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PRIFYSGOL CYMRU  
**Y Drindod Dewi Sant**  
UNIVERSITY OF WALES  
**Trinity Saint David**

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# **SICKNESS ABSENCE MANAGEMENT POLICY**

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## 1. INTRODUCTION

- 1.1 University of Wales Trinity Saint David (TSD) recognises that high levels of sickness absence have cost implications, place additional burdens on colleagues, and adversely affect the quality of service that the institution can provide to students and other customers. It is therefore essential that absences be kept to an absolute minimum if the University is to meet its commitment as a dynamic and innovative provider of high quality education, training and research. Sickness absence has a detrimental effect on the ability to meet this commitment.
- 1.2 It is accepted that absences through illness are unavoidable and the University, by the implementation of the sickness absence management procedures, does not seek to erode any rights employees are entitled to through their Conditions of Employment.

## 2. SCOPE

- 2.1 This Sickness Absence Management policy covers **all** employees except staff still within their probationary period of employment. Part time employees are subject to this policy regardless of the number of hours that they work for the University. Provision for the removal of the Vice Chancellor for incapacity on medical grounds will follow the procedure set out in this policy subject to modifications as set out in Statute X – Annex: Provisions as to the Vice Chancellor.
- 2.2 This document incorporates procedures for dealing with both short and long term absences and recognises that different patterns and duration of absence call for different approaches.
- 2.3 This policy applies to sickness absence defined as:
- self-certified absence
  - absence supported by doctor's certificate or doctor's fitness note
  - short term absence which may be intermittent or persistent
  - long term continuous absence
  - industrial injury
- 2.4 Pregnancy related conditions will be dealt with under the Maternity legislation, however, absences during pregnancy which are not pregnancy related will be monitored and managed in accordance with this policy.

## 3. AIMS

- 3.1 TSD seeks to encourage and maximise the regular attendance at work of all its employees and to institute fair, effective and consistent arrangements for dealing with absences. Through application of the Sickness Absence Management policy and procedure the University aims to:
- provide support to employees who are unable to work through ill health;
  - ensure a fair, consistent approach to monitoring and management of absence which applies to all employees (other than staff on probation);
  - maximise attendance by keeping all absences to a minimum and to achieve and maintain set absence target levels;
  - minimise disruption to operational services and the burden placed upon employees required to cover for colleagues' absence.

The University recognises the importance of its responsibility to manage sickness absence and will do so through procedures that incorporate mechanisms to monitor individual attendance levels and, where appropriate, reduce high levels of sickness absence through proactive management strategies.

- 3.2 Concern and understanding will be shown to those employees who genuinely need to be absent from work and a balanced degree of support will be offered during periods of ill health.

3.3 Training on the management of sickness absence will be available for all line managers and staff with supervisory responsibilities in order to ensure consistency in approach and application.

#### **4. LEGISLATIVE INFLUENCES**

4.1 TSD recognises that it has a legal responsibility under the Health and Safety at Work Act 1974 to ensure, as far as is reasonably practicable, the health, safety and welfare of all its employees.

4.2 The University is mindful of the terms of the Human Rights Act (1998) and in particular the need to respect the right for family life and privacy and the right to a fair hearing. This policy and procedure seeks to comply with the appropriate principles contained in this Act.

#### **5. PROCEDURE**

##### **5.1 Management of Absence**

Sickness absence management is the process by which an employer aims, through various methods, to maximise employee attendance at work. The key objectives are to:

- establish proper management systems for reviewing individual sickness records;
- review compliance with sickness reporting rules and procedures;
- identify causes of absence in order to prevent or deter absence recurring where possible;
- reaffirm a commitment to the duty of care for employees.

##### **5.2 Recording, Monitoring and Reporting of Absence**

Line managers have responsibility for ensuring that the HR department are notified of staff absence. They should ensure that the individual member of staff completes and signs the 'Self Certification for Sickness/Injury Absence' form for all time lost for reasons classified as sickness absence or absence due to injury. This form should be countersigned by the Line manager who should then forward it directly to the HR department. Delay in the completion or forwarding onward of this form could result in pay discrepancies. A copy of the Self Certification form is attached as Appendix 1. The HR department will oversee electronic and paper records of sickness absence. The information recorded will include dates, periods of absence, self-certification and medical certificates and could include occupational health reports. Sickness documentation is classified as sensitive data and will be held securely by the HR department in accordance with the University's data protection policy.

