RESEARCH COUNCIL SICKNESS ABSENCE MANAGEMENT POLICY

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Management Guidance
This document provides additional guidance for managers, employees and HR in the handling of sickness absence issues. It includes the Research Council’s Sickness Absence Management Policy and procedure which is contractual. The additional guidance, which is shaded, is not intended to be legally binding and does not form part of the Sickness Absence Management Policy and procedure.

Policy Statement
The Research Council is committed to ensuring and promoting the well-being of our employees. As part of that commitment the Research Council seeks to adopt a pro-active approach towards health issues and any work-related factors that are identified. The aim is to ensure that issues are identified at the earliest possible stage thus enabling appropriate action to be taken.

The aim of the sickness absence management policy and procedure is to support those employees unable to attend work due to sickness whilst also monitoring absence levels across the organisation. It is not a manager’s role to determine if sickness is genuine or not; however, it is the manager’s responsibility to provide appropriate and effective management intervention at an early stage, and to help employees maintain better health and return to work.

The Sickness Absence Management Policy and Procedure (the Sickness Absence Policy) has been agreed with the Trade Union Side and complies with statutory legislation as well as ACAS best practice. It may be read in conjunction with the Research Council Health Promotion Policy.

This policy applies to all Research Council employees of a temporary and permanent nature ("employees"). The use of this term is purely for ease of reference and does not in any way confer employment rights on any such category of person where the same do not exist under statute.

For employees holding limited leave to remain and/or right to work limitations, implementation of this policy may be subject to Home Office immigration rules. Before making decisions or taking any action relating to this policy advice must be sought from your retained HR Team.

The UK Shared Business Services Ltd (UK SBS) provides HR Services across the Research Councils. However some employees are deployed at establishments/facilities/ships that do not access services from UK SBS. In these cases references to the SBS or System (Employee Self Service) will not apply and employees should refer to their Research Council HR team for assistance.

Whether a worker is deemed to be a worker or employee is not always clear under employment legislation. In cases where managers or employees have any doubt as to whether the Sickness Absence Policy should apply, advice should be sought from Research Council HR team.
1. **Principles**

1.1 Employees must adhere to the Research Council’s notification procedure and provide fit notes where required. Failure to comply with the notification and certification procedures set out in paragraph 2 will be treated as unauthorised absence and sick pay may be withheld.

1.2 All managers and employees have the responsibility to identify and resolve (as far as is reasonably practical) health issues that impact on an employee’s ability to attend work.

1.3 Managers should adopt a proactive approach to managing sickness absence. The policy includes the use of trigger points to help identify when levels of absence may be a cause for concern. Where absence levels reach a trigger point, this will prompt managers to hold an attendance review meeting. Trigger points vary depending upon the circumstances; further information and examples are in section 14.

1.4 All health or health related issues will be dealt with in strict confidence.

1.5 The Research Council is committed to supporting the wellbeing of its employees. Where appropriate the advice and/or guidance from the Health and Safety advisors, Occupational Health or other medical advisors should be sought with the employee’s consent.

1.6 The Research Council defines a short-term absence as an absence of less than 20 working days. Long-term absence is defined as 20 or more consecutive working days.

1.7 Managers will maintain regular contact with absent employees (see section 18.2).

1.8 Eligible employees will be paid while absent due to sickness subject to the limits set out in this policy.

1.9 Upon return to work, managers will conduct a return to work meeting to discuss the employee’s wellbeing and update them on work activities as appropriate, and consider how to minimise the likelihood of future absences. Guidance on return to work meetings is at section 12.2.

1.10 The UK SBS Ltd will upload into the system any fit notes to correspond with the periods of absence. This information will be used to monitor absence levels.

1.11 Employees have the right to be accompanied by a work colleague or represented by a recognised Trade Union representative at any ‘attendance review’ or ‘formal’ meeting held in accordance with this policy.

1.12 This policy will be applied fairly and consistently within the constraints dictated by the business needs of the employee’s area of work. It is accepted that each case of ill health is individual and relevant to specific personal circumstances.

1.13 The Research Council HR team will provide advice and guidance on the implementation of this procedure and relevant legislation.
1.14 Please note that some underperformance issues will be dealt with under the following procedures:

<table>
<thead>
<tr>
<th>TYPE OF ISSUE</th>
<th>PROCEDURE</th>
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</thead>
<tbody>
<tr>
<td>Performance issues e.g. associated with changes in job roles and/or capability</td>
<td>Capability</td>
</tr>
<tr>
<td>Performance issue caused by Misconduct, for e.g. carelessness, negligence, lack of effort or failure to cooperate with management</td>
<td>Disciplinary</td>
</tr>
<tr>
<td>Attendance issues due to ill-health</td>
<td>Sickness Absence Management</td>
</tr>
<tr>
<td>Performance issues related to scientific misconduct</td>
<td>Scientific Misconduct</td>
</tr>
</tbody>
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Where there are a combination of factors, management in consultation with the Research Council HR team, will make a decision on the most appropriate single policy to follow.

2. Reporting sickness absence

2.1 Employees absent from work due to sickness or injury must follow the sickness notification and certification procedure.

2.2 On the first day of sickness, the employee must notify their immediate manager (or nominated person), usually within one hour of their normal start time and thereafter as agreed, to advise that they will not be attending work due to sickness, and the anticipated duration of the absence. If the employee is not able to contact their manager personally, then the employee should ensure that someone contacts their immediate manager or nominated deputy on their behalf. The sickness absence should normally be input into the system by the line manager on the first day of absence.

2.3 If the absence continues beyond the expected date of return the employee should maintain regular contact (appropriate to the context and circumstances of their health issue) with their immediate manager, or nominated person, to provide progress updates and a revised date for their return to work.

2.4 If the sickness absence continues or is expected to continue longer than seven consecutive calendar days, the employee must obtain a doctor’s fit note and send to UK SBS Ltd/Research Council HR team (as applicable) as soon as possible to be uploaded to the employee’s record. (Refer to paragraph 11 for further information regarding fit notes).

2.5 Employees returning to work after a period of absence must close the absence on the system and ensure the whole period of absence is covered. It is important that the employee
2.6 Weekends (and public/privilege holidays) will be included when counting days of sickness absence if they fall during a period of absence but not if they fall at the beginning or end of the period.

2.7 If the employee returns to work too soon after a period of sickness absence and subsequently finds that they need to take additional time off to fully recover (within 24 hours of returning), the absence periods will be linked and will be counted as one continuous period of absence. However, each separate period of absence should have the start and end date recorded on the system.

2.8 Save in exceptional circumstances, where an employee fails to report their absence promptly, fails to continue to report an on-going absence, or fails to complete and/or provide the relevant documentation, the absence will be deemed to be unauthorised.

2.9 The Research Council reserves the right to withhold salary payments (including any sick pay and/or statutory sick pay (SSP)) to any employee whose absence is unauthorised. Unauthorised absence from work may also result in Disciplinary action.

