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Trust Policy Foreword

South Western Ambulance Service NHS Foundation Trust (SWASFT) has a number of specific corporate responsibilities and obligations relating to patient safety and staff wellbeing. All Trust policies need to appropriately include these.

Health and Safety - SWASFT will, so far as is reasonably practicable, act in accordance with the Health and Safety at Work etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and associated legislation and approved codes of practice. It will provide and maintain, so far as is reasonable, a working environment for employees which is safe, without risks to health, with adequate facilities and arrangements for health at work. SWASFT employees are expected to observe Trust policy and support the maintenance of a safe and healthy workplace.

Risk Management - SWASFT will maintain good risk management arrangements by all managers and staff by encouraging the active identification of risks, and eliminating those risks or reducing them to the lowest level that is reasonably practicable through appropriate control mechanisms. This is to ensure harm, damage and potential losses are avoided or minimized, and the continuing provision of high quality services to patients, stakeholders, employees and the public. SWASFT employees are expected to support the identification of risk by reporting adverse incidents or near misses through the Trust web-based incident reporting system.

Equality Act 2010 and the Public Sector Equality Duty - SWASFT will act in accordance with the Equality Act 2010, which bans unfair treatment and helps achieve equal opportunities in the workplace. The Equality Duty has three aims, requiring public bodies to have due regard to: eliminating unlawful discrimination, harassment, victimization and any other conduct prohibited by the Act; advancing equality of opportunity between people who share a protected characteristic and people who do not share it; and fostering good relations between people who share a protected characteristic and people who do not share it. SWASFT employees are expected to observe Trust policy and the maintenance of a fair and equitable workplace.

NHS Constitution - SWASFT will adhere to the principles within the NHS Constitution including: the rights to which patients, public and staff are entitled; the pledges which the NHS is committed to uphold; and the duties which public, patients and staff owe to one another to ensure the NHS operates fairly and effectively. SWASFT employees are expected to understand and uphold the duties set out in the Constitution.

Code of Conduct and Conflict of Interest Policy - The Trust Code of Conduct for Staff and its Conflict of Interest and Anti-Bribery policies set out the expectations of the Trust in respect of staff behaviour. SWASFT employees are expected to observe the principles of the Code of Conduct and these policies by declaring any gifts received or potential conflicts of interest in a timely manner, and upholding the Trust zero-tolerance to bribery.

Information Governance - SWASFT recognises that its records and information must managed, handled and protected in accordance with the requirements of the Data Protection Act 1998 and other legislation, not only to serve its business needs, but also to support the provision of highest quality patient care and ensure individual’s rights in respect of their personal data are observed. SWASFT employees are expected to respect their contact with personal or sensitive information and protect it in line with Trust policy.
1. Preface

1.1 South Western Ambulance Service NHS Foundation Trust is committed to providing a suite of employment policies designed to give staff a clear and consistent framework through which they are supported to carry out their roles and responsibilities safely and effectively. All policies are developed in consultation with Staff Side Representatives and are approved through the recognised Joint Negotiating and Consultative Committee and Directors’ group.

2. Introduction

2.1 The Trust is committed to promoting and maintaining the health, safety and welfare of all its employees and recognises the need for an understanding and supportive approach towards staff on sick leave and will take into consideration individual circumstances as appropriate in the application of this policy.

2.2 The Trust also recognises the significant impact of ill-health and sickness absence on the cost and quality of service delivery and wishes to encourage a culture of good attendance.

2.3 This policy and procedure aims to deal fairly, consistently and constructively with attendance issues. It sets out the support, processes and attendance standards involved in the management of sickness absence and identifies the circumstances where formal action may be taken.

3. Scope

3.1 It applies to all employees of South Western Ambulance Service NHS Foundation Trust (SWASFT).

4. Key Principles

- Attendance standards will be set, monitored, reviewed and clearly communicated to all Trust employees;
- Managers will deal sensitively, consistently and constructively with any employee whose attendance levels fail to meet the Trust’s attendance standards;
- Managers will provide the support and encouragement to bring about any necessary improvements in attendance but will initiate formal action where attendance fails to meet agreed standards;
- All sickness absence will be treated as genuine unless proven otherwise;
- Any sickness absence related to pregnancy or infertility treatment will be excluded for monitoring purposes;
All employees being managed under this policy must make themselves available for meetings with the Trust management;

The Trust will deal with all persistent short term or longer term sickness issues as a ‘capability’ matter i.e. a poor attendance record will be viewed as a performance, rather than a misconduct issue;

The Trust’s Disciplinary Procedure will however be used where the following sickness related issues occur:

- Failure to follow sickness reporting procedures (i.e. not notifying sickness to the correct person, by the stated time, failing to provide medical certificates, or failing to contact management to complete a return to work interview);
- Where there is evidence that the employee has not actually been ill (this will be viewed as fraudulently obtaining sick pay from the Trust) and may be referred to NHS Counter Fraud.

