



Sickness Absence Policy

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Policy Statement

UK Research and Innovation (UKRI) is committed to promoting the health and wellbeing of its employees. So, while encouraging employees to maximise their attendance at work, UKRI recognises that they will on occasion be unable to come to work owing to sickness or ill health.

UKRI will deal fairly and sympathetically with employees who are absent from work because of ill health; and aims to assist employees on long-term sick leave with their rehabilitation and eventual return to work.

At the same time, UKRI must pay due regard to its operational needs: if an employee is persistently or repeatedly absent from work, this can damage efficiency and productivity, and place an additional burden on their colleagues.

The aim of this policy is therefore to strike a reasonable balance between the pursuit of UKRI's operational needs and the genuine need of employees to take time off work because of ill health. The policy describes how short- and long-term sickness absence will be managed, including how employees should report and record sickness absences, what to do when booking medical appointments and the circumstances in which a fit note is required.

It provides guidance for line managers on how to manage return to work meetings, and chair attendance review meetings if there is a need to discuss absence with an employee. The policy also sets out UKRI's occupational sick pay arrangements.

Before following this policy, please consult the supporting Policy Framework.

Management Statement

The Sickness Absence Policy and Procedure (the 'Sickness Absence Policy') has been agreed with the Trade Union Side and complies with statutory legislation.

Version Number	Status	Revision Date	Summary of Changes
Version 1.0	Complete	January 2020	New policy created

Sickness Absence

1. Principles

- 1.1 Employees must adhere to UKRI's notification procedure and provide a doctor's fit note (also known as medical certificate) where required. Failure to comply with the notification and certification procedures set out in section three will be treated as unauthorised absence and sick pay may be withheld.
- 1.2 All managers and employees have the joint responsibility to identify and resolve (as far as is reasonably practical) health issues that enable an employee to be fit for 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 [paragraph 19](#).
- 1.4 All health or health related issues will be dealt with in strict confidence. However, in some cases, there will be a need to inform HR, senior colleagues or medical professionals about an employee's condition, to protect and support them in their work.
- 1.5 UKRI is committed to supporting the health and welfare of its employees. Where appropriate advice and/or guidance from occupational health or other medical advisers should be sought with the employee's consent.
- 1.6 UKRI defines a short-term absence as an absence of fewer than 28 calendar days. Long-term absence is defined as 28 or more days.
- 1.7 Managers will maintain regular contact with absent employees.
- 1.8 Subject to the limits set out in this policy eligible employees will be paid Occupational Sick Pay and/or Statutory Sick Pay (see [paragraphs 9 and 10](#)).
- 1.9 Upon the employee's return to work, managers will conduct a return to work meeting to discuss the employee's health and welfare 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 [paragraph 15](#).
- 1.10 UKRI will upload into the system any fit notes to correspond with the periods of absence.
- 1.11 Employees have the right to be accompanied by a work colleague or by a 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.

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1.13 Underperformance issues will be dealt with under the following procedures:

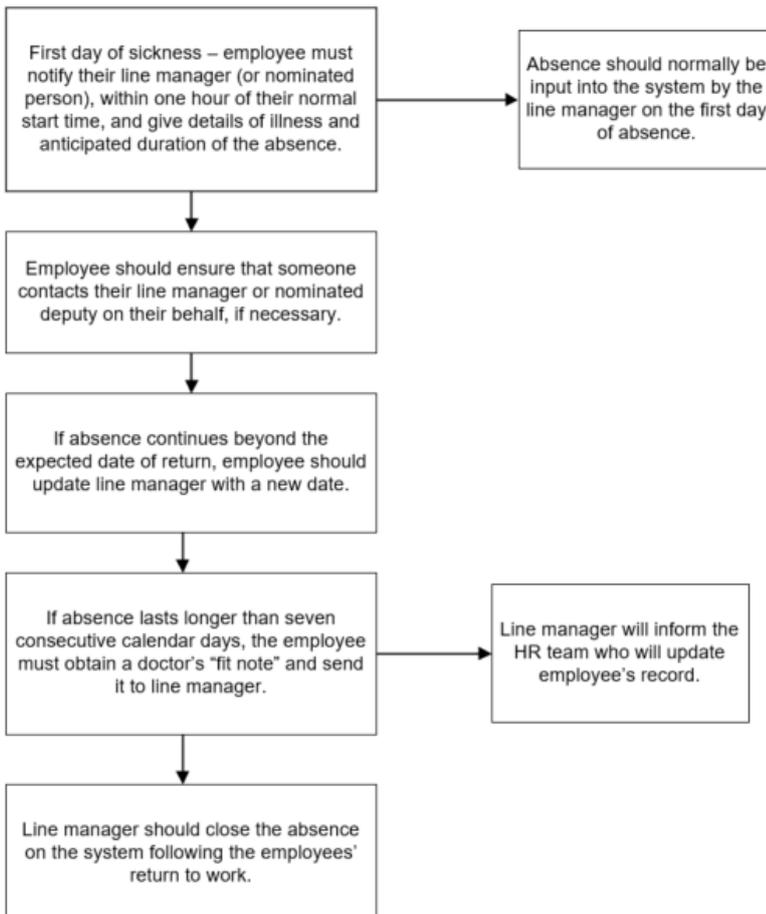
TYPE OF ISSUE	PROCEDURE
Attendance issues due to ill health	Sickness Absence Management
Performance issues e.g. associated with changes in job roles and/or capability	Performance management procedure within the Managing Performance and Conduct Policy
Performance issue caused by Misconduct, for e.g. carelessness, negligence, lack of effort or failure to cooperate with management	Disciplinary procedure within the Managing Performance and Conduct Policy

1.14 Where there is a combination of factors management, in consultation with HR, will decide on the most appropriate policy to follow.

2. Delegation

2.1 For information on the delegated authority, please refer to the UKRI HR Delegated Authority Framework.

3. Reporting sickness absence



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- 3.1 Employees absent from work due to sickness or injury must follow the sickness notification and certification procedure.
- 3.2 On the first day of sickness, the employee must notify their line manager (or nominated person), usually within one hour of their normal start time and afterwards as agreed, to advise that they will not be attending work due to sickness, the nature of the illness and anticipated duration of the absence. If the employee is not able to contact their line manager personally, they should ensure that someone contacts their line 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.
- 3.3 If the absence continues beyond the expected date of return the employee should update their line manager, or nominated person, and provide a revised date for their return to work.
- 3.4 If the 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 their line manager. The line manager will inform HR (as applicable) immediately for the employee's record to be updated. (Refer to [paragraph 13](#) for further information regarding fit notes).
- 3.5 The line manager should close the absence on the system following the employee's return to work, ensuring the whole period of absence is covered, using accurate information.
- 3.6 Non-working days, including 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.
- 3.7 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 (on the day of return to work), 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.
- 3.8 Apart from exceptional circumstances, where an employee fails to report their absence promptly, fails to continue to report an ongoing absence or fails to complete and/or provide the relevant documentation, the absence will be deemed unauthorised, and will be dealt with under the Managing Performance and Conduct Policy – disciplinary procedure.

4. Part days attendance

- 4.1 Employees who feel unwell during working hours and have to finish work early as a result 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.
- 4.2 Full and part days are determined by the number of hours worked. Employees who work less than half of their standard working day should record the absence as a full day of absence in the system, while employees who work more than half of their standard working day should record the absence as 0.5 in the system.
- 4.3 All sickness 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. UKRI has a duty of care to its employees and places great importance on their health and welfare. Recording all absences will enable a full picture of the individual's absence record to be understood and for UKRI to provide the appropriate level of support.

Sickness Absence

5. Sickness absence and annual leave

- 5.1 If an employee falls sick during a period of annual leave, they must comply with the notification procedures for reporting sickness as normal. Provided they do this, the employee may take the relevant period of annual leave at another time, including in the following leave year, if it is not practicable to take it in the current leave year.
- 5.2 Employees continue to accrue contractual annual leave during periods of sickness absence. Public and privilege holidays do not accrue during periods of sickness absence.
- 5.3 An employee on long-term paid or unpaid sickness 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.
- 5.4 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).
- 5.5 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. For more information see the Family Leave and Pay Policy.
- 5.6 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).

6. Medical appointments

- 6.1 Where reasonable notice of medical appointments (e.g. doctors, hospital, dental, or optician appointments) is given, paid time off should be granted.
- 6.2 Where possible medical appointments should be arranged outside of working hours or at a time which will cause the least disruption to the employee's work and the work of their colleagues.
- 6.3 Managers may ask for proof of attendance for medical appointments.

