

MANAGEMENT OF ATTENDANCE POLICY

April 2018

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POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by and Date	Date on Internet
DRAFT 0.1	NHS Vale of York CCG	Draft policy for CCG	Social Partnership Forum March 2017	
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1.2	NHS Vale of York CCG	Updates in regards to GDPR	SPF 10.01.18 CCG Executive 04.04.18	18 May 2018

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1 INTRODUCTION

- 1.1 NHS Vale of York Clinical Commissioning Group (the “CCG”) recognises the contribution of its employees and is committed to providing good working conditions and health and safety standards.
- 1.2 The overall purpose of the policy is to set out the CCG’s approach to the management of absence and attendance within the workplace. The policy and procedure will also set out guidance to staff and managers about their responsibilities in relation to Management of Attendance.
- 1.3 It is the responsibility of the CCG to protect the health and wellbeing of its employees and enable the best of its workforce; the Management of Attendance Policy is intending to contribute to delivering this objective.

2 POLICY STATEMENT

- 2.1 The Vale of York Clinical Commissioning Group aspires to the highest standards of corporate behaviour and responsibility. All Vale of York Clinical Commissioning Group staff are required to comply with this policy.

3 IMPACT ANALYSES

3.1 Equality

In applying this policy, the CCG will have due regard to 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, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

An Equality Impact Assessment is attached at Appendix 1. As a result of performing the analysis, it is evident that a risk of discrimination exists and this risk may be removed or reduced by implementing the actions detailed within the Action Planning section of this document.

3.2 Sustainability

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 2. At this stage, no impact has been identified on the policy or procedure.

4 SCOPE

- 4.1 This policy and procedure will apply to all employees within the CCG except for those employees currently within their probationary period, where the probationary policy should apply. If there is no probationary policy in place, managers should ensure that new employees have clear absence principles set and that their absence is reviewed regularly.
- 4.2 The CCG's policy and procedure for managing absence must be followed by all employees. It is the responsibility of every employee to report any absence and only in exceptional cases should this be carried out by someone else on their behalf.
- 4.3 If an employee knowingly gives any false information, or makes false statements about their sickness, it may be treated as misconduct and may result in disciplinary action being taken. In proven cases of gross misconduct it could lead to dismissal (e.g. absent on sick leave and working elsewhere).
- 4.4 Any employee who unreasonably fails to comply with the CCG's Management of Attendance policy and procedure may have their occupational sick pay withheld. Any decision to withhold sick pay must be made in conjunction with the Workforce Team. Advice may also be sought from Occupational Health .
- 4.5 The CCG has the right to dismiss employees whilst they are receiving sick pay entitlement. Any decision to dismiss on capability grounds will be subject to receipt of medical advice.
- 4.6 The CCG reserves the right to request a Doctor's Certificate for periods of absence of less than seven calendar days in cases of short-term persistent absence. Normally, however, this should follow an Occupational Health referral where there is no medical reason for continued short-term persistent absence. Furthermore, this option should only be used for a finite period and should be reviewed on a regular basis. Finally, should the employee incur a cost in obtaining a Doctor's certificate, then this will be reimbursed by the CCG.

5 POLICY PURPOSE / AIMS AND FAILURE TO COMPLY

- 5.1 This procedure 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 therefore this procedure gives an outline of the principles to be observed.
- 5.2 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 policy etc. 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.

Absence for planned elective medical treatment, which is for cosmetic reasons

alone, must be taken as annual leave and not sick leave. Where planned medical treatment has both a cosmetic and health improvement purpose, absence should be reported as sick leave.

- 5.3 Confidentiality will be maintained in all aspects of absence management and records will be kept in line with the Data Protection Act.
- 5.4 Managers will be fully trained in policies and procedures relating to absence. All new staff will be made aware of the policy during their induction.
- 5.5 The CCG recognises that everybody is sick or subject to emergencies from time to time; however regular attendance at work is a contractual requirement.
- 5.6 Short-term absenteeism refers to a series of illnesses, often unconnected, which result in frequent, short periods of absence. The appropriateness of referral to the CCG's Occupational Health Provider will be discussed between the employee, their line manager and a Workforce representative.
- 5.7 It is acknowledged that occasions do arise when people are away from work on a long-term basis as a result of chronic or acute ill health. Although each case will be dealt with on an individual basis this policy outlines certain principles that will always be observed.
- 5.8 In dealing with any sickness absence cases managers must be mindful of obligations that they and the CCG may have under the Equality Act 2010. In identifying whether or not an employee is covered by the Act, advice will be sought from appropriate medical professionals.
- 5.9 Advice should be taken from the Workforce Team at all formal stages of this procedure to ensure the consistent application throughout the CCG.
- 5.10 Employees may be accompanied by a trade union representative or workplace colleague in all formal discussions with management about their absence.
- 5.11 The CCG is committed to ensuring that all personal information is managed in accordance with current data protection legislation, professional codes of practice and records management and confidentiality guidance. More detailed information can be found in the CCG Data Protection and Confidentiality and related policies and procedures.

6 COMPLIANCE WITH STANDARDS

Reporting Absence

- 6.1 All employees must contact their line manager on the first day of absence as soon as is reasonably practicable or within half an hour of their normal starting time. The employee must make this call. The only exception is where it is clearly not possible for employees to ring personally, such as admission to hospital.
- 6.2 Employees must talk directly to their line manager. It is not acceptable to text, e-mail or leave messages with anybody else. This will establish an effective two-way

dialogue to take place and to elicit the information required as set out in 6.4 below. If the line manager is unavailable, then the employee should contact the alternative nominated manager, as confirmed by the line manager.

6.3 If an employee does not have a telephone at home alternative arrangements for reporting sickness must be made. If an employee fails to attend work and does not notify their manager of their absence then the employee's next of kin may be contacted.

6.4 When reporting absence employees must give the following information :

- the reason for the absence (if known);
- the expected length of absence (if known);
- whether a visit will be made to their GP, and if so, the date of the appointment.

Where possible the manager should be advised of any outstanding work that may require urgent attention during the period of absence. This will enable managers to better plan and allocate work.

6.5 In cases of continued absence, employees must contact their line manager regularly to provide them with up to date information. Should the absence continue then the employee and the manager must decide upon the frequency of further/continued contact and the form that this will take. It is not sufficient to provide fit notes as a means of maintaining contact. It should be noted that failure to maintain contact as per the agreement with the line manager, may result in the payment of occupational sick pay being delayed or withheld. Any decision to take disciplinary action or to withhold or delay payment of occupational sick pay must be made in conjunction with a Workforce Representative.

7 EVIDENCE OF INCAPACITY FOR WORK

7.1 For absences lasting seven calendar days or less, on the first day back at work, employees will be required to complete a Sickness Self-Certificate. (Appendix 5) This should include the reason for absence. The Certificate will be countersigned by a manager and subsequently will be kept in the employee's personal file.

7.2 If an absence exceeds seven calendar days, a doctor's fit note must be submitted to the line manager, no later than the tenth day of absence, covering the absence from the eighth day. The fit note is normally retained by the line manager and the absence recorded on the appropriate staff absence record form.

7.3 If an absence continues beyond the period covered by the initial fit note, further fit notes must be submitted to give continuous cover for the period of absence. On eventual return to work employees must complete the CCG's Sickness Self-Certificate in respect of the first seven days or less not covered by a doctor's fit note.

