



**SCHOOL NAME**

**SICKNESS ABSENCE  
MANAGEMENT**

**MODEL POLICY & PROCEDURE**  
(For School-Based Employees)

**June 2018**

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## **SECTION 1 | OUTLINE OF POLICY**

### **1. INTRODUCTION**

- 1.1 This policy has been developed to assist governing bodies, Head teachers and managers to manage sickness absence when an employee is absent from work.
- 1.2 It is designed to assist in the monitoring and management of sickness absence levels within the school(s) indicating when appropriate action should be implemented when trigger points are reached and / or where there are concerns about an employee's absence levels and welfare.
- 1.3 As well as improving service quality, effective sickness absence processes can ensure that any issues of concern are identified early on, leading to support for the employee and appropriate action by the School.
- 1.5 Where sickness absence is prolonged or where there is a high incidence of separate periods of absence that have an impact on achieving the best outcomes for pupils the sickness management procedure must be implemented and may lead through the various warning stages to dismissal.
- 1.6 This policy covers managing absence from work due to sickness. There is a separate policy and procedure *Schools Leave of Absence Model Policy and Procedure* that covers other absences from work, eg leave for public duties, personal and domestic reasons.

### **2. SICK LEAVE ENTITLEMENTS**

- 2.1 The arrangements and conditions for sick pay entitlements are set out in both teachers (Burgundy Book) and support staff (NJC-National agreement on conditions of service).

### **3. SCOPE**

- 4.1 This policy applies to all school-based employees on permanent, temporary and fixed-term contracts.
- 4.2 For staff on probation, as well as this policy and procedure, the school's probationary guidelines should be used for support staff on NJC terms and conditions and the Statutory Induction Guidelines for Newly Qualified Teachers.

### **4. AIMS OF THE POLICY**

- 4.1 This policy and procedure aims to minimise the impact of sickness absence in schools on service delivery and to reduce the average number of working days taken as sick leave by school based employees.

- 4.2 An employee's absence must be handled with care and sensitivity. It is important to establish good communication during the absence and this process should not be seen as heavy handed or lacking in sensitivity.
- 4.3 All employees will be treated equally and consistently. This procedure will not be applied as a punitive measure but as a tool to improve attendance at work or to enable employees to maintain their attendance. Consideration will be given to any diversity issues that may also have an impact on sickness levels, e.g. harassment within the workplace. Head teacher/managers may also exercise discretion in certain circumstances with the agreement of the governing body e.g. major flu epidemic or where it affects a significant number of the school workforce.
- 4.4 The Head teacher will be responsible for ensuring that this policy is followed where there are concerns regarding an employee's level of sickness absence and may delegate responsibilities to other senior members of staff as appropriate.
- 4.5 Where the Head teacher's attendance is a matter of concern, the Chair of Governors will manage the sickness absence.

## **5. KEY PRINCIPLES**

- 5.1 The following principles are designed to ensure that schools take proactive measures to effectively manage sickness absence whilst having regard to the need to support employees who are sick and treat them with sympathy and understanding.
- 5.2 For any school it is vital that staff attendance is managed properly as poor levels of attendance can lead to:
- a) Disruption to teaching and learning for pupils
  - b) Increased pressures on colleagues to cover workload
  - c) Reduction in the quality of service and support
  - d) Financial difficulties for the school due to increased cover costs
- 5.3 In practice, the Head teacher and/or designated line manager will among other actions be expected to:
- a) Take the appropriate action when an employee's sickness level reaches a recommended trigger point;
  - b) Investigate and discuss every case in a timely and appropriate manner;
- 5.3.1 Establish a clear plan of action with their employees by setting achievable trigger points and devising local strategies for an improvement of attendance.
- 5.3.2 Liaise with the OHS (OHS) in managing attendance;

- 5.3.3 Monitor employee attendance at work and introduce any appropriate measures to address the issues identified;
- 5.3.4 Monitor and manage any cases of long-term sickness absence;
- 5.3.5 Actively seek to rehabilitate staff to enable a safe and planned return to work.
- 5.3.6 Consider reasonable adjustments to the workplace and/or working arrangements e.g. phased return to work, to achieve a return to work and regular attendance.
- 5.3.7 Be mindful of the employee's disability when following this procedure. Ensure that reasonable adjustments are considered when facilitating meetings, reviewing working arrangements, the workplace and/or equipment. (further guidance can be sought at section x)
- 5.3.8 Where sickness absence is prolonged or where there is a high incidence of separate periods of absence that have an impact on service delivery, it is important that the sickness management procedure is implemented.
- 5.3.9 When an employee is prevented from attending work because of contact with infectious disease they shall be entitled to receive normal pay. The period of absence on this account shall not form part of the employee's sickness entitlement.