7. Occupational related ill health (including accidents at work)

- 7.1 UKRI will support its employees in the workplace and endeavour to make it a safe place to work.
- 7.2 Employees must report all work-related illness, accidents or injury, however minor they may seem as soon as possible to their manager.
- 7.3 Local arrangements should be followed for reporting work related accidents.
- 7.4 Injuries sustained at work and illness that is potentially work related will be investigated, and where appropriate, individual cases will be referred to the Occupational Health Advisor.

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7.5 In addition, where:

- 7.5.1 an accident results in the employee being absent from work, or
- 7.5.2 an employee believes that they are suffering from an occupationally related illness, the employee must update the system accordingly.

8. Contagious illness

- 8.1 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.
- 8.2 If they are advised to stay away from work, and are unable to work remotely, this will be treated as paid special leave and not sickness absence. As such this will not be counted towards any trigger point.
- 8.3 In such circumstances, HR 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).

9. Sick pay

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

10. UKRI Occupational Sick Pay (OSP)

- 10.1 UKRI's OSP scheme entitles employees to receive up to six months' full pay (inclusive of any SSP entitlement) within a rolling 12-month period. Once the first six months at full pay has been used, within the rolling 12-month period, the employee will receive half pay (including any SSP entitlement) for a further six months.
- 10.2 If an employee is sick for a cumulative total of 12 months within a four-year rolling period, their entitlement to OSP will normally cease.
- 10.3 Once the entitlement to OSP is exhausted, further unpaid sickness absence may be allowed (in exceptional circumstances paid sickness absence may be extended). Unpaid sickness absence will not be treated as pensionable service but will be recorded and count towards the trigger points.
- 10.4 Once the entitlement to OSP has been exhausted, 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. HR will make the decision on these payments after consultation with the line manager and the Occupational Health Advisor.
- 10.5 All periods for which a sickness absence is recorded count towards the calculation for entitlement to receive sick pay.

11. Injury Benefits Scheme

- 11.1 The Injury Benefits Scheme (as set out in the relevant UKRI pension scheme rules)

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provides a guaranteed minimum income to eligible employees, in the event of their ability to earn being affected by injury or disease directly or mainly attributable to their employment with UKRI.

12. Absence owing to an injury caused by a third party

- 12.1 If an employee is absent through injuries caused by a third party in respect of which damages are recoverable, this matter should be reported immediately to HR.
- 12.2 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.
- 12.3 Where a claim for damages is submitted against the third party, the employee should include a specific amount for loss of earnings.
- 12.4 If a claim for damages is wholly or partly successful, any advances received by the employee during their absence have to be refunded to UKRI 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.
- 12.5 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 sickness absence and notified in the normal way.
- 12.6 Employees are not eligible for sick pay but do receive an advance equivalent to the amount which would have been paid. The employee should include an amount for loss of earnings in a claim for damages; if successful, the employee will be required to repay the amount received as an advance. If they are unsuccessful, there is no requirement for the employee to repay the advance. Where all or part of the advance is repaid, the period of absence due to injury that counts towards the limits of OSP, will be reduced in direct proportion to the advance repaid.

13. Fit notes

- 13.1 Fit notes are issued by a doctor to provide evidence of the advice they have given about an individual's fitness for work.
- 13.2 The doctor may also indicate 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:
 - 13.2.1 a phased return,
 - 13.2.2 amend job duties,
 - 13.2.3 altered hours of work; or
 - 13.2.4 reasonable workplace adaptations.

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- 13.3 A fit note will usually be a starting point to initiate discussions between a manager and the employee, to help identify any workplace issues or additional support that could be provided. There may be other alternatives, in addition to the doctor's suggestions, which should also be considered.
- 13.4 There is no legal obligation for UKRI to comply with the recommendations contained within a fit note. However, serious consideration will always be given to them. This will normally be done in consultation with the employee at a return to work discussion. It may also be necessary to seek occupational health advice.
- 13.5 If UKRI prevents or delays the employee's return to work from the date on the fit note, this time will be paid and not recorded as sickness absence.
- 13.6 Any changes to an employee's working environment resulting from fit note recommendations will only be implemented with the agreement of the employee.

14. Managing a return to work

- 14.1 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'). Please refer to [paragraph 13](#) for further information about fit notes.

