

# ***SICKNESS ABSENCE MANAGEMENT***

## ***POLICY & PROCEDURES***

*Issued – May 2003*

# **POLICY FOR MANAGING SICKNESS ABSENCE**

## 1. **Introduction:**

The Agency considers the contribution of its staff to be of paramount importance in delivering excellent services to all its customers. As staff are the major resource of the Agency, our Service Level Agreements and objectives could not be met without the full participation and contribution of all staff. The Agency recognises and accepts its responsibility to employees to ensure that the working environment is safe and that the conditions of employment are conducive to good health and well-being. It is inevitable that employees will, on occasions, be off work because of ill health and the Agency recognises that it has an obligation towards them.

A satisfactory level of employee attendance at work is crucial to the success of the Agency, bearing in mind that high absence rates reduce the resources available to provide excellent services to our customers. A non-satisfactory level of employee attendance reduces our available resources and can have a negative impact on how we deliver our services. It also places colleagues under undue pressure. It is the responsibility of each member of staff to be in attendance at work in order to fulfil his/her contract of employment. The Agency will act as a reasonable employer at all times in its dealing with employees who are absent due to ill health. The Agency will seek to ensure, through medical opinion, that staff have sufficient time to recover their health so that on return to work they are able to fulfil the requirements of their job and their contract of employment.

A significant feature of this policy is the explicit emphasis on 'Rehabilitative care'. Details are set out in Section 9 on Page 7.

Rehabilitative care is available to all employees. The CSA recognises that it has responsibilities to staff to accommodate, where possible, individual needs which will enable a staff member to return to work, as soon as is practicable, following illness or injury. Rehabilitative care provides managers and Human Resources officers with the opportunity to facilitate individual needs in a fair and equitable manner.

## 2. **Purpose of the Policy:**

The purpose of this policy is to assist managers and staff achieve and maintain an optimum level of attendance at work, to ensure that attendance is managed effectively and that the sickness scheme is not abused, whilst ensuring that members of staff with genuine illness are treated sensitively. This policy and its procedures communicate an approach which is designed to ensure consistency and fairness in application across the Agency as a whole. This comprehensive document clarifies roles and responsibilities of both managers and staff and highlights the potential penalties incurred by failure to follow the policy and implement the associated procedures.

This policy is for the sole purpose of managing non attendance due to ill health. Other forms of absence are covered under other policies such as Carer's Leave.

### 3. **Aims of the Policy:**

The aims of the policy are:

- To manage non attendance due to ill health.
- To ensure that all staff are treated fairly, consistently and with sensitivity during times of illness.
- To provide managers with a framework for managing attendance.
- To provide managers with guidelines on how to manage the different types of absence viz casual absence, short-term absence, frequent absence or long-term absence.
- To provide managers with guidelines on how to identify, at an early stage, absence patterns which may give cause for concern so that these can be investigated and managed appropriately and in a sensitive manner.
- To ensure that all employees are aware of their contractual obligations to adhere to the Agency's sickness absence management policy and to ensure that all staff are aware of the reporting requirements under the policy.
- To ensure that all staff are aware of their responsibility to maintain the required level of communication with their manager as outlined in the policy when they are absent due to sickness.
- To minimise disruption to the provision of service.
- To reduce the incidence of unnecessary sickness absence.
- To deal effectively with abuse of the sick pay system.
- To deal effectively with those staff and managers not adhering to the policy and associated procedures.
- To help to ensure the continued viability and success of the Agency and its staff by ensuring the provision of a cost-effective, high quality service to all the Agency's customers.

### 4. **Definition of Absence:**

Any member of staff who is unable to attend their place of work is absent unless they have prior permission not to attend. If absence is due to sickness or injury and the employee has not adhered to the procedure specified, they will be subject to Disciplinary Procedures.

### 5. **Types of Absence:**

#### (a) **Casual Absence:**

Casual absence is defined as absence of short duration lasting one to three days. (Casual absence may sometimes begin to develop into a pattern of absence unique to an individual employee.)

#### (b) **Short-term Absence:**

Short-term absence is defined as absences of short duration lasting four days to four weeks.

(c) Long-term Absence:

Long-term absence is defined as any certified sickness related absence of four weeks or more duration.