## **6. ROLES AND RESPONSIBILITIES**

### **6.1 Employee Responsibilities**

- 6.1.1 To understand the importance of good attendance at work and the impact absence has on service delivery and the additional strain put on colleagues.
  - a) To be committed to having good attendance at work.
  - b) To comply with the sickness and absence reporting procedures in place.
- 6.1.2 Notify the Head teacher/manager if an infectious disease occurs in the home where the employee is living and await advice from the Head teacher as to whether they should refrain from school duties (following advice from OHS). The employee would usually expect to continue school duties pending receipt of instructions from the OHS except in the event of a notifiable disease. If the employee is required to refrain from school they will be required to follow the normal sickness reporting procedures.

### **6.2 Headteacher/Management Responsibilities**

- 6.2.1 Staff must be made aware of the policy and procedures for reporting sickness absence.

- 6.2.2 Contacting employees who have not reported their absence as required;
- 6.2.3 Ensuring that employees are aware of the support provided through the Council's independent counselling service 'Workplace Options' and other support service e.g. Teacher Support Network;
- 6.2.4 Head teachers/managers are also responsible for ensuring that the Education (Teachers) Regulations are applied and that a teacher or other worker with children and young persons should not continue in their post if the person does not have the mental or physical capacity to perform the duties of the post.

### **6.3 Governing Body Responsibilities**

- 6.3.3 Monitor the Head teacher's absence and apply the appropriate procedures
- 6.3.4 Review sickness absence data and in liaison with the Head teacher review absence data, associated costs and strategic direction to help absence figures improve.

### **6.4 Human Resources Service Provider Responsibilities**

- 6.4.3 Provide advice and assistance on individual cases as requested including, where appropriate, referral to the OHS so that an employee's medical condition can be confirmed.
- 6.4.4 Provide support to the head teacher or governing body by attending absence review meetings and hearings.
- 6.4.5 Ensure that the management of sickness is given a high priority and Head teachers are given appropriate support on the action they need to take.
- 6.4.6 Provide Headteachers and Senior Manager with training on the policy.

## **7. ACCOMPANIMENT, REPRESENTATION AND REQUESTS FOR POSTPONEMENTS**

- 7.1 Although employees have no automatic right to be accompanied at informal meetings, an employee may have representation at this stage.
- 7.2 Employees can be accompanied or represented at the First Formal meetings, final formal hearings and appeal hearings only by a trade union official, or a work colleague.
- 7.3 Where an employee is to be accompanied or represented, they should provide relevant details to the manager convening the meeting sufficiently in advance of the meeting.

- 7.4 If copy documentation is requested directly by their representative or companion, the manager should ensure that this has been done with the permission of the employee.
- 7.5 The manager and the employee's representative should aim to agree a convenient time for a hearing in advance to avoid postponements.

## **SECTION 2 | Outline of the Procedure**

### **1. INTRODUCTION**

- 1.1 This procedure explains what managers must do when an employee's absence from work becomes a concern.
- 1.2 Many employees take little or no sickness absence during a year. However, where there is high or under-managed sickness absence, it does have a direct impact on the cost and quality of the school services, as well as an effect on the staff who do attend regularly.
- 1.3 Regular and prompt attendance is a contractual condition for all employees. The governing body is committed to maintaining good attendance levels. The governing body will also manage sickness with sensitivity bearing in mind the occupational sick pay entitlement. However, nothing in this policy and procedure will prevent or restrict the governing body's right to terminate employment before entitlement to sick pay is exhausted.
- 1.4 Employees who abuse this procedure or the provisions of the sick pay scheme may have their occupational sick pay withheld and/or be subject to disciplinary action. Examples of abuse include: not reporting sickness or providing medical statement of fitness for work (fit note) as required; unreasonably failing to attend meetings with management or the OHS and engaging in activities which are inconsistent with the reported illness or which may aggravate the illness or delay recovery (such as undertaking employment).
- 1.5 There are four key aims at all stages of the procedure:
- a) Investigating the absence to understand its causes and the effect it will have on the employee's work. This should be a joint investigation with the employee.
  - b) Taking all reasonable steps to collaborate with staff in tackling health, work or welfare issues- including work-related stress.
  - c) An employee must be informed immediately of any possibility that their job may be at risk.
  - d) Exploring any options with the employee, which may permit them to improve their attendance or enable them to return to work.

## 2. TRIGGER POINTS & MONITORING PERIOD

2.1 Early involvement by managers can play an important part in reducing sickness absence.

2.2 The School operates trigger points for sickness absence, which can help managers to formally manage an employee's sickness absence. However, trigger points are only a guide to assist managers and may not automatically be applied in all cases. Consideration can be given to taking action at an earlier or later stage depending on the circumstances (see sections 2.3.2 & 2.5). The school's traded HR provider can provide advice to ensure that any action is consistent with other decisions in similar circumstances across the school.

