



**Royal  
Veterinary  
College**

University of London

# **The Royal Veterinary College Managing Absence Toolkit**

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## 1. Key Principles

## 1. KEY PRINCIPLES

The College is committed to improving the health, well-being and attendance of all employees and values the contribution they make to our success. So, when any employee is unable to be at work for any reason, their contribution is missed.

### Our approach to absence is based on the following principles:

1. As a responsible employer the College undertakes to provide payments to employees who are unable to attend work due to sickness. (See your contract of employment)
2. Regular, punctual attendance is an implied term of every employee's contract of employment – the College expects each employee to take responsibility for achieving and maintaining good attendance
3. The College will support employees who have genuine grounds for absence. This support includes:
  - a. authorised, unpaid leave in certain circumstances
  - b. a flexible approach to the taking of annual leave
  - c. access to counsellors where necessary
  - d. return to work programmes in cases of long-term sickness absence, bearing in mind the need to deliver operational commitments

### This toolkit outlines:

- your responsibilities; what the College expects from YOU, as a manager
- the responsibilities of ALL employees when dealing with absence
- why we need to work together to reduce levels of absence

Most sickness absences are genuine but are difficult to manage because they are often sudden and unexpected. This leaves some managers feeling unsure about what they can do. The toolkit will help you develop the knowledge and skills required.

### This toolkit is for use in cases of absence for one of the following reasons:

**Illness** anything from a cold to a complicated medical condition requiring an operation and recuperation.

**Inability to attend work** e.g. an employee is unable to come to work because of family or caring responsibilities (or perhaps they simply do not want to come to work – they may be unhappy, or lack motivation). Sometimes employees take sickness absence because they feel they cannot ask for annual leave at short notice.

## KEY POINTS

1. absence calculations are always done on a rolling 12 month / 52 week basis
2. the College defines short-term absence as anything up to 20 days
3. long term absence is defined as an absence of more than 20 days
4. All the forms you will need relating to this toolkit can be found under 'Absence Management Toolkit' on the A-Z of forms and policies, on the HR website

## 2. The Cost of Absence

## 2. THE COST OF ABSENCE

The obvious cost of absence is financial, ie. the cost of sick pay, but there are also 'costs' due to some or all of the following:

- hiring temporary replacement staff
- missed deadlines due to a lack of trained, experienced employees
- reduced customer satisfaction levels
- low morale among colleagues expected to take on extra responsibilities
- diminished reputation with customers (internal and external), potential employees and even lost business

Absence is often unplanned so you need to manage staff to cushion the impact of absence on the overall flow of work. High absence levels affect everyone at the College and we need managers and staff to work together in order to maintain job satisfaction, manage workloads, increase productivity and control costs.

The toolkit will now explain how to carry these out effectively and with confidence.

### KEY POINTS

The most effective ways to improve absenteeism and reduce costs are for all line managers to:

- 1. review** attendance in line with firm, well publicised absence policies
- 2. improve** absence monitoring
- 3. conduct** return to work interviews after every single absence, no matter how short

### 3. Three Stage Approach Flowchart



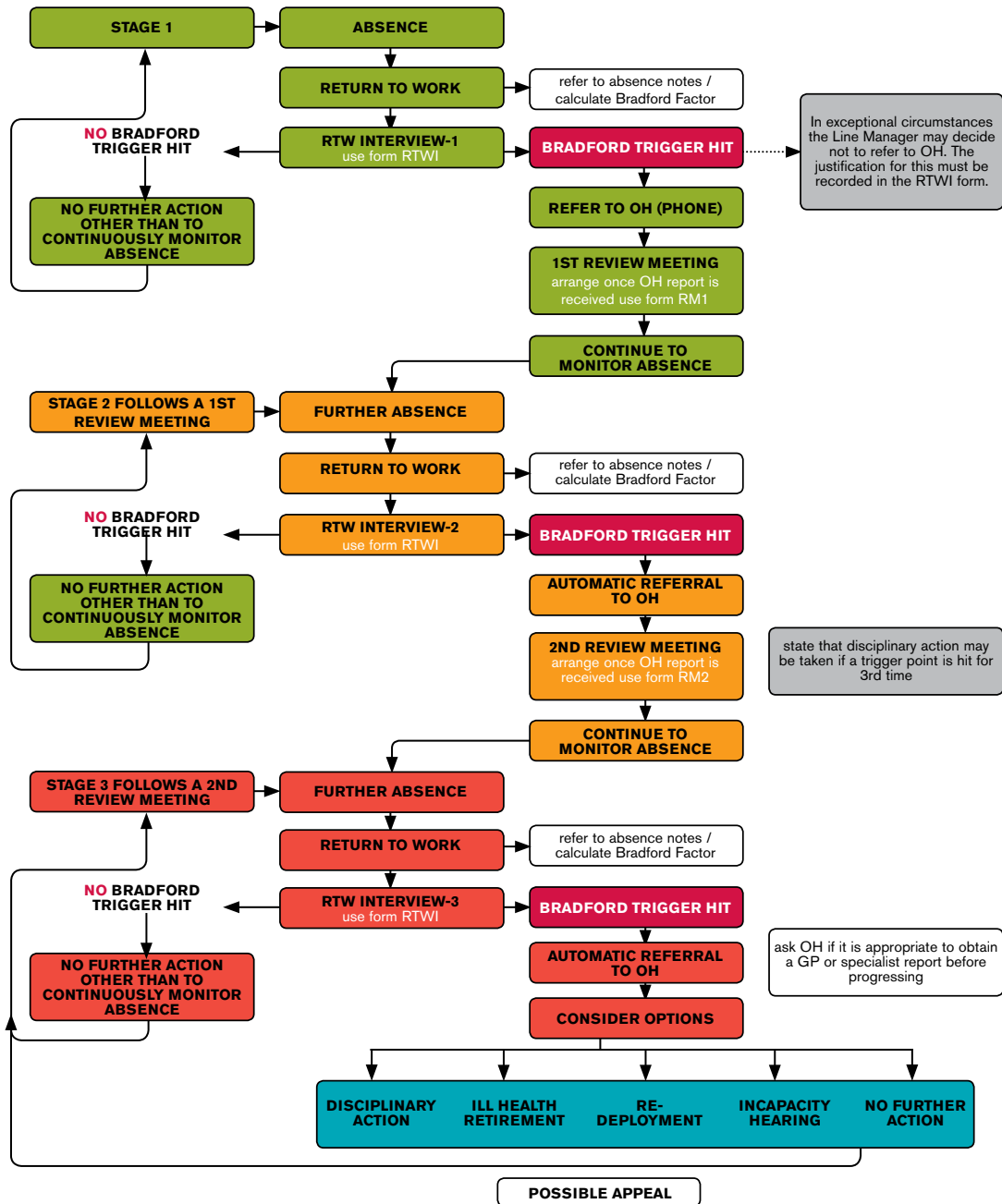
### 3. THREE STAGE APPROACH FLOWCHART

We have developed a simple **3 stage approach** (green, amber, red) to managing absence:

**OH:** Occupational Health

**RTWI:** Return to work interview

**RM:** Review Meeting



## **4. Responsibilities - Managers and Employees**

## 4. RESPONSIBILITIES - MANAGERS AND EMPLOYEES

### Managers must:

1. Ensure there are written local procedures regarding the management and reporting of absence in their area, including:
  - a. who to notify and when
  - b. the 3 stage approach flowchart
  - c. when to complete a self certificate or supply a doctors certificate
  - d. how trigger points are worked out etc.
2. Give all staff a copy and ensure they understand
3. Give a copy to every new starter at induction – ensure they understand.
4. Accurately record all staff absence and return this information to Human Resources (HR).
5. Conduct **Return to Work Interviews (RTWI)** for all absences using the RTWI proforma.
6. Establish prior to the RTWI whether the employee has hit a trigger point using the Bradford factor formula, and tell the employee during the interview.
7. Refer an employee to **Occupational Health (OH)** if they have hit a trigger point, telling them why you are referring, before sending the referral form to OH.

The College's expectation is that a Line Manager will refer staff to OH each time a trigger point is hit. However in exceptional circumstances the Line Manager may decide, that based on the facts of the case, it is not appropriate to refer to OH. An example of this might be where a staff member has been on long-term absence due to a planned operation, then returned to work and 2 weeks later had 2 days off due to a cold. In these circumstances a referral to OH may have little or no value.

If the decision is taken by the Line Manager not to refer, the Line Manager must record their reasons for taking this action. Consistency and fairness in the application of this procedure is essential, and that is why it is so important that a decision not to refer is recorded and justified by the Line Manager.

8. Act on any reasonable adjustment recommendations that OH and HR subsequently make unless there are strong business reasons why you feel you cannot. If this situation occurs you must discuss this with them to see if there is another option.

### THE RETURN TO WORK INTERVIEW

Every time, for every employee, for every absence. **Use the RTWI pro forma.**

The very fact that you hold a RTWI will deter casual absences because employees know that monitoring is being taken seriously and they will have to account for every single absence.

Taking the time to conduct one also demonstrates that you value your staff and miss them when they are away. A RTWI may also provide you with valuable information you can then use to help support your staff to achieve good attendance.

**Employees must:**

1. Comply with the written local procedures on the reporting of absence.
2. Keep their manager informed of a likely return to work date.
3. Complete a self certificate for any absence lasting between 1 -7 days and have it signed by their manager at the **Return to Work Interview (RTWI)**.
4. Supply their line manager with a doctor's certificate for any absence lasting more than 7 days.
5. Participate in OH referrals, if applicable, including keeping to arranged appointments.

*NB – if the employee does not participate, a decision could be made in the absence of information that could have been helpful to them.*

# Return to Work Interview

FORM RTWI

A Return to Work Interview must be conducted after **every** absence. It should be private and confidential, informal, structured and factual, carried out in a positive and supportive way, recorded and taken seriously.

**Before the Return to Work Interview ensure you have:** - Employee's Bradford Factor calculation  
- Previous RTWI notes if applicable

**ABSENCE STAGE 1 / 2 / 3 (circle)** Employee ..... Dept ..... BF Score .....

MANAGEMENT PROCESS	MANAGEMENT NOTES
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- 1 "Welcome back" - tell them why they have been missed.
- 2 State the reason for the Return to Work Interview; all absence is monitored and the meeting is informal, but taken seriously.
- 3 Explain that the RTW interview is not part of the disciplinary process.
- 4 You might like to ask them how they are feeling now, and if they saw their GP (NB – no intrusive medical questions!).
- 5 Ask if there is any support they require from you / others at the College.
- 6 You must ask if their absence was disability/maternity related or due to an accident at work. (NB - the College is required to record these absences separately from sickness absence - contact OH or HR for advice).
- 7 Inform them of their total number and duration of absences in the last 12 months and ask them to confirm if they agree with this record.
- 8 Tell them their Bradford factor score.  
NB - make sure you have not included any absences linked to disability/maternity or accidents at work in this calculation.
- 9 If they have hit a trigger point explain the consequences of this i.e. that they will be referred to OH and invited to either a first/ second/third review meeting. Provide them with the absence management literature.  
  
If they have hit a trigger, but you have made an objective decision not to refer you must explain to them your justification for this and record it on the RTWI form. (They cannot be invited to a review meeting if they have not been referred to OH).
- 10 Ask them if they have any questions regarding this.

Signed Manager ..... Employee ..... Date .....

## THE THREE STAGE APPROACH GREEN, AMBER, RED

### STAGE 1 - GREEN

- 1 Employee notifies manager (or nominated contact in exceptional circumstances) of absence, in line with local procedures, and gives likely duration of absence or date of return to work (if possible) so that you can reschedule work.
- 2 If the absence is likely to be brief then you don't need to make further contact (but you can if you wish). It is reasonable to expect an employee to keep you up to date with what's happening during their absence, and their likely return date. If the employee doesn't maintain good contact then it is appropriate to contact them and 'keep in touch' (keep a note of how and when you do so), but get the balance right and don't hassle them. The College would not wish any employee to feel under pressure from their manager to return to work before they should.
- 3 Prepare for the RTWI – calculate the Bradford factor and arrange to see the employee on their first day back at work.
- 4 Certification – the employee will either bring a doctor's note if the absence was for 8 days or more, or will need to complete a self-certification form if the absence was for 7 days or less. This should be done at the RTWI. No exceptions; all absences.
- 5 Look for patterns – e.g. frequent Monday absences or absences that tend to occur at particular times, possibly just before an important monthly deadline or towards the end of a busy shift cycle.  
If a pattern is apparent, check out the **TOP TIPS** box.
- 6 Family or personal problems – let's face it, they happen. If an absence may be as a result of one, read the **TOP TIPS** box on the following page.
- 7 Suspicious that reasons given for absence aren't genuine? – it's a difficult situation but one that with care you can deal with; see **TOP TIPS** box.
- 8 Hold the RTWI using the RTWI pro forma. You will both sign the form. If there is no Bradford trigger hit then tell them you will not be taking further action other than to monitor absence levels. If there is a Bradford trigger hit then tell them you will be referring them to OH, who will be in touch with them after they receive a copy of your OH referral form. Only in exceptional circumstances would a Line Manager take the decision not to refer.
- 9 If they are referred to OH you will hold a 1st review meeting with them (using form RM1) to discuss the OH report and you will continue to monitor their absence levels.