- 7.4 Failure to submit consecutive fit notes in a timely manner may be considered in breach of the Management of Attendance policy and may invoke the Disciplinary Procedure. Such periods of unauthorised absence could result in suspension of pay until the submission of a fit note (see 6.5 above).
- 7.5 If the doctor's fit note does not specify the period of absence covered, it will be taken as covering a period of seven calendar days only.
- 7.6 For reporting purposes, reports will show long-term absence as 28 calendar days or more.

8 STATEMENT OF FITNESS TO WORK (FIT NOTE)

- 8.1 The statement of fitness to work, known as the 'fit note' allows a doctor / GP to advise whether an employee is either :
- fit to work
 - not fit to work
 - may be fit to work (subject to conditions)
- 8.2 If the doctor/GP suggests that they 'May be fit to work' there are now a number of options open which may help to get the employee back to work :
- phased return to work
 - amended duties
 - altered hours
 - workplace adaptations
- 8.3 Any such recommendations should be discussed and agreed with the employee and line manager prior to commencement of work at a return to work meeting.
- 8.4 If the recommendations made by the doctor/GP on the fit note cannot be accommodated, the medical note should be used as though the doctor/GP had advised 'Not fit to Work' for the duration of the note. This means the employee does not need to return to their doctor until the expiry of the note.

9 EMPLOYEE OCCUPATIONAL SICK PAY ENTITLEMENTS

The amount of paid sickness leave entitlement depends on length of service, as outlined below :

During 1st year of service	One months' full pay and two months' half pay
During 2nd year of service	Two months' full pay and two months' half pay
During 3rd year of service	Four months' full pay and four months' half pay

During 4th and 5th years of service	Five months' full pay and five months' half pay
After 5th year of service	Six months' full pay and six months' half pay

- 9.2 The period during which sick pay is paid and the rate of sick pay for any period of absence is calculated by deducting from the employee's entitlement, on the first day of absence, the aggregate periods of paid sickness during the 12 months immediately preceding that day.
- 9.3 The definition of full pay will include regularly paid supplements, including any recruitment and retention premia. Sick pay is calculated on the basis of what the employee would have received had he/she been at work. This would be based on the previous three months at work or any other reference period that may be locally agreed.
- 9.4 Full pay is inclusive of any statutory benefits. Half pay plus statutory sick pay will not exceed full pay.
- 9.5 For the purpose of calculating entitlement to sick pay, a previous period or periods of NHS service will be counted towards the employee's entitlement to sick leave with pay where there has been a break, or breaks, in service of 12 months or less.
- 9.6 In the event of employment coming to an end, entitlement to sick pay ceases from the last day of employment.

10 OCCUPATIONAL SICK PAY CONDITIONS

- 10.1 The conditions for sick pay are financial provisions indicating an entitlement to occupational sick pay and in no way indicate the amount of absence to which an employee is entitled.
- 10.2 If sick pay entitlement is exhausted before a Final Review Meeting takes place, and where the failure to undertake the Final Review is due to delay by the CCG, sick pay will be reinstated at half pay, after 12 months of continuous absence, as follows:
- Employees with more than five years reckonable service – sick pay will be reinstated if the entitlement is exhausted before the Final Review meeting takes place.
 - Employees with less than five years reckonable service – sick pay will be reinstated if the entitlement is exhausted and a Final Review meeting does not take place within 12 months of the start of their sickness absence.

Reinstatement of sick pay in these circumstances will continue until the Final Review meeting takes place. It is not retrospective for any period of zero pay in the preceding 12 months of service.

10.3 The period of full or half sick pay detailed in 9.1 may be extended :

- where there is the expectation of a return to work in the short term and an extension would materially support a return and/or assist recovery. Particular consideration will be given to those staff without full sick pay entitlements.
- where it is considered that individual circumstances mean that an extension will relieve anxiety and / or assist recovery.

When an extension to sick pay is being considered for any reason this must first be discussed with a Workforce Manager.

10.4 Sick pay is not normally payable for an absence caused by an accident due to active participation in sport as a profession, or where contributable negligence is proved.

10.5 An employee who is absent as a result of an accident is not entitled to sick pay if damages are received from a third party. Under these circumstances the employee will be advanced a sum not exceeding the amount of sick pay payable under this scheme providing the employee repays the full amount of sickness allowance when damages are received. Once received, the absence will not be taken into account for the purposes of the scale set out in 9.1 above.

10.6 Any member of staff found to be working for another employer whilst on sick leave from the CCG will be subject to disciplinary investigation which could result in dismissal and may also be liable for prosecution and civil recovery proceedings. If a manager is aware that an employee is working for another employer whilst on sick leave from the CCG the matter should be referred to the CCG's Local Counter Fraud Specialist.

11 GP, DENTAL AND HOSPITAL APPOINTMENTS

11.1 Wherever possible employees should arrange appointments outside their normal working hours. Where this is not possible, appointments planned in advance should ideally be at either the beginning or end of the working day using flexi time, lieu time etc.

12 SICKNESS DURING ANNUAL LEAVE

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

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

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

- 12.3 If an employee is absent on sick leave and has pre-booked annual leave then they must notify their manager as soon as possible of the nature of the leave, otherwise it will be assumed that the annual leave is being taken. If the employee intended to spend time at their normal place of residency then the leave may be credited back upon receipt of appropriate medical statements/Doctors notes.
- 12.4 If the employee intends to spend more than one night away from their normal place of residency whether it be overseas or in the UK, then the employee must provide a written statement from a medical practitioner advising that the holiday would be beneficial to their condition or recovery, and in no way would aggravate or cause detriment to the illness/injury. Where necessary, the CCG will reimburse the cost of such letters. In addition, the CCG may also choose to obtain a medical opinion from the Occupational Health Provider. If the leave is supported by a medical practitioner then the employee will have the option to continue with sick leave and have the annual leave credited back or take the time as annual leave, in which case sick pay, occupational and/or statutory as appropriate, will cease. If an employee is physically unable to return to work after a holiday they must submit a fit note which covers them from the day on which they were expected to return to work. Should the employee take the leave as sickness, then entitlements to sick pay both occupational and statutory will be in line with the normal eligibility rules.
- 12.5 Where the request to continue with a pre-booked holiday is not supported by a medical practitioner, then annual leave should be taken.
- 12.6 Employees will not be entitled to an additional day off if they are sick on a statutory holiday.

13 SHORT TERM ABSENCE

- 13.1 The CCG operates an accurate method of recording and monitoring levels of absence. If the amount of time being taken off for illness is giving cause for concern, managers will discuss this with employees at the return to work meeting and provide them with a record of all absences from work. The employee will have the opportunity to explain any personal or work-related issues which may be a factor in the absence.
- 13.2 To ensure the consistency with the application of Management of Attendance Policy, trigger points are used to monitor short term sickness and long term sickness. The triggers for short term absence are :
- three occasions of absence, or
 - eight days absence in any rolling six month period
- 13.3 Where an employee reaches a trigger, an informal attendance monitoring meeting will be held with the employee. The purpose of the meeting is to provide support and assistance to overcome any short – term issues, patterns or problems which are identified. At this stage an action plan of improvement will be set which will include targets. Failure to meet these targets set at each stage of the procedure (in accordance with Appendix 3 ‘Stages of attendance management and improvement notification’) will result in progression to the next stage of the procedure. In

applying this procedure, consideration should be given to any Occupational Health advice received, particularly in relation to any underlying or on-going medical conditions.