Refer to the Research Council Unauthorised/Unplanned Absence Policy regarding additional reporting requirements to cover unauthorised absence. Salary cannot be withheld without reasonable enquiry – see paragraph 2.8

2.10 A false declaration regarding absence will be treated as a disciplinary offence and will be dealt with under the Disciplinary policy.

3. **Part days’ attendance**

3.1 Employees who feel unwell during working hours and have to go home must notify their manager before doing so. Where part days are worked, employees will receive normal pay for the whole day unless already on half or nil sick pay.

3.2 All sick absences, full or part day, should be recorded in the System for the purpose of identifying any patterns of sickness absence and maintaining accurate records. The Research Council has a duty of care to its employees and places great importance on their wellbeing. Recording all absences will enable a full picture of the individual’s absence record to be understood and for the Research Council to provide the appropriate level of support. Employees should refer to the Research Council Health Promotion Policy. In cases of part day absences related to phased return from a long-term sick absence employees should refer to paragraph 18.6.4.
4. **Sickness absences and annual leave**

4.1 If an employee falls sick during a period of annual leave, they must comply with the notification procedures. Provided they do this, the employee may take the relevant period of annual leave at another time, including in the following leave year where it is not practicable to take it in the current leave year.

4.2 Employees continue to accrue contractual annual leave during periods of paid and unpaid sickness absence (i.e. 30 days entitlement, pro-rata for employees who work part time). Public and privilege holidays do not accrue during periods of sick absence (paid and unpaid).

4.3 An employee on long-term paid or unpaid sick absence may take paid annual leave during this absence or when they return to work (in agreement with their line manager). If it is possible for the leave to be taken on return to work in the relevant leave year then it must be taken. However, where it is not possible for the employee to use their leave entitlement because of insufficient time or for overriding business reasons, they will be able to carry forward up to 20 days’ annual leave (including the normal 10-day carry-forward) to the following leave year. This carried-forward leave must then be taken in that leave year. (Carried-over leave will be pro-rated, as necessary, for part-time employees).

5. **Medical appointments**

5.1 Where possible, doctor, hospital, dental, optician or other medical appointments should be arranged outside working hours or at a time which will cause the least disruption to the employee’s work and the work of their colleagues, department/unit.

5.2 Where reasonable notice of medical appointments is given paid time off should be granted.

5.3 Managers have the right to ask for proof of attendance for medical appointments.

6. **Occupational related ill health (including accidents at work)**

6.1 The Research Council will support its employees in the workplace and endeavour to make it a safe place to work. Employees must report all work related illness, accidents or injury as soon as possible to their manager, however minor they may seem. Local arrangements should be followed for reporting work related accidents.
6.2 In addition, where:

a) an accident results in the employee being absent from work, or

b) an employee believes that they are suffering from an occupationally related illness, the employee must update the system to indicate that the absence was occupationally related.

7. Contagious illness

7.1 Employees who believe that they may have been in contact with or who are known to be carriers of a notifiable disease (any disease that is required by law to be reported to government authorities) should advise their manager, or if unavailable a person of an equivalent level, as soon as possible. In the event that they are advised to stay away from work, this will be treated as paid special leave and not sickness absence. As such this will not be counted towards any trigger point. In such circumstances, local guidance should also be consulted as there may be additional considerations for some employees for example those who work with animals or in high containment areas.

8. Sick pay

8.1 Sick pay may comprise of Statutory Sick Pay (SSP) and/or Occupational sick pay, up to a maximum of the employee’s normal basic pay. Further information on SSP can be found at www.gov.uk.

8.2 Research Council Occupational Sick Pay

8.2.1 The Research Council’s Occupational sick pay scheme entitles employees to receive up to 6 month’s full pay (inclusive of SSP) within a rolling 12 month period. Once the first 6 months at full pay has been used, within the rolling 12 month period, the employee will receive half pay (including SSP) for a further 6 months.

8.2.2 If an employee is sick for a cumulative total of 12 months within a four year rolling period their entitlement to occupational sick pay will normally cease. In some circumstances, it may be appropriate to make further payments at the lesser of half pay or ‘pension rate’ (i.e. the amount of pension that the employee would have received had they retired on ill health grounds). These payments will only be made where there is a reasonable prospect that the employee will return to work following a period of long term absence. The Research Council HR will make the decision on these payments after consultation with the line manager and the Occupational Health Advisor.

8.2.3 Once occupational sick pay has been exhausted further unpaid sickness absence may be allowed. (In exceptional circumstance paid sickness absence may be extended) Unpaid sickness absence will not be treated as pensionable service. Unpaid sickness absence will be recorded and count towards the trigger points.
8.2.4 All periods for which a sickness absence is recorded count towards the calculation for entitlement to receive sick pay.

8.3 Pregnancy, Maternity and Sick Pay

8.3.1 Sick Pay will not be paid to employees on maternity leave. If an employee who is pregnant is absent due to pregnancy related illness in the four weeks leading up to the expected week of childbirth, their maternity leave will commence automatically. Employees would no longer be eligible for Sick pay but may be eligible for the associated maternity payments available. For more information see the Maternity, Adoptive, Maternity Support and Parental Leave Policy.

8.3.2 If an employee is off-sick at any other time because of her pregnancy she is entitled to sick pay in the normal way. (Antenatal care does not count as pregnancy-related illness in this respect.)

9. Injury benefits scheme

9.1 The Injury Benefits Scheme (as set out in the relevant Research Council pension scheme) provides a guaranteed minimum income to eligible employees in the event of impairment of earnings capacity resulting from injury in the course of duty, or from injury or disease directly or mainly attributable to their employment with the Research Council.

10. Third parties

10.1 The Research Council Injury due to a Third party policy provides detailed information on this matter.

11. Fit notes

11.1 Fit notes are a statement of fitness issued by a doctor used to indicate whether the employee is fit for work or otherwise.
11.2 There is no legal obligation for the Research Council to comply with the recommendations of a fit note. However, serious consideration will always be given as to whether or not any of the recommendations can be implemented, taking advice from the Occupational Health Advisor as appropriate. This will normally be done in consultation with the employee at a return to work discussion.

11.3 If the Research Council prevents or delays the employee’s return to work from the date on the fit note, this time will be paid.

11.4 Any changes to an employee’s working conditions resulting from fit note recommendations will only be implemented with the agreement of the employee.

11.5 **Fit for Work**

11.5.1 Fit for Work is a service provided by the Government offering free medical advice, which is accessed through the service’s website or by telephone. It provides free occupational health assessments for employees who have been absent from work for 4 weeks or more. Effective of 16 December 2017 employers will no longer be able to refer their employees to the service. The assessment services under the scheme will end on 31 March 2018 in England and Wales and 31 May 2018 in Scotland.

11.5.2 The Research Council provides its own Occupational Health Service and will refer employees to its own service provider in the first instance; there is no obligation for the Research Council to refer employees to the Fit for Work service however, with the employee’s consent, their GP can refer them to Fit for Work.