5.2.1 The HR department will monitor sickness absence on a continuous basis and will seek to identify and analyse patterns of absence and trends. They will particularly seek to identify intermittent or persistent short term absence. Long term absence may be dealt with as an issue of capability which can be classified as a potentially fair reason for dismissal. The measurement of absence will allow for accurate information to be compiled and analysed to identify areas for management action and to compare absence levels to those of previous periods and establish patterns and trends.

5.2.2 The HR department are expected to report the data, monthly, to the Senior Management Team and three monthly to the HR Committee.

##### **5.3 Notification of Absence**

###### **5.3.1 Reporting of Sickness Absence**

Employees are required on the first day of absence to notify their Line Manager if they are unable to attend for work due to illness or injury. If the Line Manager is not accessible then efforts should be made to contact a member of the HR Department. Messages should not, ideally, be left with colleagues, switchboard operators or Porters.

Unless specific arrangements apply and have been communicated, notification of absence should be made as soon as practically possible prior to normal start of work for the particular day in question. During the notification the employee should indicate, where possible:

- The nature of the illness or injury

- When they expect to return to work (if known)

If the employee works within a business unit or works in a post which must be manned at particular times then their line manager might request some earlier notification arrangements. These will have been shared with employee during their induction programme.

### 5.3.2 **Industrial Injury / Third Party accident**

If the absence is due to an injury sustained in the course of the employee's official duty this should be made clear to their Line Manager so that the University's Health and Safety Official can be advised. Similarly if the absence is caused by a third party accident outside of work the employee should advise the management of the University or the HR department accordingly.

### 5.3.3 **Sickness occurring during working day**

If the employee becomes unwell during the working day and feels unable to continue their duties they should, personally, notify their Line Manager of the need to leave their work station.

5.3.4 Every effort should be made by the employee to personally report the sickness absence to their Line Manager unless genuine practical constraints apply e.g. hospitalisation or no easy access to a telephone. In such difficult circumstances, rather than delay notification the responsibility may be delegated to a relative or friend.

### 5.3.5 **Period of incapacity extending to day four and beyond**

If the absence continues the employee must make a further telephone call to their Line Manager/Supervisor on the **4<sup>th</sup> day** of absence. Wherever possible an indication should be provided of the reasons for the continued absence and the expected date of return. Weekends, bank holidays, closure days and any extra statutory day are included when calculating the 4<sup>th</sup> day. Should the 4<sup>th</sup> day of absence fall upon a non-working day the telephone call should be made on the next working day.

### 5.3.6 **Submitting absence certification**

A self-certification form must be completed when the duration of the absence is seven days or less. If the absence lasts for, or is expected to exceed, seven calendar days, medical certification should be obtained by the employee from their General Practitioner as soon as possible after the 7<sup>th</sup> day of absence. Information contained on medical certificates is classified as sensitive information and therefore the certificate should be submitted directly to the Human Resources department where it will be filed separately from the employee's personnel record.

## 5.4 **Occupational Sickness Scheme**

Where occupational sick pay is applicable as part of the contractual agreement the relevant entitlement is detailed in **Appendix 2** to this policy.

## 5.5 **Return to Work**

Following every period of sickness absence, whether self certified or medically certified by a medical practitioner, a return to work interview will be carried out by the employee's Line Manager on a one to one basis. This meeting is designed to be a constructive meeting which will provide an opportunity to discuss any perceived work related problems, and to consider any reasonable support which will assist the return to work and where possible avoid a recurrence of absence.

5.5.1 It is accepted that circumstances might arise whereby the nature of the illness may make it preferable for the return to work interview to be conducted by a person of the same gender as the employee or exceptionally by someone other than the Line Manager. In these circumstances the HR department will provide support and make the specific arrangements.

5.5.2 The interview should preferably take place on the day that the employee returns to work, however it is acknowledged that for some categories of employees this may not be possible. In such cases the interview should be conducted at the earliest practicable opportunity following the employee's return. **Return to work discussion guidelines** and the Return to work discussion form can be found in **Appendix 3**.