Where there has been a cycle of unacceptable attendance followed by an improvement and deterioration, employees who have attended a Formal Attendance meeting in consecutive 12 month period’s will be invited to a ‘final formal attendance management meeting’ on the third occasion. An outcome of this meeting could be a decision to terminate employment;

There is no requirement for the employee to have reached the limit of their sick pay entitlement before convening any of the formal hearings to discuss the future of their contracted employment;

Employees who attend work but leave early due to illness will have their absence recorded as sick leave and should report their sickness as per usual reporting procedures. Where less than 50% of the shift has been worked the sickness will count towards the sickness triggers detailed within this policy. In instances where 50% of the shift has been completed the absence will be recorded but will not count towards a trigger in isolation, but will do where there are two such instances within a twelve month period. Two occasions will be counted as one episode for the purpose of managing attendance in line with the triggers within this policy;

Authorised absence may attract occupational sick pay provided that the absence is neither a result of active participation in sport as a professional nor paid work carried out for an employer other than the Trust;

Sickness absence that is not reported in line with the provision outlined in section 6 may be considered unauthorised sickness absence;

Managers and union representatives will receive comprehensive training in all aspects of this policy and procedure;

Confidentiality will be observed at all stages of the procedure by all parties;

Right to representation will be provided to employees at all formal stages of the process, as detailed at section 18.
5. Key Roles & Responsibilities

5.1 Employees

5.1.1 It is an employee’s contractual responsibility to:

- Attend work regularly;
- Be familiar with this policy and meet identified attendance standards;
- Ensure they are aware of and then comply with the sickness notification procedures detailed in section 11;
- When aware in advance that health concerns will prevent the employee from undertaking their next shift, provide as much notice as possible to the Trust Sickness and Absence reporting line, with a minimum of three hours’ notice where possible. Continued failure to provide the minimum notice will be reviewed by direct line managers.
- When providing notice, sickness absence is not monitored until the first operational shift.
- Make initial contact with the Trust Sickness and Absence reporting line to book sick. At this time the employee may be required to stay on the telephone line to be transferred to their direct line manager or bronze commander.
- All employees to have a booking sick conversation within a 24 hour period.
- Book fit before 12 noon to ensure that day is not recorded as sickness absence
- Stay in contact with manager during a period of sickness absence and keep them informed on any progress made towards recovery. If no initial contact is made by the employee whilst on sick leave, the manager will have a right to contact the employee by telephone (an e-mail or letter) to enquire about their absence;
- Co-operate with reasonable requests to attend meetings and provide information when requested to do so by their manager. This may include a meeting at an alternative, suitable venue if it is not possible to attend their normal workplace;
- Consider actively any support offered by their manager, including suggested reasonable adjustments, other medical referrals, specialist advice or counselling;
- On receipt of an appointment to attend the Trust’s Occupational Health physician, where an appointment cannot be attended, the employee takes responsibility in arranging a new appointment with Occupational Health.
- It is a contractual condition of service to agree, at any reasonable time, to a medical examination by a doctor nominated by the Trust;
• Give permission, as required, for Occupational Health to contact their GP for a medical report;
• Submit medical certificates in a timely manner;
• Be aware of own sickness absence record;
• Engage with the Return to Work process;
• Attend formal attendance meetings when required and arrange their representation as necessary.

6. Managers

6.1 It is a manager’s responsibility to:

• Inform employees of the Trust’s attendance standards;
• Inform employees of their responsibilities under this policy;
• Inform employees of the departmental sickness reporting arrangements and those outlined in section 11;
• Take transferred calls from the sickness absence line, and to hold booking sick conversations with employees within 24 hours from when they confirm their absence with the ROC.
• Upload booking sick conversation details onto GRS.
• Conduct detailed return to work interviews within seven days of employees return to work, to then email document to HR Services and record conversation on GRS.
• Determine when an employee has a period of unauthorised sickness that has resulted from their failure to adhere to responsibilities outlined in section 5 whilst taking into account all relevant mitigation.
• Conduct a full and detailed review of potential contributing factors of sickness absence during all formal sickness review meetings, such as a review of overtime shifts, secondary employment, frequent causes of short term sickness, and health and wellbeing.
• During a review period, determine whether overtime or secondary employment should be suspended in order to support employee to return to their full health, referring to OH advice as and when appropriate.
• The manager may also advise employees that the formal attendance meeting will be considered during the employee’s potential development or job opportunities, career conversation outcome as detailed below, and will be noted by the Head of Department who may decide to send a follow up letter outlining concerns. This may demonstrate the employee’s lack of performance within their role, which would warrant the prevention of their progression along the pay increment. Any decision to defer incremental progression for this purpose must be reviewed and authorised by the Deputy Director of HR and OD.
• Develop a working environment where employees are encouraged to attend work regularly and where good attendance is recognised and celebrated;
- Provide support, advice and direction towards resources/policies/benefits designed to help employees;
- Keep in touch with employees who are absent due to longer term sick;
- Identify and take appropriate action where attendance levels fall below the expected standard;
- Offer support and assistance as appropriate i.e. Occupational Health, counselling, Employee Assistance Service;
- Maintain records of all sickness absence using Trust documentation
- Record any actions agreed at Return to Work meetings including action plans and review dates;
- Write formally to staff who are required to attend a formal meeting and confirm the outcome of the meeting, including any resulting action plans, in writing;
- Ensure formal processes at stage 3 are supported by Management Statement of Case which includes:
  - A record of absence including dates and reason for absence;
  - Record of any communication made during sickness;
  - Copies of return to work meetings;
  - Occupational Health referrals;
  - Occupational Health reports;
  - Any reasonable adjustments considered and/or implemented for disabled employees;
  - All other relevant correspondence i.e. incident reports if accident at work.
- Where appropriate, obtain medical assessment from Occupational Health in order to determine the likely length of time off work, any underlying reason for sickness absence or any suggested reasonable adjustments.