### 2.3 Trigger Points

2.3.1 Discretion, sensitivity and good practice are vital in handling individual cases.

Trigger Points	ACTION MANAGER IS TO TAKE
return to work after any sickness	return to work discussion
<ul style="list-style-type: none"> <li>8* working days of sickness absence in any 12 month period, (this can be either 8 consecutive days or an accumulation of days)</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>3 periods of sickness absence in any 3 month period,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>a pattern of sickness absence</li> </ul> <p>or</p> <p>20 working days continuous absence</p>	<p>For continuous absence begin sympathetic and regular contact with the employee.</p> <p>Consider referral to occupational health service and other action to examine whether the employee can be helped/assisted to give regular and efficient service</p> <p>Decide on appropriate action if required e.g. informal or formal action.</p> <p>Headteachers can use the deferred option at this stage see section 2.5</p> <p>This will trigger the formal stage of the procedure and Headteachers can decide whether that is appropriate or not</p>

\* the actual number of working days to be agreed by the governing body, however it is recommended that the minimum level is 8 days/ this number

will be pro-rata for those staff whose working week does not consist of 5 working days.

### **2.3.2 Managers' Discretion on Trigger Points**

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

2.3.2.2 Any extensions to the trigger points as a reasonable adjustment resulting from OH advice should be regularly reviewed.

2.3.2.3 If management wish to apply discretion to change an employee's trigger point then this should only be applied in certain circumstances.

### **2.4 Review/Monitoring Period for employees at work**

2.4.1 It is advised that a review/monitoring period be set for 2 months, or in certain circumstances this can be extended to a term. It is advised that a new trigger point be set for the length of this period. The trigger point that is set should be pro-rata'd to the length of the review period.

2.4.2 For staff who have a disability, trigger points for improvement can still be set, however at the review/monitoring meeting where the employee has not achieved the new trigger point a further monitoring period may be considered before moving to the next stage of the procedure.

2.4.3 If any employee fails to meet the new trigger point that has been set for the review/monitoring period, then the Line Manager/Headteacher will need to determine whether they move to the next stage of the process, whether a further monitoring period is required or deferred action is required.

2.4.4 If an employee continues to be off sick and trigger points have been reached, the nature of the illness should be considered before considering what action needs to be taken.

2.4.5 Where action is required Headteachers should consider the following ways of contacting employees to obtain information about their illness, treatment and its effects, prognosis and likely date of return to work :

- a) telephone conversation (see guidance notes)
- b) written invitation to attend meetings under the procedure.

### **2.5 Deferred Action**

2.5.1 If an employee hits the trigger points a meeting should take place to explore the reasons for the sickness and normally you would progress through the

procedure. However in certain circumstances such as an employee having routine surgery with a set period of recovery it may be appropriate to defer action being taken (refer to section 3 paragraph 3.2 planned operations). The Headteacher will decide and agree any “deferred action” or another manager will make a recommendation to the Headteacher to “defer action”.

- 2.5.2 Clearly if an employee is still absent this must be handled with care and sensitivity. If you have already established good communication during the absence this process should not be seen as heavy handed or lacking in sensitivity.
- 2.6 At the Stage 1 Meeting the OH report should be considered, including any, reasonable adjustments. Managers should follow the Absence Management Procedure although it is recognised that not all of the points require discussion, as the aim of the Absence Management Procedure is to focus on employee absences from work. HR advice should be obtained for these cases, including obtaining appropriate template letters.

### **3. PROCESS**

#### **3.1 Informal Stage**

- 3.1.1 The informal stage should commence when the 1<sup>st</sup> trigger has been exceeded or where management have concerns about the amount of sickness absence or pattern of sickness.
- 3.1.2 A meeting will take place to explore the following:
- a) the reasons for sickness absence,
  - b) any underlying work, welfare or domestic problems which may be contributing to the sickness absence.
  - c) offer flexible arrangements to enable the employee to discuss sensitive medical issues. (For example, they may wish to talk to or be accompanied by someone of the same race or gender).
  - d) raise any management concerns and explain the effect of absence on the work.
  - e) a review/monitoring period should be set with a new trigger point for that period (this is for employees who are currently at work only).
  - f) a further meeting should be arranged within an agreed timescale e.g. 2 months later (this is for colleagues who qualify as long term sick).
  - g) explain the School’s policies on sickness absence including the focus on whether the employee can give regular and efficient service.
  - h) explore any other options which may permit the employee to improve attendance or return to work.
  - i) keep accurate records and notes of the matters discussed.

3.1.3 For employees who are in work at the end of the review/monitoring period we would expect a meeting to take place to review the trigger point set for that period.

3.1.4 If an Occupational Health Referral has been made at this stage when the School are in receipt of it a meeting is required. This maybe in addition to the review meeting, especially if the report has not been received at the time of the above prior to moving on to the next stage. There may be certain circumstances where this may not be possible and we would advise that you take advice from your Traded HR provider.

## **3.2 Formal Stage**

3.2.1 Before a formal stage meeting is scheduled it is advisable to refer the employee to occupational health to seek advice on what support or reasonable adjustments may be required. Once this information is obtained it can be discussed at the formal stage meeting.

3.2.2 If the trigger points set at the informal stage are exceeded a first formal stage meeting should be arranged unless there are good reasons for remaining at the informal stage e.g. deferred action (section 2.5).

