

SICKNESS ABSENCE POLICY, PROCEDURES AND GUIDELINES

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1. INTRODUCTION

Aston University wishes to create and support a healthy and efficient working environment, not only through its obligations to comply with Health and Safety legislation but also through a caring and rehabilitative approach towards sickness absence management. Illness resulting in absence from work, not only has a significant effect on the member of staff, but also has a major impact on the operating capability of the University. It is envisaged that the Sickness Absence Policy, Procedures and Guidelines outlined below will assist members of staff to fulfill their potential and contribute to the achievement of the University's objectives.

This document should be read in conjunction with other relevant health and attendance-related policies, e.g. Performance Management Procedure, Disability Policy for Staff and the Policy for the Prevention and Management of Work Related Stress, etc.

2. POLICY

The University places a high value on the health of all staff and encourages health improvement initiatives, through occupational health advice and intervention.

The University is committed to:

- encouraging, guiding and supporting members of staff to help them achieve and maintain good health and high attendance standards
- dealing with issues of attendance in a timely, fair and effective manner
- ensuring that there are clear communications between management and members of staff concerning the application of these procedures

The University seeks to ensure that appropriate arrangements are in place to minimise the likelihood of sickness absence occurring, limit the consequences for staff and the University's activities when sickness absence does occur, and support staff through periods of ill health with the aim of securing their return to work.

Executive Deans, Heads of Departments and managers have a central role in the effective management of sickness absence and its impact upon work performance and service levels. It is important that all managers, supported by the University, acquire the skills and training needed to conduct relevant processes in a competent and caring manner.

In applying the sickness absence procedure, decisions will be made by managers on the basis of information obtained through interview findings, attendance data and medical advice.

The arrangements set out in this document relate to sickness absence affecting the ability of members of staff to carry out their duties, and should be distinguished from unauthorised absence which is an issue of conduct that may fall within the scope of the University's disciplinary procedures.

This policy applies to all members of staff and will be applied fairly and consistently.

3. GUIDING PRINCIPLES

The following principles govern this policy and procedures:

- **fairness** – actions should be reasonable, necessary, known and understood. Members of staff involved are entitled to be heard with courtesy and respect.

- **confidentiality** - information relating to sickness absence should not be divulged to a third party not involved in the process
- **equality** - The University will endeavour not to discriminate unfairly or illegally, directly or indirectly

4. ROLES, OBLIGATIONS AND RESPONSIBILITIES

4.1 Members of Staff

Members of staff who are unable to attend work due to sickness have a responsibility to fulfill certain obligations. These include:

- following the Sickness Reporting and Certification Procedures (see paragraph 7 below), to enable the manager/supervisor to reschedule the member of staff's work and manage the absence
- returning to work as soon as fit to do so
- meeting with the Manager if requested, either in the workplace or at a mutually acceptable location
- considering and applying (as appropriate) advice and support offered by Occupational Health
- attending for medical review with the University's Occupational Health Service if referred by Human Resources.

4.2 Managers

Managers of staff have responsibilities to fulfill in relation to absence due to ill health. These include:

- Ensuring that all staff are aware of reporting procedures in the event of sickness absence
- creating a working environment conducive to attendance, by effective management and by reviewing issues such as job design, workload, levels of staff motivation, work relationships, communication and the effective management of change
- being aware that impaired performance through sickness may create additional health and safety risks which should be considered when reviewing the duties that the individual is assigned to carry out
- being knowledgeable and aware of the University's sickness absence policy and procedures
- acquiring the necessary skills through training to enable the effective management of sickness absence and to conduct sickness absence meetings sensitively
- treating a member of staff's absence and attendance record fairly and consistently with that of other colleagues
- maintaining contact with members of staff on long term sickness absence at agreed times and (if appropriate) locations
- consulting with Occupational Health and Human Resources to facilitate the member of staff's return through consideration of the adoption of flexible working practices on a temporary or permanent basis as appropriate
- treating any information about a member of staff's illness in strict confidence discussing it only with appropriate others, i.e. Human Resources, Occupational Health, Safety and Environmental Protection Service. Discussion with anyone other than those referred to above should only be with the express permission of the member of staff.
- seeking to identify the causes of sickness absence where these are related to the workplace and, where appropriate, taking preventative measures to reduce

the likelihood of resultant further absences; advice may be sought from Occupational Health