7. HR Management Responsibilities

7.1 It is HR Management responsibility to:

- Advise managers and their staff on the application of this policy;
- Attendance at stage one and two meetings is not compulsory but can be facilitated at the request of the manager;
- Attend all stage three meetings without exception;
- Have appropriate management systems in place to collect good quality data on sickness absence and use this to highlight to managers when trigger points are reached;
- In partnership with Trade Union Representatives regularly monitor and review arrangements to identify where and how policies can be improved;
- Carry out regular audits to ensure long term absence is managed in line with Trust employment policies;
- Work with managers and staff to facilitate a return to work, including provision of advice and support with preparing referrals to Occupational Health.
- Ensure the provision of a sickness absence management support line is available to managers from Monday to Friday, 9:00am to 5:00pm.

8. **Trade Unions**

8.1 **The role of the Trade Unions is to:**

- Provide confidential support and a representation to their members at all stages of the attendance management process;
- Accompany individuals at meetings if requested and participate constructively;
- Provide proper advice to members being managed in line with this policy;
- Ensure fair and equitable application of this policy.

9. **Medical Health Advice and Support**

9.1 The Occupational Health Service is a specialist and confidential advisory service for all employees and managers in the Trust. The Trust works with the Occupational Health Team (OH) to support and raise awareness of health issues with staff. Occupational Health provides professional advice on health issues at work and provides health assessments to:

- Advise on fitness for work with a view to supporting staff to continue at work;
- Advise on reasonable adjustments;
- Help and advice on rehabilitation for staff returning to work following a period of ill health;
- Advise on capability issues.

9.2 Employees may be referred by their manager to an Occupational Health advisor for a medical assessment to seek advice on reducing sickness absence and/or facilitating a return to work where this is possible. A copy of the individual’s job description should accompany the referral document.

9.3 The referring manager must explain clearly to the employee why he/she is being referred and what advice is being specifically sought. The employee will receive a copy of the medical report and the manager will use these to inform all informal and formal stages of sickness management.
9.4 Occupational Health will request permission from the employee to approach the employee's GP and/or other health professional if they require further information.

9.5 Both employees and their managers can request to be referred to occupational health in anticipation of a health concern without attendance being identified as a concern.

9.6 Where mental health related illness is reported as the reason for sickness the ROC will remind the member of staff of the Trust’s Staying Well Service. The manager and HR Business Partner will also consider early referral to Occupational Health where this is appropriate.

10. Transfer to Short Term Suitable Alternative Role due to Ill Health

10.1 A transfer into a suitable alternative role may be agreed whilst an employee is being managed for long term sickness absence, taking into account Occupational Health advice.

10.2 Before the transfer is agreed there must be a clear understanding and agreement of the position regarding pay that will be authorised by the substantive Head of Department and host Head of Department. There are two options that are available, depending on the needs and wishes of the employee and their substantive line manager as follows:

a) During longer term transfers, sickness absence will not be recorded, however the employee will continue to be monitored under the Trust’s Sickness Absence Policy to ensure they are supported and to discuss a return to their substantive role in the foreseeable future. This would be arranged where employees undertake a longer term transfer with the intention of finding suitable alternative employment. In this circumstance, the employee will receive the pay, terms and conditions, associated with their new role.

b) During shorter term transfers, sickness absence will continue to be recorded, and as such, the employee will continue to receive the pay and conditions associated with their substantive role. In this circumstance, the employee intends to return to their substantive role, however until they are fully fit to do so, they wish to be placed temporarily into a different role as a development experience and to keep them occupied and therefore engaged with the Trust whilst they are on long term sick.

10.3 During either arrangement, it is the responsibility of the substantive line manager to maintain contact and hold the relevant sickness meetings during this time.

10.4 If management receive advice that an employee’s assignment into a temporary, alternative role may jeopardise their recovery then their transfer may be withdrawn, depending on advice received from Occupational Health.
In normal circumstances the base station where the employee will be located for the duration of the secondment will become their official base for mileage purposes. Any variation will be agreed by the head of service and a HR Business Manager.