15. Return to work meetings

- 15.1 A return to work meeting will be conducted by the employee's immediate line manager, or nominated deputy, after each instance of sickness absence (including sickness whilst on annual leave), irrespective of the length of absence.
- 15.2 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.
- 15.3 The purpose of a return to work meeting is to welcome the employee back to work and to discuss the reason for the absence. During the meeting the manager should establish any need for support and how this can minimise further recurrence of absence.
- 15.4 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.
- 15.5 The procedure for managing a return to work meeting and the points to be covered are shown in detail at [Appendix A](#).

16. Reasonable adjustments not related to disability

- 16.1 In considering the advice within an occupational health report, the manager in conjunction with HR team will review reasonable adjustments to work practices, premises and/or equipment that have been recommended.
- 16.2 It is the manager's responsibility to implement reasonable adjustments to facilitate the employee's attendance at work. Possible adjustments may include:
 - 16.2.1 adjusting the work environment,
 - 16.2.2 relocating work,

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- 16.2.3 providing training,
- 16.2.4 providing more supervision/work plan,
- 16.2.5 being more flexible about working hours, including consideration of permanent contractual changes such as flexible working pattern,
- 16.2.6 redeployment to another role within UKRI.

16.3 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 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.

17. Inability to Return to Work

17.1 In 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 HR will be taken as to whether it is appropriate to consider:

17.1.1 ill health retirement; or

17.1.2 dismissal on grounds of ill health (Further information and guidance can be found in [paragraph 27](#)).

18. Monitoring and Absence reviews

18.1 UKRI will monitor health-related absence closely to identify patterns of sickness absence and areas where further support could be provided.

18.2 UKRI also expects managers to monitor employee attendance and absence as part of their day to day responsibilities.

18.3 Action will be taken when absence levels become a cause for concern (see paragraph below). Occupational health advice will be sought in these circumstances and recommendations will be discussed with the employee and implemented where appropriate.

18.4 A manager's responsibilities in monitoring and absence reviews are detailed in [Appendix C](#).

19. Trigger points to prompt an attendance review meeting

19.1 UKRI 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, and individual circumstances should to be taken into account. These points include:

19.1.1 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,

19.1.2 an employee's absence due to ill health reaches a total of 12 working days during the preceding 12-month period,

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- 19.1.3 an employee has been absent due to sickness on five separate occasions in a six-month period,
 - 19.1.4 a discernible pattern of absence is giving cause for concern,
 - 19.1.5 there are grounds for suspecting the nature of the work/work environment are causative factors in an employee's health.
- 19.2 In cases of absences that are attributable to an underlying condition (meeting the legal definition of disability) that the employee has disclosed previously, the Occupational Health Advisor may recommend reasonable adjustments that:
- 19.2.1 absences relating to that condition should not be used for assessing trigger point levels; or
 - 19.2.2 an enhancement to trigger points should be made. Line managers should discuss the occupational health recommendations with HR and agree on the actions to take.
- 19.3 It may also be appropriate to exclude any absence relating to a workplace injury, contagious illnesses (any disease that is required by law to be reported to government authorities) and potentially one-off injuries/illnesses from the calculation of trigger point levels.
- 19.4 Managers will continue to monitor such absence levels and may, if the level of absence resulting from a disability or other conditions that have been excluded is still a cause for concern, hold a formal attendance review. In these cases, advice should be taken from HR.

20. Long-term sickness absence

- 20.1 UKRI defines long-term sickness absence as 28 or more calendar days.
- 20.2 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.
- 20.3 UKRI 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.
- 20.4 In determining the appropriate management approach, UKRI will consider the following:
 - 20.4.1 the likelihood of improvement in health and a return to work,
 - 20.4.2 an assessment of previous and likely future absence due to ill health,
 - 20.4.3 the possibility of redeployment to alternative work if this would be appropriate,
 - 20.4.4 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.

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- 20.5 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;
- 20.6 Options for rehabilitation.