## 5.6 Fit note

- 5.6.1 From 6 April 2010, the system of sick notes was replaced by a fit-note system under which medical practitioners can suggest adjustments to an employee's role and/or workplace to enable them to return to work.
- 5.6.2 Sick notes allowed doctors to advise only that an individual should or should not work. However, fit notes allow medical practitioners to tick an option to advise employers that an employee either:
- is "not fit for work", where the employee has a health condition that prevents him or her from working; or
  - "may be fit for work taking account of the following advice", where the employee is not fit to return to work to perform all of his or her normal duties, but may be able to return to work if the employer offers some support.
- 5.6.3. If the medical practitioner advises that an employee "may be fit for work taking account of the following advice", the doctor will be required to provide further information, including information on the functional effects of the employee's condition. The doctor can indicate what adjustments could assist the employee to return to work by ticking one or more of four boxes, to suggest: a phased return, amended duties, altered hours and/or workplace adaptations. The doctor can also include further suggestions and information in the comments section, for example a recommendation that the employee is referred to occupational health for an assessment.
- 5.6.4 The University's obligations under the Equality Act 2010, including the duty to make reasonable adjustments, are unaffected by the introduction of the fit note system. In circumstances where an employer is considering whether or not an employee can return to work the fit note will assist the employer in deciding what adjustments it should make to facilitate this.
- 5.6.5 Advice from a doctor on a fit note is intended to help the employer manage the employee's return to work. If the University receives a fit note stating that an employee "may be fit for work taking account of the following advice" it will consider the advice on the fit note carefully, discuss it with the employee and seek to agree with the employee how the recommendations can be implemented. The University will seek to agree the specific adjustments that will be made, for how long they will apply and any other consequential changes (for example a change to pay where a reduction in hours has been agreed).
- 5.6.6 The advice given on a fit note is advice for the employee and is not binding on the employer. It is ultimately the employer's decision how to act on the advice, taking into account its wider legal obligations. Where further guidance is required on the appropriateness of the work situation, independent occupational health advice will be sought as a matter of course.
- 5.6.7 If the University is unable to implement the suggestions on the fit note, it should explain this to the employee and treat the fit note as if the doctor had advised that the employee is "not fit for work". The employee does not need to return to the doctor to confirm this but neither is the employee precluded from discussing further with the doctor and seeking guidance on alternative suggestions for adjustments.

## 6. VARIOUS TYPES OF ABSENCE

### 6.1 Intermittent / Persistent Short Term Absence

These are classified as absences which are usually sporadic, attributable to minor ailments, in many cases unconnected and which are frequent or unacceptable. These absences can be the most disruptive because of the unpredictability and the difficulty in arranging staffing cover.

- 6.1.1 Sickness Management procedures may be triggered by one, or a combination of the following trigger points.

<b>Trigger Points</b>
<ul style="list-style-type: none"> <li>• 3 occasions of absence in a 3 month rolling period</li> <li>• 5 occasions of self-certified absence in a 12 month rolling period</li> <li>• 10 days absence in a 12 month rolling period (this may comprise a single or multiple absences)</li> <li>• any unacceptable pattern of absence.</li> </ul>

6.1.2 If considered appropriate the facility to self certify sickness absence may be withdrawn at any point in the procedure. In such circumstances the employee will be required to produce a medical certificate from their doctor on the first day of any further period of sickness absence. Failure to do so may result in suspension of sick pay. The University may agree to reimburse the cost of obtaining the medical certificate.

6.1.3 In cases where it is suspected that unwarranted absence has been taken and ascribed to ill health the matter may be more appropriately addressed through the disciplinary procedure.

**6.2 Initial Absence Review Meeting – Short Term Absence**

When any one, or combination of the trigger points listed above has been reached the employee will be invited to attend an Initial Absence Review meeting with his/her line manager and a member of the HR department. The purpose of this meeting is to investigate the employee’s absence, perhaps counsel the employee and where appropriate agree a joint remedial strategy.

6.2.1 The employee will be advised that, at this juncture, the meeting will be classified as an informal investigative meeting.

6.2.2 Absence records will be produced and the employee invited to supply an explanation for the absences. The discussion should explore any underlying problems, medical or otherwise, which need to be addressed. Expected standards of attendance will be clearly defined.

6.2.3 After hearing the employee’s reasons for the absence(s) the University will determine that;

- No further action is necessary other than to continue to monitor attendance; OR
- It is necessary to inform the employee that their absence is a cause for concern and advise him/her of the consequences of failure to improve attendance.