(These absences, always certified, will benefit greatly from efficient medical management of the underlying problems. Close co-operation between the Occupational Health Service, the employee, the line manager and senior managers is essential in the resolution of this type of absence. The Agency will make its best endeavours to rehabilitate staff on long-term sickness back to work but resolution may ultimately include termination of employment on grounds of incapacity.)

(d) Frequent Absence:

Frequent absence is defined as a number of absences over a short, medium or long-term period.

(Frequent casual absence must be identified at the earliest possible stage, ie when a pattern is emerging.)

6. **Roles and Responsibilities:**

(a) Managerial Responsibilities:

The control of absenteeism is a management function and one by which they will be measured. Each manager is responsible for the control of absence and for the sensitive, fair, and consistent treatment of staff who are ill. Each manager has the general responsibility to:

- Ensure confidentiality of information at all times.
- Ensure the sickness absence management policy is implemented in full.
- Ensure consistency in implementation of the policy.
- Monitor the attendance of all members of staff for whom they have responsibility.
- Maintain accurate records of absence.
- Ensure that all staff are aware of performance standards expected and that attendance is monitored.
- Treat members of staff who suffer ill-health sympathetically, fairly and consistently.
- Involve Human Resources and Occupational Health when necessary and supply adequate and appropriate information on the reason for any referral to Occupational Health, detailing the specific advice sought (refer to Appendix 1).
- Ensure as part of induction of new staff that the importance of this policy is emphasised and that all new appointees have the policy explained to them and their obligation identified.
- Ensure that the probationary period of each new member of staff is used appropriately, that attendance records are monitored and that appropriate action is taken as soon as any problems emerge.

- Ensure that this policy is implemented in its entirety, that each member of staff is aware of the policy and their responsibilities within the policy and that there is no abuse of the sick pay scheme, that all absences are monitored and that all necessary and appropriate action is carried out.
- Ensure that absence is never ignored.
- Ensure that absence reports and statistics are highlighted and that staff are kept informed of absence levels within the team, the section and the business unit/Directorate.
- Endeavour to find out the cause of absence but only in general terms.
- Ensure that on the first day of the employee's return to work a return to work interview is conducted with the appropriate documentation completed.
- Ensure that advice from Human Resources is sought in situations of uncertainty.
- Ensure that progress is monitored
- Keep staff who are absent informed of changes/events within Directorate/ Business Unit, including sending the CSA Job Trawl and EHSSB Job Bulletin to staff.

**FAILURE BY MANAGERS TO DISCHARGE THEIR RESPONSIBILITIES WILL RESULT IN DISCIPLINARY ACTION UNDER THE AGENCY'S DISCIPLINARY PROCEDURE**

(b) Role of Business Unit/Directorate Senior Management:

It is ultimately the responsibility of senior managers to monitor the attendance of staff within their sections/departments.

Senior managers are required to take an active role in ensuring that:

- Attendance is managed effectively and consistently.
- All staff adhere to the policy at all times.
- Statistics on attendance is a regular agenda item at staff meetings.
- Monthly reports on attendance are monitored, reviewed and appropriate action taken.
- All efforts are made to find out the reasons for non-attendance.

(c) Employee's Responsibilities:

Employees are expected to demonstrate their commitment to the Agency and to discharge the obligations of their contract of employment by regular attendance at work and efficient completion of all tasks allocated by management. Employees should only be absent from work when it is essential and permission has been given. Employees have a responsibility not to abuse any procedures covering attendance at work. Employees are expected to:

- Report absence to line managers in accordance with the procedure and notification requirements as outlined in the last paragraph of Section 1, Page 9 and Section 2, Page 9 & 10.
- Participate in 'contact meetings' when on long-term sick as per Section 10, Page 14.

- Attend the Occupational Health Service as requested.
- Comply with all requests from Occupational Health which will facilitate a return to work.
- Refrain from any activity, domestic, social or sporting, which may be prejudicial to recovery or likely to bring into question the reason for continued absence.
- Advise their line manager if they intend to take holiday as part of the recuperative process when this is part of medical advice.
- Ensure that they have read and fully understand this policy for managing sickness absence.
- Actively participate in contact meetings (See Section 10, Page 14).
- Ensure that compliance with the certification requirements in terms of both self- and medical certificates as necessary and on time is exercised and ensure that the whole period of absence is covered.
- On return to work, attend and participate in a return to work interview with the line manager and/or senior manager.