21. Absence management meetings

- 21.1 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 HR to discuss the following:
 - 21.1.1 the advice from occupational health,
 - 21.1.2 the employee's view of their health situation,
 - 21.1.3 the medical report from the GP or specialist (as applicable),
 - 21.1.4 the prognosis and likely time scale for a return to work, if known,
 - 21.1.5 support that could be offered by UKRI, prior to and/or on return to work.
- 21.2 At least five working days' notice will be given of the meeting (unless the employee agrees in writing to less).
- 21.3 At all stages of the formal procedure, the employee has the right to be accompanied by a work colleague or a Trade Union representative. A Trade Union representative who is not an employed official must have been certified by their union as being competent to accompany a worker. 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.
- 21.4 Where employees are unable to travel, the meeting will be conducted via the telephone or video conferencing, 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.

22. Maintaining Contact

- 22.1 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 may miss the social interaction of colleagues. Such feelings can sometimes hinder a speedy recovery, so it is important that managers agree to keep in touch with employees on long-term sickness absence on a regular basis (ordinarily weekly but this will be dependent on individual circumstances).
- 22.2 Contact may be by telephone, occasional meetings at a neutral venue or the employee's home, or via e-mail.
- 22.3 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.

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22.4 For details of and guidance on what the letter should include, see [Appendix H](#).

23. Occupational Health Advice

23.1 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:

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

23.1.2 the likely duration of the illness/condition, and

23.1.3 whether there are any steps that UKRI could take to facilitate a return to work.

23.2 For further guidance on when and in what circumstances to refer an employee to occupational health, see [Appendix I](#).

23.3 On receipt of a report from the Occupational Health Advisor the line managers should discuss the occupational health recommendations with HR and agree on the actions to take.

24. Disability discrimination: Considerations

24.1 The Equality Act 2010 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.

24.2 The Equality Act 2010 provides protection to employees with disabilities from discrimination. Whether or not an employee has a disability can be a complex area and should be considered carefully in discussion with HR.

24.3 An employee with a disability 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. The impact on the calculation of sickness absence, sick pay or trigger points will be made known to the employee.

25. Informal Attendance Review meetings

25.1 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.

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

25.3 The purpose of an attendance review meeting is to:

25.3.1 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,

25.3.2 identify the likelihood of further absence, including in the context of the employee's absence history,

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- 25.3.3 determine whether it is appropriate to seek advice from occupational health, particularly where an underlying medical condition has been identified,
 - 25.3.4 agree solutions to address causes of absence from work (either at the meeting or following receipt of advice from occupational health),
 - 25.3.5 agree reasonable targets and timescales for improved attendance (ensuring that where appropriate, health issue(s) are taken into consideration),
 - 25.3.6 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 UKRI instigating formal action as outlined.
- 25.4 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.
- 25.5 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:
- 25.5.1 any reasonable adjustments that might help alleviate the employee's medical symptoms; and
 - 25.5.2 the likely timescale for improvements to their sickness absence record.
- 25.6 More detail on possible work adjustments and possible outcomes from an attendance review meeting can be found in [Appendix D](#).

26. Formal Stages in Managing Short Term Sickness Absence

26.1 First Formal Absence Management Review Meeting

- 26.1.1 Following an informal attendance management review, where there is no improvement in attendance a formal absence management review meeting will be held. For more details, see [Appendix E](#).

26.2 Second Formal Absence Management Review Meeting

- 26.2.1 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 five working days written notice should be given for attendance at the second formal meeting.
- 26.2.2 The procedure for the second formal absence management review meeting is set out in [Appendix F](#).

26.3 Final Formal Absence Management Review Meeting

- 26.3.1 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.

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- 26.3.2 More details on this process and the rights of the employee are set out in [Appendix G](#).

27. Dismissals and Ill Health Retirement

- 27.1 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 HR) including the context of the whole employment history.
- 27.2 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 HR Delegated Authority Framework.
- 27.3 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 sickness absences or because their work performance has deteriorated to an unacceptable standard through ill health.
- 27.4 When UKRI proposes to retire an employee on grounds of ill health, or where an employee requests ill health retirement, and are no longer able to discharge duties effectively, UKRI will seek advice from its medical adviser.
- 27.5 If it is decided that ill health retirement is appropriate, UKRI will notify the employee of the decision and give formal notice of retirement. The employee will be informed of their right to appeal against UKRI's decision and be provided with details of the appeal procedure (see [paragraph 28](#)).
- 27.6 The ill health retirement provisions of the relevant pension scheme will apply, including the right of appeal.
- 27.7 The decisions to dismiss will only be taken after a full review of all relevant factors including the context of the whole employment history.
- 27.8 Consideration of alternative solutions must be demonstrated and documented prior to dismissal which should be considered only as a final option.
- 27.9 Such terminations will be either with notice or payment in lieu of notice.
- 27.10 Managers must consider re-deployment to alternative suitable work taking advice from HR. UKRI is not obligated to create a special job, nor to be a medical expert, but to take action on the basis of the medical evidence available.
- 27.11 Provided that UKRI has taken reasonable steps to secure the employee's cooperation in gathering medical evidence but has failed to secure that co-operation, it is entitled to take action on the evidence available, even if that fails short of the full medical position.
- 27.12 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 HR to discuss ill health early retirement.

