

Sickness Absences

Reference Number: RDF1888-23

Date of Response: 31/10/23

Further to your Freedom of Information Act request, please find the Trust's response(s) below:

Please be aware that the Royal Devon University Healthcare NHS Foundation Trust (Royal Devon) has existed since 1st April 2022 following the integration of the Northern Devon Healthcare NHS Trust (known as Northern Services) and the Royal Devon and Exeter NHS Foundation Trust (known as Eastern Services).

1. *What is the name of your Trust?* Royal Devon University Healthcare NHS Foundation Trust.
2. *What is the current sickness rate for your staff for LTS and STS?* 2.49% (STS); 2.86 (LTS) at 25/09/2023

Prevention of sickness absence:

3. *What does your Trust do, to prevent sickness absence?*

- The Occupational Health and Wellbeing Team:

The occupational health and wellbeing team is a multi-disciplinary team with a consultant clinical lead and a specialist community public health nursing (SCPHN) head of service with management and leadership responsibility for the team. This team comprises of occupational health physicians and doctors, occupational health specialist nurse advisors, occupational health practice nurses, physiotherapists, dietitian, counselling, and staff support services, health and wellbeing practitioners, and administrative staff. This balance reflects the department's commitment to providing a comprehensive high-quality, holistic, and efficient service to our staff.

The service not only focuses on fitness for work but provides a range of services to meet the physical and emotional health needs of employers, employees, and students.

- (SEQOHS)

We hold and maintain a Safe, Effective, Quality Occupational Health Service (SEQOHS) accreditation and are committed to providing a high-quality, efficient, and confidential service.

- Trust Induction

The Trust runs a thorough induction process for all staff joining RDUH and encourages engagement with health and wellbeing initiatives as outlined above.

- Union and staff-side

The Trust, working with union and staff-side representatives, and inclusion leads, develops, and promotes policies and training to support wellness at work and help staff return to work safely and with support after periods of sickness absence.

- Attendance and stress assessment/policies:

The Trust's (attendance) policy focuses on supporting staff compassionately and encourages regular and proactive health and wellbeing conversations between managers and their employees to pick up any wellbeing issues at an early stage.

We also have a stress management policy and associated stress risk assessment which aims to pick up signs of stress in staff early, in order to prevent this affecting them in the longer-term, and an action plan is created as a result of this assessment.

- Occupational Health courses and wellbeing service:

We have a range of courses in place to educate and increase awareness for both staff and managers or signs of stress and how to recognise these and how to manage stress e.g. stress workshops, managers mental health training, burnout workshop.

We have training and processes in place to prevent musculoskeletal injuries such as through DSE assessments and manual handling training.

We have a range of accessible Occupational Health and Wellbeing services, that staff can access via self-refer for several mental health and physical health concerns e.g. menopause clinic, sleep clinic, counselling service, 24/7 counselling support line. We also have a Trauma incident process in place to react quickly to staff exposed to trauma and offer early intervention and support.

4. *To what degree (rating on a scale of one to ten), do you feel as if your organisation has measures in place, to prevent sickness absence?* The FOIA allows the public to ask for copies of information held. You have requested an opinion and this information is not held in documents within the Trust therefore we are unable to release information in response to this question.

5. *As part of the research I have conducted, it seems apparent that to prevent sickness absence, a healthy workplace is needed. How does your Trust do this? If they do not, what do you feel as if they should be doing?*

- Infection Control:

The Infection Control teamwork across the Trust to ensure that infectious diseases are contained and managed appropriately, protecting staff as well as patients.

- Health and Wellbeing (Attendance)

The Promoting a Positive Working Environment, Menopause, and Supporting Health and Wellbeing (Attendance) at Work policies are all designed to promote and support mental and physical wellbeing.

- Please also refer to response to question 3

6. *What (if anything), do you feel as if your organisation could do to prevent sickness further? The Trust does not hold this information.* The FOIA allows the public to ask for copies of information held. You have requested an opinion and this information is not held in documents within the Trust therefore we are unable to release information in response to this question.

The Trust engages with staff through staff surveys to support health and wellbeing at work.

7. *Does your Trust offer 'duvet days' or days off, related to mental health reasons, but doesn't trigger towards formal sickness management?* No. All sickness absence episodes are managed under the Supporting Health and Wellbeing (Attendance) at Work Policy. Staff can request flexible working if this will enable them to manage their health conditions successfully.

8. *If so, have you found that since implementing such scheme, sickness absence has reduced? If not, is this something that your Trust would consider? What is your opinion on this?* The FOIA allows the public to ask for copies of information held. You have requested an opinion and this information is not held in documents within the Trust therefore we are unable to release information in response to this question.

9. *To what degree do you feel as if your Trust works in a way which accommodates flexible working?* The Trust has Flexible Working and Special Leave policies that can be used to support individual requests.