11. **Notification of Sickness Absence**

11.1 The employee is required to notify all absence via the Trust’s sickness reporting line as soon as possible and no later than three hours before the commencement of their schedule shift. The reason for absence and likely date of return or next contact date must be given.

11.2 The Trust’s Sickness Absence line will record the date of when an employee books sick, and will then transfer the employee directly through to their line manager or bronze commander, depending on availability. A booking sick conversation must take place between the employee and direct line manager within a 24 hour period.

11.3 The employee must also immediately notify the Trust through the sickness line when they are fit to return to work as soon as possible to give early notification of return to aid in shift/ work planning. This will then enable a return to work to be carried out and for the sickness episode to be closed on the Trust’s payroll systems.

11.4 Calls to the Trust Sick Lines may be recorded for the purpose of employee monitoring and training.

11.5 Once the initial return to work has been recorded by the Sickness Absence Line, the ROC will notify the employees direct line manager who will then conduct a return to work interview within seven days to then record conversation on GRS and email documentation to HR Services.

11.6 The requirement for notification applies whether the employee is working at their usual workplace or is on a training course, secondment or placement in another organisation.

11.7 If the employee is at an address other than their home address during their sickness absence it is their responsibility to advise the Trust of their contact details.

11.8 The manager and employee are required to stay in contact during sickness absence for both welfare and operational purposes.
12 Medical Certificates

12.1 Managers must ensure that employees know about the regulations governing the submission of medical certificates. The length of absence applies to all staff and is not pro-rated for part-time staff.

12.2 Absences up to and including 7 calendar days do not require certification as the nature of this absence will be recorded in the return to work interview and a record of this retained on personnel files and recorded on GRS.

12.3 Absences over 7 calendar days require a GP certificate (fit note) to be forwarded to the manager. These certificates must be signed by a doctor registered with the General Medical Council (or other registered medical practitioner if the member of staff is not in the UK when they become ill).

12.4 Sickness will be entered into GRS by the ROC and local management as appropriate and the sick notes and return to work interview paperwork will forwarded to HR in HQ for filing electronically.

12.5 During long-term sickness it is the employee’s responsibility to ensure that their absence is covered by a current certificate to authorise payments.

12.6 Backdated sickness notes will not be accepted by the organisation unless there is evidence of exceptional circumstances and agreed with HR.

12.7 GP Fit Notes will be monitored by Direct Line Managers. Failure to provide the correct certificate cover for periods of sickness absence may result in pay being stopped and action being taken for being absent without permission and may result in disciplinary action.

13 Categorisation Of Sickness Absence

13.1 The Trust categorises sickness absence as short and long term, and has separate procedures for each. The procedures are set out in Appendix A.

13.2 Where an employee has multiple short spells of sickness absence within a rolling 12-month period, this is termed intermittent short-term sickness absence.

13.3 Long term absence is one continuous period of sickness absence exceeding 28 calendar days.

14 Sickness Absence Triggers

14.1 Formal Short Term Sickness Triggers

14.1.2 While the Trust recognises that sickness absence can occur from time to time, it requires regular and sustained attendance in order to deliver high quality patient
services. An employee’s sickness absence and attendance are of concern and will be reviewed when the employee has had within a rolling 12 month period.

- 4 separate occasions of sickness absence or
- 10 calendar days of sickness absence in any 12 month rolling period.

14.1.3 Following a 12 month attendance target, employees will have their attendance monitored on a pro rata basis:

- 2 separate occasions of sickness absence or
- 5 calendar days of sickness absence during a six month period

OR

- 4 separate occasions of sickness absence or
- 10 calendar days of sickness absence in any 12 month rolling period.

14.1.4 It is important that managers are discussing any concerns early where necessary so that any issues that may be impacting on an employee’s ability to provide acceptable attendance at work are not left unresolved.

14.1.5 A ‘rolling year’ means that when an episode of sickness occurs, the manager should review the 12 month period preceding that specific period of absence from the return to work date. Managers should discuss all absences in this rolling year regardless of whether they have been subject to previous attendance action/part of a previous target for attendance.

14.2 Long Term Sickness Absence

14.2.1 Long term sickness absence (a period of continuous absence exceeding 28 days) must be handled sensitively and with care. It is very important for employees to stay in contact with the Trust while they are absent. Managers/Supervisors should agree with their member of staff the best way for keeping in touch in order to support the employee whilst they are absent. This may include sending Trust communications and other relevant information.

14.2.2 As a guide, employees can expect regular contact of at least once a month from their line manager. Through both these informal contacts and the formal meetings the focus will be on ensuring open communication about the nature of the health condition and on-going exploration of support and adjustments that may enable the employee to return to employment, either to their existing role, or where this is contrary to health advice, to a suitable alternative role if one can be identified.

14.2.3 The long term sickness procedure is underpinned by Occupational Health advice and it is important that employees engage with this service fully to enable all parties to be informed by medical evidence, advice and guidance. Where an
employee does not engage with the Occupational Health Service the Trust will continue to manage the sickness absence without this information.