## ABSENCE PATTERNS

If a pattern is apparent, speak to your employee about it. Do so in a factual way without making any accusations. Take care not to make assumptions and remain open minded. The simplest way to put the matter to the employee is first to state the facts, and second to ask them if they can explain the pattern. For example:

### DON'T

You're always off on Mondays - that's very strange, don't say you think?

I suppose you'll have some excuse or other.

You always seem to be off when some important job has to be done. We can never rely on you.

You are no use to us if you can't cope with the shift cycle. We need you at work and not off sick.

### DO SAY

I have noticed that six out of your 10 absences have been on Mondays.

Would you like to comment on that apparent pattern?

Is there any reason why nearly all your absences have been in the final week of the month?

The records show that you tend to be absent towards the end of your shift cycle. Is there any problem we can help you with in relation to shift working?

## TOP TIPS

Your main aim in speaking to an employee about a pattern of absence should be to try to establish the underlying reason or reasons for the frequent absenteeism. It is only when the underlying cause is identified that it will be possible to decide what to do about the problem.

Even if the employee is unable or unwilling to put forward any explanation, such a discussion will have the advantage of alerting them to the fact that you have noticed the pattern. This in turn may deter any further casual absence.

## THE THREE STAGE APPROACH GREEN, AMBER, RED

### SUSPICION

If at any stage you have reasonable grounds to believe that the reasons given for an employee's absence are not genuine, you should put these doubts directly to them in a factual way.

Never make unsubstantiated accusations, however if there is some evidence to suggest that an employee has taken time off work without a proper reason, you should raise this with them to establish the truth.

One way to tackle this is simply to put the matter to the employee as a statement of fact followed by a general question. For example, you could state that it has been reported that the employee was seen out socialising on the same day that he or she phoned in sick. You should follow this statement up by asking them if he or she would like to comment on this or explain it.

In this way you can avoid making direct accusations whilst giving the employee a full opportunity to offer his or her side of the story.

If it comes to light that an employee's absences from work are being caused wholly or partly by family problems, e.g. a sick child or genuine problems with childcare, you should be supportive, whilst at the same time explaining clearly that continuous absences are unacceptable for the College as their employer.

The aim should be to strike a balance between the need to support an employee who has genuine difficulties and the need to get the employee's work done reliably and efficiently. While a degree of tolerance and sympathy will usually be appropriate, no manager can be expected to put up with an employee's frequent absences indefinitely. Try to reach agreement with the employee as to targets and timescales for an improvement in attendance.

### TOP TIPS

#### **What you can do if a pattern of short-term sickness emerges**

Frequent absence may indicate general ill health which requires medical investigation and, if continued, may indicate work stress or lack of capability to do the job. Encourage your staff to seek proper medical attention to establish any underlying health problem.

It may also be helpful to discuss whether there are domestic difficulties or problems with the job. Referral to Occupational Health may be appropriate; ask HR for advice at any time. Contact may be made with their GP via OH, so long as the employee agrees; a positive benefit is that sometimes a serious illness may be spotted at an early stage and appropriate guidance given.



## STAGE 2 (FOLLOWS IF THEY HAVE ALREADY ATTENDED A 1ST REVIEW MEETING) - AMBER

- 1 The process is almost exactly the same as Stage 1:
    - if there is **no** Bradford trigger hit you take no further action except to monitor absence
    - if there is a hit they will be referred to OH (again)

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  - 2 **The key difference at Stage 2** is that you must inform the employee at the review meeting that if there is a Bradford trigger hit for a third time within a rolling 12 month period, then disciplinary action may be taken
- 

## STAGE 3 (FOLLOWS IF THEY HAVE ALREADY ATTENDED A 2ND REVIEW MEETING) - RED

- 1 The process is almost exactly the same as Stages 1 and 2
    - if there is no Bradford trigger hit you take no further action except to monitor absence
    - if there is a hit they will be referred to OH (again)

---

  - 2 **The key difference at Stage 3** is that you must now consider what options are open to you including:
    - disciplinary action
    - incapacity hearing
    - ill health retirement
    - re-deployment
    - no further action
-

# Management Framework for First Review Meeting

FORM RM1

*The review meeting falls outside of the disciplinary process and therefore the employee has no right to be accompanied.*

**Ensure you have the following for the review meeting:**

- Details of absence for the last 12 months and Bradford factor score
- Copy of the employee's recent Return to Work Interview form
- Recent Occupational Health Report
- Absence levels of the rest of the team – (this information must be anonymised)

MANAGEMENT PROCESS	MANAGEMENT NOTES
1	Acknowledge the valuable contribution they make to the team and why their role is important.
2	Discuss the impact absence has on the business and your responsibility as the line manager to monitor absence levels.
3	State the reason for the meeting – i.e. the fact that they hit a trigger point and as a result of this you referred them to OH in line with the Absence Management Toolkit.
4	Make reference to the OH referral report and discuss any significant issues which have been raised including any reasonable adjustments that OH recommend.
5	Ask the employee if there are any underlying reasons for their high level of absence which you should be made aware of in order to support them as they improve their attendance.
6	Invite them to make any suggestions that they feel could help them to improve their absence levels.
7	Compare their absence levels to the rest of the team – this information should be anonymised.
8	Confirm and discuss the need for them to show an improvement in their absence levels.
9	Explain that you will continue to monitor their absence levels on a monthly basis and state what will happen if they hit another trigger point. i.e. a second referral to OH followed by a second review meeting.
Attach further notes if necessary.	
<b>Signed Manager</b> ..... <b>Employee</b> ..... <b>Date</b> .....	