28. Appeals

- 28.1 All employees have the right to appeal against a formal decision at any stage of this policy. The process is outlined in the HR Policy Framework.



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28.2 Details of the person to whom the appeal should be sent will be included in the outcome letter.

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Appendix A - Return to Work meeting

A1. Managing a Return to Work

- A1.1 The manager should arrange to meet with the employee to discuss their return to work. At this meeting the manager and employee should:
- A1.1.1 consider the appropriateness of a phased return to work,
 - A1.1.2 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 Advisor, will have provided advice with regards to any appropriate adjustments that could be made 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 consider any such medical advice when making this decision.
 - A1.1.3 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 will be monitored. These details will be confirmed in writing.
- A1.2 Managers should give due consideration to the employee's own assessment of 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.
- A1.3 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.
- A1.4 Where it has been agreed on the recommendation of the Occupational Health Advisor 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 based on 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 sickness absence.
- A1.5 To minimise the impact of inputting multiple absences on the employee's entitlement to sick pay. Managers should keep a local record of hours not worked under a phased return and enter onto the system as a sickness absence whenever the total hours of the employee's standard day have been reached.
- A1.6 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.
- A1.7 Any requests for a permanent change in hours/working pattern should be considered under the Ways of Working Policy.
- A1.8 During a return to work meeting with an employee, line managers should:
- A1.8.1 confirm that the employee feels fit to return to work and implement any phased return/reasonable adjustment,
 - A1.8.2 confirm with the employee any factors affecting their role which may have arisen during their absence,
 - A1.8.3 establish the reasons/limitations, which may prevent the employee being able to

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attend work or carry out certain tasks,

- A1.8.4 determine whether the employee is taking any medication that may cause side effects that may impact on their ability to carry out their normal work,
- A1.8.5 offer help to the employee if needed e.g. the UKRI's Occupation Health Advisors or other health facilities.
- A1.9 Where absences are becoming a concern, the manager should also inform the employee that further short-term absences and/or long-term absences could lead to a more formal review.
- A1.10 Managers should contact HR for further guidance or if training is required in managing individual cases and for advice on current legislation, reasonable adjustments, and external organisations that UKRI uses in managing sickness absence (e.g. Access to Work).
- A1.11 If the line manager is unsure of what follow-up action is required after a return to work meeting they should contact HR who will provide advice and, if appropriate assist with any necessary follow up action.
- A1.12 Return to work meetings are informal, but the fact one has taken place should be noted on the system.

Appendix B – Inability to Attend a Return to Work Meeting

- B1.** It is expected that the employee (and if appropriate the chosen representative) will make every effort to attend an arranged meeting. UKRI 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:
- B1.1 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 representative.
 - B1.2 Where the employee is unable to attend due to circumstances beyond their control (e.g. illness) another meeting date will be arranged.
- B2.** In situations where an employee is unable to attend a meeting the following options may also be offered to give the employee every opportunity to present their views:
- B2.1 holding the meeting at the employee's home,
 - B2.2 holding the meeting at a neutral location,
 - B2.3 holding the meeting via a telephone or video conference,
 - B2.4 going ahead with the hearing in the employee's absence but with a Trade Union representative or work,
 - B2.5 a colleague attending the meeting on the behalf of an employee, who will present the case,
 - B2.6 going ahead with the hearing but taking into account any written representations that the employee wishes to make.
- B3.** If all reasonable attempts to arrange an alternative meeting fail, the appropriate manager in consultation with HR will take account of the following before making a decision on how to proceed:
- B3.1 the seriousness of the issues under consideration,
 - B3.2 the employee's general work record, work experience, position and length of service,
 - B3.3 medical opinion from the Occupational Health Advisor on whether the employee is fit to attend the meeting.
 - B3.4 UKRI 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.
- B4.** 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 HR Delegated Authority Framework.