6.2.4 Where there is cause for concern all practical steps to alleviate the situation should be explored and an action plan, including any support mechanisms which may be appropriate, will be agreed together with a timescale for improving attendance. A period of review will be agreed, which should not exceed three months other than in exceptional circumstances. A date for a Second Review meeting will also be determined.

6.2.5 The HR department will confirm, in writing, the outcome of the Initial Absence Review Meeting and will include details of any agreed action as well as the period of review. A copy of this document will be retained on the employee’s personal file. The sickness absence will be continuously monitored.

**6.3 Second Absence Review meeting – Short Term Absence**

If the monitoring indicates that there has been no improvement in the level of absence or a further trigger point has been reached then a Second Absence Review meeting will be arranged to discuss the matter. During this meeting the absence records will be further reviewed and the employee invited to supply a further or additional explanation for the absences. The discussion should explore any underlying problems, medical or otherwise, which need to be addressed. Unless there are exceptional reasons to believe that an improvement is imminent then the employee will be advised that the Second Review meeting will be deemed as the completion of the informal stage of the Disciplinary Policy and further poor attendance will be subject to the formal stage of the University’s

Disciplinary Policy. The decision will be confirmed in writing and a record retained on the employee's personal file.

6.3.1 The employee will be entitled to be accompanied at both the Initial Absence Review meeting and the Second Absence Review meeting. Section 8 refers.

6.3.2 The University does not have its own Occupational Health department but under a service level agreement utilises the services of Carmarthenshire County Council's Occupational Health department. The University reserves the right to refer an employee to the Occupational Health department at any stage in the procedure for addressing intermittent/persistent short term absences. Referral is not a sanction or form of quasi-disciplinary action. The purpose of the referral will be to obtain an independent professional medical assessment of the employee's health in the context of his/her employment in order to provide support for the employee.

#### 6.4 Long Term Absence

There is no time limit in law after which it is fair to dismiss an employee who is absent from work. The key question is whether or not in all the circumstances the employer can reasonably be expected, in light of the requirements of its operation, to wait any longer for the employee to recover and resume working.

6.4.1 Unless there is reason to believe that the employee is not absent from work due to genuine sickness or injury the University will adopt a supportive and sympathetic approach to the long term absence of an employee. However, ultimately it may become necessary for the University to consider termination of employment. Before reaching a decision to dismiss the University will:

- Review the employee's absence record to assess whether or not it is sufficient to justify dismissal;
- Consult the employee;
- Obtain up to date medical advice;
- Advise the employee in writing as soon as it is established that termination of employment has become a possibility;
- Meet with the employee to discuss the options and consider the employee's views on continuing employment;
- Review if there are any other roles into which the employee could reasonably be re-deployed. Where the employee's condition amounts to a disability particular reference will be made to the provisions of the Equality Act 2010.
- For the purpose of this procedure long term absence is defined as continuous absence of 4 weeks or more. The intervals between the absence review meetings may be adjusted depending on individual circumstances. The Director of Human Resources should be consulted.

6.4.2 Absence review meetings will normally be conducted by the line manager supported by the HR Department. The employee may be accompanied in any absence review meeting. Section 8 refers.

6.4.3 The line manager and or HR department will maintain reasonable regular contact with the employee throughout the period of sickness absence. The frequency and form of this contact e.g. telephone calls, home visits will depend upon the circumstances and may vary from case to case. The purpose of such contact is to reflect genuine concern for the well being of the employee, ascertain the nature and progress of the illness, and to offer support.

6.4.4 Home visits will be by prior arrangement, other than in exceptional circumstances e.g. where reasonable attempts to contact the employee have failed; where abuse of the sick scheme is suspected. If the employee wishes, a recognised trade union representative, friend or relative may be present. Line Managers must not make unaccompanied **formal** visits to the homes of employees.

6.4.5 Where an employee has been absent for a period of 4 weeks and there is no sign of an immediate return to work then the case may be referred to the Occupational Health department.

6.4.6 In cases where the medical conditions are clearly established with a predictable and defined period of absence and is unlikely to lead to further periods of absence e.g fractured bones, post-operative recovery, referral to the Occupational Health department may be deferred. However, should complications arise affecting or delaying the recovery of the employee referral to Occupational Health may become appropriate.