3.2.3 This stage can be initiated for employees who are continuously absent for 20 days or more without the need for the informal stage

3.2.4 The manager/Headteacher will, in formal meetings and discussions, continue with the four key activities set out at 5.2 above and if necessary arrange for another manager to conduct the meeting.

3.2.5 The manager/Headteacher will:

- a) consider the causes of the sickness absence and its effect on work, taking account of medical advice.
- b) explain School policy on sickness absence including the focus on whether the employee can give regular and efficient service.
- c) explore any work, welfare or domestic problems or other explanation offered.
- d) a review/monitoring period should be set with a new trigger point for that period (this is for employees who are currently at work only).
- e) issue any warning and determine a course of action which will take into account the needs of the School, and where possible, the interests of the employee.
- f) a further meeting should be arranged within an agreed timescale e.g. 2 months later (this is for colleagues who qualify as long term sick)
- g) keep records and notes of the matters discussed.

3.2.6 There can be more than one first formal stage meeting particularly if specialist consultant's reports are awaited. If a member of staff is on long-term sickness absence it is essential to maintain contact.

### **3.3 Final Stage**

3.3.1 The final formal stage of the procedure must continue with the four key activities set out in paragraph 2.1 above and arrange for the Headteacher/Panel of Governors , with authority to dismiss, to hear the case in a final formal meeting.

3.3.2 The Headteacher/Panel of Governors will consider:

- a) if the employee is capable of regular and efficient service after hearing from the manager and the employee.
- b) if the employee's health needs are compatible with the School's need for work to be done.
- c) any reasonable alternatives to dismissal including reasonable adjustments to the work or work place, medical redeployment, phased return, early retirement and so on.
- d) whether the employee has been treated reasonably in all the circumstances and in line with the four key activities of the procedure
- e) determine a course of action which will take into account the needs of the school, and, where possible, the interests of the employee.
- f) recommendation for dismissal may be considered in the case of any employee who has unacceptable level of sickness absence.
- g) where a decision is recommended for dismissal notice in line with the employee's contract must be paid.

### **3.4 Appeal**

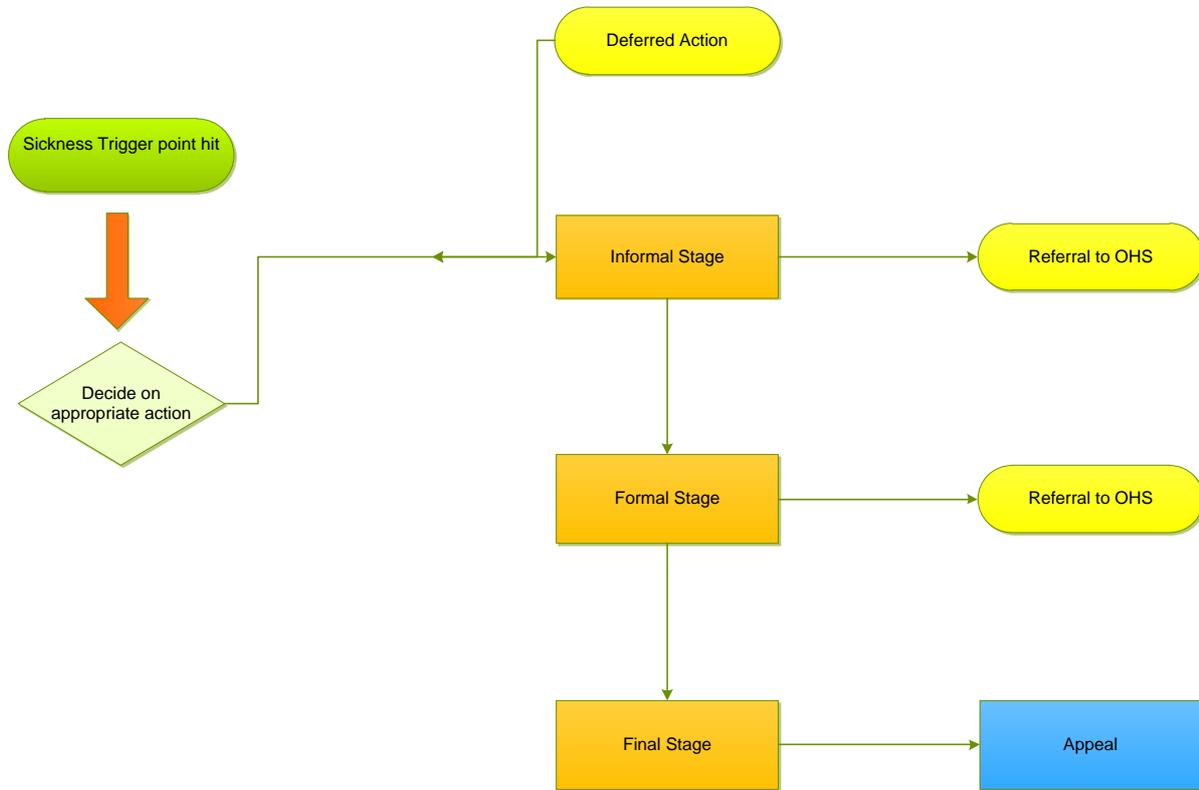
3.4.1 Employees should be advised that any appeal against dismissal must be lodged in writing with the Chair of Governors within 10 working days of receipt of the written decision.