10. *Do you think that your Trust could be doing anything further, to promote and implement flexible working schemes, specifically with the intention of reducing sickness absence?* The FOIA allows the public to ask for copies of information held. You have requested an opinion and this information is not held in documents within the Trust therefore we are unable to release information in response to this question.

Impact on Patient Care:

11. *How does your Trust reduce the impact on patient care, through high levels of sickness absence?* See answers above.

12. *What does your wellbeing support look like, within your Trust? Does this have a correlation to the sickness absence within your organisation?* See answers above.

13. *Please could you send me a copy of your Sickness Absence Policy.* Please find attached.

Supporting Health and Wellbeing (Attendance) at Work Policy

Policy description

Our mission is to work together to help you to stay healthy and to support you compassionately when you are not. We aim to make the Royal Devon a [great place to work](#) so that we can improve the quality of care and life for the people we serve.

We are committed to providing and promoting an inclusive working environment that is free from discrimination and ensures everyone is treated with dignity, respect and compassion.

Everyone will likely experience periods of ill health from time to time. This policy sets out how we will support colleagues to stay well at work and how time away from work due to ill health will be compassionately managed. Everyone is different and each individual will be treated in a fair and reasonable manner with due consideration to individual circumstances.

This policy does not apply to bank or agency workers.

If you require this document in a different format or language please speak to the HR Team.

The EIA, Document Review and Approval information and Communication Plan for this policy has been completed and can be viewed [here](#).

Overarching principles to be followed

Compassion: We recognise that ill health is part of life and we are committed to providing a culture of compassion and understanding when you do become ill.

Integrity: We are all accountable for attending work and for managing our own health. We should talk honestly about concerns which are affecting our health with our line manager, Occupational Health & Wellbeing (OH) or People Function (HR) to enable early intervention when needed and appropriate support resources for your health and wellbeing.

Person-centred and inclusive: The emphasis for managers is to focus on knowing and building rapport with individuals within their team. Managers will adopt a



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supportive, inclusive and compassionate approach and understand and be responsive to individual needs, while also taking into consideration the needs of the service.

Equity: Colleagues will have equitable opportunity to benefit from a supportive and compassionate approach and the provisions of the Equality Act (2010) and Human Rights Act (1998) and other appropriate employment legislation will also be applied.

Our Charter sets out the expectations, requirements, values and behaviours that are expected of each and every one of us.

This policy supplements NHS Terms and Conditions.

Our values



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1. Responsibilities

Our Board is fully committed to adopting and promoting the key principles within this policy, modelling the principles of restorative, just and learning culture. Our Chief People Officer has overall Trust responsibility for this policy.

All managers are responsible for ensuring the practical application of this policy and they are expected to model compassionate and kind behaviour and contribute to building a psychologically safe working environment.

Every colleague is responsible for complying with their terms and conditions of employment, Our Charter as well as Trust policies and procedures, and for taking personal responsibility for their health and wellbeing wherever possible to do so.

The People Function (HR) is responsible for providing professional advice and support to managers on applying this policy and associated procedures

2. Staying well at work

We are committed to promoting good health and wellbeing for all our staff and recognise that a variety of health and wellbeing support options and the opportunity to regularly discuss health and wellbeing plays a very important part.

2.1 Regular discussions and Keeping in Touch conversations

When you feel concerned about your health and/or wellbeing, acting early will help minimise the impact of an illness or injury. Regular conversations with your line manager are essential and can:

- identify early health and wellbeing concerns so that we can support you to stay well
- identify reasonable adjustments that may alleviate your symptoms, challenges and/or concerns
- sign-post to professionals who may be able to provide you with further support, diagnosis or adjustments



- review any reasonable adjustments or support to ensure they remain relevant and effective
- complete a Health and Wellbeing Passport to support you to stay at work with any underlying health or wellbeing condition.

You may have a really good understanding of your own health and wellbeing needs and the situations that help you stay healthy. There may also be signs that your manager notices which may prompt a discussion. Signs could include unusual or erratic behaviour, withdrawal from colleagues or work activities, unable to concentrate, tiredness, mobility, pain etc.

It is common to feel uncomfortable when talking about personal issues, but it is important to have an early and open conversation with your line manager so that support can be identified before an injury, illness or your wellbeing worsens.

Keeping in Touch conversations, if you are not at work, can be done over the phone, via MS Teams or at a mutually agreed neutral location where feasible, and the manager will also keep you up-to-date on any work changes if appropriate. Managers will keep jointly agreed records of the keeping in touch conversations during long-term absences.

2.2 Health & Wellbeing support options

In order to promote good health and wellbeing, the Trust has a variety of recommended support services together with information, tips and advice. These can be found on our [Health & Wellbeing](#) intranet pages.