11.5.3 If an employee is referred to Fit for Work they will be assessed either by telephone or face to face. Fit for Work will issue a Return to Work Plan following the assessment that has been agreed with the employee. With the employee’s consent this can be shared with an appropriate official within the Research Council.

The doctor may also tick one or more of the following options, as appropriate, to provide supporting information to the employer and what they could do to help facilitate a return to work:

- a phased return;
- amended job duties;
- altered hours of work; or
- reasonable workplace adaptations.

A fit note will usually be a starting point to initiate discussions between manager and the employee, to help identify any workplace issues or additional support that could be provided. There may be other alternatives, additional to the doctor’s suggestions, which should also be considered.
11.5.4 It is not mandatory for the Research Council to follow the recommendations on the Return to Work plan.

11.5.5 The Return to Work plan can be used as evidence equivalent to a Fit Note. If the employee is discharged or chooses not to share the Return to Work plan with the Research Council, then a Fit Note will be required.

11.5.6 The existence of a Return to Work plan does not preclude the Research Council from taking any action under the terms of the policy.

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**Employees will automatically be discharged from a Fit for Work Plan:**

- Two weeks after they have returned to work (including beginning a phased return); or
- On the date when Fit for Work decides that there is no further assistance it can offer the employee, which will be either when the employee has been with the service for three months, or at the point that Fit For Work decides that the employee will be unable to return

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12. **Return to work meeting**

12.1 A return to work meeting will be conducted by the employee’s immediate supervisor or manager after each instance of sickness absence (including sickness whilst on annual leave), irrespective of the length of absence.

12.2 Return to work meetings should be held on the first day of return or as soon as is reasonably practicable, normally within one week of the employee’s return to work.
12.3 If the line manager is unsure of what follow-up action is required after a return to work meeting they should contact the Research Council HR team who will provide advice and, if appropriate assist with any necessary follow up action.

12.4 Return to work meetings are informal, and that it has taken place is noted on the System.

13. **Monitoring and Absence reviews**

13.1 As part of its duty of care the Research Council will monitor health-related absence closely to identify patterns of sickness absence and areas where further support could be provided. The Research Council HR team will monitor employee absence, both at a local and organisational level, with a view to identifying absence patterns and trends.

13.2 The Research Council also expects managers to monitor employee attendance and absence as part of their day to day responsibilities.

13.3 Action will be taken when absence levels become a cause for concern (see paragraph 14...
below). Occupational Health will be consulted in these circumstances and recommendations will be implemented where appropriate.

Managers should:

a) Be aware of sickness levels within their areas and seek to monitor and manage sickness absence.

b) Ensure that full records of absence are maintained to provide accurate facts on which to act if an employee’s sickness record gives cause for concern.

c) View the system records to check reasons for absence.

d) Analyse records for trends/patterns of absence in respect of an individual and/or teams. This analysis will help to identify potential issues to explore with individual employees.

e) Be aware that sickness absence may have psychological as well as physical aspects to be addressed. It is important to create a sensitive and confidential environment in which the employee can discuss sickness absence and any health issues or problems.

Managers should look specifically for any pattern of regular absences, or a regular day each week. For example, frequent Monday absences or absences that tend to occur at a particular time, such as prior to a monthly deadline.

It is important that managers keep an open mind and do not jump to any conclusions as to why an employee is taking time off work. Frequent short-term absences could be due to a series of unrelated sickness episodes, a symptom of unhappiness at work, other personal problems, or may be an indicator of an underlying serious medical condition. It is really important that managers speak to employees about their absence levels and reasons for absence to understand the root cause in order to identify an appropriate and effective course of action.

14. Trigger points to prompt an attendance review meeting

14.1 The Research Council has established ‘trigger points to help managers identify where absence levels are of concern and therefore, warrant further investigation. The ‘trigger points should be used as guides rather than an absolute as individual circumstances should to be taken into account.

14.2 The factors that should prompt managers to consider holding an attendance review meeting include:

- An employee has been absent continuously through ill health for more than two weeks with no indication of a return to work within the following two weeks.
• An employee’s absence due to ill health reaches a total of 12 working days during the preceding 12 month period.

• An employee has been absent due to sickness on five separate occasions in a 6 month period.

• A discernible pattern of absence is giving cause for concern.

• An employee has shown a change in performance or conduct where there is reason to believe that ill health may be a contributory factor.

• There are grounds for suspecting the nature of the work/work environment are causative factors in an employee’s health.

14.3 Any of these single events, or a combination, could warrant the instigation of an attendance review meeting. Managers who are concerned about an employee who has frequent short-term absences, irrespective of whether a trigger level has been exceeded, should contact the Research Council HR team in the first instance for advice and guidance.

14.4 Pregnancy related sickness should be recorded separately on the system from other illness and will not be counted towards a total sickness record for the purposes of determining whether an attendance review meeting is required. Pregnancy-related sickness absence will not be used as a reason for disciplinary action or redundancy selection.

15. Underlying medical conditions

15.1 Absences related to an underlying medical condition that is covered by the legal definition of disability will not be counted in the calculation of sickness absence or trigger point levels, so long as the manager is aware of them.

15.2 Depending on the circumstances, it may also be appropriate to exclude any absence relating to a workplace injury, contagious illnesses, and potentially one-off injuries/illnesses from the calculation of sickness absence or trigger point levels.

For cases where personal or domestic circumstances may be contributory factors, employees should be made aware of available support mechanisms. The period of absence should not automatically be treated as sickness absence; alternative provisions could be considered e.g. parental leave. Managers should exercise judgement and seek advice from the Research Council HR team if uncertain.

15.3 Although absence related to a condition covered by a disability will not be counted in sickness absence calculations or trigger points, managers will continue to monitor such absence levels separately and may, if the level of absence is a cause for concern and it is considered appropriate, hold a formal attendance review. In these cases advice should be taken from the Research Council HR team.
16. **Informal Attendance Review meetings**

16.1 The line manager should work informally with the employee to manage sickness absence to ensure acceptable attendance levels are maintained. However, if an employee's absence levels are considered to be unsatisfactory and/or a trigger level has been exceeded, the manager will normally arrange an attendance review meeting with the employee to discuss their absence levels and the reasons for this.

16.2 Attendance review meetings are informal however employees may be accompanied by a work colleague or represented by a recognised Trade Union representative.

16.3 The purpose of an attendance review meeting is to:

- Provide the employee with the opportunity to discuss any reasons for the attendance issues and establish whether or not there is an underlying cause of the absences.
- Identify the likelihood of further absence, including in the context of the employee’s absence history.
- Determine whether it is appropriate to seek advice from Occupational Health, particularly where an underlying medical condition has been identified.
- Agree solutions to address causes of absence from work (either at the meeting or following receipt of advice from Occupational Health).
- Agree reasonable targets and timescales for improved attendance (ensuring that where appropriate, health issue(s) are taken into consideration).
- Make the employee aware that, where no specific health or disability issues have been identified, a lack of improvement in their attendance may result in the Research Council instigating formal action as outlined in paragraph 18.