3.4.2 It is important that an up to date Occupational Health report is obtained prior to the final stage meeting to ensure recent medical advice is available to the panel.

3.4.3 In recognising the governing body's duty of care to employees, Head teachers/ managers are expected to address concerns as soon as they arise. Informal reviews, and a referral to the OHS, may therefore take place before the trigger points are reached.

3.4.4 Where stress or depression is given as a reason for sickness, employees should be referred to the OHS so that early interventions can take place to address any underlying work-related issues.

## 4. OVERVIEW OF PROCESS



## **SECTION 3 | FURTHER GUIDANCE FOR MANAGERS**

### **1. RECORDING SICKNESS ABSENCE**

1.1 The Head teacher/manager will be required to maintain a sickness absence record upon which all sickness absence will be recorded. Following each period of sickness absence; following the return to work meeting the sickness absence record must be updated, including recording the reason for the sickness absence and any other relevant information.

#### **1.2 Return to Work Meetings**

1.2.1 Managers will, in an informal return to work discussion, offer flexible arrangements to enable the employee to discuss sensitive medical issues that may affect their attendance or work performance. This conversation must be confidential.

### **2. STATEMENT OF FITNESS FOR WORK (fit note)**

2.1 Periods of sickness absence in excess of seven continuous days (this includes weekends) must be covered by a medical 'fit note'. A fit note must be obtained from the general practitioner and submitted without delay to the head teacher/manager.

2.1.2 The requirement to self-certify sickness absence differs for teachers and support staff:

- a) Teachers will verbally notify for the first 3 days, from day 4 and up to 7 days they will self-certify using the appropriate form;
- b) Support staff must self-certify any sickness absence up to 7 days and then supply a GP fit note on the 8<sup>th</sup> calendar day of absence.

2.2 Fit notes obtained from either a general practitioner or the hospital should indicate that employees are fit or unfit to attend work in the following situations:

- a) where sickness absence falls within a period of annual leave and the employee wishes to reclaim the annual leave they are required to provide their manager with a fit note covering the period;
- b) on the day either side of a school closure period if they are absent employees must provide a certificate. If there is a cost to the employee to obtain a certificate the school will reimburse this payment.

## 2.3 **Fit note**

- 2.3.1 The fit note is a form employees will receive from a GP, which confirms whether the employee is either: (a) not fit for work or (b) maybe fit for work. In option (b) cases the GP make recommendations for reasonable adjustments to help the return to work. It is for management to determine whether they may be implemented.
- 2.3.2 If an employee wants to return to work prior to the fit note running out, the manager will need to ask the employee to return to their GP to seek a new fit note reflecting the situation in which the employee feels they are able to return to work on. If the manager has concerns regarding an employee's return to work due to their health or with the recommendations that are on the fit note, the manager should carry out a risk assessment to assess their concerns. Further advice may be sought from an HR Adviser, Health and Safety Adviser or OH as appropriate.

## **3. MEDICAL APPOINTMENTS/PLANNED OPERATIONS**

### **3.1 General Medical Appointments**

- 3.1.1 Employees must make non urgent medical/dental appointments outside of their normal working hours. Where this is not practical, they should be made to cause minimal disruption to the working day, i.e. lunchtime, early, late appointments and may be required to make up the time, either by staying late or by using flexi time where this scheme is operated.
- 3.1.2 We acknowledge there can be less flexibility for hospital/specialist appointments, wherever possible staff will make these appointments outside of School hours.
- 3.1.3 Employees must provide managers with proof of their appointment (e.g. an appointment card or copy of the appointment letter) when requesting time off to attend hospital appointments.
- 3.1.4 Necessary paid time off will be given for the purpose of all cancer screening and for routine medical appointments for employees with a disability.
- 3.1.5 Time off to accompany dependants is not sickness absence and must be taken as annual leave or flexi time unless management considers there are exceptional circumstances and authorised leave of absence.
- 3.1.6 Time off for cosmetic surgery must be taken from employees own leave entitlement or flexi time unless the GP confirms the employee is unfit and should refrain from work. If the cosmetic surgery is linked to a disability related condition, please speak to a HR Adviser.
- 3.1.7 Leave to undertake IVF treatment must be expected to be taken as Special Leave for Personal and Family Reasons.