- investigating cases where there is a suspected work-related cause for absence, identifying and implementing any reasonably practicable corrective action required, and consulting with Safety and Environmental Protection Services and Occupational Health as appropriate
- encouraging members of staff to participate in the support available from the Occupational Health and other support agencies, e.g. the Employee Counselling Service
- managing, as far as possible, the consequences of a member of staff's sickness absence to minimise the effects on performance, service levels and the workload of colleagues
- recording and reporting sickness absence promptly through the appropriate University recording and reporting procedures, collecting information about the level, causes and incidence of sickness absences in a format which aids University review and decision making
- conducting meetings with a member of staff in relation to sickness absence when supportive intervention becomes necessary
- investigating cases where it is felt that abuse of the sick pay arrangements has taken place and, in consultation with Human Resources, initiating the appropriate procedures to deal with the abuse.

4.3 Human Resources

The role of the Human Resources Department is to:

- advise and support managers and members of staff on the Sickness Absence Policy Procedures and Guidelines and their application
- advise and support managers in planning adjustments that are appropriate to assist a member of staff to remain at work or return to work following sickness absence
- advise members of staff and managers on ill health retirement or termination on the grounds of ill health where appropriate.

4.4 Occupational Health

The role of Occupational Health is to provide occupational health information and advice to managers and appropriate others, e.g. Human Resources Department, Safety and Environmental Protection Services, in support of the management of sickness absence, and to case manage members of staff who are absent due to sickness, with regard to:

- advising whether there is a medical condition affecting attendance or work performance
- advising on the potential impact of such a medical condition and on the member of staff's ability to perform their duties
- where appropriate, and with the consent of the member of staff, liaising with the GP/Clinician responsible for the medical care of the member of staff (under the Access to Medical Records Act 1988, the member of staff has the right to obtain access to the GP/Clinician's report before it is forwarded to Occupational Health)
- advising on a likely date for return to work
- what temporary or permanent adjustments to the job would enable a member of staff to function safely and effectively in spite of the health condition
- suggesting types of suitable alternative work if a member of staff will be unable to return to their own job

- providing advice on an appropriate process for rehabilitation back to work
- advising whether work has had an adverse effect on the health of members of staff and how this can be prevented from happening in the future

*It should be noted that the Occupational Health Service (MOHS) also provides health information, consultation and advice on a confidential basis to any member of staff who self-refers.

4.5 Safety and Environmental Protection Services

The role of the Safety and Environmental Protection Service is to investigate and monitor the causes of work-related absences to ensure that appropriate standards of occupational health and safety are in place and to assist the University in complying with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1985.

5. SICK PAY

The following entitlement to sick pay will apply to all staff*, providing that the sickness is reported and certificated as outlined below:

Up to 12 months service:	8 weeks full pay (inclusive of any Statutory Sick Pay (SSP)) followed by 8 weeks half pay (plus SSP except to the extent that the combined amounts exceed full pay)
Over 12 months' service:	26 weeks full pay (inclusive of any Statutory Sick Pay (SSP)) followed by 26 weeks half pay (plus SSP except to the extent that the combined amounts exceed full pay)

Academic staff as defined in the Statutes of the University who are employed in an academic post on 1 April 2011 will be entitled to receive paid sick leave at the rate of 26 weeks full pay, 26 weeks half pay for the first year of their employment.