### **6.5 Phased Return to Work**

Where appropriate, and subject to receipt of a fit note in which the medical practitioner advises that the employee “may be fit for work taking account of the following advice” the University will offer flexibility in facilitating a return to work. There may be occasions where an employee has recovered from a long term debilitating illness but would find it difficult to return immediately to their full contracted duties and hours of work without further risk to their health, or when an employee has sufficiently recovered to be able to carry out some of their duties/hours of work. In such cases line managers are encouraged to take a flexible approach to facilitate the employee’s earlier return to work by allowing a phased return, where possible. The needs of the individual and the University will be considered in determining the way forward.

6.5.1 Following discussions with the employee in conjunction with the line manager, the HR department will seek advice from the Occupational Health department on a suitable structured programme for a phased return to work. This may include restrictions on work activities and/or reduced hours, again having regard for the needs of the University and the employee’s normal duties.

6.5.2 The period of time over which the return is phased will be based on advice obtained from the Occupational Health department and agreed between HR, the line manager and the employee.

6.5.3 It is recommended that full pay during such phased return arrangements should be allowed for a maximum of the first 4 weeks. After that period the employee will normally be paid for the actual hours worked.

### **6.6 First Absence Review Meeting - Long Term Absence**

The first absence review meeting will take place at around 6 weeks of continued absence. A full discussion on the matter will take place and will have regard to received medical advice and the Occupational Health report (if appropriate). Consideration will be given to possible options that might be pertinent in the circumstances e.g. a phased return to work, redeployment to another post or part-time work and if possible agreement received on the way forward. In certain circumstances it may be pertinent to discuss the possibility of termination of employment. A time scale will be agreed for a further review of the case which would normally be around 9 weeks of continued absence.

### **6.7 Second Absence Review Meeting – Long Term Absence**

The second absence review meeting will follow a similar format to the first meeting and provide the opportunity to discuss any further medical advice as well as the agreed action from the previous meeting. Any new information will be considered and where appropriate the action plan revised accordingly. As before, possible outcomes will be discussed, including, where appropriate, the possibility of termination of employment and a way forward agreed. The employee will be advised to ensure that, wherever possible, any further evidence is available prior to the Final Absence Review Meeting which will take place no later than 16 weeks of continued absence. In the interim period between the second and final review meetings further advice from the Occupational Health department may be sought.

### **6.8 Final Absence Review Meeting – Long Term Absence**

Following the established format of previous absence review meetings the situation will be discussed fully with the employee and any further medical information taken into account as appropriate. If there is no foreseeable return to work, re-deployment has not been a feasible option and no other solution has been found to facilitate the employee’s return to work, the employee will be informed that the employment is likely to be terminated. The employee’s views will be sought.

## **6.9 Permanent Ill Health**

The University will have due regard to the reports from the Occupational Health Physician engaged by the Occupational Health Department which show that the employee is permanently unfit to discharge efficiently the duties of his/her post or any comparable employment. Where the employee's condition amounts to a disability particular reference will be made to the provisions of the Equality Act 2010 in these circumstances. The University will offer appropriate support to an employee who wishes to investigate the possibility of ill health retirement.

## **6.10 Dismissal**

Genuine sickness absence is recognised as something which is not normally within the employee's control and a formal disciplinary hearing under the terms of the Disciplinary Policy is likely to be inappropriate. The Director of Human Resources will ensure that the employee's situation and the University's actions in response are fully heard by the Vice Chancellor, or nominee, who will have not previously been involved in the process. The Vice Chancellor, or nominee, will decide whether it is reasonable in light of all the circumstances to dismiss the employee on grounds of continued inability to attend work due to long term ill health, or on grounds of permanent ill health.

Dismissal will attract appropriate contractual notice. The dismissal will be confirmed in writing and the employee will be advised of their right of appeal. The employee will be invited to attend an appeal meeting of a special committee of the Council.

## **7. SPECIAL CIRCUMSTANCES**

### **7.1 Communicable Diseases**

Where an employee is known to be suffering from a communicable disease, he/she may be suspended from duty on the advice of the nominated Health Official within the local authority. The employee will remain excluded from work until professional medical advice is received that confirms that it will be appropriate for the individual to return to the workplace.

### **7.2 Infection Control**

If an employee is suffering from or maybe the potential source of an infectious condition which would make it inappropriate for them to continue with normal duties, HR will liaise with the line manager/supervisor in an attempt, where possible, to transfer the employee to alternative work (e.g. move staff from a vulnerable client group or from food handling) or suspend from duty on medical grounds. Such action would normally be taken in consultation with the Occupational Health Officer or the nominated Health Official within the local authority.