- 13.4 Where an employee fails to maintain regular attendance deemed acceptable for the CCG, they will progress through the stages of the procedure (see Appendix 3). This process may, eventually result in dismissal if the absence continues.
- 13.5 At any stage during this process, it may be appropriate to seek advice from a CCG appointed medical practitioner.
- 13.6 Employees are entitled to have a staff side representative or CCG work colleague not acting in a professional or legal capacity to accompany them to any of the formal stages of this procedure if they so wish.
- 13.7 If at any stage the employee achieves a better attendance record than is required by the triggers set at Appendix 3 (or agreed otherwise), no action will be taken. The manager will continue to monitor the level of attendance or pattern of absence.

14 LONG TERM ABSENCE

- 14.1 Long-term absence is classed as any period of continuous absence of four weeks duration or more or, for absence which is not continuous e.g. two weeks' absence followed by a further two week absence.
- 14.2 In all cases of long term absence, Occupational Health advice must be sought. A manager should also refer an employee to Occupational Health earlier when it is clear that the length of absence is likely to be four weeks or more. Also any references to ill health due to stress at work should be referred to Occupational Health immediately.
- 14.3 In cases of long-term absence line managers must arrange to conduct regular review meetings to discuss possible courses of action should the absence continue. These may include rehabilitation and return to work requirements, redeployment, ill-health retirement etc. The meetings should be recorded and notes sent to the employee concerned. Employees may be accompanied by a trade union representative or a CCG work colleague not acting in a professional or legal capacity. The line manager may also be accompanied by a Workforce Representative. The frequency of such meetings will depend upon the circumstances of the individual case.
- 14.4 These meetings should be held at mutually convenient locations, with due regard made to the employee's circumstances. If an employee is too ill to travel, the line manager may arrange to conduct a home visit at a mutually convenient time, if the employee agrees. However it should be noted that, as part of the return to work process, it may be more relevant to hold the meetings at a business location, or a suitable alternative venue.
- 14.5 Review and decision dates should be arranged taking into consideration the employee's sick pay entitlements and there must be a review meeting before their sick pay ends.

14.6 Employees who fail to attend sickness review meetings may be subject to the various sanctions within this policy.

15 ON-GOING MEDICAL CONDITIONS

15.1 In some situations an employee may have on-going health related problems which may impact upon their ability to perform the duties of their role. The employee may still be in work, or have long term or short term absence. This will be addressed by any or all of the following three steps :

- **Medical advice** - support and guidance to help determine the best course of action for the employee
- **Reasonable Adjustments / redeployment** – consider what adjustments can be made to role including hours or lighter duties. Identify if there is any suitable alternative role the employee could undertake either on a permanent basis or Interim basis. (refer to redeployment policy for additional information)
- **Final Review Panel** - if the employee's substantive post is not suitable due to their ill health and the above stages have been unsuccessful in supporting the employee to resume full duties, a final review hearing should be arranged.

Before any decision to terminate an employee on medical grounds the following must have been meaningfully considered :

- Rehabilitation
- Phased return
- A return to work with or without adjustments
- Redeployment with or without adjustments.

16 RETURN TO WORK INTERVIEW

16.1 On their return to work, employees will be required to attend a return to work interview with their line manager to discuss their absence. If the employee has been absent with a highly sensitive condition he/she may ask for a manager of the same gender to manage the absence. The meeting is separate to an absence review meeting and will take place at an agreed time and in a private place.

16.2 The discussion should allow for an exchange of information and be as frank and as open as possible as this will prevent any misunderstandings concerning the nature of the absence. Managers should also take this opportunity to discuss any patterns or trends of absence that may emerge.

16.3 This will also enable the line manager to discuss any assistance, help, counseling or action on work-related issues that may be provided to enable an employee to return to work or prevent further absence occurring.

16. Notes and outcome of the meeting will be agreed and retained on file.

17 OCCUPATIONAL HEALTH

- 17.1 In cases of long-term absence, managers are expected to exercise discretion in referring such absences to Occupational Health and the following principles should be applied :
- Occupational Health can be consulted for advice when the likelihood of a return to work or cause of absence is not known.
 - A member of staff should be referred to Occupational Health at an early stage in the absence if it is considered that a referral may benefit the employee or the CCG.
 - Occupational Health is available to give both general and specific advice on the fitness of an employee for work, adjustments to the workplace where appropriate and likely return dates.
 - An employee may request an Occupational Health referral, via their manager, for advice and support on the best way of seeking a return to work.
- 17.2 Where there is doubt regarding an employee's ability to return to work on a permanent basis advice must be sought from Occupational Health. Employees may be eligible to ill-health retirement benefits if they have two years continuous membership of the NHS Pension Scheme. Ill-health retirement should be discussed with the employee and the Workforce Team during the review meetings. Further information is available in the Retirement Policy.
- 17.3 Employees must make themselves available to attend Occupational Health referrals as a contractual obligation (this may include home visits by an Occupational Health representative or the attendance at an Occupational Health Office). However, due regard should be made to the accessibility of the location in relation to the nature of absence. Following the referral, Occupational Health will then provide a written report to management, a copy of which will also be sent to the employee. In most cases management will meet with the employee to discuss the content of the report.
- 17.4 In some cases it may be more appropriate for Occupational Health to contact a third party for a medical opinion e.g. GP, Consultant etc. In such cases consent must be obtained from the employee concerned before accessing any third party medical records. In these cases, any information provided by a third party is always disclosed to Occupational Health and not to management. Occupational Health will then provide management with a written summary of information provided which is pertinent to the employee's on-going employment. Employee consent is not required for the release of this report.
- 17.5 Occupational Health may recommend appropriate treatment, such as physiotherapy or cognitive behavioural therapy, in supporting staff to remain in work, or return to work, at the earliest opportunity.
- 17.6 If an employee has concerns about their mental or physical health and its impact on their ability to carry out their employment, they are encouraged to seek the advice and support of Occupational Health by self-referral.

18 DISABILITY RELATED ABSENCE AND REASONABLE ADJUSTMENTS

- 18.1 If an employee is disabled or becomes disabled during their employment, then the CCG is legally required under the Equality Act 2010 to make reasonable adjustments to enable the employee to continue working.
- 18.2 Advice must be sought from Occupational Health as to what they suggest are 'reasonable adjustments'. However it will be the line manager's decision as to whether those adjustments are also reasonable for the service. Any adjustments made must be discussed with the employee concerned. Where the manager has any doubt, they must speak to a Workforce representative for advice.
- 18.3 The Equality Act 2010 introduced the concept of positive action where a disabled member of staff (if they are as qualified) can be treated differently in order to ensure they remain in work, e.g. an internal disabled applicant, who has been displaced from their current role, may be considered favourably against an able bodied candidate.
- 18.4 Where there is a lack of understanding, on any part, if the absences are linked to a disability Occupational Health advice should be sought at the earliest opportunity.

19 SUBSTANCE MISUSE

- 19.1 Where an employee's absence is as a result of a suspected or admitted substance misuse problem please refer to the CCG's Managing Alcohol and Substance Misuse Policy.

20 RETURNING TO WORK

- 20.1 Wherever possible the CCG will aid a return to work on a permanent basis. To establish the most effective way of doing this the CCG may seek further medical advice. This may include making reasonable adjustments to the employee's job, allowing a phased return to work, or by allowing the employee to return to work on a reduced or alternative hours basis.