Managers can contact the HR Helpdesk or the Employee Support & Resolution team for further support information if needed.

2.3 Reasonable Adjustments

Where appropriate and possible, reasonable adjustments may help you to stay at work or help you return to work.

If you have a disability or a long-term condition, the Trust (in line with the Equality Act 2010) is committed to taking steps to meet your needs, even if this requires more favourable treatment.

Reasonable adjustments can support your health and wellbeing, either on a temporary or permanent basis, and need to be appropriate to your needs but also your area of work. Examples of reasonable adjustments are:

- [flexible working](#)



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- enhanced supervision, training and/or support
- temporary or permanent change to working pattern or hours
- temporary or permanent adjustment to duties or place of work
- specific equipment (i.e. chair, IT equipment, tools etc)
- any other reasonable adjustments recommended by medical or Occupational Health (OH) reports (e.g. absence levels, attendance at appointments for long-term conditions etc)
- exploring redeployment opportunities when all other options have been exhausted.

Please click on the following link to view examples of reasonable adjustments in practice <https://equalityhumanrights.com/en/multipage-guide/reasonable-adjustments-practice>

There may be occasions where, due to the nature of the work, service or premises, reasonable adjustments cannot be made. Your manager will take advice from OH fitness to work assessments or from the Employee Support and Resolution team.

Reasonable adjustments will be confirmed in writing and recorded on your personal file and reviewed regularly to ensure they continue to be relevant.

3. Reporting Sickness Absence

- In line with specified local service agreements, you should speak to your manager or the person in charge of the shift when you are unwell, and only where it is not possible to call or where previously agreed, you can text message or e-mail.
- If you are too ill to contact your manager someone else can make the call on your behalf, but you must speak with your manager as soon as you can.
- It is important to give the reason why you are unwell so that any relevant support or steps can be discussed (i.e. OH fitness to work referral, stress risk assessment, reasonable adjustments). An indication of how long you are expecting to be unwell should be discussed together with any work that needs to be covered in your absence.
- If you are off work for 1-7 calendar days, you need to fill in a self-certificate form on your first day back at work to ensure the Trust can keep accurate sickness records for Statutory Sick Pay purposes. This should be completed during the Welcome Back to Work Check-In.

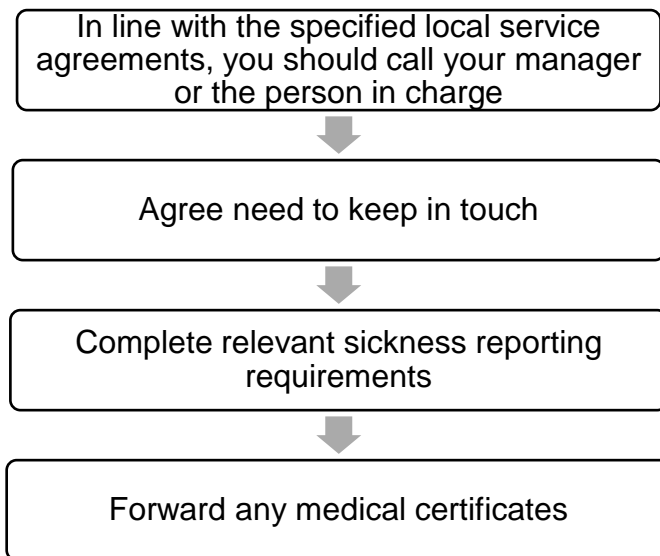


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- If you are off work for 8 calendar days or more, you must send your manager a medical certificate from your doctor to cover your absence from day 8 onwards. Medical certificates must be sent to your manager within 7 calendar days of the date of issue to ensure sick pay continues.
- You and your manager will agree timescales for any Keeping in Touch conversations to ensure appropriate support for your wellbeing needs.

Reporting sickness flowchart



3.1 Sickness Absence Occurring During a Shift

If you do not feel well enough to complete your shift/contracted day, you should let your line manager or the person in charge of the shift know before leaving.

Any time away from the workplace due to sickness will be recorded. Periods of less than one day’s absence will be recorded as ‘part paid day’ and will not affect your pay. You will not be required to make up the lost time. These periods will not be included as sickness absence on ESR but may be considered by your manager when reviewing your overall sickness absence record.

Subsequent days of sickness absence will be recorded as usual.



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If there is a pattern of regular sickness absence your manager will meet with you to discuss further and understand if there are any underlying issues that can be supported.

3.2 Pregnancy-Related Absence

If you are pregnant and unwell because of your pregnancy, this will be notified and reported in the normal way (making it clear that it is pregnancy-related), but will not be taken into account for any formal absence process.

For more information on supporting pregnant staff please see the [maternity and paternity guidance and policy](#).

If you are off sick due to a miscarriage or your sickness absence directly relates to a miscarriage, you will be treated in the same way by the Trust as if you were off because of pregnancy-related illness.