# Management Framework for Second Review Meeting

FORM RM2

*The review meeting falls outside of the disciplinary process and therefore the employee has no right to be accompanied.*

**Ensure you have the following for the review meeting:**

- Details of absence for the last 12 months and Bradford factor score
- Copy of the employee's latest Return to Work Interview form
- Latest Occupational Health Report
- Absence levels of the rest of the team – this information must be anonymised
- Management notes from First Review meeting (FORM RM1)

**MANAGEMENT PROCESS**

**MANAGEMENT NOTES**

1 State the reason for the meeting i.e. this is the second time they have hit a trigger point and inform them of their absence level.

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2 Make reference to the OH report and discuss any recommendations they have made.

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3 Refer to the first review meeting where you discussed the importance of good attendance levels and any recommendations that either the employee or OH gave, to help improve absence.

Explore with the employee why their absence has not improved.

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4 Emphasise the impact that absence has on the College and their team.

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5 Explain that if they hit another trigger point formal disciplinary action may be taken.

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Attach further notes if necessary.

**Signed Manager** ..... **Employee** ..... **Date** .....

## 5. Trigger Points

## 5. TRIGGER POINTS

### THE Bradford factor - identifying the disruption caused by short term absence

Short-term absences are the most disruptive to the operational running of the College. The Bradford factor identifies persistent short-term absence for individuals by measuring the number of spells of absence and is therefore a useful measure of the disruption caused by this type of absence.

#### The Bradford factor is calculated as follows: $S \times S \times D = BF$

- **S** is the total number of spells (instances) of absence of an individual over a set period (a rolling 12 months / 52 weeks)
- **D** is the total number of days of absence of that individual over the same set period
- **BF** is the Bradford factor score

You must not include any absences related to disability, maternity or an accident at work, as part of the Bradford factor calculation.

#### For example:

9 one day absences:  $9 \times 9 \times 9 = 729$

1 nine day absence:  $1 \times 1 \times 9 = 9$

#### Additional examples for the last 12 months:

Sam was absent 3 times totalling 5 days:  $3 \times 3 (= 9) \times 5 = \mathbf{BF\ of\ 45}$

Jo was off 3 times for 6 days:  $3 \times 3 (= 9) \times 6 = \mathbf{BF\ of\ 54}$

Niall was absent 4 times for 6 days:  $4 \times 4 (= 16) \times 6 = \mathbf{BF\ of\ 96}$

*(getting very close...)*

Chris was off 4 times for 7 days:  $4 \times 4 (= 16) \times 7 = \mathbf{BF\ of\ 112}$

*(oh dear!!!)*

Ali was absent during the same period twice; once for 5 days and once for 8 days. However her **BF** was only 52:  $2 \times 2 (= 4) \times 13 = 52$

### TOP TIPS – TRIGGER POINTS

Trigger points are part of a package of tools for managing absence. They provide useful guidelines for managers on when to review attendance. They are not used to determine levels of disciplinary action. There are various formulae which can be used to assess absence and the College has adopted the Bradford factor to calculate trigger points.

## OH REFERRAL

There are several different triggers; the general guidance is as follows:

1. When someone has been off work continuously for 4 weeks. (Remember, one absence of 20 days or more is classed as long term).
2. OH recommends early intervention when someone is absent due to mental health issues, so refer after only 2 weeks.
3. When someone has hit the Bradford factor trigger point.

These are guidelines only and there may be occasions when you feel it necessary to refer sooner. If you are in any doubt whether to refer or not please contact Human Resources for further guidance.

### Before you refer

Before you submit a referral form to OH you must speak to the employee concerned and explain why you will be referring them. OH will not make an appointment with an employee until you have done this. If it is the first time the employee is being referred give them a copy of the 'OH Employee Information Leaflet' (this can be found under 'Absence Management Toolkit' on the A-Z of the HR website) which will provide them with more information on the OH service. Explain that the OH service can help support them to improve their attendance and therefore it is important that they engage with them.

### What to do if a pattern of short-term sickness emerges

Frequent absence may indicate general ill health which requires medical investigation and, if continued, may indicate work stress or lack of capability to do the job. Encourage your staff to seek proper medical attention to establish any underlying health problem.

## TOP TIPS

### What to do if a pattern of short-term sickness emerges

Frequent absence may indicate general ill health which requires medical investigation and, if continued, may indicate work stress or lack of capability to do the job.

Encourage your staff to seek proper medical attention to establish any underlying health problem.

Why the College decided the initial trigger point of 99\*

**The facts:**

- the College lost 4,606 working days to sickness absence (1st April 2009 to 31st March 2010)
- this equates to just under 6 days per employee
- over 400 employees had an absence in the period
- there were 1,178 separate incidents

To decide the Bradford factor score trigger point, the average number of incidents and the average number of days lost in the period were assessed. This showed an average of 3 incidents, with an average of 11 days lost. Using the Bradford factor formula, this equates to a trigger point of 99 points.

\*In order for the College to be able to reduce its current absence levels it was felt that the trigger point of 99 was a useful and reasonable starting point although this figure will be reviewed on an annual basis.

**TOP TIPS – THE DISABILITY DISCRIMINATION ACT**

The Disability Discrimination Act 1995 (amended 2005) creates a duty on employers to tailor their actions to the individual circumstances of disabled employees. Certain disabilities may lead to a greater likelihood of short-term absences or to a higher total of days of absence which means they may be disproportionately disadvantaged by any non-individually tailored application of the Bradford factor.

The DDA allows disabled employees to request 'reasonable adjustments' in situations where they are disadvantaged by generic processes. In order to ensure that disabled employees are not disadvantaged you are required to record Disability-Related Absence separately from Sickness Absence and not to include this in your Bradford factor calculations. For clarity, as part of the RTW interview you are required to ask the employee if any of the absences are disability related. OH can also give advice on whether an absence is disability related.

## Management Referral to Occupational Health Service **CONFIDENTIAL**

Please ensure this form is completed fully to assist the Occupational Health Advisor / Physician in providing you with a comprehensive report. It is important that the employee/student understands why they are being referred; a copy of the Employee Information leaflet will provide additional information for the employee.

Please complete the form by typing/checking as required in grey boxes and then submit by e mail as indicated below.