20.2 Phased Return

Where a phased return to work is recommended by Occupational Health, or a medical practitioner, the employee will be able to return to work on a part-time basis whilst receiving their full pay. This will be for a maximum period of four weeks; thereafter the employee must either substitute their annual leave for days not worked or receive payment only for the hours worked.

Where an employee requests a phased return to work themselves, they must take annual leave for days not worked or receive payment only for the hours worked.

20.3 Redeployment

If medical opinion is that an employee is unfit to return to their former employment, the possibility of alternative employment must be considered. (Please refer to the

Redeployment Policy).

Where an employee's pay reduces because of ill-health or injury, and they have the required membership of the NHS Pension Scheme, their membership at the higher rate of pay may be protected.

20.4 Temporary Injury Allowance

Employees on sick leave, and receiving either reduced pay or no pay, as a result of an injury or illness that is wholly or mainly attributable to their NHS employment will be eligible to apply for Temporary Injury Allowance. Applications should be made by the employee to their line manager who will make the decision on whether payment should be made, in conjunction with a Workforce representative. Further guidance may be sought from Occupational Health Service or NHS Pensions.

Employees do not need to be members of the NHS Pension Scheme to apply for Temporary Injury Allowance.

Temporary Injury Allowance will stop when the employee returns to work or leaves their employment.

20.5 Medical Suspension

If a manager has concerns with regards to an employee and their ability to undertake work without risk to themselves or others they may ask the employee to remain on medical suspension until Occupational Health advice is sought. Alternative duties or place of work may also be considered at this point to support the employee.

20.6 Ill Health Retirement

Throughout the absence management process all options, such as rehabilitation, redeployment, part time working, job redesign etc. must be considered in conjunction with the employee.

Where the medical opinion indicates that an employee is permanently unfit for any employment or for the duties of their current role, the individual has the option of applying for early retirement on the grounds of ill health, in line with the provisions of the NHS Pension Scheme. This option is only available to employees who have at least two years continuous, pensionable NHS employment.

Applying for ill health retirement is a specific process to the absence management process but the CCG will provide all reasonable support to the application process.

This option should be discussed with an individual in full at the appropriate time and as much information as possible will be provided to enable the employee to make an informed decision. For more information regarding this procedure please contact the Workforce Team.

20.7 Resignation

At any time during the process an employee may choose to resign from their employment. They are required to give their contractual notice and any outstanding accrued holiday entitlement will be paid in lieu.

Payment in lieu of notice may be agreed by the line manager in conjunction with the Workforce Team.

20.8 Dismissal On The Grounds Of Capability

Before dismissal is considered, all other options as outlined above must have been discussed with the employee during the regular meetings that have taken place throughout the absence. Managers must be satisfied that all relevant information has been obtained and all relevant facts investigated. Documentation supporting this must be provided to the employee. In cases of long-term sickness, managers must also be mindful of the cessation of occupational sick pay entitlements in conjunction with the long-term prognosis.

In cases of short-term absence, managers must also consider the potential loss of specialist knowledge/experienced member of staff, the cost of replacing the employee, whether or not any flexible working arrangements could be agreed etc.

Should the dismissal of an employee be identified at any stage in the process as the only appropriate option (i.e. all other options as outlined above have been investigated and found to be inappropriate) a Final Review Hearing will be convened. This will be chaired by the appropriate manager with the authority to dismiss and will be attended by the employee in question, their line manager and a Workforce Team representative, (see Scheme of Delegation).

Prior to this meeting the employee will receive a copy of the report, detailing the case history to date and considerations taken into account (e.g. Equality Act implications, suitable alternative employment, ill health retirement) together with all other relevant documents, made to the person authorised to dismiss.

At this meeting the employee will have the opportunity to present their case and submit supporting evidence. They have the right to be accompanied by a trade union representative or workplace colleague. The employee has the right to appeal this decision.

Following the meeting the employee will be given a letter confirming the reason for dismissal, the date of dismissal, their right to appeal, details of any payment in lieu of contractual notice and any other outstanding payments to which they are entitled e.g., annual leave.

20.9 Maternity Related Absence

Should an employee be absent from work due to pregnancy related sickness, these absences should be recorded separately and not counted towards absence triggers. However such absence should continue to be monitored to allow for supportive measures and adjustments to be considered.

If an employee is off work ill, or becomes ill, with a pregnancy-related illness during the last four weeks before the expected week of childbirth, maternity leave will normally commence at the beginning of the 4th week before the expected week of childbirth or the beginning of the next week after the employee last worked, whichever is the later. Please see the organisation's Maternity Policy for more detail.

20.10 Appeal

Employees may appeal against any decision to issue a warning under any formal stage of this procedure by writing to the Chief Officer with a copy to the Workforce team, giving the reasons for appeal, within 10 working days of receiving written warning confirmation of the warning or dismissal.

The CCG will endeavour to hold an appeal hearing within 4 weeks of receipt of the appeal notification.

The appeal hearing will be chaired by a Lay / GP Member of the CCG Governing Body plus the Accountable Officer / a Senior Manager and a Workforce representative. Neither of these panel members will have previously participated in the case.

Ten working days' notice will be given of the meeting arrangements, see Appendix 7, L12. Five working days prior to the hearing, the dismissing manager who issued the warning will submit a case history report explaining the circumstances leading to the decision, and their appeal. Copies of these documents should be available to the other party and the panel members.

At the appeal hearing the following procedure should be adopted :

- The Chair will lead introductions, ensure everyone agrees the purpose of the meeting and has received all documentation being considered. If the appellant is not accompanied by a companion the chair must ensure they were aware they were entitled to bring a companion.
- Management side will present an explanation of the case and circumstances that lead to the decision. The appellant and/or their companion will have an opportunity to ask questions. Then the panel will then have an opportunity to ask questions.
- The appellant and/or their companion will present the case supporting the appeal. Management side, then the panel will have the opportunity to ask questions.
- Both management and the appellant will have an opportunity to sum up their cases. No new information should be put forwarded at this stage.
- An adjournment will be held for the panel to reach a decision.

Usually the decision of the panel will be presented on the day. It will be confirmed in writing within 5 working days.

There is no further internal right of appeal.

21 BRIBERY ACT 2010

21.1 The Bribery Act is relevant to this policy. Under the Bribery Act it is a criminal offence to :

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.
- These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.
- Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist.

22 ROLES / RESPONSIBILITIES / DUTIES

22.1 Manager responsibilities

Line managers have an important role to play in the management of absence. The key responsibilities for managers include :

- Ensure that they are familiar with the Management of Attendance Policy and their obligations in relation of the management of the policy
- Communicate appropriately with absent staff
- Dealing with any actions in a timely manner when dealing with absence from work, balancing the needs of the employee with those of the service
- Maintain accurate records of all absences and reasons for absence
- Hold return to work meetings after each individual episode of sickness
- Maintain confidentiality at all times
- Attend any CCG training provided on policy updates
- Identify a 'nominated deputy' for staff to report sickness absence to during periods of annual leave/out of the office/non-working time and communicate this to staff.
- Maintain accurate records of all absences and reasons for absence and outcomes from discussions and ensure these are secure in line with data protection and records management policies and procedure

22.2 Employee Responsibilities

Employees are expected to :

- Ensure regular attendance at work
- Communicate appropriately with their manager when absent from work
- Co-operate fully in the use of these procedures
- Attend Occupational Health when required to do so as a contractual duty
- Comply with the sick pay scheme
- Meet with their manager for a Return to Work meeting following any sickness absence
- Attend review meetings with Management when discussing periods of absence or planning return to work, reasonable adjustments or alternative employment
- Submit any GP fitness notes or self-certification as required, in line with this policy.