Fertility treatment/IVF-related absence should be considered in line with pregnancy-related absence and not count towards triggers. For advice on time off for IVF/Fertility treatment appointments, please refer to the Trust's [Special Leave policy](#).

3.3. What happens if you don't report your absence or don't respond to regular contact?

Please refer to the flow chart in the policy toolkit.

If you do not report your absence, or do not respond to contact during your absence, your manager will first try to contact you again.

If you then don't respond or engage, your line manager will seek advice from the Employee Support & Resolution Team (HR).

Where there has been an indication of domestic abuse, or you disclose this during a Welcome Back to Work discussion, then advice will be sought from HR or the Safeguarding Team and reference should be made to the Domestic Abuse Affecting Staff Policy. Managers or mutually agreed deputies should be aware of any safe sentence that has been decided.

Where reasonable attempts to engage with you have not been successful, or if you continually fail to forward medical certificates within a reasonable timeframe, this may result in a loss of occupational sick pay or normal pay and/or formal action.



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3.4 Annual Leave and Sickness Absence

Contractual annual leave continues to accrue whilst you are on sick leave.

If you are on long-term sickness absence, you may be entitled to carry forward annual leave under the Working Time Directive. Further information is outlined in the [Annual Leave policy](#). Please refer to the toolkit for examples of scenarios. Advice will be sought from the Employee Support & Resolution team if needed. If you are on long-term sickness absence and wish to take a holiday, you are required to let your manager know in advance in the same way you would do if you were at work.

You can either use any pre-booked annual leave entitlement whilst absent or cancel/reclaim your annual leave entitlement to be taken at a later date depending on your needs and circumstances.

If you become unwell during a period of pre-booked annual leave, you will be regarded as on sick leave from the day you reported your sickness. Annual leave can then be taken at a later date within the annual leave year. This does not apply to public holidays. You must provide certification in the normal way.

3.5 Time Off for Appointments

The Trust supports reasonable time off to attend medical appointments, but requests that you endeavour to arrange appointments outside of normal working hours to avoid disruption to services wherever possible to do so. There may be times when your health and wellbeing means more time-off for medical appointments is required. Your managers will compassionately discuss any adjustments required and seek advice from the Employee Relations Support team to ensure compliance with The Equality Act 2010 and may agree Disability Leave (see below).

3.6 Time Off for Cosmetic Surgery

Where cosmetic surgery is needed on medical or psychological grounds, supported by a letter from a GP it will be treated as sick leave and you will receive sick pay.

If cosmetic surgery is undertaken and is not supported medically, you will need to take annual leave, including for any recovery time. If after surgery you become unwell and unable to attend work, normal sick reporting and pay will apply.



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3.7 What happens if a manager has concerns that you should not be at work (medical suspension, injury, infections and diseases at work)?

Where you have been requested to stay away from the workplace following a period of infectious diarrhoea and vomiting or other condition, exclusion is required under the staff health and illness (Infection Control) policy or because of bespoke IPC/OH advice (where advice has been sought from Infection Prevention and Control (IPC) team). You will be recorded as off sick for the period of sickness and then on paid medical suspension for any exclusion period afterwards where you have been asked to stay away from the workplace. If you contract an illness where exclusion periods apply, appropriate advice will be sought by your manager. The agreed exclusion period does not count towards any absence monitoring.

Some work-acquired infections need to be reported to the Health & Safety Executive (HSE) under Reporting of Injuries, Diseases, Dangerous Occurrence Regulations 1995 (RIDDOR) and an Incident Form must be completed on Datix informing the Safety and Risk Management Department so appropriate reporting can be undertaken.

If you are injured at work, you must inform your manager as soon as possible and complete any necessary health and safety forms. It is important to note that after a period of either 7 calendar days sickness absence, or restricted / light duties, the Health and Safety Executive (HSE) will also be notified under the Reporting of Injuries, Diseases, Dangerous Occurrence Regulations 1995 (RIDDOR) by the Trust's Safety and Risk Management Department and the Trust's Safety and Risk Management Department will be notified by your Manager and an incident form completed on Datix.

A Datix Form must be completed as near to the incident as possible and you will be referred to the Occupational Health Service for your injury to be confirmed as work related.

Injuries at work are recorded as sickness on the ESR/Healthroster system but your manager will mark the sickness as work-related. An industrial injury or illness will be treated separately from all other sickness; it will not count against your sick pay entitlement.

If you lose income due to industrial injury or illness your manager will contact HR for guidance on obtaining injury allowance, usually at half or nil pay. Sickness absences relating to injuries and infections at work will be taken into consideration alongside your infection control training records if your absence is being reviewed.