14.2.4 The Trust recognises ill health may prevent employees from attending work for a prolonged period of time, and is committed to supporting employees in these situations, taking into account the affect ill health has on an employee’s personal circumstances balancing these with the needs of the service. Escalation through the process id dependent on the circumstances of the absence and is not dependent on an individual contractual right to sick pay.

14.2.5 Where an Occupational Health Report is obtained the content will be discussed with the employee as soon as reasonably practicable and consideration will be given to the recommendations of the report including any reasonable adjustments that would enable the employee to return to work. These adjustments may include workplace adjustments, light duties, phased return to work or restricted duties. If the employee declines to attend or does not consent to their doctor being contacted by Occupational Health, they will be informed that any future decision about their future employment will be made without the benefit of medical advice.

15 Return to Work Meetings

15.1 Return to work dates are confirmed by the centralised ROC who capture the initial information on GRS for reporting and shift planning purposes. This information is then emailed to direct line managers who will complete a detailed return to work interview within a seven day period. This meeting can take place via the telephone when circumstances prevent a face to face meeting. The completed return to work interview will then be recorded by the direct line manager onto GRS and documentation emailed to HR Services to save on personnel file.

15.2 A meeting should always be conducted by the employee’s Line Manager after any episode of long term absence to welcome them back to work, undertake or plan any necessary assessments, ensure they are safe to work and to discuss any changes within the organisation. The manager will take notes of the return to work meeting to then email to HR Services to save on personnel file.

16 Responding to Patterns of Absence

16.1 Following each period of absence managers have a responsibility to review the individual’s entire long and short term sickness history to determine if any pattern exists in relation to certain days, weekends or short term sickness or on days where leave was declined.

16.2 Short term sickness absence preceding, following or during a public bank holiday will be monitored, and two incidences within a 12 month period will result in the employee being called to a Formal Attendance Meeting.
16.3 Where a pattern has been identified in an individual’s short term sickness absence the individual will immediately be called to a formal meeting where the pattern will be explored with them. Where there is no satisfactory explanation for the concern, the matter may be referred to the Head of Operations/Department and the HRBM for the area where a decision will be taken to investigate under the Trust Disciplinary Policy.

16.4 Where a pattern has been identified in long term sickness then the individual will be called to a Final Formal Attendance Meeting the pattern and the whole sickness history will be discussed and termination of employment considered.

16.5 Where there has been a cycle of unacceptable attendance followed by an improvement and deterioration, employees who have attended a Formal Attendance meeting in consecutive years will be invited to a ‘final formal attendance management meeting’ on the third occasion. An outcome of this meeting could be a decision to terminate employment.

16.6 All targets will run from the date of the hearing. This should take place within 3 weeks of the trigger being met. Where the hearing is not run within these timescales, any targets will be backdated to the previous return to work date.

17 **Reviewing Secondary Contracts/Employment**

17.1 Staff must not undertake secondary employment whilst on sick.

17.2 A review will take place of any member of staff who is at an informal stage one or formal stage two review under this policy to ensure additional hours worked under overtime or secondary contracts of employment will not undermine the individual’s ability to maintain a satisfactory attendance record.

17.3 The Trust’s authorisation of any additional employment or work will be reviewed and a decision made as to whether this should be suspended until such a time as attendance levels improve.

18 **Representation**

18.1 At all stages in the formal procedure, including formal investigation interviews, the employee will have the right to be accompanied by an employed Trade Union official, a Trade Union representative that the Union has certified as competent, or a fellow worker, not acting in a legal capacity. The employee is responsible for arranging the attendance of their representative.

18.2 Prior to any hearing, the employee should inform the HR representative to the hearing of their representative’s name, status and contact address. All subsequent relevant information will then be copied to the employee and representative.
19. **Support for Staff Wellbeing**

19.1 Supporting staff following traumatic incidents is both morally justified and is a Trust priority. TRiM practitioners have been identified and trained by the organisation and will be used to assist staff identified as being at risk of the effects of psychological trauma, as outlined within the Health and Wellbeing section of the Trust’s intranet.

19.2 The Trust also appreciates and understands that there may be occasions when staff wish to discuss issues with an external, confidential person. This support is provided through the Employee Assistance Programme, the details for which can be found on the intranet.

19.3 When staff are identified as showing signs of trauma stress, either as a result of a TRiM assessment or the observations of their line manager, they will be encouraged to access the bespoke trauma counselling service provided by Red Poppy. The details and information about accessing this service can be supplied by the relevant HR Business Partner.

20 **Returning to Work after Long Term Absence/transfer to alternative roles during Ill health**

20.1 Annual leave, may be used to assist a phased return to work which may be considered for a period of up to a maximum of four weeks. This will be dependent on the circumstances of the absence and the availability of a role to undertake and taking into account relevant medical advice. Where it is considered appropriate for the return to work to take place over a longer period, this can be agreed through a Case Management Review with senior management and senior representation from HR.