Sickness absence may have psychological as well as physical aspects to be addressed. It is important to create a sensitive and confidential environment in which the employee can discuss sickness absence and any health issues or problems including whether the illness is considered a disability.

16.4 Where health issues or concerns have been identified in the attendance review meeting, managers should discuss the next steps with the employee and consider making an Occupational Health referral, including for advice on:

a) Any reasonable adjustments that might help alleviate the employee’s medical symptoms; and

b) The likely timescale for improvements to their sickness absence record.
Possible work adjustments may include:

- Modification of work patterns or practices, equipment, management systems, or workstations, which might assist the employee’s access to or confidence in the workplace.

- Provision or support in any medical interventions, for example physiotherapy or time off for other medical appointments which might alleviate the employee’s condition.

To ensure that return-to-work plans are properly understood and implemented they should be discussed and agreed with the employee to include clear timeframes. This should be in writing and include regular review dates.

16.5 Possible outcomes from an attendance review meeting might be:

a) The manager may review the sickness absence rate and agree that there is no cause for concern.

b) An agreed review period to monitor progress.

c) A temporary or permanent workplace adjustment and an agreed review period in a specified time to monitor progress following implementation of the adjustments.

d) A requirement to seek and consider OH or medical advice. If this is the case, the meeting should be reconvened as soon as possible once the Occupational Health advice is received. If medical advice suggests a phased return or a need to initially undertake light duties, a review period would be agreed. This reduction in duties would not normally exceed 3 months but in exceptional circumstances consideration should be given to agreeing permanent reduced hours.

e) That there are no appropriate adjustments that will assist or are possible at this stage. If this is the case, the possibility of redeployment to another position to accommodate the employee’s health condition should be considered.

To ensure that Occupational Health recommendations are properly understood and implemented they should be discussed and agreed with the employee. Any actions should include clear timeframes and be reviewed regularly.

Where a review period has been agreed, managers should regularly meet with the employee to provide encouragement and support.

16.6 Following the agreed review period:

- Where attendance has improved to a satisfactory level, no further action is necessary.
• Where attendance has not improved to a satisfactory level, the employee will be invited to attend a first formal absence management review meeting under procedure as outlined in paragraph 17.

16.7 In rare cases, where absences are not found to be genuine, disciplinary proceedings will be instigated. The Research Council Disciplinary policy provides detailed information on the procedure which will be followed in this situation.

17. Formal Stages in Managing Short Term Sickness Absence

17.1 First Formal Absence Management Review Meeting

17.1.1 Following an informal attendance management review, where there is no improvement in attendance a formal absence management review meeting will be held.

The manager must work with the Research Council HR team in seeking advice and guidance throughout the formal procedure.

17.1.2 The manager, in conjunction with the Research Council HR team, will invite the employee to a formal absence management review meeting in writing, giving the employee at least 5 working days’ written notice of the meeting.

17.1.3 The employee has the right to be accompanied by a work colleague or represented by a recognised Trade Union representative. The employee also has the right to request a postponement of up to five working days if their chosen representative is not available to attend on the original day or time.

17.1.4 The employee’s absence record over the past 12 months will be discussed at the review meeting.

17.1.5 The aim of the meeting is to:
   a) Review and discuss the employee’s sickness absence record.
   b) Allow the manager to explain why the level of absence is giving concern and the impact of this on the work of the team/Unit.
   c) Allow the employee to explain the reasons for absence(s).
   d) Seek to ascertain if there are any underlying problems which might be causing the absence(s).
   e) Consider and agree reasonable adjustments (where possible) to help prevent a recurrence.
   f) Explain the potential consequences if the employee fails to achieve and maintain the required level of improvement.
   g) Agree next steps/date for review.
   h) The manager may consider it appropriate to adjourn the meeting to consider the responses given by the employee and/or to arrange an Occupational Health referral if not
already obtained. Following receipt of any medical advice, the meeting should be reconvened as soon as possible.

Examples of reasonable adjustments to working practices include:

- For a specified period of time allowing the employee more time off work to attend medical appointments, to seek treatment, or adapt to medication, than would normally be considered acceptable.
- Vary the employee’s hours of work either temporarily or permanently to accommodate medical care.
- Provide additional rest breaks if the employee’s condition means that they tire easily.

17.1.6 Possible outcomes from the formal attendance management review meeting might be:

a) Agreement of any reasonable adjustments to be made.

b) An agreed review date to determine the level of improvement to be achieved.

c) Setting of agreed targets and timescales for achieving these.

d) Counselling / coaching.

e) That there are no appropriate adjustments that will assist or are possible at this stage. If this is the case, the possibility of redeployment to another position to accommodate the employee’s health condition should be considered. Ill health retirement may also be considered.

Consideration may also be given to allowing the employee a career break. Further information on career breaks is set out in the Career Breaks and Sabbaticals Policy.

17.1.7 After the first formal absence management review meeting a First Stage Outcome letter will be provided to the employee to confirm the main discussion points, targets set and review dates. The letter should also include the right of appeal and to whom any appeal should be submitted.

17.1.8 The letter should normally be issued within five working days of the meeting and will be kept on file on the system. If after a period of 12 months improvement is maintained, the letter will normally be disregarded.
17.1.9 The employee has the right of appeal against a decision at any stage of the formal procedure. Details of the purpose and how to lodge an appeal are at paragraph 19.

17.1.10 If a satisfactory level of attendance has been achieved together with the ability to carry out necessary work duties, no further steps will be taken under the formal process outlined within this policy. The employee should be reminded that the improvement must now be sustained over an agreed period. Failure to do so may result in the formal process being re-instated from this point.

17.2 Second Formal Absence Management Review Meeting

17.2.1 Where there is insufficient improvement in attendance within agreed time frames, a second formal absence management review meeting will be held. As before, at least 5 working days’ written notice should be given for attendance at the second formal meeting.

17.2.2 The employee has the right to be accompanied by a work colleague or represented by a recognised Trade Union representative. The employee also has the right to request a postponement of up to five working days if their chosen representative is not available to attend on the original day or time.

17.2.3 Managers will work with the Research Council HR team to decide whether further Occupational Health advice is needed.

17.2.4 At the second formal meeting, the improvements/targets set at the first meeting will be discussed and the reasons why attendance has not improved will be explored.

17.2.5 After the meeting a Second Stage Outcome letter will be provided to the employee to confirm the main discussion points raised and targets set. This should normally be issued within five working days of the meeting and would be disregarded after a period of 12 months if the improvement is reached / maintained.

17.2.6 The employee has the right of appeal against a decision at any stage of the formal procedure. Details of the purpose and how to lodge an appeal are at paragraph 19.

17.2.7 If a satisfactory level of attendance has been achieved, no further steps will be taken under the formal process. The employee should be reminded that the level of attendance must now be sustained over an agreed period. Failure to do so may result in the formal process being re-instated from this point.

17.3 Final Formal Absence Management Review Meeting

17.3.1 Where attendance remains unacceptable a third formal absence management review meeting will be arranged to discuss the failure to improve. A recommendation for dismissal
is one of the options as an outcome; this will be made to the person with delegated authority to dismiss.