There may be times when your manager has concerns and asks you to stop working on medical grounds. Your manager will refer you to OH for a fit to work assessment



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and normal pay continues during your absence until the assessment has been completed. Your absence will be recorded as medical suspension on ESR or Healthroster. This decision will be made in conjunction with the Employee Support & Resolution team and your manager may undertake a risk assessment with you.

Once medical clearance has been given by your medical advisor/GP with input from OH, you can return to work.

In the event your GP or OH advice deems you not to be fit for at work, your absence will be recorded and treated as sickness (it will not be backdated) and sick pay entitlements will follow NHS Terms and Conditions.

Long term absences due to an injury at work, will be monitored in line with the process for managing long term sickness absence outlined below, to ensure contact and support continues from your line manager and other actions such as re-referral to OH, temporary redeployment and return to work plans may need to be made depending on the length of absence and support already in place.

3.8 Dying to Work Charter

The Trust is committed to supporting terminally ill colleagues with dignity, respect, compassion and sensitivity. If you have been diagnosed with a terminal condition you may decide that you want to continue working as long as you can, either for financial security or that work provides a helpful distraction from your diagnosis. Whichever choice you make, you will be able to get help and support from the Trust to include any reasonable adjustments that may be required.

Each case will be assessed and progressed on an individual basis ensuring that your personal wishes (wherever possible) and relevant financial implications are considered, including any death in service benefits, ill health retirement or termination of employment with a lump sum payment.

Advice from the Employee Support and Resolution team will be sought as a number of options are available for the colleague and must be fully researched before a decision is made.

For more information, refer to the [NCA Dying to Work Charter website](#).

4. Welcome Back to Work Check-In

Whenever you are absent from work due to sickness, your manager will check-in with you to see how you are and to see if there is any underlying reason for the



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absence that needs further discussion and/or support. This will happen in the Welcome Back to Work Check-In.

Your Welcome Back to Work Check-in will be tailored to the length and type of absence and may only last a few minutes via phone or email for short absences. This conversation may involve discussions regarding any patterns of recurring absence.

Welcome Back to Work Check-ins will take place on the day you return to work, but if that isn't possible, your manager will hold an initial conversation with you within 3 working days. Your manager will also update the Welcome Back to Work (RTW Fields) in ESR/Healthroster. A template for completing a welcome back to work meeting is available in this policy's toolkit.

5. Referral to Occupational Health

You may be asked to attend an Occupational Health appointment within our staff support service if:

- there are concerns that there may be underlying health and wellbeing issues impacting on your ability to do your role and/or attendance at work
- you have been (or are likely to be) off sick because of illness or injury for 28 calendar days or more, or if a date of return has not been indicated
- an illness or injury or has been diagnosed which may permanently affect your ability to perform their duties
- you, your medical practitioner or manager requests consideration of change of duties on medical grounds
- you wish to be considered for permanent ill health retirement
- an assessment is required following an injury sustained at work.

Your manager will always gain your consent before making the referral.

Occupational Health (OH) may provide recommendations of changes to the workplace, working pattern or work practice to help you return to work or improve attendance. All recommendations will be considered and take account of impact on service delivery. It is considered a reasonable management request to attend OH to ensure we can maximise the support we can provide and that you receive the appropriate occupational sick pay.

OH may ask you for consent to contact your GP or specialist for a medical report if necessary. Confidentiality will be maintained in line with the consent provided.



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You will be given a copy of your OH report to approve before it is sent to your manager.

On receipt of the OH report, your manager will meet with you to discuss the content of the report and agree the support, reasonable adjustments, expected actions etc.

6. Indicators to monitor health, wellbeing and/or attendance

Indicators are signals/indications that require further consideration and discussion to provide you with the relevant and necessary support and ensure you know how health, wellbeing and attendance will be managed. This helps to ensure there is a framework for managers to work to and ensures consistency across the Trust in managing attendance. An indicator is not an automatic reason to pursue a formal management procedure and managers will consider individual circumstances and seek advice from the Employee Support & Resolution team before starting any formal stages.

Typical indicators are as follows. It is possible that more than one indicator is happening at the same time. The below table is a non-exhaustive list of example indicators.

Indicator Examples
Patterns of recurring absence Examples of this may be: <ul style="list-style-type: none"> 4 or more occurrences of absence in a 12-month rolling period* A cumulative total of 2 working weeks or more in a rolling 12-month period*
Signs of Stress or Anxiety
Other signs that suggest underlying concerns
Ability to do part or all of the role effectively for reasons related to health and wellbeing
Absence is for more than 28 calendar days (refer to the Long-Term Absence section)

* A rolling 12-month period looks back at the 12 months from the last episode of absence.

6.1 Signs of Stress or Anxiety

The Trust is committed to supporting all staff with their mental wellbeing. Reasons for stress may or may not be work related. However, establishing the causes early will enable appropriate support whilst they are at work or when absent.