Type of referral	Please Check	
Staff referral	<input checked="" type="checkbox"/>	To initiate the referral please submit to HROps@rvc.ac.uk
Postgraduate Referral	<input type="checkbox"/>	To initiate the referral please submit to rvc@connaught.plc.uk
Undergraduate Referral	<input type="checkbox"/>	To initiate the referral please submit to rvc@connaught.plc.uk
Student Referral via Student Support Services	<input type="checkbox"/>	To initiate the referral please submit to rvc@connaught.plc.uk

### Line Manager / Academic Details

(\*Academic\* is the term referred to for the individual responsible for referring the student)

Line Manager/Academic Name:	Cathie Tickle
Line Managers/Academic Tel:	01707 666984
Line Managers/Academic email address:	ctickle@rvc.ac.uk
If an employee, complete HR Section, if known.	
HR Name:	Katy Newton
HR Tel No:	01707666042
HR email address:	knewton@rvc.ac.uk

*OH Clinician – Please contact referring manager to discuss case prior to consultation, if manager not available please e mail manager & HR where appropriate to confirm contact has been attempted.*

### Employee / Student

Name:	Joe Bloggs
Address:	Hawkshead Road, Brookmans Park, Herts
Date of Birth:	17th September 1972
Employee Position, Under Graduate/Post Graduate course:	Cleaner/Porter
Department & Campus:	Estates/Hawkshead
Full Time or Part Time? (if P/T please state days and times of work)	Full time 6am - 2pm
Length of time in current position or course:	3 year
Home Telephone:	01707 666666
Mobile/Contact Telephone:	07979797979
Absence report included/attached:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> please provide dates of absence relevant to this referral
Are there any specific requirements needed to assist in this assessment (i.e. interpreter, advocate)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes please specify:

### Please describe duties of the position or current course requirements (or attach copy of job description)

Job Description / Course requirements as follows:

Cleaning offices and accommodation and halls of residence. Tasks include waste bin emptying, vacuuming, cleaning toilets, kitchens, dusting. Make up beds, use buffer machine.



**Reason for Referral (Please X as appropriate)**

Long term sickness absence	<input type="checkbox"/>	Recurrent short term sickness absence	<input checked="" type="checkbox"/>
Ill health retirement assessment	<input type="checkbox"/>	Concerns for work performance	<input type="checkbox"/>
Workplace assessment	<input type="checkbox"/>	Workplace accident	<input type="checkbox"/>
Occupational exposure hazard concerns	<input type="checkbox"/>	Investigation of workplace illness or injury	<input type="checkbox"/>
Substance abuse problems	<input type="checkbox"/>		

**Student related below**

Assessment of fitness to continue studies	<input type="checkbox"/>	Assessment of fitness to resume studies	<input type="checkbox"/>
Physical/mental condition affecting studies	<input type="checkbox"/>	Other (Please specify)	<input type="checkbox"/>
Allergic symptoms identified	<input type="checkbox"/>		<input type="checkbox"/>

OH Clinician – Please note that any return to work adaptations should be complete within 6 weeks as per RVC Policy.

Other (Please specify)

**Information About the Employee/Student's Work/Study Environment (Please X as appropriate)**

Small/large animal handling	<input type="checkbox"/>	Shift work	<input checked="" type="checkbox"/>
Work with respiratory/skin sensitisers	<input type="checkbox"/>	Use of hand/wrist at awkward angles	<input type="checkbox"/>
Work with radiation	<input type="checkbox"/>	Use of vibrating tools	<input type="checkbox"/>
Use of display screen equipment	<input type="checkbox"/>	Lone working	<input type="checkbox"/>
Bending/stooping	<input checked="" type="checkbox"/>	Working with arms at/above shoulder height	<input type="checkbox"/>
Heavy lifting	<input type="checkbox"/>	Prolonged standing/sitting	<input checked="" type="checkbox"/>
Working at height	<input type="checkbox"/>	Other (Please specify)	<input type="checkbox"/>

Are there any additional factors currently that may impact on their role e.g. extra workload / relationships and personal circumstances? If yes, please outline what the factors are and indicate if these are permanent or temporary.

**Not that we know of**

Please provide details of current problem (How is this affecting their ability to work or study?)

**Joe has had various reasons for his frequent short term absence and he suffers from migraines. Joe has been seen twice before by previous OH supplier as part of monitoring of sickness absence. He has had a number of days off frequently over the last 3 months and has had two formal meetings regarding his absence**

How long has the problem been present? **18 months**

What remedial action have you taken/any adjustments made?

**It was previously recommended that Joe takes fluids and eats earlier in the morning and as he starts work at 6am he was unable to eat before coming to work so it was agreed that Joe could take an earlier tea break if that would help**

Has this individual been referred to the Occupational Health Service in the last 6 months?

**Yes**

What specific questions do you want answered?

**Staff**

Is Joe fit to do the normal duties above?

Is there an underlying medical condition likely to result in Joe taking further sickness absence?

**Are there any reasonable adjustments we can make to help this situation to help reduce the instances of short term frequent absence?**

I confirm that the reason for referral has been fully explained to the employee/student.

**Referring Manager/Academic**

Name **Cathie Tickle** Date .....

Employee/student signature (where possible)

I confirm that the referral has been fully explained to me.

Signed: **Joe Bloggs** Date .....

## 6. Keep in Touch

## 6. KEEP IN TOUCH

### How and when to get in contact

**It is a key responsibility of all managers to keep in regular contact with any staff who are absent.**

You know the individual and should be able to handle any sensitive issues. Don't pass the responsibility to others unless there are sound reasons for doing so but if you have any concerns then talk to HR.

### In cases of:

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<b>Traumatic injury or sudden illness</b>	Extend your sympathies and use discretion until the longer prognosis is known; keep in touch.
<b>Planned treatment</b>	Do they need or want any intervention or support from you? Employees may welcome hospital or home visits but check with relatives first.
<b>Stress</b>	If you are notified that an employee is suffering from a stress-related illness make contact within a week. However they might find it difficult to talk to you and they might not be ready to discuss returning at this stage. Use discretion until the longer-term prognosis is known.

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### TOP TIPS

Make sure your conversation with the absent employee is clearly focused on their health and well-being and their return to work. Try to focus as much on what the employee **can** do as well as things they may need help with.

## TOPS TIPS - MANAGING

### As a manager you need to:

- apply standards consistently
- look after your employees' well-being
- look after the best interests of the employee
- look after the best interests of the College
- keep within the law

### 1. Understand the College's Leave and Absence Policy and Incapacity Procedure

Know what you **can** do to manage attendance.

### 2. Get help!

You may discover that absence has been caused or exacerbated by problems with colleagues. If the absences are due to relationship problems discuss ASAP with HR.