5.1 Pension Contributions During Sickness Absence

5.1.1 USS Members

Where staff are members of the Universities Superannuation Scheme (USS), deductions will continue to be made as normal while sick pay is paid at the full rate. When sick pay reduces to half pay, the University will pay the employee's contribution in addition to the employer's contribution.

Once sick pay has been exhausted, USS members have the option either to continue to pay contributions (in which case the University will pay the employer's contribution) or to suspend their scheme membership.

Staff are advised to contact the Pensions Office when their sick pay is due to expire.

5.1.2 AUPS Members

Where staff are members of Aston University Pension Scheme (AUPS), deductions will continue to be made as normal while sick pay is paid at the full rate. Because contributions to AUPS are collected at a fixed rate determined at 1 April each year, deductions will remain at this level when sick pay reduces to half pay.

Once sick pay has been exhausted, no pension contributions will be made and AUPS membership will be suspended.

5.2 Statutory Sick Pay

Statutory Sick Pay (SSP) is money paid by employers to employees who are away from work because they are sick.

Employers need medical forms (either self certifications or doctor's certificates) in order to pay Statutory Sick Pay.

Staff who are not eligible for Statutory Sick Pay, will be sent form SSP1 to outline the reasons why. Form SSP1 should then be completed to claim Employment and Support Allowance.

Staff who disagree with the University about their entitlement to SSP can ask HM Revenue & Customs for a decision about their entitlement.

Staff who have:

- changed jobs within the last 8 weeks, and
- received at least one week's SSP from their old employer in the 8 weeks before this current spell of sickness (odd days of SSP may count), can count the SSP from their old employer towards their 28 weeks maximum SSP payment. This means they may be able to transfer to a higher rate of Employment and Support Allowance.

Staff should ask their former employer to fill in form SSP1 (L) *Leaver's statement of SSP*. The completed form should be sent to the Payroll Section at Aston University. It will help to ensure that SSP is paid correctly and that Employment and Support Allowance is transferred at the right time.

Further information about other help while sick is available in leaflet DHC1 JP, a *guide to disabled people, those with health conditions and carers*.

Staff on low incomes while sick may be able to get Income Support. Income Support is a Social Security benefit for people who do not have enough money to live on. More information about Income Support is available from the Jobcentre Plus office.

Leaflet DHC1JP is available from:

- any Jobcentre Plus office
- most advice centres like the Citizens Advice Bureau, or
- any Post Office (except in Northern Ireland).

Information about benefit entitlement while sick is available from www.direct.gov.uk or the Benefit Enquiry Line for people with disabilities. The phone call is free. The number is **0800 882 200** or in Northern Ireland **0800 220 674**.

Staff with problems hearing or speaking who need to use a textphone, should ring **0800 243 355** or in Northern Ireland **0800 243 787**. The phone call is free.

Textphone systems are available to use at the Citizens Advice Bureau and main libraries.

Working Tax Credit (WTC) helps people with an illness or disability to return to, or take up, work by topping up earnings. It is a tax credit for people on low to middle incomes who are working 16 hours or more a week and who have an illness or disability which puts them at a disadvantage in getting a job.

For further information on claiming WTC contact your nearest Jobcentre Plus office.

If you want to know more about SSP, contact your nearest HM Revenue & Customs office. You can find the phone number in The Phone Book under 'Inland Revenue' or 'HM Revenue & Customs'.

6. SICKNESS ABSENCE AND HOLIDAYS

Staff continue to accrue holiday as normal during paid periods of sickness absence. During any unpaid periods of sickness absence, holiday is accrued at the rate of 28 days per annum (inclusive of Public and University holidays).

Staff who fall sick during a period of annual leave or over a Public or University holiday, can claim back their annual leave or Public/University Holiday provided they can provide documentary evidence about the ill-health and its duration (normally a statement from a doctor or a hospital), regardless of the duration of the ill-health (i.e. from the first day of sickness). Where a charge is made for the provision of such documentary evidence, part or all of this may be reimbursed by the University, depending on the circumstances.