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You may choose to directly access the [Staff Support and Counselling service](#). Alternatively, the [Employee Assistance Programme \(EAP\)](#) is now available 24/7 for staff to use.

Further guidance and support is also available from Workways via www.mindfulemployer.net or from MIND at <https://www.mind.org.uk/media-4/4661/resource4.pdf>

If you are signed off for 4 weeks or more due to stress, anxiety, depression or another psychological reason, your manager will discuss with you whether a referral to Occupational Health is needed.

You and your manager may undertake a stress risk assessment.

6.2 Disability Leave

If you have a disability recognised under the Equality Act 2010, you are entitled to a reasonable amount of time off to attend treatment or other appointments with regard to the management of your disability. The reason for this is to ensure that you do not suffer avoidable disadvantage when compared with a person who is not disabled.

Disability Leave will be considered in line with Occupational Health advice and is distinct from sickness absence in relation to your disability. Where your disability increases the levels of disability related sickness, a reasonable adjustment may be agreed to allow a greater level of sickness absence before progressing through the formal absence stages.

Disability Leave will not be included for the purpose of assessing performance, promotion, attendance and similar issues. Managers are advised to contact the Employee Support & Resolution team for further advice and guidance.

7. Health, Wellbeing and Attendance Management Stages

It is important for the Trust to support colleagues compassionately through any health and wellbeing concerns so they are well at work. To be able to manage this, there are usually four stages in the management of health, wellbeing and attendance situations.

Whilst high levels of absence can lead to progression through each stage, it may not always be appropriate to do so. Advice to ensure fair, equitable, compassionate and appropriate approaches are taken will be provided by the Employee Support & Resolution team in conjunction with Occupational Health recommendations.



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There may be a number of meetings within each Stage. Refer to the What will happen at Health, Wellbeing and Attendance meetings section below for further information of each stage.

Please refer to the Long-Term absence section where applicable.

At Stages 2, 3 and 4, you will have the right to be accompanied by a Trade Union representative or workplace colleague (not acting in a legal capacity) and a member from the Employee Support and Resolution Team may join the formal meeting.

7.1 Stage 1 – Health, Wellbeing and Attendance Review Meeting (informal)

If your manager continues to have concerns, they will ask to meet you.

It may be appropriate for your manager to set expectations or actions – refer to Setting expectations, actions section below.

Your manager may have follow-up meetings with you to ensure continued support and check progress.

7.2 Stage 2 – First Formal Health, Wellbeing and Attendance Review Meeting

If you do not meet the expectations that have been set during the informal Health, Wellbeing and Attendance Review stage, your manager will meet with you and inform you that you will be invited to a First Formal Health, Wellbeing and Attendance Meeting.

It may be appropriate for your manager to issue a first warning and/or set further expectations or actions– refer to Setting expectations, actions and/or warnings section below.

Your manager may have follow-up meetings with you to ensure continued support and check progress.

7.3 Stage 3 – Second Formal Health, Wellbeing and Attendance Review Meeting

If you do not meet the expectations that have been set during the First Formal Health, Wellbeing and Attendance Review Meeting stage, your manager will meet with you and inform you that you will be invited to a Second Formal Health, Wellbeing and Attendance Review Meeting.



It may be appropriate for your manager to issue a final warning and/or set further expectations or actions– refer to Setting expectations, actions and/or warnings section below.

Your manager may have follow-up meetings with you to ensure continued support and check progress.

7.4 Stage 4 – Final (Health, Wellbeing and Attendance Capability) Review Meeting

If you do not meet the expectations that have been set during the Second Formal Health, Wellbeing and Attendance Review Meeting stage, your manager will meet with you and inform you of this and let you know that you will formally be invited to a Final Health, Wellbeing and Attendance Review Meeting. You will also be informed that one of the outcomes of this meeting may be a decision to bring your contract of employment with the Trust to an end (dismissal) on grounds of ill-health.

7.5 What will happen at Health, Wellbeing and Attendance meetings

Understanding and supporting health and wellbeing concerns

This section applies to all stages of the health, wellbeing and attendance management stages.

The first part of any meetings will cover the following (where it hasn't already been discussed at previous meetings):

- compassionately understand health, wellbeing and attendance concerns with the aim of supporting you to become well at work
- highlight and discuss any health, wellbeing or attendance concern, any reasons etc.
- If there are any absences that are indicative of a disability or long-term health condition, then refer to the Long-Term Health Condition section below
- discuss (and review where relevant) support or reasonable adjustment that can be put, or are, in place; any medical advice received or needed; any relationship or other workplace issues that may exist; any actions either your manager or you can do to alleviate issues
- complete a Health and Wellbeing Passport if appropriate
- complete a Stress Risk Assessment if appropriate
- your manager will consider the impact of a formal process on you so that appropriate support can be offered.