20.2 A transfer into a suitable alternative role may be agreed whilst an employee is being managed for long term sickness absence, taking into account occupational health advice. This may be for a short period to enhance prospects for redeployment, a longer period to enable recovery or as a permanent move.

20.3 During a temporary transfer it is the responsibility of the substantive line manager to maintain contact and hold the relevant sickness meetings during this time. If management receive advice that an employee’s recovery is jeopardised due to the temporary work, the transfer may be withdrawn.

20.4 Before any transfer, advice and agreement on the pay and contractual arrangements must be sought from Human Resources and authorised by the substantive Head of Department and host Head of Department.

20.5 Where a return to work following long-term sickness absence is not possible due to the nature of the sickness or injury, and where all practicable alternatives
including suitable alternative roles and reasonable adjustments to the role have been fully explored, termination of the employment contract on the grounds of ill health or capability will be considered. The Trust will offer support during the process and will ensure that the employee is informed of their entitlements and options. The HR Department and Line Managers will assist the individual in any applications for ill health retirement.

21 Industrial Injury

21.1 In line with Health and Safety legislation employees have a responsibility to report accidents at work. Any work injury must be recorded on Datix within 24 hours of the incident.

21.2 If the employee continues long-term sickness absence they may be entitled to Injury Allowance (IA). This would be approved only if the injury / disease is wholly or mainly attributable to their NHS duties. Advice from the Occupational Health service may be sought. Details on guidance for staff and managers with respect of IA applications can be found on the Trust’s intranet (http://intranet.swast.nhs.uk/hr-forms_2.htm). Details can be found under Work Related Absence Form.

22 Sickness and Annual Leave

22.1 Employees will not be entitled to an additional day off if sick on a statutory holiday.

22.2 Staff may choose to take annual leave during periods of long-term sickness absence. In such cases staff must obtain approval in advance from both their Line Manager on advice from the appropriate HR Business Partner. If a period of leave is approved the Line Manager will complete a notification of change form to the HR Services Department and the employee’s period of absence will be suspended and recorded as annual leave for payment purposes. This annual leave must also be notified to the ROC for operational staff so it can be recorded on GRS.

22.3 Should sickness continue following the period of annual leave, the period of sickness will be considered to be linked for reporting purposes.

22.4 Annual leave will only be carried over where an individual has been absent for a whole year or a significant majority of the leave year.

22.5 For the purpose of calculating how much Statutory Holiday an employee has remaining in any holiday year, any contractual or Bank holiday hours taken will be deducted.

22.6 In the case of an employee leaving the Trust due to ill health, the manager should establish how much leave is outstanding and arrange for this to be paid as
appropriate. Any payment for outstanding leave for the current year will be based on the employee’s contractual entitlement. Whereas any payment for outstanding leave from the previous leave year will be determined in accordance with the statutory leave entitlement detailed above.

23  Unauthorised Absence

23.1 Unless the employee can demonstrate a satisfactory reason, if an employee fails to notify the Trust and their manager of their absence or fails to provide a Medical Certificate within 10 days of the first date of absence, they will not be paid for those days of absence and they will be recorded as “unauthorised”. Backdated certificates will not be accepted unless there are exceptional circumstances and are authorised by HR. Unauthorised absence constitutes a breach of contract and may be dealt with under the Trust Disciplinary Policy.

23.2 Employees are expected to adhere to the responsibilities outlined in section 5. Failure to do so will be reviewed by direct line management, and taking into account all relevant mitigation, may result in the sickness absence being recorded as unauthorised.

24  Supporting Documents

24.1 To assist staff and managers to understand and interpret the requirements of this policy further guidance is maintained and published by the HR Department and can be accessed by contacting your local HR Business Partner.

25  Policy Monitoring and Review

25.1 The effectiveness of this policy will be monitored and reviewed at the HR management team meeting three months before the review date. Recommendations will be recorded and shared via the recognised policy approvals process in time for the policy review date.
Appendix A

Absence Management Procedures

There are three stages in sickness absence management, all of which are interchangeable between short term and long term sickness absence.

Stage 1 - Attendance Meeting

The ROC will inform line managers when an employee has been placed on an automatic 12 month review following 28 days of long term sickness or 4 separate occasions or 10 days of absence of short term sickness absence within a twelve month rolling period.

The direct line manager will arrange a stage one sickness meeting within a three week period, with all the relevant documentation. This is an informal meeting, and so it is at the discretion of the employee should they wish to bring representation. The line manager will give as much notice as possible in order that representation can be arranged. Should the employee fail to attend the meeting, a second date will be convened. Following on from which, if the employee does not attend, the manager will review the information in the employee’s absence.

The line manager will review the employee’s attendance record. The employee/representative will then be given the opportunity to discuss absences and any possible mitigating circumstances as well as to suggest/request any support or other measures which they think could help to improve their attendance.

The line manager will review all possible factors that may have contributed towards the employee’s sickness absence, such as recent overtime shifts, secondary employment agreements, patterns of sickness absence in relation to the sickness absence reason, or regular shifts or days.