- 7.2.1 Similarly if an employee is exposed to a source of infection which poses a risk to them (or in some circumstances their cohabittees) and which cannot be adequately controlled by normal practices and procedures the University might be inclined to move or suspend the vulnerable employee. Such action will normally be taken in consultation with the Occupational Health Advisor or the nominated Health Official within the local authority.

### **7.3 Terminal Illness**

Where the University is aware that an employee has a terminal illness the University will approach any consideration of the employee's situation and/or continued employment in a particularly sensitive way. The University will review the formal absence procedure and based on individual circumstances, will consider the appropriateness of certain aspects of the formal absence procedure.

### **7.4 Abuse of the Sickness Absence Management procedures**

Unfortunately, it is realised that abuse of the system might occur with a minority of staff. This is regarded as unacceptable, and the University will deal firmly with this practice, recognising that it has a detrimental impact on colleagues and the delivery of services.

- 7.4.1 Non-compliance with the provisions of this policy by the employee may lead to the withholding of sick pay and may constitute misconduct and be dealt with in accordance with the University's Disciplinary policy.

7.4.2 Where an alleged abuse of the Sickness Absence Management Policy is detected then the matter will be treated as a conduct issue and will be dealt with under the full terms of the University's Disciplinary policy. In accordance with the terms of the Disciplinary policy the alleged abuse will be investigated before any disciplinary action is taken.

7.4.3 In the context of Sickness absence examples of employee conduct which could influence disciplinary action include:

- failure to follow the notification rules without good reason
- providing an unsatisfactory reason for being absent from work
- failure to provide medical certificates when required
- engaging in activities which are known to be inconsistent with the nature of the illness or which delays recovery
- deliberate falsification of self certification or medical certificates

The list annotated above is not exhaustive.

## 8. RIGHT TO BE ACCOMPANIED

The '**right to be accompanied**' will be applicable at all stages of the Sickness Absence Management policy. Due to the sensitivity associated with sickness the range of companions will, in certain circumstances, other than the where the disciplinary policy has been invoked, be extended, by agreement, to include relatives or friends.

*'The employee can be represented by a 'Companion' i.e. a recognised Trade Union representative or a work colleague. This 'Companion' will be permitted to address the meeting in order to put the employee's case, to sum up the employee's case, to confer with the employee or to respond on their behalf to any view expressed at the meeting. The 'Companion' **will not have** the right to answer questions on the employee's behalf. The employee will have the right to ask for meetings arranged as part of this policy to be postponed for up to one week if the 'Companion' cannot attend on the date given. The request for a postponement should be made in writing and confirmed by the University, in writing.'*

**Appendix 1**

**SELF CERTIFICATION for Sickness/Injury Absence**

This form must be completed for all periods of absence from work due to sickness, including half days, then countersigned by your line manager and returned to the Human Resources Department on your first day back at work.

**PART 1: Employee Details**

Name of Employee: .....		Staff No: .....	
Address: .....			
Job Title: .....		Department:.....	
Faculty.....			
Campus:.....			

**PART 2: to be completed by Employee for absence of 1 – 7 days ( inclusive of week-ends)**

	Date	Time
First day of sickness: .....	.....	..... am/pm
First Working day of sick: .....	.....	..... am/pm
Reason given for absence:.....		
Notification of absence received on:.....		..... am/pm
I understand that to give false information on this form could mean the withholding of Occupational Sick Pay and may also lead to disciplinary action being taken.		
Signed: .....		Signed: .....
(Employee)		(Line Manager)

**PART 3: REASONS FOR ABSENCE**

If absence if due to an accident or injury at work, has accident/incident form been completed? Yes/No