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Additional requirements for formal meetings

In addition to the above, formal meetings (i.e. stages 2, 3 and 4) will include the following.

Notice of the meeting: Your manager will meet with you to let you know they have concerns relating to your health, wellbeing and/or attendance and that you will be invited to one of the informal or formal stages. You will have 7 calendar days' notice in writing.

Right to representation: You will have the right to be accompanied at any **formal** meetings by a Trade Union representative or workplace colleague (not acting in a legal capacity). This will be confirmed in writing by your manager.

Also attending: Your manager (or their manager if appropriate) will lead the review meetings and a member of the Employee Support and Resolution team may also be in attendance for **formal** meetings (i.e. at a meeting where a warning may be issued).

At Stage 4, the meeting will be chaired by a senior manager (not involved in the process so far and with the authority to dismiss). An alternative member of the Employee Resolution and Support team will attend to provide advice to the Chair. At this stage, the manager from the last stage, together with a member of the Employee Resolution and Support team will attend.

Information shared at the meeting:

- At Stage 4, a pack of information on your absence history, steps taken to date, as well as letters and up to date Occupational Health reports will be shared with all attendees 5 working days before the meeting.
- At Stage 4, a summary report will be produced by the manager who led Stage 3. This will be shared with all attendees 5 working days before the meeting.
- For formal review meetings, you may submit any information in response up to 2 working days beforehand.
- At the meeting the manager will summarise the situation, confirming the expectations that have been set, the support or reasonable adjustments put in place, referring to medical reports or advice.
- You will also have an opportunity to explain to the manager your circumstances and any information you feel is relevant to be shared for consideration.



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- Any further adjustments or support, which may have not been available or appropriate at earlier stages of the process will be considered.
- After reviewing all facts, the manager, in discussion with the Employee Support & Resolution representative, will determine the expectations, actions or warnings that may be appropriate to put in place.
- You will be made aware of the potential consequences if expectations are not met at that stage.

Confirmation of outcome: Your manager will confirm the discussion, actions, expectations and any warnings in writing and this will be sent to you within 5 working days of the meeting. At Stage 4, a different manager to your line manager will confirm the outcome.

Regular review throughout each stage: Your manager will agree regular health, wellbeing and attendance review meetings throughout each stage (at least monthly) to enable continued support and improvement.

7.6 Setting expectations, actions and/or formal warnings

This section is applicable to all stages.

Where expectations to improve your levels of attendance are established, you will be expected to have no more than two episodes of sickness absence of no more than 4 accumulative working days; OR a single episode of sickness absence not exceeding 1 working week over the next 6-month period.

The setting of attendance expectations will take long-term conditions, disabilities and other provisions covered by the Equality Act 2010 into account. Expectations may be extended or adjusted following advice from Occupational Health (e.g. for those with underlying health conditions).

Expectations and/or actions will be confirmed in writing and regularly reviewed between yourself and your manager throughout a specified review period (usually 6 months).

Where attendance expectations have been established and met, at the end of 6 months, the process will end and monitoring of absence will return to usual practice. If, however, absence becomes a concern within 6 months of closing the process, based off the previously outlined indicators, your manager will discuss the situation with the Employee Support and Resolution team and a decision may be made to follow the process from Stage 2.



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Where you do not meet expectations at the end of the specified review period, your manager will meet with you again to discuss reasons, review support and adjustments. Your manager may decide to progress to the next stage in the formal process.

Decisions about any warnings or dismissal outcomes will only be made after full consideration of all information and relevant medical advice.

7.7 Ending your Employment (i.e. dismissal)

At Stage 4, you may be dismissed on the grounds of ill health capability. If at the Final Health, Wellbeing and Attendance Capability Review Meeting, all of the information and options have been considered and support opportunities exhausted and there is no reasonable expectation that your attendance or ability to perform your role due to health reasons will improve, then your employment will end (i.e. you will be dismissed).

Absence warnings will normally have been given at previous stages before colleagues can be dismissed, but this may not always be appropriate.

Before ending your employment, the Trust will seek opportunities to avoid dismissal such as redeployment into an alternative role or alternative options where available and appropriate to do so. Where appropriate, retirement on ill health grounds will also be considered.

Where a decision is made to end your employment with the Trust, you will be informed of your right to request a review (appeal) against the decision – see relevant section below.

8. Long-Term Absence

Long-term absence is defined as absent for more than 28 calendar days, either planned or unplanned.

You and your manager will agree the regularity and method of regular keeping in touch conversations – refer to section above.

An Occupational Health referral will be made ensuring absences are handled according to medical advice and with the assistance of the Employee Support and Resolution team.



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Your manager will let you know when your entitlement to occupational sickness pay is about to change (refer to [NHS Terms and Conditions](#)).