Where a member of staff is prevented from taking their annual leave by the end of a holiday year due to their sickness absence, or where holidays are accrued during sickness absence, or where they are claimed back where ill-health interrupted a period of annual leave, they must be taken within 12 months of returning to work.

When taken, accrued annual leave will be paid at the normal rate of pay; regardless of whether the member of staff is on full pay, half pay, statutory sick pay, or no pay at all.

Staff may take annual leave while absent due to ill-health if they wish. If staff wish to do this, they should notify their manager and HR Advisor which days they wish to be treated as annual leave. The HR Advisor will arrange to pay them normal holiday pay rather than occupational sick pay for the days that they nominate. If the member of staff qualifies for statutory sick pay, it will continue to be paid during their annual leave. SSP will be included in any holiday pay.

7. SICKNESS REPORTING AND CERTIFICATION PROCEDURES

When absent from work due to sickness or accident, members of staff should follow these reporting and certification procedures, which are required for entitlement to and payment of SSP and Occupational Sick Pay.

The following arrangements for reporting and certifying sickness absence and for making sickness payments apply to all staff at Aston University.

Staff must keep their immediate supervisor/manager (or other nominated person) fully informed in the event of absence from work due to ill-health. The minimum requirements are set out below. **It is important that staff comply with these procedures. If they do not, any allowances to which they are entitled may be delayed and it could ultimately result in loss of sick pay.**

7.1 First Day of Sickness Absence

Except where local arrangements have been made for staff who work at different times from their manager, staff should contact their manager as soon as possible after the time they would normally be expected to attend work. Staff who work afternoons or evenings, should phone in during the morning if possible.

Staff should let their manager know the reason for their absence and its likely duration. If the manager is not available, staff should leave a message with another manager in their work area.

Staff who have difficulty getting to a telephone must ask a friend/relative to ring on their behalf. If access to a telephone is likely to be a regular problem, staff should inform their manager as soon as they start employment with the University so that alternative arrangements can be made.

There are special arrangements for staff who fall sick during a period of annual leave. See 7.5 below.

7.2 Fourth Day of Sickness Absence

Where the period of absence was estimated at three working days or less, but staff remain unable to return to work, they should notify their manager of their continued ill-health not later than the fourth working day of absence.

7.3 Absences of Eight Days or More

Staff who are sick for more than one week should contact their manager again, if possible by telephone, to confirm that their absence is continuing. They should also visit their doctor immediately and obtain a medical certificate which should be submitted to their manager as soon as possible (see Paragraph 7.4 below).

An absence of one week means continuous absence from work over a period of seven consecutive days which may include both working and non-working days.

During a prolonged period of absence, staff should try to keep in touch with their workplace. Their manager may contact them from time to time to monitor their progress.

7.4 Certification of Sickness

Staff who have been continuously absent from work due to ill-health for one week or less, should, when they return to work, report to their manager and inform them of the reason for their absence and its duration. The manager will update the HR system (CORE) with this information.

Staff who have been absent due to ill-health for 8 days or more (including Saturdays and Sundays), must obtain a statement from a doctor or hospital on the eighth day and forward it to their manager as soon as possible. Further statements must be supplied, as necessary, to cover the full period of absence after the first 7 days.

Staff who fail to produce a doctor's statement for an absence of eight days or more, will be considered to be absent from duty without due cause and no payment will be made for any period not covered by doctor's statements after the initial statement on the eighth day.

Medical notes must be sent to managers within 14 days from the start of a period of sickness absence.

Staff who are uncertain what to do when absent through ill-health, should contact Human Resources for advice.

Refusal to return doctor's statements will result in disciplinary action.

7.5 Sickness Reporting While on Annual Leave

Where staff fall sick while on holiday, they must inform their manager as soon as practically possible in order for this time to be regarded as sick leave. This is particularly important where the ill-health may affect the return to work date. See paragraph 6 for certifying sickness absence while on annual leave.