### 3. Talk with your staff

It can be difficult talking to staff about why they have been absent from work. Some people naturally find it difficult to discuss personal medical problems. Also, many managers shy away from what they perceive as a 'showdown' with their staff – particularly if they suspect that the sickness has not been genuine or if they wish to discuss high levels of sickness absence.

### 4. Notice their absence

Some absence may be due to lack of motivation. If an employee feels their absence won't be noticed they will often be more inclined to take time off.

### 5. Don't make assumptions

Let's say a colleague with a bad back should be ready to return to work. Is their delay in returning due to a recurrence of the medical problem or is it due to anxiety about returning to their work routine? Early intervention and good communication are the key ingredients to managing absence.

## KEY POINTS

- keeping in contact is a key factor in helping employees to return to work after sickness absence
- contact can be a sensitive issue as some employees may feel they will be pressed to come back to work too early
- without contact, those who are absent may feel increasingly out of touch and undervalued

## 7. Employee Well-being

## 7. EMPLOYEE WELL-BEING

### **Looking after your staff – the importance of their health and well-being**

Employers are increasingly making the link between absence and the health and well-being of their employees. The College wishes to consider issues like smoking, alcohol and stress alongside traditional occupational health issues such as noise, dust and chemical hazards. Many of these issues are critical to developing an effective and committed workforce. However, the right policies and procedures won't work unless they are used in the right way by managers who feel confident to do so.

The starting point for supporting employee well-being is good quality management and effective work organisation.

### **Helping your staff to achieve a good work-life balance**

It is wise to recognise that there is increasing focus on the benefits of encouraging a good 'work-life balance'. Individuals have reasonable and legitimate reasons for needing to be absent from work – for example, they may have caring responsibility for an elderly relative. Also, parents of children aged 16 and under (18 and under for disabled children) and carers of adults have the right to request a flexible working arrangement and this must be considered.

If you believe that high levels of absence are linked to family commitments you might investigate possible flexible working arrangements, maybe for a short period, if appropriate. This applies equally to men and women.

### **Medical appointments**

Appointments to visit doctors, dentists or hospitals should be arranged out of working hours if at all possible to avoid disruption to the working day. If this is not possible, an employee is responsible for notifying their line manager in advance of any absence due to pre-arranged medical, dental or optical appointments.

If the total absence from work as a result of the appointment is less than 3 hours, the absence will not be recorded as sick leave. Appointments that result in an absence from work of 3 hours or more will be recorded as sickness absence.

### **Unauthorised Absence**

Absence of this kind may indicate the need to invoke disciplinary action and the College supports managers taking appropriate action against those who try to exploit the sickness provisions at the expense of the majority. However, the College will ensure that such cases are given proper consideration.

## 8. Long Term Absence

## 8. LONG TERM ABSENCE

Long-term sickness can be one of the most difficult problems to tackle. The College aims to consider if such problems can be eased through more flexible working arrangements, if possible.

You need to assess what impact the long-term sickness is having. Ask yourself:

- just how much damage is being caused by this absence?
- is there an immediate crisis, or could we afford to continue for some time without a replacement, with some re-organisation?

Lots of issues must be explored and it is vital that everyone remains objective and focuses on facts.

### The main causes of long term absence:

#### Among manual workers:

- acute medical conditions
- back pain
- musculoskeletal conditions
- stress
- mental health problems

#### Among non manual workers:

- stress
- acute medical conditions
- mental health problems
- musculoskeletal conditions
- back pain

### Dealing with long-term absence

You have to consider the following:

- in the opinion of the employee's GP/medical consultant, or of the College's OH advisor, when will a return to work be possible?
- would a 'phased return' – working part-time or flexible hours – help the employee to get back to work?
- will there be a full recovery or will a return to the same work be inadvisable?
- could the employee return if some assistance was provided? Could some re-organisation or re-design of the job speed up a return to work?
- is alternative, lighter or less stressful work available, with retraining if necessary?
- is there a requirement under the Equality Act 2010 to make a reasonable adjustment?

In some cases, it may be appropriate to simply keep in touch with the employee and give them the time they need to recover. This is particularly true where there is a possibility that the illness has job related causes.

## KEY POINTS

### It is really important to:

- maintain contact with the employee.
- use OH and seek medical advice
- be clear about arrangements for sick pay
- develop a 'return to work' programme



## GETTING BACK TO WORK

Employees are often understandably anxious about returning to work after a long absence. They may have lots of questions to ask you. For example:

<b>Has my working environment changed?</b>	If the sickness was work-related they may be concerned about using the same equipment, for example. Have you reviewed your risk assessment?
<b>Could you make reasonable adjustments for me?</b>	If they are disabled, or have become disabled, you are required to make reasonable adjustments to help them back to work.
<b>What do my colleagues know about my absence?</b>	Reassure them that all discussions and paperwork about their illness have remained strictly confidential. Ask them how they wish to handle the subject of their absence with colleagues or in team meetings etc. Employees need to be reassured that you have given some thought to their return to work. Talk to the employee and their colleagues and work out a 'return to work' programme.

### Return to work programme

A tailored return to work programme will be led by OH in consultation with you as the manager and could include:

- shorter or flexible hours in the first few weeks
- assistance to catch up on any new developments within the College
- training on new equipment or new processes/procedures
- a friendly chat about what's been going on at work – for example, any social events they may have missed or that are coming up

## KEY ISSUES

### Chronic Ill Health

Chronic ill health and the inability to attend work consistently are among the most difficult employee-related problems for any organisation, particularly when the employee holds a key position.

OH must determine whether or not they are disabled under the Equality Act 2010. (An employee is disabled for the purposes of the Act if their illness has a substantial, long-term and adverse effect on their ability to undertake normal day-to-day activities).

'Disabilities' are not always the more obvious ones; for example, a person can be classified as disabled once they have been diagnosed with cancer, HIV and multiple sclerosis. People with some mental illnesses are also disabled under the Act.

If the employee is disabled, you have a duty under the Act to make reasonable adjustments to premises and working practices if not doing so would put the employee at a substantial disadvantage. If you fail to make reasonable adjustments for a disabled employee, they could take a claim of disability discrimination to an employment tribunal.

### **Dismissal during long term absence**

Occasionally an employee may have to leave the College because of long-term ill health.

Sometimes the employee will simply choose to resign but you might eventually have to consider dismissing them. However, you must carefully consider as many options as possible to help them come back to work if it is possible.