Following advice from the Employee Support & Resolution team, after you have been absent from work for 28 calendar days, your manager will set up a Long-Term Health, Wellbeing and Attendance Review Meeting, giving a week's notice. The purpose of the meeting is to have a compassionate and supportive wellbeing conversation to discuss your progress, determine when a return to work can be expected, discuss a referral to OH and discuss any support that might be appropriate. Employee Support and Resolution will attend and you have the right to bring a trade union representative or work colleague. On returning to work following a long-term period of absence you will be supported back to work through either a phased return (see below), temporary or permanent redeployment or other reasonable adjustments as advised by Occupational Health, Employee Support & Resolution and your manager.

Where it is unlikely that you can return to work in your current or an alternative role in the Trust, a Final Formal Health, Wellbeing and Attendance (Capability) Review Meeting may be set up (Stage 4). You will receive 7 working days' notice of the meeting and the meeting may take place in your absence if you are too unwell to attend. In such cases you may wish to submit a statement for the senior manager to consider.

At the meeting:

- Your line manager will explain to the senior manager the nature of your absence, what action has been taken to support you to return to work and what the Occupational Health advice has stated.
- You may wish to explain any extenuating circumstances and talk through your treatment/recovery/prognosis.
- After reviewing all of the facts the senior manager will decide on the appropriate next steps, the outcome of which may be:
 - You are well enough to return to work. Reasonable adjustments and/or a phased return may be appropriate support.
 - You are not well enough to return to work in your role. Redeployment is considered and identified.
 - You are not well enough to return to work in your role and there are no roles to redeploy you into OR you are not well enough to return to any roles within two months. This would result in your employment with the Trust to end on grounds of ill health.

You have the right to Request a Review (appeal) if a decision is made to end your employment with the Trust.



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The outcome of this meeting will be confirmed in writing to you within 5 working days of the meeting.

8.1 Disability and Long-Term Health Conditions

A disability is defined as ‘a physical or mental impairment which has a substantial and long-term adverse effect on an individual’s ability to carry out normal day-to-day activities’ (Equality Act 2010).

Physical and mental impairment includes sensory impairment, progressive illnesses, long term health conditions, cancer, HIV, and multiple sclerosis. Hidden impairments are also covered for example mental health diagnosis, learning disabilities and epilepsy and may also extend to other long-term concerns such as stress.

Long Term Health Condition (LTHC): is defined as a condition that cannot at present be cured but can be controlled with medication and/or therapies. (NHSE).

The Trust recognises the value of a diverse workforce and is committed to supporting colleagues with disabilities and LTHC and colleagues who may become disabled or diagnosed with a LTHC, so all colleagues are enabled to engage in meaningful employment. Particular consideration will be given to whether someone’s absence is subject to the provisions of the Equality Act 2010. i.e. where a reasonable adjustment is required.

8.2 Phased Return to Work

There may be occasions where you are not able to return to your full duties but would benefit from some short-term adjustment under a phased return to work. In such cases, following discussion with Employee Support & Resolution and often on the advice of OH, you may return on a time limited basis as follows:

- Reduced hours with those hours increasing over an agreed period to the contract hours.
- On amended duties or shifts not being undertaken, for an agreed period of time
- To an alternative post on a temporary basis
- On reduced hours and on amended duties.

A phased return to work will usually be limited to a maximum period of 4 weeks with full pay. This may be extended under exceptional circumstances following advice from Employee Support & Resolution. If this is extended beyond 4 weeks by your request, you can use annual leave (in order to receive full pay) or unpaid leave.



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8.3 Redeployment due to Health Reasons

Redeployment due to ill health can be considered throughout the attendance management process when an individual has been deemed unfit to continue in their current role for the foreseeable future as stipulated by the OH fitness to work assessment.

You will be placed on the redeployment register for a period of 12 weeks. All reasonable attempts to secure redeployment (temporary or permanent) will be made.

In considering whether a post is a suitable alternative, the Trust will pay due regard to your personal circumstances. Both parties will be expected to show some flexibility.

Where redeployment to a lower band is considered, this will entail adjustment of pay and is not subject to protection of earnings.

Following the 12 weeks, if no suitable alternative employment opportunity has been secured, then you will be invited to a Final Formal Review Meeting at which point a decision to end your employment on the grounds of ill-health will be made.

9. Right to Request a Review (appeal)

You have the right to Request a Review (appeal) against expectations set at formal Stages 2, 3 or 4 (including a decision to end employment).

A Request to Review must be submitted in writing to the Director of People within 10 working days of the date of the letter. The letter must state clearly the reasons for requesting the review. Information on this process can be found in the Trust's Promoting a Positive Working Environment policy.

10. Equality Impact Statement, Document Control, Approval and Review

The EIA, Document Control, Approval and Review for this policy has been completed and can be viewed [here](#).



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