17.3.2 At least 5 working days’ written notice should be given for attendance at the final formal meeting.

17.3.3 The employee has the right to be accompanied by a work colleague or a recognised Trade Union representative. The employee also has the right to request a postponement of up to five working days if their chosen representative is not available to attend on the original day or time.

17.3.4 Managers will work with the Research Council HR team to decide whether further Occupational Health advice is needed.

17.3.5 After the meeting a Final outcome letter will be provided to the employee to outline the decision/recommendation, reasons for the decision, and the right to appeal. This should normally be issued within 5 working days of the meeting.

17.3.6 The possible outcomes of the final formal meeting include:
   a) No further action will be taken at this time
   b) Agree that the employee will return to work and maintain acceptable levels of attendance; failure to do so will result in dismissal
   c) Redeployment within the Research Council.
   d) Management suggest the employee is retired on the grounds of ill health.
   e) Dismissal on the grounds of ill health.

17.3.7 The employee has the right of appeal at any stage of the formal procedure. Details of the purpose and how to lodge an appeal are at Section 19.

17.4 Dismissals and Ill Health Retirement

17.4.1 Following the formal absence management review stages one of the outcomes could be dismissal. The decision to dismiss will only be taken after a full review of all relevant factors (by the person with delegated authority to dismiss in consultation with the Research Council HR team) including the context of the whole employment history.

17.4.2 In normal circumstances the decision to dismiss will only be taken after three formal absence management reviews. The decision to dismiss an employee will be taken in accordance with the local delegations framework.

17.4.3 Dismissal on the grounds of Ill Health Retirement may be considered when an employee is no longer able to discharge their duties effectively, due to frequent or lengthy sick absences or because their work performance has deteriorated to an unacceptable standard through ill health. A range of reasonable adjustments must be considered by managers, the Research Council HR team and Occupational Health before Ill Health Retirement is considered.

17.4.4 When the Research Council proposes to retire an employee on grounds of ill health, or where an employee requests ill health retirement, the Research Council will seek advice from its medical advisor.

17.4.5 If, in the light of this advice and following appropriate consultation with the employee, it is decided that ill health retirement is appropriate, the Research Council will notify the employee
of the decision and give formal notice of retirement. The period of notice will be three months unless a shorter period is mutually agreed. The employee will be informed of their right to appeal against the Research Council’s decision and be provided with details of the appeal procedure (see paragraph 19).

17.4.6 The ill health retirement provisions of the relevant pension scheme will apply, including the right of appeal.

- The decision to dismiss will only be taken after a full review of all relevant factors including the context of the whole employment history.
- Consideration of alternative solutions must be demonstrated and documented prior to dismissal, which should be considered only as a final option.
- Such terminations will be either with notice or payment in lieu of notice.
- Employers must consider re-deployment to alternative suitable work taking advice from the Research Council HR team. The employer is not, however, expected to create a special job, nor to be a medical expert, but to take action on the basis of the medical evidence available.
- Provided that the employer has taken reasonable steps to secure the employee’s cooperation in gathering medical evidence but has failed to secure that co-operation, the employer is entitled to take action on the evidence available, even if that falls short of the full medical position.
- In cases where the Occupational Health advice is that an employee has become permanently incapable of carrying out their duties due to permanent ill health, managers must liaise with Research Council HR team to discuss ill health early retirement, subject to the Research Council’s Pension Scheme rules.
- Dismissal or redeployment may be appropriate in cases where the nature of the illness makes it unsafe for the employee to continue to carry out their duties in their existing role, or where it creates an unsafe environment for other groups of workers or members of the public.

18. Long-Term Sickness Absence

18.1 Principles

18.1.1 The Research Council defines long-term sickness absence as 20 or more consecutive working days.

18.1.2 The primary aim in dealing with long-term absence should be to facilitate the employee’s return to work at the earliest reasonable point. Managers have a duty of care to balance the needs of the business and team, with support for an employee who is suffering from long-
term sickness.

18.1.3 The Research Council will take a sympathetic and considered approach to long-term sickness absence. As soon as it becomes clear that an employee’s absence will be long-term, managers should meet with the employee informally, to discuss what support the organisation can provide them to assist their recovery and a return to work, and address any concerns they may have about their employment (see 18.2 below).

18.1.4 In determining the appropriate management approach, the Research Council will take into account the following:

- The likelihood of improvement in health and a return to work;
- An assessment of previous and likely future absence due to ill health;
- The possibility of redeployment to alternative work if this would be appropriate;
- The feasibility of making reasonable temporary adjustments to the work, including reduced working hours, part-time working and other flexible working arrangements to facilitate a return to work;
- Where the absence is a result of or linked to a disability, considering reasonable adjustments to the job and/or working environment to assist a return to work;
- Options for rehabilitation.

18.2 Maintaining Contact

18.2.1 A significant contributory factor to the effective management of long-term absence is maintaining regular contact between the manager and employee. Those who are away from work due to longer term health problems can feel isolated and lonely and may miss the social interaction of colleagues. Such feelings can sometimes hinder a speedy recovery so it is important that managers keep in touch with employees on long-term sickness absence on a regular basis (ordinarily weekly but this will be dependent on individual circumstances).

18.2.2 Contact may be by telephone, occasional meetings at a neutral venue or the employee’s home, or via e-mail.

18.2.3 Managers can sometimes feel uncomfortable contacting employees who are away from work due to illness as they don’t want to be seen to be putting undue pressure on the employee. However, a lack of contact from a manager may be presumed, by the employee, as a lack of interest in their wellbeing and can lead to them feeling unsupported and abandoned. To avoid this situation, managers should write to the employee indicating a desire to maintain contact. In the letter the manager should:

- Explain the letter is a request for contact out of concern for the employee’s wellbeing and to reiterate any offer of support that is reasonable and practical; it is not to put any pressure on the employee to return to work.
- Ask the employee for their preferred method of contact (i.e. by telephone, occasional visits at home or at a neutral venue, email communication, or a combination of these).
• Outline that the employee's wishes with regards to the method of contact will be taken into account.

• Agree with the employee what information they would like to receive e.g. changes and developments within the workplace.

Maintaining regular contact with employees who are away from work due to long-term absence not only allows managers to keep up-to-date with the employee’s state of health and their progress with regards to a return to work, but will also enable the manager to effectively plan for and maintain temporary cover for the absent employee.

18.2.4 Where circumstances make it difficult for direct contact (for instance where the reason for the absence is of a sensitive nature or related to line management issues), advice should be sought from the Research Council HR team.

18.3 Occupational Health Advice

18.3.1 Once an informal discussion with the employee has taken place, managers should consider referring the employee to Occupational Health for a medical assessment to determine:

• The effects of the employee's illness/condition,

• The likely duration of the illness/condition, and

• Whether there are any steps that the Research Council could take to facilitate a return to work.