23 SCHEME OF DELEGATION

This table details who has the appropriate authority to deal with each stage of the procedure.

Informal procedure	Line Manager or equivalent level manager from elsewhere within the CCG
Formal procedure	Line manager or equivalent level manager from elsewhere within the CCG and a Workforce Representative
Appeal following formal procedure	Line Manager's manager or Manager who has not previously been implicated and a Workforce Representative
Final Review Hearing	Chaired by a Senior Manager with delegated authority who has not previously been implicated and a Workforce representative
Appeal against dismissal	Chaired by a Lay/GP Member of the Governing Body plus Accountable Officer/Senior Manager who has not previously been involved and a Workforce representative

24 POLICY IMPLEMENTATION

This policy will be communicated to staff via team meetings/team brief and will be available for staff on the intranet.

Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

25 TRAINING AND AWARENESS

A copy of the policy will be available on the CCG internet. Training needs will be identified via the performance appraisal process and learning and development plan.

26 MONITORING AND AUDIT

The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Governing Body.

27 POLICY REVIEW

The policy and procedure will be reviewed after three years for the CCG Governing Body in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

28 REFERENCES

Not applicable.

29 ASSOCIATED POLICIES

To ensure that this policy is viewed in context, it should be read in conjunction with other relevant CCG policies i.e., Career Break, Maternity and Paternity etc.

30 CONTACT DETAILS

Name : Corporate Services Manager
Telephone : 01904 555578
Email : valeofyork.contactus@nhs.net
Address : NHS Vale of York Clinical Commissioning Group
West Offices, Station Rise YORK, Y01 6GA

31 APPENDIX 1: EQUALITY IMPACT ANALYSIS FORM

1.	Title of policy/ programme/ service being analysed
	Management of Attendance Policy
2.	Please state the aims and objectives of this work.
	<p>The overall purpose of the policy is to set out CCG’s approach to the management of absence and attendance within the workplace. The policy will also set out guidance to staff and managers about their responsibilities in relation to Absence Management.</p> <p>It is the responsibility of the CCG to protect the health and wellbeing of its employees and enable the best of its workforce; the Absence Management Policy is intending to contribute to delivering that objective.</p>
3.	Who is likely to be affected? (e.g. staff, patients, service users)
	Staff
4.	What sources of equality information have you used to inform your piece of work?
	Staff data
5.	What steps have been taken ensure that the organisation has paid due regard to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics
	The analysis of equalities is embedded within the CCG’s Committee Terms of Reference and project management framework.
6.	Who have you involved in the development of this piece of work?
	<p>Internal involvement: Senior Management team</p> <p>Stakeholder involvement: Consultation with Senior Managers</p> <p>Patient / carer / public involvement: This is an Internal policy aimed at staff employed by the CCG and contractors working for the CCG. The focus is on compliance with statutory duties and NHS mandated principles and practice. There are no particular equality implications for patients.</p>

7.	What evidence do you have of any potential adverse or positive impact on groups with protected characteristics? Do you have any gaps in information? Include any supporting evidence e.g. research, data or feedback from engagement activities	
Disability People who are learning disabled, physically disabled, people with mental illness, sensory loss and long term chronic conditions such as diabetes, HIV)	Consider building access, communication requirements, making reasonable adjustments for individuals etc.	
The policy is not clear how disability- related absence should be recorded or handled. However, there is reference to disability-related absence in 5.2 where managers are required to take account of such circumstances. Any negative impact can be reduced with the close involvement of Workforce and Occupational Health professionals who can consider advice accompanying the Equality Act 2010. No staff are currently recorded as disabled in the CCG but the organisation recognises it must plan its policies on the basis that some employees may have a disability, may become disabled in the course of their employment or that people with disabilities will be recruited in the future.		
Sex Men and Women	Consider gender preference in key worker, single sex accommodation etc.	
Staff with Caring responsibilities (often women) may be recorded as sick (potential negative impact) and should be reminded that Special Leave Policies are available to deal with urgent domestic issues. 80% of staff in the CCG are female, so this is potentially significant for the CCG since the evidence about women and men’s participation in the labour market and the reality of childcare arrangements show that progress towards a more equal division of caring responsibilities between women and men is still very slow (source EHRC Briefing Paper Jan 13). In addition to childcare responsibilities, other caring can also be dealt with under other policies. Policy does, however, require line managers to take account of other policies before taking action which should help to reduce any negative impact.		
Race or nationality People of different ethnic backgrounds, including Roma Gypsies and Travellers	Consider cultural traditions, food requirements, communication styles, language needs etc.	
Considered – no impact		

<p>Age This applies to all age groups. This can include safeguarding, consent and child welfare</p>	<p>Consider access to services or employment based on need/merit not age, effective communication strategies etc.</p>
<p>Considered – no impact</p>	
<p>Trans People who have undergone gender reassignment (sex change) and those who identify as trans</p>	<p>Consider privacy of data, harassment, access to unisex toilets & bathing areas etc.</p>
<p>The policy does not specify arrangements for absence connected to medical processes related to transgender issues and that any employee diagnosed with Gender Dysphoria or Gender Identity Disorder this will be covered by the normal arrangements of this policy.</p>	
<p>Sexual orientation This will include lesbian, gay and bi-sexual people as well as heterosexual people.</p>	<p>Consider whether the service acknowledges same sex partners as next of kin, harassment, inclusive language etc.</p>
<p>Considered – no impact</p>	
<p>Religion or belief Includes religions, beliefs or no religion or belief</p>	<p>Consider holiday scheduling, appointment timing, dietary considerations, prayer space etc.</p>
<p>Considered – no impact</p>	
<p>Marriage and Civil Partnership Refers to legally recognised partnerships (employment policies only)</p>	<p>Consider whether civil partners are included in benefit and leave policies etc.</p>
<p>Considered – no impact</p>	

<p>Pregnancy and maternity Refers to the pregnancy period and the first year after birth</p>	<p>Consider impact on working arrangements, part-time working, infant caring responsibilities etc.</p>
<p>Considered – no impact</p>	
<p>Carers This relates to general caring responsibilities for someone of any age.</p>	<p>Consider impact on part-time working, shift-patterns, options for flexi working etc.</p>
<p>Considered – no impact</p>	
<p>Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders, people with HIV.</p>	<p>Consider ease of access, location of service, historic take-up of service etc.</p>
<p>Not applicable</p>	

8.	<p>Action planning for improvement Please outline what mitigating actions have been considered to eliminate any adverse impact?</p> <p>Staff with Caring responsibilities (often women) may be recorded as sick (potential negative impact) and should be reminded that Special Leave Policies are available to deal with urgent domestic issues. 65% of staff in the CCG are female, so this is potentially significant for the CCG since the evidence about women and men's participation in the labour market and the reality of childcare arrangements show that progress towards a more equal division of caring responsibilities between women and men is still very slow (source EHRC Briefing Paper Jan 13). In addition to childcare responsibilities, other caring can also be dealt with under other policies. Policy does, however, require line managers to take account of other policies before taking action which should help to reduce any negative impact.</p> <p>Please state if there are any opportunities to advance equality of opportunity and/ foster good relationships between different groups of people?</p> <p>An Equality Action Plan template is appended to assist in meeting the requirements of the general duty</p>
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Sign off
Name and signature of person / team who carried out this analysis <i>CSU workforce team</i>
Date analysis completed <i>3.3.14</i>
Name and signature of responsible Director
Date analysis was approved by responsible Director