Dismissal is the last resort once all other options have been considered. Before making a decision, you must consider all the factors mentioned earlier – such as reasonable adjustment, flexible working, job design, a phased return to work, etc. The decision could be challenged and you may have to satisfy an employment tribunal as to the fairness of the decision.

After long absences, particularly those that are work related, there is often a fear of returning to work. An understanding approach, coupled perhaps with part-time working at first, can help build up confidence and a return to normal performance.

However, if the job can no longer be kept open, the matter must be dealt with appropriately and the employee should be told.

#### **You could also think about offering the employee:**

- medical help - such as physiotherapy
- practical help and support - such as transport to work
- specialist help - such as internal or external counselling

OH are occasionally able to consider short term fast track treatment for certain conditions and can arrange a cost benefit analysis for you to consider.

Familiarise yourself with the Incapacity Procedure; ill health retirement may be another option. But keep in mind that the main thing is to listen well and be objective.

### **TOP TIPS**

#### **Alternatives To Dismissal**

You may be able to make changes so that you can keep an employee who has a long-term illness or disability. It is good practice to ask the employee what reasonable adjustments might help them to remain in work.

#### **You could consider:**

- reorganising the work or redesigning the job
- reallocating certain non-core duties to other workers or a transfer to a job or location with easier access
- offering retraining
- altering their hours of work
- eliminating night-shift work
- offering home working, if appropriate
- making adaptations to equipment or furniture

Did you know you could arrange an **'access audit'** by a professional access organisation, such as Access to Work (AtW), to help assess the situation and suggest reasonable adjustments?

You may be able to obtain a grant towards the cost of any adjustments.

If you think this would be useful then talk to HR for advice.

## 9. Stress and Mental Health Problems

## 9. STRESS AND MENTAL HEALTH PROBLEMS

**Stress isn't an illness, it's a symptom.**

**What might be the underlying cause?**

**Don't forget the majority of stress is caused by outside factors, not work.**

**The main causes of work-related stress are:**

- workload
- management style
- relationships at work

**Other causes include organisational change, pressure to meet targets and lack of employee support from line managers.**

The Health and Safety Executive (HSE) defines stress as the 'adverse reaction that individuals have to excessive pressure or other types of demands placed upon them'.

**Stress is not an illness** but over time it can lead to ill-health, such as depression or anxiety, and it is also linked to coronary heart disease. Although much stress is caused by individuals' lives outside work, frequently there is a complex interaction between the sources of stress. For example, someone going through a relationship break-up may not be able to cope with the demands of a job that under normal circumstances they would find quite manageable.

Regardless of the cause, stress is likely to lead to changes to an individual's behaviour, performance or attendance that will have a negative impact in the workplace. The College wants to ensure that stress is identified as soon as possible and managed effectively.

**Line managers play a critical role in managing and preventing stress. Managers can either cause or help prevent stress through how they manage people. They are also the people in an organisation that are most likely to be able to pick up on the early warning signs that might indicate an employee is suffering from stress**

### TOP TIPS - ODD DAYS OFF

Both stress and some mental health problems can sometimes be manifested in the 'odd day' off work, often with illness given as the reason or excuse. Whether paid or unpaid, this type of absence is costly to the College because it is unpredictable. They can also be the cause of some lateness and poor time-keeping which are similarly disruptive, particularly when others cannot begin work until arrangements are made to provide cover.

On the other hand, absence of this kind may point to problems concerning the quality of management, working relationships, job design, and other factors.

All of these need to be examined to see if better management is the answer to the problem since, if staff know that absence will be noticed and will be investigated by management on return, they are less likely to take time off work without proper cause.

Stress and mental health problems are common causes of sickness absence – particularly long-term sickness. **Mental health problems** can be very difficult to diagnose. They may be caused by stress, by bullying or by depression brought on by a combination of factors affecting an employee at work and at home. Try to be understanding. Consult with HR at any time.

**The average length of time individuals take off with depression is 30 days.**

The College offers a free, impartial, confidential Counselling Service, provided by Care First. This services provides unlimited free-phone access 24 hours a day, every day of the year, for personal and work related issues. The service is available via telephone (free-phone 0800 174 319) or online. Care First also provides a free advice and information service, which can also be accessed on the same free-phone number. For further information, visit the Care First page on the HR website.

## 10. Conduct or Capability?

## 10. CONDUCT OR CAPABILITY?

### **Absence as a capability issue**

Where an employee genuinely suffers from long-term ill health, or frequent related bouts of short term sickness which interfere with their job performance, by following the 3 stage approach it will become evident that their absence is due to capability and not conduct.

- An eligible employee may be entitled to statutory sick pay for up to 28 weeks - as well as any contractual sick pay.

### **Absence related to drugs and alcohol**

The College will treat employees addicted to drugs or alcohol similarly to employees with any other serious illness. However, if an employee will not accept they have a problem or seek help, the issue may become one of unacceptable conduct.

Where the issue is purely one of conduct, ie the employee is not addicted to alcohol or drugs but their drug/alcohol consumption is leading to regular absence/lateness it would be appropriate to follow the College disciplinary procedure after going through the 3 stages.

### **Absence as a conduct issue**

Where an employee is often absent or late for unexplained/unconvincing reasons, this becomes a conduct issue and you may need to take disciplinary action.

Be aware though, that sickness, domestic problems or travel difficulties leading to absence or lateness may not necessarily amount to misconduct. In cases of genuine sickness, particularly if the sickness is pregnancy related, disciplinary action should not be taken. As before, go through the 3 stages.

### **Taking disciplinary action**

The employee should be given an opportunity to improve. Usually warnings, both oral and written, are sufficient.

However, if the situation does not improve, you may have to consider dismissal as a last resort and after proper and fair procedures have been followed.

### **KEY POINT**

Where an employee genuinely suffers from long-term ill health, or frequent related bouts of short term sickness which interfere with their job performance, by following the 3 stage approach it will become evident that their absence is due to capability and not conduct.