18.3.2 Where the employee is able to provide adequate information concerning their absence and/or anticipated return to work it may not always be necessary to seek additional medical advice from Occupational Health. This will be dependent on individual circumstances. Managers should always seek advice from the Research Council HR team to determine whether a referral to Occupational Health is necessary.

18.3.3 Where the manager and HR consider a referral to Occupational Health is appropriate in the circumstances, the manager will make a request for referral. Requests for referrals to Occupational Health Advisors should be in writing and must include a job description of the employee’s role. Any referral will be made with the knowledge of the employee and seek to encourage the open exchange of information. The employee may be consulted on the information requested but does not have the right to veto any information requested by the Research Council.
18.3.4 In addition, the Research Council may require the employee to undergo a medical examination performed by an Occupational Health Advisor or a medical advisor appointed and paid for by the Research Council. In the event that the employee refuses or is unable to attend the appointment, then a decision regarding management of the case will be made on the information available.

18.3.5 Occupational health advice is given to the manager via the retained HR team and will not contain confidential medical detail, but is concerned with the effects of a health problem on work attendance or performance, or the effects of work on the employee’s health. Occupational Health reports are sent with the employee’s consent, to the retained HR team and discussed with the employee and their line manager. The employee will also receive a copy of the report.

18.3.6 Medical referrals should be specific and request a written report covering:

- The reasons for the illness and why it prevents the employee from doing their regular duties/attending the workplace.
- The nature of treatment and possible side effects.
- An indication of when the employee is likely to be able to return to work.
- Whether on return there may be a limitation on the duties the employee should undertake, including a phased return and the likely time span.
- Whether there are any reasonable adjustments to help improve the employee’s attendance or assist the return to work, including any reasonable adjustments to the employee’s role or way of working that might accommodate a medical condition.

Upon receipt of the request, the Occupational Health Advisor (OHA) will seek written consent from the employee to obtain a written medical report from the employee’s General Practitioner (GP) and/or specialist (if required). The medical report is obtained to provide the OHA with the full information on which to base their advice to the manager on how to manage the sickness absence. Under the provisions of the Medical Reports Act (1988), employees may request to see any report provided by their doctor/specialist before it is passed on to the OHA.

18.3.7 If an employee does not consent to the disclosure of the medical report, decisions about their employment will be taken without the benefit of the fullest medical advice.

18.3.8 If the advice received from the OHA is inconclusive, it may be necessary to obtain a second medical opinion.
18.4 Disability discrimination: Considerations

18.4.1 An employee who is away from work on long-term sick absence may be disabled for the purposes of the Equality Act 2010. The Act contains a very broad definition of disability, which includes both physical and mental impairments that last, or are expected to last, 12 months or more and are substantial in terms of their effects on an individual's day-to-day life.

18.4.2 The Equality Act 2010 provides protection to disabled employees from discrimination. Whether or not an employee has a disability can be a complex area and should be considered carefully in discussion with the Research Council HR team.

Management should exercise judgement when recording and considering actions and trigger levels, particularly in cases of contagious illnesses, accidents at work, pregnancy related illness and potentially one-off injuries/illnesses.

18.4.3 An employee whose condition is defined as a disability under the Equality Act is entitled to take time off during working hours and/or agreed periods of leave for rehabilitation, assessment or treatment in connection with their disability. Any such leave, depending on the circumstances, should be monitored separately and should not be counted in the calculation of sickness absence or trigger points.

18.5 Absence management meeting

18.5.1 Where appropriate, once advice has been received from Occupational Health, the employee will be invited in writing to attend a meeting with their manager and a representative from the Research Council HR team to discuss the following:

   a) The advice from Occupational Health
   b) The employee’s view of their health situation
   c) The medical report from the GP or specialist (as applicable)
   d) The prognosis and likely time scale for a return to work, if known
   e) Support that could be offered by the Research Council, prior to and/or on return to work.

18.5.2 At least 5 working days’ notice will be given of the meeting (unless the employee agrees in writing to less).

18.5.3 Employees have the right to be accompanied by a work colleague or represented by a recognised Trade Union representative. Employees also have the right to request a postponement of up to five working days if their chosen representative is not available to attend on the original day or time.

18.5.4 Where employees are unable to travel, the meeting will be conducted via the telephone or a meeting may take place at an alternative venue nearer to the employee’s home. Alternatively, a written representation can be submitted. A summary of the discussion from the meeting will be produced, a copy of which will be provided to the employee for information and comment.
18.6 Managing a Return to Work

18.6.1 Once the employee has received an indication from their doctor, or the Occupational Health Advisor, that they may soon be ready to return to work, the manager should be made aware as soon as is reasonably practicable. This will normally be in the form of a statement of fitness for work (often referred to as a ‘fit note’) – refer to paragraph 11 for further information about fit notes.

18.6.2 The manager should arrange to meet with the employee, and where appropriate a member from the Research Council’s HR team, to develop a plan of the steps required for a full return to work. At this meeting the manager and employee should:

- Consider the possibility of a phased return to work and the options for this in order to determine a proposed date to return to work.

- Consider whether the employee will be fit to perform all normal duties or whether adjustments should be made. In most cases the employee’s doctor, or Occupational Health Adviser, will have provided advice with regards to any appropriate adjustments that could be made in order for the employee to return to work. This might be a reference to amended job duties, altered hours of work, workplace adaptations or other advice. Managers should take into account any such medical advice when making this decision.

- Discuss and agree what type of support will initially be provided in the first few weeks/months following the employee’s return to work, and determine how their progress with be monitored.

These details will be confirmed in writing.

Managers should give due consideration to the employee’s own opinions on their condition, likely date of return and the work they would feel capable of doing upon return. This needs to be balanced alongside professional medical opinion.

18.6.3 Upon the employee’s return to work, the manager has a responsibility to monitor the situation and informally discuss this with the employee for an agreed period of time to ensure that the employee is coping adequately with their workload.
18.6.4 Where it has been agreed, on the recommendation of the Occupational Health Adviser, that the employee be allowed to return to work initially on reduced hours, the aim will be to progressively increase the hours worked until normal working is resumed. Pay will be calculated on the basis of proportionate pay for the net hours worked plus proportionate sick pay at the appropriate rate for the net hours not worked. The net hours not worked will be aggregated and recorded as certificated sick absence.

In order to minimise the impact of inputting multiple absences on the employee’s entitlement to sick pay (refer to paragraph 8.2) Managers should keep a local record of hours not worked under a phased return and enter onto the System as a sick absence whenever the total hours of the employee’s standard day has been reached.

18.6.5 If medical advice for an employee who is absent due to a long-term illness suggests a phased return or a need to initially undertake light duties, a review period will be agreed.

18.6.6 Any requests for a permanent change in hours/working pattern should be considered under the Flexible Working Policy.

18.7 Reasonable adjustments

18.7.1 In considering the advice within an Occupational Health report, the manager in conjunction with Research Council HR team will review reasonable adjustments required to be implemented for work practices, premises and/or equipment.