8. GUIDELINES FOR MANAGING SICKNESS ABSENCE

Frequent short-term absences, or one or more long term absences, may be indicative of underlying health problems, and the University wishes to supportively address such problems in order to effectively manage occupational health issues and to minimise the organisational implications.

The number and frequency of episodes of absence, and the number of days lost are important factors in the need for action. In cases where absence recurs and/or certain trigger points have been reached (see 8.1 below), having regard to the reasons for the pattern of absences and departmental circumstances, the manager is responsible for the initiation of supportive intervention, or other actions.

If, having regard to the reasons for the pattern of absences and departmental circumstances, the manager believes that supportive intervention is not required at that stage, other than regular communication, no further action will be taken at that time, although the manager will keep the absence level under review.

If the manager believes that supportive intervention is necessary, the initial step in such cases will be to arrange a meeting with the member of staff as soon as possible. If the current absence is likely to be short term (i.e. less than four weeks) this meeting should take place on the member of staff's return to work.

In cases of long-term absence (four weeks or more), the member of staff may be requested to attend a meeting with his/her manager, at a mutually acceptable location, and/or attend a medical review with the Occupational Health. Where there have been frequent short-term absences, the member of staff may be asked to visit Occupational Health for advice and support and/or medical review. Where investigation of the circumstances of the sickness absences give no cause for concern at that stage, the manager may nevertheless continue to keep the absence level under review.

Where underlying problems are linked to non-medical issues, the manager will seek, where appropriate, to assist the member of staff by identifying, with the help of Human Resources, confidential and independent sources of professional help.

Where the manager has taken the decision to discuss sickness absence with a member of staff, outcomes of the review meetings may result in:

- no further action being taken at that stage, although absence levels may be kept under review

- referral to Occupational Health for advice and assistance
- a request for a report from Occupational Health following a medical review of the member of staff
- other alternative outcomes which may be more suitable dependent on the circumstances, e.g. where absences relate to work-based problems, domestic issues, personal issues, etc
- the application of the Performance Management Procedure in relation to Frequent Short-Term/Long Term Absence/Disability/Substance Dependency.

8.1 Trigger Points

Generally the following levels of short-term absence should trigger a review by a manager and Human Resources:

- Three or more periods of sickness absence in any 13 week period
- Five or more periods of sickness absence or ten or more days sickness absence in any 12 month period
- A recurrent pattern of sickness absence.

9. REHABILITATION AND PHASED RETURN TO WORK

The University wishes to create and support a healthy and efficient working environment, not only through its obligations to comply with Health and Safety legislation but also through a caring and rehabilitative approach towards sickness absence management. To this end the University seeks to be supportive and flexible in assisting staff if they need time away from work due to illness and in supporting their rehabilitation back to work.

To help people get the support they need to get back to work the fit note system means that doctors can advise that staff are either:

- unfit for work; or
- may be fit for work.

A doctor will give a 'may be fit for work' statement if they think that their patient's health condition may allow them to work if they get suitable support from the University. This statement means the doctor's assessment is that the patient's condition does not necessarily stop them from returning to work. For example, they could return to work but may not be able to complete all of their normal duties, or they could benefit from amended working hours, or a phased return to work.

If a member of staff receives a 'may be fit for work' statement, it should not automatically be assumed that the University will be able to accommodate the conditions. Before returning to work, the member of staff should contact their manager to discuss whether or not it is feasible to meet the requirements in the work situation. This may require a face to face meeting or a referral to Occupational Health. If it is not possible for the University to provide the support necessary for the member of staff to return to work, the 'Fit Note' will be treated as if the doctor had advised 'not fit for work'.

The member of staff does not need to return to their doctor for a new statement to confirm this.