32 APPENDIX 2: SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development plan or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	Management of Attendance Policy
What is the main purpose of the document	To set out the CCG's approach to the management of absence and attendance within the workplace and set out guidance to staff and managers about their responsibilities in relation to Absence Management.
Date completed	
Completed by	CSU Workforce

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = N/A	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport?	N/A		
	Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)?			
	Will it reduce 'care miles' (telecare, care closer) to home?			
	Will it promote active travel (cycling, walking)?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = N/A	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it improve access to opportunities and facilities for all groups?			
	Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery?			
Procurement	Will it stimulate innovation among providers of services related to the delivery of the organization's social, economic and environmental objectives?	N/A		
	Will it promote ethical purchasing of goods or services?			
Procurement	Will it promote greater efficiency of resource use?	N/A		
	Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)?			
	Will it support local or regional supply chains?			
	Will it promote access to local services (care closer to home)?			
	Will it make current activities more efficient or alter service delivery models			
Facilities Management	Will it reduce the amount of waste produced or increase the amount of waste recycled? Will it reduce water consumption?	N/A		

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = N/A	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Workforce	Will it provide employment opportunities for local people?	0		
	Will it promote or support equal employment opportunities?	0		
	Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?	0		
	Will it offer employment opportunities to disadvantaged groups?	0		
Community Engagement	Will it promote health and sustainable development?	0		
	Have you sought the views of our communities in relation to the impact on sustainable development for this activity?	N/A		
Buildings	Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?	N/A		
	Will it increase safety and security in new buildings and developments?			
	Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)?			
	Will it provide sympathetic and appropriate landscaping around new development?			
	Will it improve access to the built environment?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = N/A	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Adaptation to Climate Change	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?	N/A		
Models of Care	Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?	N/A		
	Will it promote prevention and self-management?			
	Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?			
	Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?			

33 APPENDIX 3: STAGES OF ABSENCE MANAGEMENT AND IMPROVEMENT NOTIFICATION.

	Period of Absence	Improvement Target	Action	Decision
<p>Stage 1</p> <p><u>Informal</u></p> <p>Verbal Notification of unsatisfactory attendance</p>	<p>If the employee has had 3 occasions or 8 days absence in any rolling 6 month period they will be issued with Stage 1 notification</p> <p>Letter to employee sent with 7 working days' notice</p>	<p>Over the next 12 weeks, if the employee has a further episode of short term absence, they will progress to Stage 2</p>	<p>Attendance meeting:</p> <p>The purpose of the Stage 1 Informal Meeting is to:-</p> <ul style="list-style-type: none"> • explain to the employee the reasons why the meeting has been arranged and refer to the Management of Attendance Policy and the management of frequent short-term absence. • advise the employee of the concern regarding their health/level of absence • ask the employee to identify any underlying cause for the absence • enable the manager to provide assistance, wherever possible, with any problems identified • consider a referral to Occupational Health • review absence record and reasons for absence. Check details with any Self Certs /Fit Notes/Return to Work forms. <p>Agree standard of attendance and support if necessary.</p> <p>Agree review period.</p> <p>Confirm next steps.</p>	<p>Issue decision in writing within 5 working days, copy kept on personal file and copy to Workforce</p> <p>Will remain on file for 12 months</p>

	Period of Absence	Improvement Target	Action	Decision
Stage 2 Formal First Written Warning	<p>From the date of the Stage 1 meeting, if the employee has a further episode of short term absence, they will progress to Stage 2</p> <p>Letter to employee sent with 7 working days' notice</p>	<p>During the next 12 weeks, if the employee has a further episode of short term absence, they will progress to Stage 3</p>	<p>Attendance meeting:</p> <p>The purpose of the Stage 2 Formal Meeting is to:-</p> <ul style="list-style-type: none"> • review the employee's absence during the previous 12 week period. • ask the employee to identify any further problems which might be contributing to their level of absence • provide assistance and help, wherever possible, with any problems identified • consider a referral to Occupational Health • review absence record and reasons for absence. Check details with any Self Certs /Fit Notes/Return to Work forms. <p>Agree standard of attendance and support if necessary.</p> <p>Agree review period.</p> <p>Confirm next steps.</p>	<p>Issue decision in writing within 5 working days, copy kept on personal file and copy to Workforce</p> <p>Will remain on file for 12 months</p> <p>Right of appeal within 10 working days of action being taken</p>
Stage 3 Final Written Warning	<p>From the date of the Stage 2 meeting, if the employee has a further episode of short term absence, they will progress to short term</p>	<p>Over the next 12 weeks, if the employee has a further episode of short term absence, they will progress to</p>	<p>Attendance meeting:</p> <p>The purpose of the Stage 3 Formal Meeting is as stated at Stage 2.</p> <p>Consider alternative options if necessary, adjustments and redeployment if</p>	<p>Issue decision in writing within 5 working days, copy kept on personal file and copy to Workforce</p> <p>Will remain on file for 12 months</p> <p>Right of appeal within 10 working days of</p>

	Period of Absence	Improvement Target	Action	Decision
	<p>absence, they will progress to Stage 3</p> <p>Letter to employee sent with 7 working days' notice</p>	Stage 4, final review panel	<p>appropriate.</p> <p>Agree review period.</p> <p>Confirm next steps including continued episodes of absence could result in dismissal.</p>	action being taken
Stage 4 Final Review Panel	<p>From the date of the third review up to 12 weeks, if the employee has a further episode of short term absence, they will progress to Stage 4, final review panel</p> <p>Letter to employee sent with 7 working days' notice</p>	If the employee hasn't met the improvement notification issued at Stage 3 consider review or reissuing of improvement targets	<p>Final Review hearing:</p> <p>Employee is invited to attend Hearing in front of impartial panel. See scheme of delegation.</p> <p>Line Manager to provide a case history report to inform the panel who will then review absence record, actions taken to date to support improvement and any supporting medical advice. Any alternatives' to dismissal will be discussed including redeployment.</p>	<p>Issue decision in writing within 5 working days, copy kept on personal file and copy to Workforce</p> <p>Possible outcome Dismissal</p> <p>Right of appeal</p>

*Please note: The above triggers should be pro rata for part time employees and calculated on contracted days worked

34 APPENDIX 4: PROCEDURE FOR REPORTING SICKNESS ABSENCE AND RETURN TO WORK

As an employee of NHS Vale of York CCG it is your contractual obligation to ensure that your manager is aware of any absence you have had due to sickness.

Please make yourself aware of the Management of Attendance Policy, and the following guidelines, and if in doubt seek further advice from your manager or the Workforce Team.

Procedure for Reporting in sick :

You must contact and speak to your line manager or designated person on the first day of absence as soon as is reasonably practicable or within half an hour of your normal starting time and you must make this call, unless it is clearly not possible for you to ring personally. It is not acceptable to text, e-mail or leave messages with anybody else. If your line manager is unavailable, then the employee should contact an alternative nominated manager.

Name	Job Title	Contact Numbers

When reporting absence please give the following information :

- the reason for the absence (if known);
- the expected length of absence (if known);
- whether a visit will be made to their GP, and if so, the date of the appointment.

Advise your manager of any outstanding work that may require urgent attention during the period of absence.