Managers should also give some thought as to how the employee will feel upon their return to work. Often employees returning from a long absence will be anxious about their ability to perform and may also be concerned about how they will be perceived and treated by their colleagues. It is therefore very important for managers to take positive steps to welcome the employee and facilitate their reintegration into the workplace. Such steps may include:

- Review current work and plan to give the employee meaningful work so they feel like they are contributing to the team, being careful not to overload them with work;
- Ensure the employee is not returning to a backlog of work;
- Arranging a social visit prior to the employee’s return to work to allow them to meet with colleagues informally;
- Consider asking one of the employee’s colleagues to act as a ‘buddy’ for a period of time, taking responsibility for helping them with any difficulties in the first few weeks following their return to work.
18.7.2 Where as a result of a medical condition and despite implementation of reasonable adjustments to the existing job, an employee is unable to continue in their normal role, advice should be sought from the employee’s GP and the Occupational Health Advisor in order to identify the types of duties the employee could undertake that would not endanger their own health or that of their fellow employees.

18.7.3 It may also be appropriate to consider redeployment to another role within the Research Council.

18.8 Inability to Return to Work

18.8.1 It is important to recognise that in some extreme cases, an employee may ultimately be unable to return to work. If on the advice of the Occupational Health Advisor and taking all circumstances into account, there continues to be no indication of a likely return to work, a management decision in consultation with the Research Council HR team will be taken as to whether it is appropriate to consider:

- Redeployment to another role within the Research Council
- Ill health retirement
- Dismissal on grounds of ill health

18.8.2 In certain circumstances, where Ill Health retirement or redeployment are not possible or appropriate, dismissal on the grounds of ill health may be the only remaining route. If this is the case, a further meeting will be held with the employee before a final decision is made.

18.8.3 As before, the employee has the right to be accompanied at any meetings by a work colleague or represented by a recognised Trade Union representative.

18.8.4 It is expected that the employee (and if appropriate the chosen representative) will make every effort to attend an arranged meeting. The Research Council recognises that there may be occasions when this is not always possible. However, it is important that the process is not unreasonably delayed at any stage and therefore in these circumstances the following will normally apply:

It is the manager’s responsibility to implement reasonable adjustments to facilitate the employee’s attendance at work. Possible adjustments may include:

- Making adjustments to the work environment.
- Reallocating work.
- Providing training.
- Providing more supervision/work plan.
- Being more flexible about working hours, including consideration of permanent contractual changes such as a flexible working pattern.

Managers should seek further advice from the Research Council HR team.
a) The employee has the right to request a postponement of up to five working days if their chosen representative is not available to attend on the original day or time. Meetings should not be unreasonably delayed due to the non-availability of a particular representative.

b) Where the employee is unable to attend due to circumstances beyond their control (e.g. illness) another meeting date will be arranged.

c) In situations where an employee is repeatedly unable to attend a meeting the following alternatives may also be offered in order to give the employee every opportunity to present their views:

- Holding the meeting at the employee’s home
- Holding the meeting at a neutral location
- Holding the meeting via a telephone or video conference
- Going ahead with the hearing in the employee’s absence but with a TUS representative or work colleague of their choosing who will present the case
- Going ahead with the hearing but taking into account any written representations that the employee wishes to make.

18.8.5 If all reasonable attempts to arrange an alternative meeting fail, the appropriate manager in consultation with the Research Council HR team will take account of the following before making a decision on how to proceed:

- The seriousness of the issues under consideration
- The employee’s general work record, work experience, position and length of service
- Medical opinion from the Occupational Health Adviser on whether the employee is fit to attend the meeting

18.8.6 The Research Council reserves the right to proceed in the employee’s absence, but if this is the case the employee will be advised of this in advance. The meeting will take into account all the available relevant information and evidence and the employee will be notified of the outcome in writing and made aware of their right to appeal, as appropriate.

18.8.7 If, after consideration of all the facts, dismissal is recommended, notice of this action will be issued in accordance with this policy, and will include a right to appeal against the decision. The decision to dismiss will be taken in accordance with the local delegations framework.

18.8.8 The same facilities as outlined in the paragraphs 18.8.4-18.8.6 above will also apply to any appeal hearings.

19. Appeals process

19.1 Principles

19.1.1 All employees have the right to appeal against a formal decision at any stage of this policy.
19.1.2 Details of the person to whom the appeal should be sent will be included in the decision letter.

19.1.3 The appeal should indicate the full grounds upon which it is made. It must be sent in writing within seven working days of receipt of the decision letter.

19.1.4 An employee can submit new evidence or information that they consider relevant to the appeal and should enclose copies of any new documentation to support their case. If the employee requires assistance to put their appeal in writing they should seek advice from their Trade Union representative or Research Council HR team.

19.1.5 Employees have the right to be accompanied by a work colleague or represented by a recognised Trade Union representative.

19.2 Purpose of the Appeal

19.2.1 The purpose of the appeal is to determine whether:

   a) the decision was fair and reasonable in all the circumstances;

   b) the Sickness Absence Management Policy was followed correctly.

19.2.2 The aim is to review the basis upon which the original decision was made and to allow:

   a) the employee to submit any new evidence;

   b) the employee or an accompanying work colleague or recognised Trade Union representative to comment on any new evidence;

   c) the employee to raise any procedural issues, or comment on those matters they believe have been ignored and/or received insufficient consideration.

19.3 Authority Levels

19.3.1 Managers who have the authority to hear appeals within the Research Council are set out in the Research Council’s delegation authority.

19.4 Appeal Hearing Process

19.4.1 Final appeals will be heard by a senior manager from within the Research Council who has had no previous involvement in the case. In exceptional cases the appeal may be heard by someone outside of the Research Council. The person hearing the appeal will be accompanied by a member of the Research Council HR team.

19.4.2 The HR professional may be external to the Research Council.

19.4.3 The manager should act as Chair and decision maker.

Wherever possible the HR professional should be unconnected with the case.
19.4.4 Upon receipt of an appeal the responsible manager should:

a) send the employee details of the arrangements relating to the appeal hearing;

b) advise them of their right to be accompanied by a work colleague or Trade Union representative. The employee should, where possible, confirm that the person’s attendance and identity before the hearing commences;

c) hold the appeal hearing where possible within 10 working days of receipt of the letter containing the grounds of appeal. This is subject to the employee’s right to request a postponement of up to five working days where their chosen representative is not available to attend on the original date or time.

Those hearing the appeal should study the relevant documentation including the notes of the review meetings.