## **3.2 Planned Operations**

- 3.2.1 Employees absent due to planned operations may reach the School's trigger points. Managers should discuss contact arrangements with employees before the start of their planned absence. Dependent upon the length of the planned recovery period operation it may be necessary to hold an informal welfare meeting to enable the school to receive an update regarding the employees recovery. Any planned absence may hit a trigger point, however the manager may defer from taking action under the policy as per section 2, 2.5 or should seek advice from their HR provider.
- 3.2.2 Managers should use this meeting to discuss with employees how they might best be supported (e.g. referral to OH, any reasonable adjustments) to enable them to return to work when they are well enough. An appropriate review period should also be set following this meeting as set out in this procedure.

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

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

## **3.4 Pregnancy Related Sickness**

- 3.4.1 Pregnancy related sickness should be recorded but will not be counted towards the trigger points.

# **4. OHS REFERRALS AND RECOMMENDATIONS GIVEN**

## **4.1 OHS Referrals**

- 4.1.1 A Head teacher/manager might have enough information from discussions with the employee to be able to deal with sickness absence effectively. However, often some further medical advice and guidance is required and the employee may need to be referred to the Independent Occupational Health Service (OHS). Employees may be asked to attend OHS if it is considered necessary as there may be an underlying medical condition and never just because a trigger point has been reached.
- 4.1.2 An employee also has the right to request a referral to OHS if they have concerns about their health.

- 4.1.3 Once the OHS has the necessary information, they will write to the referring manager with a summary of the effects and implications of any medical condition. This may not include full details, as medical information must be treated confidentially. Depending on the information provided, action may or may not be needed. The OHS will give guidance and advice on possible next steps which may include phased return or, altered hours. It is highly recommended that the advice given by the Occupational Health Physician should be carefully considered, especially with regard to enabling people to return to work and any disability issues. It is the Headteacher/manager's responsibility to make the decisions.
- 4.1.4 Employees are expected to attend OHS as requested. If any employee should refuse to go to OHS, they should be advised that being provided with the medical information may assist a return to work. In the absence of this information, decisions can be taken based on the information that is available, which could have implications for their continuing employment.
- 4.1.5 It is important for employees to attend the scheduled OHS appointment. If unable to attend the appointment, the employee should seek to re-arrange it, giving at least 48 hours' notice to OHS in order to avoid cancellation charges. They should inform the school of the new date.
- 4.1.6 Non-attendance at OHS appointments is not acceptable and the employee should give sufficient notice with good reason of non-attendance.

## **4.2 Reasonable Adjustments**

- 4.2.1 OHS may suggest some reasonable adjustments to help employees remain at work. Consideration as to whether reasonable adjustments are required for an employee should be given and if the manager does not feel that they can be accommodated, a discussion with their HR Adviser would be advisable.
- 4.2.2 Managers should ensure that all issues are considered and reasonable adjustments are recorded to provide an accurate source of information on what has been agreed.

## **4.3.3 Reasonable Adjustments - Phased Return to Work**

- 4.3.3.1 It may be recommended by OHS that the employee returns to work on a phased return basis, if this is possible. A phased return is no more than 4 weeks, during which time the employee is paid on full pay but with reduced hours. The aim of a phased return is to help deliver a gradual successful return to work.
- 4.3.3.2 A phased return period would normally be granted up to 4 weeks. However if OHS recommends a phased return of more than 4 weeks the manager should consider whether this can be accommodated.

4.3.3.3 Should this extension be agreed consideration can be given to reduce hours and pay with agreement from the employee. The member of staff would receive full pay for the first 4 weeks only and then only receive pay for the hours or days they work for any period over 4 weeks. The Headteacher can use their discretion to pay full pay for the completed phased return to work period. For support staff alternative options such as the use of the annual leave, flexi time, time off in lieu may be applicable.

#### **4.2.2 Reasonable Adjustments - Temporary Alternative Work**

4.2.2.1 OHS may suggest alternative work/duties for the employee. This may be considered in cases where an employee is unable to perform the full range of his/her duties but is able to attend work and undertake restricted duties or alternative duties for a temporary period, with the expectation that they will be able to resume full duties in the near future.

4.2.2.2 Temporary alternative work of this nature will normally be part of a return to work plan, incorporating the advice from OHS or it could be from a fit note. A temporary change to a contract for the duration of the GP's fit note does not constitute a variation of terms and conditions.

## **5. MEDICAL REDEPLOYMENT/SUSPENSION**

### **5.1 Medical Redeployment**

5.1.1 Where changes in working hours or working practices have been supported by medical recommendation, but are impractical or have been unsuccessful. There will be occasions when the School will need to consider alternative employment opportunities for the employee within the School/Employer. Advice can be sought from OHS regarding whether redeployment should be considered.

5.1.2 Redeployment is a positive act, which can enable the employee to continue in work and the employer to retain the skills and experience of valued employees, as well as meeting its legal obligations.

### **5.2 Medical Suspension**

5.2.1 In certain circumstances it may be appropriate to medically suspend an employee, eg:

- Where employees and their GPs consider they are fit to return to work (with or without adjustments) and the manager, in conjunction with a Senior Manager and HR, believe they are not and therefore require OH advice before allowing the employee to return back to work. If the GP recommends any adjustments which, having undertaken the necessary risk assessment, the manager cannot accommodate, employees will remain off sick for the period specified on the fit note.