## 11. Appendix 1



## 11. APPENDIX 1

### Stress (Health and Safety Executive (HSE) data):

- Stress is “the adverse reaction people have to excessive pressure or demands placed on them”
- Stress is a very personal issue
- Over 12 million working days are lost per annum because of it
- It affects people both mentally and physically, taking many forms including anxiety, depression, heart disease, back pain, headaches, gastrointestinal disturbances, alcohol and drug dependency
- Each new case leads to an average of 31 days off work
- Employers are obliged by law to assess the risk of work-related stress and to take measures to control these risks
- **Effective management is the best way to reduce it**

### The HSE have identified six management standards to:

- help employers measure their performance in managing key causes of stress at work
- identify areas for improvement

### The six standards:

1. **demands** made on employees
2. **control** they have over their work
3. **support** they receive from managers and colleagues
4. **role** clarity
5. **relationships** at work
6. **change** and how it is managed

### Employers must:

- **do something about the underlying causes of stress, like poor communication and lack of training**
- **help employees cope with the symptoms of stress, like anxiety and ill health**

Common themes which can **stop** the underlying causes of stress emerging:

- clear policies
- setting objectives
- effective communication
- working together

The **benefits** of tackling work-related stress:

- quality of life – employees feel happier at work and perform better
- attendance and sickness – attendance goes up and sickness goes down
- management of change – changes are easier when ‘stress’ is managed effectively
- employee relations – problems can be resolved at work rather than at a tribunal

Main causes of stress		What employers can do about it
<b>1 Demands</b>	Employees often become overloaded if they cannot cope with the amount or type of work they are asked to do.	Pay attention to the way the job is designed, training needs and whether it is possible for employees to work more flexible hours.
<b>2 Control</b>	Employees can feel disaffected and perform poorly if they have no say over how and when they do their work.	Think about how employees are actively involved in decision making, the contribution made by teams and how reviewing performance can help identify strengths and weaknesses.
<b>3 Relationships</b>	A failure to build relationships based on good behaviour and trust can lead to problems related to discipline, grievances and bullying.	Check College policies for handling grievances, unsatisfactory performance, poor attendance and misconduct, and for tackling bullying and harassment.
<b>4 Support</b>	Levels of sickness absence often rise if employees feel they cannot talk to managers about issues that are troubling them.	Give employees the opportunity to talk about the issues causing stress, provide a sympathetic ear and keep them informed.
<b>5 Role</b>	Employees will feel anxious about their work (and the organisation) if they don't know what's expected of them.	Review the induction process, work out an accurate job description and maintain a close link between individual objectives and College goals.
<b>6 Change</b>	Change needs to be managed effectively or it can lead to huge uncertainty and insecurity.	Plan ahead so change doesn't come out of the blue. Consult with employees so they have a real input and work together to solve problems.

## Stress Case Studies

### 1. Demands - (don't change for the sake of it)

#### Example

Two employees work doing the same job as part of a small team. A new manager arrives and divides up the work slightly differently, resulting in one of the employees doing the more difficult work, while the other is given the more routine, repetitive tasks.

The employee with the challenging work begins to work longer hours in order to get his work completed on time. After a few weeks he is frequently off sick due to the pressure of work.

The other employee does the routine work easily and has time left with nothing to do. She soon feels bored and starts to make mistakes and not complete tasks due to lack of motivation.

#### Solution

The manager holds a meeting with the employees to discuss the problems. The manager admits he might have acted too hastily and agrees to look at the job design and reorganise work duties. Training is arranged so that both employees can undertake some of the more challenging work to the standard required and the routine work is distributed more fairly.

### 2. Control – (more control = more interest)

#### Example

A new manager is concerned about one of her teams. Their level of performance and attendance is not as good as other teams. She speaks to the team leader who says the team doesn't really feel as though they are fully included in what is going on which has led to a drop in motivation whilst the poor attendance has increased workload. The manager decides to hold a 'clear the air' meeting with the team and they have an ideas session in which they try to identify the strengths, weaknesses, threats and opportunities facing the team. It is clear that the team would like to improve.

#### Solution

The manager suggests a weekly half hour meeting at which plans and work can be discussed and questions raised. A whiteboard is installed outside the meeting room so that items or problems can be written down by team members as they occur.

The new meetings are not an instant success as the team are dispirited and not motivated to participate as much as they could but the manager makes sure that useful information is provided and questions are always answered. Gradually team members become more forthcoming and the meetings become an integral part of the weekly routine. The manager notices an improvement in morale and attendance and a number of suggestions made by staff at the meetings are successfully implemented.

## 11. Appendix 2

## THE LEGAL CONTEXT

As a responsible employer the College must not only keep within the law but embrace good practice and has a duty of care to protect staff from risks to their health and safety. Some of these risks, such as working very long hours and not taking sufficient rest breaks for example are covered by legislation, e.g. the Working Time Regulations 1998 which limit weekly working hours, provide minimum periods of rest and a minimum level of paid leave.

**Below are some of the areas you need to be aware of in relation to your staff:**

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<b>Maternity</b>	<ul style="list-style-type: none"><li>▪ all pregnant employees, regardless of service, are entitled to reasonable, paid time-off for ante-natal and other pregnancy-related care</li><li>▪ keep absence records separate from sickness records – a woman attending regular ante-natal classes should not hit a ‘trigger point’ in the same way as someone with regular sickness absence</li><li>▪ ensure a health and safety risk assessment has been done for the pregnant employee</li></ul>
<b>Disability</b>	<ul style="list-style-type: none"><li>▪ if your employee is disabled or becomes disabled, you are legally required under the Disability Discrimination Act 1995 to make reasonable adjustments to enable the employee to continue working – for example, providing an ergonomic chair or a power-assisted piece of equipment</li><li>▪ make sure the individual is not disadvantaged because of their disability</li><li>▪ if absence is related to disability, record separately from other sickness absence</li></ul>
<b>Data protection</b>	<ul style="list-style-type: none"><li>▪ you must get your employee’s permission in writing in order to see their medical records</li><li>▪ the Access to Medical Reports Act 1988 gives an employee the right to see the medical practitioner’s report up to six months after it was supplied</li><li>▪ an employee can ask their GP to amend their medical report if they think it is incorrect or misleading</li></ul>
<b>Health and safety</b>	<ul style="list-style-type: none"><li>▪ health and safety law requires you to undertake risk assessments of your activities to prevent people being harmed</li><li>▪ review your risk assessments if your employees have suffered injury or ill health that makes them more vulnerable</li></ul>
<b>Discipline and dismissal</b>	<p>There are key principles for handling disciplinary and grievance situations (whether related to absence or anything else) in the workplace. These include:</p> <ul style="list-style-type: none"><li>▪ informing the employee of the problem</li><li>▪ holding a meeting to discuss the problem</li><li>▪ allowing the employee to be accompanied</li><li>▪ deciding on appropriate action</li><li>▪ providing employees with an opportunity to appeal</li></ul> <p>Always refer to the College Disciplinary Procedure and HR before taking action.</p>

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