19.5 The Appeal Hearing

19.5.1 At the Appeal Hearing the chair should:

a) introduce those present and explain their respective roles;

b) explain the purpose and format of the Appeal Hearing, including the possible outcomes;

c) invite the employee to explain the basis in which they are appealing, referring to documents or evidence previously submitted or any new evidence which has come to light where they believe this may support their grounds for appeal;

d) if an employee is accompanied by a work colleague or recognised Trade Union representative, they may outline the employee’s grounds for appeal or make statements on an employee’s behalf. However, they may not answer a question on an employee’s behalf;

e) ask all necessary questions and summarise the facts;

f) decide on whether any further investigation/action is required; this may require an adjournment;

There should always be an adjournment to enable the Chair to consider everything stated in the evidence and where necessary to investigate matters or seek appropriate advice, before deciding on the most appropriate outcome.

g) the Chair should, whenever possible and as soon as possible, verbally inform the employee of the decision reached and the reasons for it.
19.5.2 The decision should be confirmed in writing with reasons. This will normally be confirmed within five working days of the Appeal hearing concluding, although this will be extended should further time be required. In such an instance the employee will be notified of the proposed date by which a decision is expected to be made.

Where an employee fails to attend an Appeal hearing the manager should make all reasonable efforts to discover the reason for such failure to attend and another Appeal Hearing should be arranged.

Where an employee fails to attend for a second time without valid justification, the Appeal Hearing will take place in the employee’s absence.

In very unusual circumstance, the employee may not be able to attend a rearranged Appeal Hearing for legitimate reasons. In such cases the employee may be allowed to make written submissions.

19.6 **Appeal Outcomes**

19.6.1 The possible outcomes of the appeal include:

a) **Uphold the current decision** - i.e. confirm the decision, thereby rejecting the employee’s appeal.

b) **Amend the current decision** - i.e. substitute an alternative form of action. For example, it may be decided that the improvements required should be redefined in some way or the timeframe amended within which the improvements should be achieved.

c) **Overturn the current decision** - i.e. set aside the original decision, thereby upholding the employee’s appeal.

19.6.2 The decision made at a ‘dismissal’ appeal hearing is final, with no further right of internal appeal.

The decision should be clearly communicated to the employee in the appeal decision letter and explain the reasons for the decision and advise the employee that there is no further right of appeal.

20. **Review date**

20.1 This policy will be regularly reviewed to incorporate any legislation changes. The TU may request that a policy is reviewed.
### 21. Amendment history

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Comments/Changes</th>
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<tbody>
<tr>
<td>2.0</td>
<td>1 August 2015</td>
<td>Clarification provided at para 3.1 on sick pay</td>
</tr>
<tr>
<td>2.0</td>
<td>1 August 2015</td>
<td>Recording of part and full days covered at para 3.2</td>
</tr>
<tr>
<td>2.0</td>
<td>1 August 2015</td>
<td>Guidance Box following para 3.2 describing part and full days</td>
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<tr>
<td>2.0</td>
<td>1 August 2015</td>
<td>Clarification on calculation for entitlement to receive sick pay</td>
</tr>
<tr>
<td>2.0</td>
<td>1 August 2015</td>
<td>Guidance box added after para 18.6.4 to cover phased return and the recording of hours</td>
</tr>
<tr>
<td>3.0</td>
<td>1 December 2015</td>
<td>New Section added at 11.5 detailing Fit For Work</td>
</tr>
<tr>
<td>4.0</td>
<td>1 August 2017</td>
<td>Replacement para 2.8 to clarify unauthorised absence, amendment at 2.9 to clarify meaning additional guidance in note at 2.9 to clarify reasonable investigation before salary could be withheld and para 8.2.2 to clarify meaning of paragraph</td>
</tr>
<tr>
<td>5.0</td>
<td>1 October 2017</td>
<td>Para 8.3 renamed as Pregnancy, Maternity and Sick Pay</td>
</tr>
<tr>
<td>5.0</td>
<td>1 October 2017</td>
<td>Para 8.3.2 re-written to clarify that sick pay for pregnancy related illnesses is paid in the normal way.</td>
</tr>
<tr>
<td>5.0</td>
<td>1 October 2017</td>
<td>Para 14.4 new paragraph inserted confirming that pregnancy related sickness does not count in determining whether an attendance review is required and will not be used as a reason for either disciplinary action or redundancy selection.</td>
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<tr>
<td>5.0</td>
<td>1 October 2017</td>
<td>Para 15 Re-titled as Underlying medical conditions</td>
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<tr>
<td>5.0</td>
<td>1 October 2017</td>
<td>Para 15.1 Re-written to remove references to pregnancy related absence.</td>
</tr>
<tr>
<td>6.0</td>
<td>1 January 2018</td>
<td>Addition to para 11.5.1 to reflect abolition of Government Fit to Work scheme.</td>
</tr>
<tr>
<td>7.0 (UKRI)</td>
<td>1 June 2018</td>
<td>Additional paragraph added to Policy Statement confirming Policy may be subject to Home Office Immigration Rules</td>
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Annex A - Summary of the stages in the management of short term and long term sickness absence

Short Term Absence Flow Chart

Informal stage

- Return to Work discussions held between the line manager and the employee
- Has absence level been identified as a cause for concern?
  - If yes, informal meeting to establish if underlying cause and to consider referral to Occupational Health Advisor

Formal stage

- Hold first formal meeting
  - Outcome letter issued
  - Right of appeal

Insufficient improvement in attendance - Hold second formal meeting

- Outcome letter issued
- Right of appeal

Attendance remains unacceptable – Hold final formal meeting

- Final outcome letter issued – possible outcomes include no further action, return to work and maintenance of acceptable level of attendance, redeployment, consideration of ill health retirement, dismissal on the grounds of ill health.
- Right of appeal
Long Term Absence Flow Chart

Informal stage

- Contact maintained between manager and employee

→ Referral to Occupational Health Advisor

Absence management meeting

- Return to work (reasonable adjustments as appropriate e.g. phased RTW)

- Inability to RTW. Consideration of redeployment, ill health retirement, dismissal on health grounds

Formal stage

Meeting with employee before final decision taken

→ Decision to dismiss. Right of appeal
ANNEX B - Absence due to an injury caused by a third party

1. This policy sets out the Research Council’s approach to the provision of sick pay when absence is due to an injury caused by a third party.

2. If an employee is absent through injuries caused by the actionable negligence, nuisance or breaching of statutory duty by a third party in respect of which damages are recoverable, this matter should be reported immediately to the retained HR team.

3. During the period of absence the employee will not be eligible for sick pay but sums equivalent to the amount which would have been paid if the absence had been due to ordinary sickness will be issued as an advance. The employee will be asked to sign an undertaking as soon as possible, to return the advance where damages are successfully claimed.

4. There a claim for damages is submitted against the third party, the employee should include a specific amount for loss of earnings.

5. If a claim for damages is wholly or partly successful, any advances received by the employee during their absence have to be refunded to the Research Council and their income tax and NI contribution payment will be adjusted. In no circumstances will the employee be required to repay a sum greater than the amount received from the third party as compensation for the advance during the absence. If the employee does not claim any damages from the third party or their claim is wholly unsuccessful, they will not be required to repay the advance or any part of it.

6. When all or part of the advance of salary is repaid, the period of absence (due to the injury) that is set against the maximum period of sick leave allowed will be reduced in direct proportion to the amount of the advance that is repaid. Pending repayment, absences should be recorded provisionally as paid or unpaid sick absence and notified in the normal way.