- Medical suspension may also apply where the manager believes employees are not fit to attend work.. The manager may medically suspend the employee until OH advice is received.
- 5.2.3 Decisions to medically suspend should be based on sound health and safety or safeguarding grounds and managers must be able to demonstrate this.  
**NB:** Medical suspension is on contractual pay and does not impact on sick pay. It is also not a period of sickness absence and must not be recorded as such.
- 5.2.4 A review of the medical suspension must take place once the required medical information is provided by OH. If OH advises that the employee is able to return to work, the medical suspension will normally be lifted. If the manager is unwilling to end a medical suspension, HR advice needs to be sought to source other medical advice.

## **6. ILL HEALTH RETIREMENT**

### **6.1 Ill Health Retirement**

- 6.1.1 This can only be certified by an independent Occupational Health Physician and refers to permanent ill health following extensive medical reviews. Where the employee is incapable of performing efficiently the duties of their current employment or any other comparable employment with their current employer because of ill health or infirmity of mind or body ill health retirement may be recommended.
- 6.1.2 There are different tiers of ill-health retirement for members of both the Local Government and Teachers Pensions Schemes. This is dependent on whether the employee is judged to be permanently incapable of their current job but is judged capable of obtaining gainful employment before retirement age. Partial ill-health benefits can be granted which would cease to be payable upon the employee obtaining 'gainful' employment. Advice should be sought from HR on the process for ill-health or partial ill-health retirement.

## **7. UNDERLYING MEDICAL CONDITION - EMPLOYEE STILL AT WORK**

- 7.1 Some employees have underlying medical conditions which affect how they carry out their roles. They may not be absent from work but they may be unable to carry out their duties and responsibilities to a satisfactory level and/or fail to fulfil their contractual working hours due to the underlying medical condition.
- 7.2 In such cases managers need to refer them to OH to seek advice about the underlying medical condition. If OH confirms their performance and/or ability to undertake the full duties/hours of their substantive post is affected by their

underlying medical condition, the manager is advised to organise an informal meeting.

- 7.3 If an employee is suffering with stress-related illness, anxiety or depression, as determined on the Fit Note, it is essential that support is provided. If work-related issues are felt to be contributing to ill health, managers must discuss these with a HR Adviser so appropriate and reasonable action(s) can be taken swiftly.
- 7.4 Managers have a duty of care to employees to take reasonable steps to avoid putting them in situations that might impair their health. Managers also have a responsibility to the School/Council to protect it from litigation.
- 7.5 **Unfit for a prolonged period**
- 7.6 Advice may be received from OH that the employee is deemed unfit to return to their substantive role either permanently or for a prolonged period due to an underlying medical condition and redeployment is not recommended. In these scenarios it may be appropriate to escalate to a Final Stage Absence Management Hearing
- 7.7 Managers should be aware that an employee who has been found unfit to continue in their substantive post and who fails to secure alternative employment will face dismissal from the School/Employer. A positive approach will be taken to redeploy the employee. Managers should be aware of the requirements of the Equality Act 2010.
- 7.8 The above would need to be discussed between the HR Adviser and manager..

## **8. TERMINAL ILLNESS**

- 8.1 Managers should deal with such situations compassionately taking into account the wishes of the employee and their financial situation as well as the needs of the organisation. Each case will be considered on its own circumstances and advice must be sought from the pensions department (LPGS), OH and HR.
- 8.2 Managers should remind employees of the employee assistance programme which is also available to them.
- 8.3 There are occasions when employees with terminal illnesses wish to be dismissed and may be eligible for early release of pension benefits, if they are a member of the Local Government Pension Scheme. Factors to consider include the medical condition and how long the employee is expected to live, as these may be critical in establishing the most beneficial course of action.
- 8.4 In these cases employees will be kept on the payroll, even though they have exhausted their sick pay entitlement. Formally dismissing someone who is

dying elevates distress, where it is to the employee's advantage to remain in service due to their entitlement to benefits such as death in service.

- 8.5 Dealing with employees suffering from terminal illness can be very difficult for all concerned. Under the Equality Act 2010, terminal illness is defined as those who are expected to die within the next 12 months.
- 8.6 Each case will need to be dealt with individually. However, a referral to Occupational Health for support and advice for the employee concerned and colleagues may be deemed appropriate to confirm diagnosis.
- 8.7 Employees should also be reminded of the Employee Assistance Programme that is available to them.
- 8.8 The governing body of the school may wish to consider an extension to the employees sick pay in these situations (refer to section 5).