Procedure for Returning to Work

When returning from sick you will be required to complete a self-certificate (Appendix 5) form and attend a return to work meeting with your line manager to discuss your absence. This will also enable your line manager to discuss any assistance, help, counseling or action on work-related issues that may be provided to enable you to return to work.

35 Appendix 5: SELF CERTIFICATE OF SICKNESS FORM

This form must be completed for any sickness absence to account for up to 7 calendar days at the start of your sickness absence period. Absence lasting 8 calendar days or more require you to submit a Fitness to Work form from a medical professional to account for your sickness absence from the 8th calendar day onwards.

Surname	_____	First Name	_____
Payroll Number	_____		_____
<u>About Your Sickness</u>			
Date you became unfit for work	_____		
Date fit for work	_____		
Reasons for absence	_____		
Notification made to (name)	_____	Date	_____
Have you consulted a GP or visited a hospital?			Yes / No
Have you been prescribed medication?			Yes / No
Were you issued with Fitness to Work Certificate?			Yes / No
Was the absence a result of an accident at work or as a result of industrial disease?			Yes / No
If yes, please give details	_____		
Have you reported the accident?			Yes / No
Please provide any additional information	_____		

Was the absence as a result of an accident outside work?	Yes / No
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I declare that the given is correct. I understand that giving false information could result in the loss of sick pay benefits and/or disciplinary action and/or action by the Department of Work and Pensions

**Employee's
Signature**

Date

36 APPENDIX 6 : RETURN TO WORK INTERVIEW FORM

Employee Name:	Job Title:
Name of Return to Work Interviewers:	Job Title Return to Work Interviewers:
Absence Start Date:	Return to Work Date:
Reason for Absence:	Are you fully recovered? Yes / No Comments:
Total Number of Days Sick:	Number of days sick in last 6 months:
Has the Employee Hit any Sickness Absence Trigger Points? Yes / No	Will the Employee be referred to a Formal Monitoring Meeting? Yes / No
Are you fit to be back at work? Y/N Is this subject to any reasonable adjustments (inc. phased return)?	Were the correct reporting procedures followed? Y/N Self cert form received: Y/N Doctors note received: Y/N
Are there any problems relating to your illness/injury that may affect your ability to perform your job? Y/N	Have you suffered from a condition which is likely to re-occur? Y/N
Do you need further Occupational Health support? (where appropriate) Yes / No	Did you attend hospital /clinic or GP surgery? Y/N
Are you taking any medication? Y/N	Are there any follow up appointments required? Y/N
Is Occupational Health aware of your sickness/injury? Y/N	Is there any further support that can be provided now or in the future? Y/N

Additional Comments:	
Employee Signature:	Date:
RTW Interviewers Signature:	Date:

Please retain this form along with any medical certificates in the employee's personal file.

37 APPENDIX 7 – LETTER TEMPLATES

Each letter to be on NHS Vale of York Clinical Commissioning Group headed paper.

Ref: L1

Dear

Receipt of Fitness to Work Note

I am writing to acknowledge receipt of your Statement of Fitness to Work which I received on [date]. Can I ask that you continue to keep me updated with regards to your sickness and continue to forward on any Statement of Fitness to work forms as and when applicable.

I hope that you are beginning to feel better and if there is anything further you need from me in relation to your sickness please do not hesitate to contact me.

Yours sincerely

Name

Job title

cc : Personal File
Workforce Representative

Ref: L2

Dear

I am writing to you in accordance with the NHS Vale of York Clinical Commissioning Group Management of Attendance Policy.

As you have been absent from work due to sickness since [date] I would like to meet with you informally to discuss any help or assistance the [organisation] can offer you. I would be grateful if you could call me on [number] to arrange an appropriate time and location

In the meantime if there is anything further you need from me in relation to your sickness please do not hesitate to contact me.

Yours sincerely

Name

Job title

cc : Personal File
Workforce Representative

Ref: L3

Dear

Failure to Attend Occupational Health

I have been notified by Occupational Health that you failed to attend your appointment that had been arranged for you on [Date, Time] and had not contacted them to inform them that you wouldn't be attending.

Can I bring to your attention that as an NHS Vale of York Clinical Commissioning Group member of staff the current Management of Attendance Policy states that 'Employees must make themselves available to attend Occupational Health referrals as a contractual obligation' and I have enclosed a copy of this policy for your information.

I have therefore arranged for a further appointment for you at Occupational Health on [date, time and location].

Can you please inform Occupational Health if this date is not suitable so they can organise an alternative date.

Yours sincerely

Name

Job title

cc : Personal File
Workforce Representative

Ref : L4

Dear

Invite to Informal Attendance Monitoring Meeting - Stage 1

I am writing to advise you / confirm that a meeting has been arranged under the NHS Vale of York Clinical Commissioning Group Management of Attendance Policy to discuss your level of absence as you have hit the policy's trigger point. The dates which we have recorded over the last ** months for you being sick are as follows :

Start Date	End Date	Reason	Total Calendar Days

An Attendance Monitoring Meeting has been arranged to discuss your absences and this will take place as follows :

Date
Time
Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

This is an informal Stage 1 meeting of the Management of Attendance process therefore it is not necessary to have representation at this stage. I would be grateful if you can confirm your attendance at the meeting by [date].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Ref : L5

Dear

Outcome of Informal Attendance Monitoring Meeting - Stage 1

I am writing to advise you of the outcome following the Informal Attendance Monitoring Meeting at Stage 1 which was held on [Date]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence.

You were formally issued with a verbal notification of unsatisfactory attendance as per the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy. This notification will be held on your file for 12 months from the date of this meeting [Date].

The target for improvement was discussed at the meeting and I advised you that your attendance will be monitored over the next 12 weeks, commencing from (date of the Informal Meeting) during which time a recognised improvement is expected. If there is a recognised improvement in your attendance record during this period, i.e., no further episodes of short term sickness during the 12 week period, no further action will be taken. However, failure to achieve the improvement in attendance will lead to a formal Stage 2 meeting in accordance with the CCG's Management of Attendance Policy.

I would like to arrange a review meeting in 2 months to review how you are doing against the plan and this meeting will be arranged in due course.

** We agreed that an Occupational Health referral will be made to support you and to identify any adjustments that can be made to help you to sustain your attendance at work. Can I bring to your attention that it is a contractual obligation that you attend Occupational Health.

In the meantime if you have any questions please let me know.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Ref : L6

Dear

Invite to Formal Attendance Monitoring Meeting - Stage 2

I am writing to advise you / confirm that a further meeting has been arranged under the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy to discuss your level of absence at Stage 2. This is following your Stage 1 meeting which was held on [date] where you were issued with a verbal notification of unsatisfactory attendance. Since [date] you have been absent on a further episode of short term absence which we have recorded as follows :

Start Date	End Date	Reason	Total Calendar Days

We have therefore arranged a Formal Attendance Monitoring Meeting at Stage 2 to discuss your absences and this will take place as follows :

Date
Time
Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I shall be chairing the meeting and will be supported by [name], [job title].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Management of Absence Policy
V2.1

Ref : L7

Dear

Outcome of Formal Attendance Monitoring Meeting - Stage 2

I am writing to advise you of the outcome following the Formal Attendance Monitoring Meeting at Stage 2 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence.

As I explained at the meeting you have had a further episode of short term absence during the last 12 weeks and due to this you were formally issued with a First Written Warning as per the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy. This warning will be held on your file for 12 months from the date of this meeting [Date].

