effective it should be read in conjunction with the other relevant organisational policies and procedures.
- Good health through the development of proactive health initiatives that support staff to be well and stay well and improve their health and wellbeing.
- · Agreed and accepted procedures to facilitate the appropriate management of long and short term absences
- The utilisation of the Trust's Occupational Health services in order to support a timely return to good health, and ultimately return to work.

Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally, or unwittingly on the equality target groups contained in the pro forma

Equality Target Group 1. Age 2. Disability 3. Sex 4. Marriage/Civil Partnership 5. Pregnancy/Maternity 6. Race 7. Religion/Belief 8. Sexual Orientation 9. Gender reassignment	Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed? Equality Impact Score Low = Little or No evidence or concern (Green) Medium = some evidence or concern(Amber) High = significant evidence or concern (Red)	How have you arrived at the equality impact score? a) who have you consulted with? b) what have they said? c) what information or data have you used? d) where are the gaps in your analysis? e) how will your document/process or service promote equality and diversity good practice
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Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Age	Including specific ages and age groups: Older people Young people Children Early years	Low	There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.
Disability	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities: Sensory Physical Learning Mental Health (and including cancer, HIV, multiple sclerosis)	Medium	Staff with a long term disability could be adversely affected by the trigger point of 4 absences, or fifteen days. It is important that reasonable adjustments are in place to support staff with long term disabilities and where illness is expected to surpass 4 absences in a 12 month period that this is discussed between staff and manager in advance.
Sex	Men/Male Women/Female	Low	There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.

Marriage/Civil Partnership		Low	It is accepted that female staff can be more likely than male staff to be primary care givers of children or dependents and/or be part time employees. It is reassuring this is taken into account in the trigger system in a fair and inclusive manner (JM, 04.08.23) There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.
Pregnancy/ Maternity		Low	Pregnancy and Maternity are specifically addressed in the policy when linking absence to either and safeguards in place. Subsequently, there is no evidence that pregnancy or maternity is negatively affected by the implementation of this policy. It is reassuring to see a strong leave policy which provides a number of family leave, fertility, bereavement leave options that can avoid sickness absence for this group. (JM 04.08.23)
Race	Colour Nationality Ethnic/national origins	Low	There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.
Religion or Belief	All Religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.
Sexual Orientation	Lesbian Gay Men Bisexual	Low	There is no evidence that this protected characteristic is negatively affected by the implementation of this policy.
Gender re- assignment	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	Absence from work due to medical appointments related to gender reassignment is reasonable when possibilities outside of work hours have been exhausted. This is specifically highlighted in the policy and so there is no evidence that this is negatively affected by the implementation of this policy.

Summary

There is no evidence to suggest that the majority of the protected characteristic groups are negatively impacted by the implementation of this policy. Complications arising from pregnancy and/or maternity which lead to absence are addressed directly. The only protected characteristic which has the potential be worse off by the implementation of this policy are those disabled with a long term disability. It is conceivable that they could be adversely affected by the trigger point of 4 absences, or fifteen days. It is important that where reasonable adjustments are in place to support staff with long term disabilities that if a long term illness or disability is expected to surpass 4 absences in a 12 month period that this is discussed between staff and manager in advance. (JD 05.08.21)

It is reassuring to see a strong leave policy which provides a number of family leave, fertility, bereavement leave options that can avoid sickness absence following complications for this group. (JM 04.08.23)

It is reassuring to see the trigger system is proportionately applied and reasonable adjustments should be considered where an employee is more likely to need sickness absence away from work due to a disability. Consideration is given to part time employees in the trigger system which evidence suggests is more likely to be female staff, and the number of occasions of absence trigger is equal and consistent with a full time employee. (JM 04.08.23)

EIA Reviewer: Justin Marjoram Strategic HR Workforce Projects Lead	
Date completed: 4 August 2023 Signature Justin Marjoram	