## **9. ACCIDENT AT WORK**

- 9.1 If an employee considers their absence to be caused by an injury at work, the employee must complete an Incident Report form and pass to their Head teacher. In the case of community and voluntary controlled schools this form should be forwarded to the LBWF Health and Safety Team. An employee who is absent from work due to an accident or injury at work should be treated in the same way as if their absence was due to sickness and therefore the Managing Sickness Absence Policy should be followed.
- 9.2 The Headteacher in conjunction with advice from both Occupational Health and the Health & Safety team will determine if the employee's injury was caused at work.
- 9.3 When it has been accepted by the school that the employee's injury did occur at work the employee will receive the same entitlement as they would under contractual sick pay terms. But this period of pay would not count towards their contractual sick pay entitlement. In accordance with the Green Book, Support Employees will not have one off set against the other. In accordance with the Burgundy Book, Teachers will receive the first six months of absence at full pay, followed by their normal sick pay.
- 9.4 An employee who is absent from work as a result of an accident that took place outside work with a third party and if the employee is subsequently successful in their claim and receives reimbursement of salary from the third party's insurer, the school would need to be reimbursed from this sum.

## **10. EXTENSION TO SICK PAY**

10.1 An extension to sick pay may be appropriate in some limited circumstances. The Chair of Governors may consider an extension to sick pay in exceptional circumstances such as a terminal illness. The decision to extend sick pay will be made on an individual case by case basis. The following principles will apply:

- a) For sick leave, the employee's full-pay period may be extended by a maximum of six months.
- b) For industrial injury, the period on full-pay, including any extensions, will not exceed 12 months.
- c) Where the full pay period is extended to cover the half pay period, the employee will normally be paid 1 month's half pay before moving to nil pay
- d) Shorter periods of extension may be granted. Where more than one extension is given this will be subject to the maximum periods above.
- e) Even when an extension is granted, it must be kept under review.

10.2 The reason for the extension must be one of the following:

- a) It is likely to contribute to an earlier return to work by easing the employee's financial situation or domestic concerns.
- b) It will enable a reasonable period without financial pressure on the employee in which the prognosis of the illness can be established.
- c) It will bridge a short gap between the end of the sick pay and the time the employee is due to retire.
- d) It will enable the Governors/Head teacher to deal sympathetically with an employee who has a terminal illness.
- e) The reason for the absence qualifies as an industrial injury.
- f) The reason for the absence qualifies under the provisions of the sickness entitlement for accidents at work (section 4).

## **11. EMPLOYEES WITH A DISABILITY**

11.1 The Equality Act 2010 prohibits discrimination because of disability and places a duty on employers to make reasonable adjustments to working practices and premises in order to accommodate the needs of individual employees and job applicants who have a disability. This means that an employee with a disability must not be treated less favourably than any other employee without justification.

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

11.1.3 If there are problems with an employee's attendance and an underlying medical condition or disability is identified, the manager must have an open

discussion with the employee and if appropriate seek advice from OH. OH may be able to suggest reasonable adjustments that could be made to either the physical place of work, or the work itself.

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

## **11.2 Reasonable Adjustments**

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

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

## **11.3 Examples of Reasonable Adjustments**

- a) Re-arranging seating or furniture in the office space.
- b) Amendments to the role – the individual completes the parts of the job they are able to and takes on other responsibilities whilst their colleagues will pick up the work they cannot complete.
- c) Flexibility in working practice – the consideration of flexibility in working times, the provision of additional breaks.
- d) Allowing extra time for reading or written work or travel time between meetings.
- e) Additional/modified equipment - to support in the workplace. Examples of this include specialised seating, ergonomic mouse, large screen, anti glare screen filter, or specialised software.
- f) Provision of a reader, interpreter or signer.
- g) Adjustments to systems/processes in place e.g. colour coding a filing system.
- h) Appropriate communication methods (i.e. large print manuals).
- i) Adjustments to absence triggers.

11.4 Managers should ensure that all issues are considered and reasonable adjustments are recorded to provide an accurate source of information on what has been agreed.

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

### **11.6 Review of Reasonable Adjustments**

11.6.1 Regular review should take place between the employee and manager to ensure that the adjustments put in place, which may include extension of trigger points resulting from occupational health advice, continue to be effective.

11.6.2 Specialist advice from third parties, such as OH, Access to Work or IT specialists may be needed before changes can be agreed and implemented.

### **11.7 Reasonable adjustments may be reviewed:**

- At any regular one-to-one meeting, supervision, or appraisal.
- At a return to work interview following a period of sickness absence or treatment.
- Before a change of job or duties or introduction of new technology or ways of working.
- Before or after any change in circumstances for either party including a change in the nature of the disability.

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

### **11.8 Absences Relating to an Employee's Disability**

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

- All reasonable adjustments have been considered to the number of day's absence which trigger a review under the procedure.
- All reasonable adjustments have been made to reorganise a job around functions that the employee can perform, and that

- All reasonable adjustments have been made to working practices, the workplace and its location that place the disabled person at a significant disadvantage.

## **11.9 Disability Related Sickness Absence**

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

### **11.10 Progressive conditions considered to be a disability:**

There are additional provisions relating to people with progressive conditions. People with HIV, cancer or multiple sclerosis are protected by the Act from the point of diagnosis. People with some visual impairments are automatically deemed to be disabled.