Managers will consider possible actions to offer additional support for the employee, and set a 12 month target to improve the employee’s attendance.

- Targets are set for 12 months following a return from the episode of sickness that caused the attendance to drop below the required standard. However, this may be removed depending on mitigation discussed, subject to the approval from the Head of Department.
- Set an appropriate return to work date during long term sickness absence, to be achieved within four months from the date of when their sickness absence commenced.
• The employee will be informed that should their attendance not show satisfactory improvement during this period of time, then a formal attendance management meeting would be arranged.

If necessary, the line manager has the discretion to consider the removal of the employee’s overtime shifts, and secondary employment agreements for a period of time during the review period. The manager may also advise employees that a stage one sickness meeting may be considered during the employee’s potential development or job opportunities, career conversation outcomes, and will be noted by the Head of Department who may follow up with an additional letter outlining concerns. Depending on the matters discussed during the stage one sickness meeting, the Head of Department may decide to send an additional letter outlining the importance of adhering to the Trust’s Sickness Absence Policy as their contractual obligation.

The employee will be provided with a written summary of this meeting and any agreed actions within 7 calendar days.

Where the employee’s absence continues to fall outside of the triggers outlined within section 13 of this policy or if the period of absence continues to exceed four months, and no return to work date can be established, the employee will be invited to a stage 2 Formal Attendance Review.

**Maintaining Contact**

When an employee is absent from work long term, the Line Manager will contact (and record on GRS) them on a regular basis and the employee also has a responsibility to maintain regular contact with their manager. The most appropriate method of contact will be agreed. This approach is to ensure the employee is supported during the period of absence, is kept up to date with any relevant changes within the Trust and the manager are aware of the expected length of absence where known.

**Stage 2 - Formal Attendance Meeting**

Where long term sickness absence continues to four months, or where short term sickness absence targets set at the previous attendance meeting have not been met, a formal attendance meeting will be convened.

Formal attendance meetings will be chaired by the employee’s manager. A Sickness Absence Report will be produced containing all the relevant documentation relating to the individuals sickness. The Line Manager/Supervisor will arrange the formal meeting within 3 weeks, providing at least 10 calendar days’ notice. The employee will be given a copy of the report at least 10 calendar days’ in
advance along with a letter outlining the date, time and purpose of the meeting. The possible outcomes will also be clearly set out in the letter.

It may be necessary to obtain an Occupational Health report prior to a formal attendance meeting.

The employee/representative will then be given the opportunity to discuss absences and any possible mitigating circumstances as well as to suggest/request any support or other measures which they think could help to improve their attendance. Having listened to the information, the employee’s Line Manager/Supervisor will then consider possible actions/support and set an appropriate target to improve the employee’s attendance.

- Set an appropriate target to improve the employee’s attendance. Targets are set for a 12 month period following a return from the episode of sickness that caused the attendance to drop below the required standard. The employee will be informed that should their attendance not show satisfactory and sustained improvement during this period of time, then a final formal attendance meeting will be arranged where an outcome could be termination of employment.
- For long term sickness absence, discuss an appropriate return to work date to be achieved by six month from the date of when their sickness absence commenced.

Following this meeting the resulting actions/support and new target along with the subsequent action should this target not be achieved, will be confirmed in writing to the employee within 7 calendar days.

The individual will be informed of their right to appeal against the decision of a formal attendance meeting. This must be in writing to the Head of Department or HR Business Partner within 7 days from the date of the meeting.

**Stage 3 – Formal Attendance Meetings**

Where long term sickness absence continues to six months or where a target at the formal attendance meeting has not been met, a final formal attendance meeting will be arranged.

Within a 5 week period, the Line Manager/Supervisor will arrange the meeting providing at least 10 calendar days’ notice. The employee will be informed of the date and time in writing including the warning that an outcome at the third stage could be termination of employment and will receive all relevant documentation, in the form of a Sickness Absence Report prior to the meeting.

The hearing will be listened to by a Senior Trust Manager and will be supported by a HR Business Partner/Manager.
The panel will consider all information in order to reach a decision on the action to be taken and therefore both sides should have every opportunity to state their case.

In reaching their decision, the panel will take into consideration:

- The overall attendance record;
- The reasonableness of any target set by previous panels/managers;
- Any mitigating factors presented by the employee for having failed to meet the required attendance standard;
- The fairness, consistency and merits of the information presented;
- The efforts made by the employee to improve their attendance;
- The degree to which the employee may have contributed to failing to meet the standard set e.g. reluctance to accept support, adjustments, advice etc.;
- Reasonable adjustments and supportive measures which have been made or not made.
- Whether the employee has been unable to return to their role following the formal attendance meeting
- Whether possible changes to employment arrangements or any training which might enable the employee to remain in employment.