**PLEASE INDICATE THE CATEGORY YOU FEEL BEST DESCRIBES YOUR ILLNESS (ONE CATEGORY ONLY PLEASE):**

<input type="checkbox"/> Allergy/Reaction	<input type="checkbox"/> Dental/Mouth Related	<input type="checkbox"/> Nerve Related/Stress/Anxiety/Debility/Depression
<input type="checkbox"/> Anaemia	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Operation/Post Op Recovery
<input type="checkbox"/> Angina/Chest Pain	<input type="checkbox"/> Diarrhoea	<input type="checkbox"/> Prostate or testicular problems
<input type="checkbox"/> Appendicitis	<input type="checkbox"/> Ear Related	<input type="checkbox"/> Road Traffic Accident
<input type="checkbox"/> Arthritis	<input type="checkbox"/> Epilepsy fits or convulsions	<input type="checkbox"/> Skin Problems
<input type="checkbox"/> Asthma	<input type="checkbox"/> Eye Related	<input type="checkbox"/> Sinusitis
<input type="checkbox"/> Back Trouble/Spine problems	<input type="checkbox"/> Fractures/dislocations/sprains	<input type="checkbox"/> Sore Throat
<input type="checkbox"/> Blood Pressure Problems	<input type="checkbox"/> Gynaecological	<input type="checkbox"/> Stomach Upset
<input type="checkbox"/> Bowel Problems	<input type="checkbox"/> Headache/Migraine	<input type="checkbox"/> Temperature/Sick/Headache etc
<input type="checkbox"/> Breast Problems	<input type="checkbox"/> Hospital/Tests	<input type="checkbox"/> Viral Infection/Virus
<input type="checkbox"/> Chest Infection	<input type="checkbox"/> Influenza	<input type="checkbox"/> Other ( please specify)
<input type="checkbox"/> Cough/Cold	<input type="checkbox"/> Kidney Problems	
<input type="checkbox"/> Cystitis	<input type="checkbox"/> Muscle Pain/Sprain	

**PART 4: To be completed by the Line Manager**

	Date	Time
Resumed work: .....	.....	..... am/pm
Approval for payment - Signed: .....		
Designation: ..... Date:.....		

## Appendix 2

### Occupational Sick Pay

1 <sup>st</sup> year of Service	Full Pay for 1 month and after completing four calendar months' service before the start of the period of absence through illness, half pay for 2 months.
2 <sup>nd</sup> year of Service	3 months full pay, 3 months half pay
3 <sup>rd</sup> Year of Service	4 months full pay, 4 months half pay
4 <sup>th</sup> Year and successive years service	6 months full pay and 6 months half pay

## Appendix 3

### Return to work discussion guidelines

When dealing with attendance issues managers should ensure that they adhere to principles of sensitivity and confidentiality.

The purpose of the Return to Work Discussion (RTWD) will be to:

- Acknowledge the employee's return to work, welcome them back and if appropriate update them on any relevant issues or changes since their absence
- Offer support to the employee, if appropriate
- To identify reasons for the period of absence, if appropriate.
- Ascertain the likelihood of any recurrence
- Establish whether there are any underlying problems that are preventing regular attendance and determine what can be done to remedy those problems-any information given must be kept confidential and if appropriate specific details in relation to question 5 and 7 need to be recorded on the form
- If appropriate to the type of absence, provide an opportunity to reinforce the importance of the employee's role in the service area; the effect of the absence on the department and the University expectations for regular attendance at work.

Managers will be required to make necessary arrangements to undertake the discussion with an employee upon their return to work and unless wholly impracticable, within 5 working days of their return to work.

Managers will be expected to complete the RTWD form during the discussion and maintain a confidential record of each discussion, including any action to be taken following the RTWD. The form contains a set of standard questions for managers to guide the discussions. Clearly each return to work discussion will be a unique occasion for the manager and the employee. Managers should apply the good practice skills to conducting the discussion ensuring the discussion is handled with sensitivity. Managers should not rigidly adhere to the questions using an interrogative manner but use them as a guide for the discussions depending on the particular circumstances of the absence and the employee. When arranging a return to work discussion with an employee, managers should ensure that employees are aware that a standard form will be completed so that the areas likely to be discussed are not a surprise for the employee. A copy of the completed RTWD should be forwarded, under confidential cover, to the Human Resources Department.

There may be circumstances, at the request of the employee, when the nature of the absence may require the interview to be conducted by a person of the same sex as the employee. In such circumstances managers should make the necessary arrangements for an appropriate manager of the same sex to conduct the interview.

The RTWD required managers to come to a conclusion at the end of the discussion as to an appropriate course of action. This action should be discussed with the employee on conclusion of the RTWD and the implications of the decision should be fully explained. The pro-forma outlines a progression of recommendations as a guide to be used to tackle both long term and frequent and intermittent absence:

- **Managerial Support-** A referral to the Occupational Health Advisor may have taken place during the period of absence and in these circumstances the manager should refer to the information provided to ensure any recommended adjustments have been made and whether there is any requirement for a further referral even though the employee has returned to work (see below).