The target for improvement was discussed at the meeting and I advised you that your attendance will be monitored over the next 12 weeks, commencing from (date of the Formal Meeting) during which time a recognised improvement is expected. If there is a recognised improvement in your attendance record during this period, i.e., no more than one episode of short term sickness during the 12 week period, no further action will be taken. However, failure to achieve the improvement in attendance will lead to a formal Stage 3 meeting in accordance with the CCG's Management of Attendance Policy.

I would like to arrange a review meeting in two months to review how you are doing against the plan and this meeting will be arranged in due course.

I advised that I would be making a management referral to Occupational Health to support you and to identify any adjustments that can be made to help you to sustain your attendance at work. Can I bring to your attention that it is a contractual obligation that you attend Occupational Health.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within 10 days of this letter.

In the meantime if you have any questions please let me know.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Ref : L8

Dear

Invite to Formal Attendance Monitoring Meeting - Stage 3

I am writing to advise you / confirm that a further meeting has been arranged under the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy to discuss your level of absence at Stage 3. This is following your Stage 2 meeting which was held on [date] where you were issued with a First Written Warning. Since [date] you have had a further episode of short term absence which we have recorded as follows :

Start Date	End Date	Reason	Total Days	Calendar

We have therefore arranged a Formal Attendance Monitoring Meeting at Stage 3 to discuss your absences and this will take place as follows :

Date
Time
Location

The purpose of this meeting is to provide support and assistance to help you maintain attendance at work and to identify any issues that you may be having. An action plan for improvement will be agreed at the meeting

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by [date] and also whether you will be accompanied.

I shall be chairing the meeting and will be supported by [name], [job title].

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Yours sincerely

Name
Job title

cc : : Personal File
Workforce Representative

Ref : L9

Dear

Outcome of Formal Attendance Monitoring Meeting - Stage 3

I am writing to advise you of the outcome following the Formal Attendance Monitoring Meeting at Stage 3 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of the meeting was to discuss your attendance record and your high level of sickness absence.

As I explained at the meeting, you have had a further episode of short term absence during the last 12 weeks and due to this you were formally issued with a Final Written Warning as per the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy. This warning will be held on your file for 12 months from the date of this meeting [Date].

We discussed what alternatives would be available to you in terms of *reduced hours*relocation*redeployment and also any adjustments that could be made to support you to sustain your attendance at work.

We also discussed your target for improvement at the meeting and I advised you that your attendance will be monitored over the next 12 weeks, commencing from (date of the Formal Meeting) during which time a recognised improvement is expected. If there is a recognised improvement in your attendance record during this period, i.e., no more than one episode of short term sickness during the 12 week period, no further action will be taken. However, failure to achieve the improvement in attendance will lead to a Final Review Panel, Stage 4 meeting in accordance with the CCG's Management of Attendance Policy which may result in your dismissal on the grounds of capability due to ill health.

I would like to arrange a review meeting in two months to review how you are doing against the plan and this meeting will be arranged in due course.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within 10 days of this letter.

In the meantime if you have any questions please let me know.

Yours sincerely

Name

Job title

cc : Personal File
Workforce Representative

Ref : L10

Dear

Invite to Final Review Hearing – Stage 4

I am writing to advise **you / confirm** that a hearing has been arranged under the NHS Vale of York Clinical Commissioning Group (CCG) Management of Attendance Policy at Stage 4. This is following your Stage 3 meeting which was held on **[date]** where you were issued with a Final Written Warning. Since **[date]** you have had a further episode of short term absence which we have recorded as follows :

Start Date	End Date	Reason	Total Days	Calendar

We have therefore arranged a Final Review Hearing at Stage 4 to discuss your absences and this will take place as follows :

Date
Time
Location

The panel will be chaired by **[name, job title]** supported by **[name, job title]**. Also in attendance will be **{name, Job title}** who will be supported by **[name, job title]**.

The purpose of this hearing is to review your absence record and the actions that have been taken to date to support your improvement and also any supporting medical information. You will have an opportunity to present your case and submit any supporting evidence.

Please note that the hearing could ultimately result in dismissal although every effort will be made to look at alternatives including redeployment.

You have the right to be accompanied by a Trade Union Representative or a work colleague, not acting in a legal capacity. I would be grateful if you can confirm your attendance at the meeting by **[date]** and also whether you will be accompanied.

I have enclosed a copy of the policy for your information. In the meantime if you have any questions in advance of the meeting please let me know.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Ref : L11

Dear

Outcome of Final Review Hearing - Stage 4

I am writing to advise you of the outcome following the Final Review Hearing at Stage 4 which was held on [Date]. In attendance at the meeting were [name, Job titles of all attendees]. The purpose of this hearing was to review your absence record and the actions that have been taken to date to support your improvement and also any supporting medical information.

The outcome of the meeting was that it was that a redeployment option would be considered. Can you please liaise with [name, job title] with regards to the process and the options that are currently available to us.

OR

Due to your continuing absences and failure to achieve satisfactory improvement in your attendance you employment with [organisation] was terminated.

Your employment was terminated on [date] and you are entitled to ** days outstanding annual leave which will be paid in your final salary.

I can confirm that you are entitled to ** weeks pay in lieu of notice and I will ensure this is included within your final salary.

You have the right to appeal against this decision and this needs to be made in writing to [name, job title] within 10 days of this letter.

In the meantime if you have any further queries please do not hesitate to contact [name, job tile]

OR

On behalf of NHS Vale of York Clinical Commissioning Group may I express my regret that your employment has ended in these circumstances.

Yours sincerely

Name
Job title

cc : Personal File
Workforce Representative

Ref : L12

Dear

Confirmation of arrangements for Appeal Hearing

I am writing to confirm the arrangements for the Appeal Hearing that has been set up to consider the appeal against [please insert] that you lodged on [insert date]

The Appeal Hearing will take place as below :

Date:

Time:

Venu :

The Panel will be chaired by [insert name, job title] who will be supported by [insert name] Workforce Representative. Also present will be [insert name and job title] and [insert name] Workforce Representative] who will present the case for the decision you are appealing against being made. You are entitled to be accompanied by an accredited representative of a recognised Trade union or a CCG colleague not acting in a legal capacity. Please can you advise me of your companion and their contact details at least six working days prior to the meeting.

You should submit copies of your case for appeal and any documentation you wish to be considered, to the panel and to management side at least five working days prior to the hearing. You and your companion, if applicable, will receive a copy of the management side statement of case five days prior to the hearing.

I understand you already have a copy of the Management of Absence Policy, however further copies are on the intranet and if you are not able to access the intranet please request additional copies through me.

Please confirm your attendance at the hearing to me by [insert date] and in the meantime if you have any queries about this letter or the process to be followed please do not hesitate to contact me or a Workforce Representative.

Yours sincerely

Name

Job Title

cc : Personal File
Workforce Representative

Ref : L13

Dear

Outcome of Appeal Hearing

I am writing to confirm the outcome of the appeal hearing held on [insert date]. I chaired the panel and was supported by [insert name], workforce representative. Also present was [insert details of all present]. The purpose of the hearing was to consider your appeal against the decision to [insert details].

After carefully considering all of the information presented I confirmed that the decision [insert details] should be upheld and this is due to [insert rationale].

OR

After carefully considering all of the information presented the decision [insert details] was not up held on the basis of [insert rationale]. [also insert details of alternative arrangements].

Please be advised that this is the final decision in relation to the appeal and you have no further internal right of appeal.

Yours sincerely

Name

Job Title

cc : Personal File
Workforce Representative