Appendix C – Monitoring and Absence Reviews

- C1.** When monitoring absences, line managers should:
 - C1.1 be aware of sickness levels within their team and seek to monitor and manage sickness absence,
 - C1.2 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,
 - C1.3 view the system records to check reasons for absence,
 - C1.4 analyse records for trends/patterns of absence, to help identify potential issues to explore with individual employees,
 - C1.5 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.
- C2.** Managers should look specifically for any pattern of regular absences.
- C3.** Managers should follow the process for managing excessive sickness absence:
 - C3.1 short term – Informal stage; two formal review meetings; final review; appeal,
 - C3.2 long term - Informal; absence management meeting; if unable to return to work consider options including redeployment, ill health retirement and dismissal, right of appeal.

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Appendix D– Attendance Review Meetings

- D1.** Managers who are concerned about an employee who has frequent short- term absences, irrespective of whether a trigger level has been exceeded, or has concern about an employee’s long-term absence should contact HR in the first instance for advice and guidance on whether an attendance review meeting may be appropriate.

- D2.** The aim of the meeting is to:
 - D2.1 review and discuss the employee’s sickness absence record,
 - D2.2 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,
 - D2.3 allow the employee to explain the reasons for absence(s),
 - D2.4 seek to ascertain if there are any underlying problems which might be causing the absence(s),
 - D2.5 consider and agree reasonable adjustments (where possible) to help prevent a recurrence,
 - D2.6 explain the potential consequences if the employee fails to achieve and maintain the required level of improvement,
 - D2.7 agree next steps/date for review.

- D3.** The employee’s absence record over the last 12 months will be discussed at the review meeting. Pregnancy related sickness will not be counted for the purposes of determining whether an attendance review meeting is required.

- D4.** 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.

- D5.** Possible outcomes from an attendance review meeting might be:
 - D5.1 the manager may review the sickness absence rate and decide that there is no cause for concern,
 - D5.2 an agreed review period to monitor attendance,
 - D5.3 a temporary or permanent workplace adjustment and an agreed review period in a specified time to monitor progress following implementation of the adjustments.

- D6.** Possible work adjustments may include:
 - D6.1 modification of work patterns or practices, equipment, management systems, or workstations, which might assist the employee’s access to or confidence in the workplace,
 - D6.2 provision or support in any medical interventions, for example physiotherapy or time off for other medical appointments which might alleviate the employee’s condition,
 - D6.3 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

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employee's health condition should be considered,

- D6.4 a requirement to seek and consider occupational health advice. If this is the case, the meeting needs to be adjourned and should be reconvened as soon as possible once the occupational health advice is received. If occupational health 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 three months but in exceptional circumstances consideration should be given to agreeing permanent reduced hours.
 - D6.5 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 obtained. Following receipt of any occupational health advice, the meeting should be reorganised as soon as possible,
 - D6.6 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.
 - D6.7 To ensure that occupational health recommendations are properly understood and implemented they should be discussed and agreed with the employee. Any actions should be clear with timeframes and be reviewed regularly. Where a review period has been agreed, managers should regularly meet with the employee to provide encouragement and support.
- D7.** Following the agreed review period:
- D7.1 where attendance has improved to a satisfactory level, no further action is necessary.
 - D7.2 where attendance has not improved to a satisfactory level, the employee will be invited to attend a first formal absence management review meeting under the procedure as outlined in [Appendix E](#).