Following absence of any duration the return to work discussion may result in the identification of support to assist the employee in achieving better attendance; for example dealing with effective working relationship issues, teambuilding, regular support sessions, or a review of working arrangements/patterns. Managers should not commit themselves to any measures that they cannot fulfil. Therefore for some measures there may need to be further discussion with more senior management before commitment can be made and the employee will need to understand this.

- Referral to Occupational Health/Counselling- As outlined above, the employee may be returning to work following a period of absence where at least one referral to the Occupational Health Advisor has been made. The Occupational Health Advisor may have asked for a review of ongoing concerns about the employee's health even though they are at work and may require further occupational health guidance. The provision of the Occupational health Advisor service is there to support employees and managers and therefore a referral can be appropriate in these circumstances.

Where there has been no previous referral or the referral was some time ago and where the manager identifies with the employee that there may be an underlying medical problem or where the manager has concerns about any frequent and intermittent absence which may or may not be linked to an underlying medical problem, a referral to the Occupational Health Advisor may be appropriate.

The Occupational Health Advisor will within the bounds of confidentiality be asked to advise the manager on whether the employee's medical condition affects their ability to undertake the tasks required and to attend work on a regular basis. There should be consideration of whether the Disability Discrimination Act covers the condition and if so whether there are any health care supports or workplace adjustments that can enable the employee to achieve an acceptable level of attendance.

Counselling- During the discussion the employee may disclose other concerns or some underlying problem that may indicate a need for counselling support. Any processing of counselling support will only be undertaken with the consent of the employee concerned and is not obligatory.

Progress to more formal procedure - Where a manager is concerned at the lack of progress of an employee in achieving improved attendance where concerns have been previously raised at a return to work discussion, or where the manager suspects that the employee may have abused the Sickness Absence Management Policy, the employee should be informed that the manager will consult with the HR Department about more formal procedural steps to address the matter.

# RETURN TO WORK DISCUSSION FORM

Managers must ensure completion of this form for all absences. The form should then be sent under confidential cover to the Human Resources Department to be placed on the employees personnel file and actioned, where necessary. Please refer to the guidelines before conducting a discussion with an employee.

Surname:.....

Forename.....

Position:.....

Faculty/School/Department.....

The purpose of the return to work discussion is to ensure that every employee appreciates that whenever they are absent from work, an important member of the team is missing. The standard questions below are to be used by the manager to guide the discussion. Please refer to the Return to Work Discussion Guidelines and the Sickness Absence Management Policy for guidance.

- 1. What was the reason for the absence? .....
- 2. Was this absence related to a previous absence? YES/NO  
(If YES please give details).....  
.....
- 3. Is there any likelihood of a reoccurrence? YES/NO
- 4. Did you seek medical advice from your Doctor/Consultant  
YES/NO
- 5. Do you require further medical treatment?  
(If yes please give details) .....  
.....  
.....
- 6. Did the Doctor/Consultant give any advice in respect of your work/work pattern?  
.....  
.....
- 7. Are there any underlying problems relating to the absence that you wish to discuss (personal, work or domestic) and, if so can any assistance be given to you by your Line Manager or Department?  
.....  
.....  
.....

Was the absence notified in accordance with the correct procedure?

YES/NO

(if not please detail reasons why not)

.....  
.....  
.....

Self certification completed

YES/NO

Medical certificate provided

YES/NO

OUTCOME OF DISCUSSION

The outcome of the discussion is: (please tick)

- 1. No further action in relation to this period of absence is required
- 2. Managerial support to assist employee to achieve better attendance
- 3. Referral to Occupational Health Advisor/Counselling
- 4. Progress to more formal procedure

This decision is appropriate for the following reasons:

.....

.....

.....

.....

Manager's Name .....

Position .....

Faculty/Department .....

Manager's signature.....

Date.....

I acknowledge Return to Work Discussion Forms shall be retained on my personal file

Employee's signature.....

Date.....

THIS FORM SHOULD BE SENT UNDER CONFIDENTIAL COVER TO THE HUMAN RESOURCES DEPARTMENT



## Document Version Control

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### Related documents

Capability Policy  
Disciplinary Policy  
Grievance Policy