Where necessary every effort will be made to identify suitable alternative employment. The employee will be invited to apply for vacancies and, where suitable, will be guaranteed an interview prior to any other candidate to establish their suitability for the post. Employees should note that alternative employment in place of dismissal on ill health grounds does not attract protection of earnings. Where no suitable alternative employment can be found or, if the employee unreasonably refuses an offer of suitable employment, the employment contract may be terminated.

Having considered all of the above, the panel must then determine whether to:

- Dismiss the employee on grounds of capability due to poor health or attendance;
- Issue a formal warning and/or further target for improvement to be achieved in a defined period.

Where possible the employee will be informed of the decision at the end of the hearing and the outcome confirmed in writing within 7 calendar days of the hearing.

Should the panel defer a decision in order to obtain further medical information or advice, the timeframe for any decision will be defined by the panel.

The individual will be informed of their right to appeal against the decision. This must be in writing to the Executive Director of Human Resources and Organisational Development within 7 days from the date of the hearing.
On dismissal, the employee must be given written confirmation of any pay in lieu of notice due under the terms of his/her contract and any outstanding annual leave entitlement.

The employee has the right to appeal the decision of a final formal attendance meeting and the appeals procedure is described at Appendix B.
Appendix B

Appeal Procedure

All employees have the right of appeal against the outcome of a final formal attendance meeting heard under this policy.

An appeal must be made in writing to the Executive Director of HR and Organisational Development.

The written appeal must be made within 7 calendar days of receipt of the written confirmation of the outcome of the hearing. The reason for the appeal must be clearly stated, and should normally be on the grounds of one or more of the following:

- Investigation and substantiation of issues (adequacy and sufficiency);
- Procedural (regularity and fairness);
- Action (unreasonable).

The appeal hearing should take place at the earliest opportunity, and should be chaired by an appropriate manager. In cases of dismissal, the panel will consist of 2 Senior Managers, one of whom should be a Board member. None of the panel members should have been involved in the case prior to the appeal.

The employee should be given at least 10 calendar days written notice of the appeal hearing detailing the date, time and venue, with their right to be represented detailed.

If the employee wishes to present any documentary evidence at the appeal hearing, a copy of this must be submitted to the HR Department at least 5 calendar days before the appeal hearing. It is then the HR Department’s responsibility to arrange for copies to be distributed as appropriate. If the employee wishes to call witnesses, the HR Department must be informed of this at least 5 calendar days prior to the hearing.

The employee will receive written confirmation of the outcome of the hearing within seven calendar days of the decision being made. This confirmation will detail:

- The issues considered at the hearing;
- Those present at the hearing, and their roles;
- The decision taken;
- The reason for the decision;
- (In cases of dismissal) The employee’s notice entitlement (if applicable);
- (In cases of dismissal) The effective date of termination.

The conclusion of the appeal hearing will be final. In cases involving dismissal employment will not be extended to facilitate an appeal.
Managers with the Authority to Give Formal Sanctions

Line Managers within SWASFT are authorised to issue warnings or to dismiss an employee, subject to the outcome of a hearing under the capability, disciplinary or attendance policy, in accordance with the table below:

<table>
<thead>
<tr>
<th>Line Manager Pay Band</th>
<th>Warning issued</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Review 3-6 months Target Setting</td>
</tr>
<tr>
<td>First Line Manager (Bands 4 – 7)</td>
<td>Yes</td>
</tr>
<tr>
<td>Service Manager (Band 8a)</td>
<td>Yes</td>
</tr>
<tr>
<td>Senior Manager (Band 8b and above) Including those managers in secondment to an 8b post and acting up formally</td>
<td>Yes</td>
</tr>
</tbody>
</table>
# Appendix D

## Version Control Sheet

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Author</th>
<th>Summary of Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20.06.14</td>
<td>HR</td>
<td>Complete revision of policy</td>
</tr>
</tbody>
</table>
| 2       | 12.12.14   | HR     | Section 15 altered to:  
|         |            |        | a) Clarify management responsibility for reviewing sickness history to identify patterns  
|         |            |        | b) Escalation of concerns to next stage in procedure  
|         |            |        | c) Where a cycle of unacceptable attendance identified, escalation to a ‘final formal attendance meeting’ on 2\textsuperscript{nd} and not 3\textsuperscript{rd} occasion.  
|         |            |        | Section 19 altered to include options for transfers to alternative posts during ill health. |
| 3       | 25.03.15   | HR     | Appendix A altered to clarify how and when targets will be set following a return from long term sickness absence. |
| 4       | 01.07.15   | HR     | Review of entire policy |
| 5       | 04.01.16   | HR     | Addition to Section 9 to reflect introduction of the Staying Well Service. Minor amendments to reflect sickness reporting procedure and how to access supporting documents. |
| 6 and Appendix A | 21.01.16 | HR | Removal of reducing targets to 6 months, all reviews will remain at 12 months |
| 7 and Appendix A | 21.01.16 | HR | Addition of written warning as action short of dismissal following a STS final formal attendance meeting |
| 8 and Appendix A | 27.06.2016 | HR | Remove separate ST and LT meeting guidance, to have one section describing the three formal sickness meetings |