Appendix E- Formal Stages in Managing Short Term Sickness Absence

E1. First Formal Absence Management Review Meeting

- E1.1 If the outcomes from an attendance review meeting have not been met, it will be necessary to hold a formal absence management review meeting.
- E1.2 The manager will invite the employee to a formal absence management review meeting in writing, giving the employee at least five working days written notice of the meeting.
- E1.3 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.
- E1.4 The aim of the meeting is to:
 - E1.4.1 review and discuss the employee's sickness absence record,
 - E1.4.2 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,
 - E1.4.3 allow the employee to explain the reasons for absence(s),
 - E1.4.4 seek to ascertain if there are any underlying problems which might be causing the absence(s),
 - E1.4.5 consider and agree reasonable adjustments (where possible) to help prevent a recurrence,
 - E1.4.6 explain the potential consequences if the employee fails to achieve and maintain the required level of improvement,
 - E1.4.7 agree next steps/date for review.
 - E1.4.8 The employee's absence record over the last 12 months will be discussed. Pregnancy related sickness will not be counted for the purposes of determining whether a formal absence management review meeting is required.
 - E1.4.9 Any occupational health reports may also be discussed.
- E1.5 Possible outcomes from the formal attendance management review meeting might be:
 - E1.5.1 agreement of any reasonable adjustments to be made,
 - E1.5.2 an agreed review date to determine the level of improvement to be achieved,
 - E1.5.3 setting of agreed targets and timescales for achieving these,
 - E1.5.4 counselling / coaching,
 - E1.5.5 that there are no appropriate adjustments to their current role that will assist them, or that 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.
- E1.6 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

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review dates. The letter should also include the right of appeal and to whom any appeal should be submitted.

- E1.7 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.
- E1.8 Managers should also:
 - E1.8.1 ensure any follow up action is taken and any agreed adjustments/support implemented,
 - E1.8.2 monitor the employee's attendance and performance e.g. through a work plan.
- E1.9 The employee has the right of appeal against a decision at any stage of the formal procedure.
- E1.10 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.



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Appendix F- Second Formal Absence Management Review Meeting

- F1.** Managers will work with HR to decide whether further occupational health advice is needed.
- F2.** 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.
- F3.** 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.
- F4.** The employee has the right of appeal against a decision at any stage of the formal procedure.
- F5.** 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.



Appendix G - Final Formal Absence Management Review Meeting

- G1.** At least five working days written notice should be given for attendance at the final formal meeting.
- G2.** The employee has the right to be accompanied by a work colleague or a 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.
- G3.** Managers will work with HR to decide whether further occupational health advice is needed.
- G4.** 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 five working days of the meeting.
- G5.** The possible outcomes of the final formal meeting include:
 - G5.1 no further action will be taken at this time,
 - G5.2 agreement that the employee will return to work and maintain acceptable levels of attendance; failure to do so will result in dismissal,
 - G5.3 retirement on the grounds of ill health,
 - G5.4 dismissal on the grounds of ill health.



Appendix H - Maintaining contact

- H1.** 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.
- H2.** 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).
- H3.** Outline that the employee's wishes with regards to the method of contact will be taken into account.
- H4.** Agree with the employee what information they would like to receive e.g. changes and developments within the workplace.
- H5.** Maintaining regular contact with employees who are away from work due to long-term absence not only allows manager 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.
- H6.** 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 HR.



Appendix I - Occupational Health Advice

- 11.** Managers should always seek advice from HR to determine whether a referral to occupational health is necessary. Where the employee can provide adequate information concerning their absence and/or anticipated return to work it may not always be necessary to seek additional advice from occupational health. This will be dependent on individual circumstances.
- 12.** Where the manager and HR (or the employee and HR) do consider a referral to occupational health is appropriate, HR will make a request for a referral. Requests for referrals to Occupational Health Advisors should be in writing and may include a description of the employee's duties.
- 13.** Any referral will be made with the employee's knowledge and will seek to encourage the open exchange of information. The employee should be consulted on the information requested but does not have the right to veto any information requested by UKRI.
- 14.** Occupational health referrals should be specific and request a written report covering:
 - 14.1** the reasons for the illness and why it prevents the employee from doing their regular duties/attending the workplace,
 - 14.2** the nature of treatment and possible side effects,
 - 14.3** an indication of when the employee is likely to be able to return to work,
 - 14.4** whether on return there may be a limitation on the duties the employee should undertake, including a phased return and the likely time span,
 - 14.5** 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.
- 15.** In addition, UKRI may require the employee to undergo a medical examination performed by an Occupational Health Advisor or a medical adviser appointed and paid for by UKRI. If the employee refuses or is unable to attend the appointment, then a decision regarding management of the case will be made based on the information available.
- 16.** Occupational health reports are sent, with the employee's consent, to HR and discussed with the employee and their line manager. All reports provided by occupational health will be treated in strict confidence.
- 17.** If an employee does not consent to the disclosure of the occupational health report, decisions about their employment will be taken without the benefit of knowing the full position.