9.1 Phased Return

The purpose of a phased return to work is to rehabilitate the member of staff to their full duties and gradually build back up to undertaking their normal working hours within an agreed timescale.

After a member of staff has been absent from work due to illness over a prolonged period of time, their GP and/or Occupational Health may recommend a phased return to work as part of a rehabilitation programme to allow the member of staff to re-adjust to full attendance/ performance at the workplace.

9.2 Rehabilitation

In terms of a rehabilitation programme the following process should be noted:

- Occupational Health will make the recommendation relative to the overall period of a phased return to work, which will be dependent on the individual circumstances of each case, but will not normally be effected over more than a four week period
- the member of staff will be advised by Occupational Health of a recommended phased return programme, subject to their manager's agreement relative to the general timescale, duties and working arrangements
- the manager and the member of staff will agree the general timescale, duties and working arrangements. Targets should be agreed for each week of the phased return period in relation to the weekly times of attendance and the weekly range of duties to be performed
- if restrictions on certain duties are to be placed on a returning member of staff, Occupational Health must review and reassess these restrictions within an agreed timescale
- any request by the member of staff, or recommended alteration by the manager, in respect of the general timescale, duties and working arrangements during the phased return will be subject to agreement between Occupational Health, the member of staff and the manager.
- the manager will be responsible for updating the member of staff on any changes which have taken place within the School/Department during their absence.

9.3 Timescales

The phased return to work programme will normally not exceed four weeks, bearing in mind the need for a degree of flexibility since the member of staff's progress might be difficult to predetermine. The programme will be time-limited and targets will be agreed. Should there be difficulties related to the phased return arrangements, Occupational Health should meet with the member of staff to review the situation.

The manager should review the member of staff's progress on a weekly basis and should they recognise that the member of staff is unlikely to be able to resume their normal working hours and duties before the four week period expires, further urgent advice should be sought from Occupational Health. This may result in a further time-limited extension of the phased return or a temporary contractual reduction in working hours, or agreeing the need for the member of staff to resume sick leave and to re-submit medical certificates. In some cases, consideration may be given to a permanent reduction in working hours or the possibility of redeployment. Where none of these measures are appropriate due to the nature of the illness, consideration may have to be given to invoking the Performance Management Procedure.

9.4 Support During Phased Return

In certain circumstances it may be appropriate to seek a volunteer to act as a "buddy" for a limited period of time as a useful way of providing support in the very

early stage of return, e.g. befriending, or accompanying at lunch times, to assist the member of staff in assimilating back into the workplace.

9.5 Medical Certificates

If the GP and Occupational Health have recommended that a phased return to work is appropriate, and the manager has agreed a rehabilitation programme, the member of staff should submit a final medical certificate from the GP. Further medical certificates will not be required relative to a phased return as the member of staff will no longer be on sick leave and sick pay will not apply. If an extension to the phased return to work is envisaged, further medical certificates will be required.

9.6 Payment During Phased Return

Based on agreed working hours and irrespective of the stage at which the phased return takes place, i.e. during full sick pay period, half pay period or no pay period, payment will be as follows:

- During the first four weeks of phased return payment will be at full pay. Any entitlement to SSP will continue during this period and will be included within the pay.
- In respect of any further agreed extension of phased return beyond four weeks', payment will be pro rata to hours worked, unless a short extension of the phased return to work is envisaged. In this case agreement to continue full pay will be subject to agreement between the manager and the Human Resources Department.

9.7 Sickness Recording During Phased Return

The sickness record for a member of staff on a phased return to work will show them as sick for SSP purposes, but not for occupational sick pay purposes. Managers should record staff as on a phased return in their sickness absence return.

9.8 Reviews During Phased Return

During the phased return period the manager will meet with the member of staff weekly, to assess progress and identify any problems. If problems are encountered there should be a discussion on how best to resolve them involving the manager, Occupational Health and the member of staff, with advice from Human Resources Department as appropriate.