**FAILURE BY EMPLOYEES TO DISCHARGE THEIR RESPONSIBILITIES WILL RESULT IN DISCIPLINARY ACTION UNDER THE AGENCY'S DISCIPLINARY PROCEDURE**

(d) Role of Human Resources Directorate:

The Agency's Human Resources specialists have a responsibility to:

- Support line management.
- Help with the interpretation of the procedure to ensure a consistent application across the Agency.
- Provide absenteeism statistics to managers.
- Facilitate and process Occupational Health Service referrals.
- Monitor the implementation of the policy.
- Provide appropriate training to increase knowledge and understanding of the sickness absence management policy.
- Review the policy and procedures and update these as and when necessary.
- Facilitate Contact Meetings.

(e) Occupational Health Service:

The Agency has engaged an Occupational Health Service to assist staff and managers with professional work-related health advice. The Occupational Health Service will:

- Give advice to employees, managers and the Agency on issues relating to health at work.
- Assess the likely return to work date for an individual employee.
- Advise line managers if any reasonable adjustments are required to facilitate a return to work for an employee.
- Identify if counselling or any other specialist services are required to facilitate the return to work of an individual employee.

- Advise whether or not an employee is able to return to work to carry out the duties under their contract of employment.
- Provide letters of support, as appropriate.
- Provide reports to Superannuation Branch in respect of ill-health retirement applications.
- Provide advice to the employee and help the employee to understand his/her illness and how to minimise its impact on their ability to work.

## 7. **Conduct During Sickness Absence:**

The purpose of paid and unpaid sickness absence is to facilitate employees' full and proper recovery from an illness or injury. This includes activities which are part of an agreed programme of rehabilitation. If staff are found to be using the scheme for purposes other than recovery, the Agency will regard this as misconduct and disciplinary action may be invoked.

Activities which would normally be considered by the Agency to be inconsistent with genuine sickness or injury or contravene this policy include:

- Participation in any sport, hobby, social or other activity which could aggravate the illness or injury or which could delay recovery.
- Undertaking any other employment during sickness absence whether paid or unpaid which is in any way inconsistent with the nature of your illness or injury.
- Engaging in any other activity which is inconsistent with the nature of your illness or injury.
- Altering or causing to have altered any of the details on your medical certificate, eg date, signature, reason for absence etc.
- Giving the Agency inaccurate or misleading information about your absence.

## 8. **Return to Work After Long-Term Absence:**

Often, on the advice of the Occupational Health Service, the Agency is required to make reasonable adjustments to facilitate the return to work of an individual member of staff. These reasonable adjustments can range from:

- Reduced hours
- Temporary redeployment to another section.
- Phased return to work
- Rehabilitative Care
- Homeworking (if feasible).

The Agency will discuss reasonable adjustments, on an individual basis, with all employees who have been on long-term sick leave.

## 9. **Rehabilitative Care**

A number of approaches to rehabilitative care are possible and their adoption reflects CSA's commitment to rehabilitative care and support:-

**Phased Return to Work** – Easing back into work, following medical advice, with reduced weekly hours. This can be facilitated in most cases by the use of an employee's accrued annual leave. If this provides insufficient time, the Line Manager and member of staff can discuss further options with Human Resources.

**Work-Life Balance** – CSA is committed to getting the right balance between work and life outside work and can discuss, on an individual basis, alternatives to the standard working week including the following:

- Adjusting existing working patterns
- Job-sharing
- Part-time working
- Reduced hours commitment
- Term-time working
- Change of Duties/Transfer

It may be possible to offer staff a temporary change of duties either within their existing section/business unit or by transfer to another section/business unit. This will be considered when, following medical advice, the staff member, while able to return to work, is not yet ready to carry out all the duties associated with their job description/grade.

**Career Break** – A complete break from work, unpaid, for one year.

**Flexible Working** – CSA operates a flexi scheme which enables employees to vary their start and finish times and the length of their lunch breaks.

10. **Managing Discrepancy Between GP and Occupational Health Service Information:**

If there is a discrepancy between the GP Certificate and the Occupational Health Service Report, the Agency will appoint an independent consultant who will examine the employee and provide the Agency with a medical report and recommendations. This report will be considered final and the Agency will use it to plan appropriate action.

The employee is expected to attend any appointment arranged by the Agency as part of this procedure. Failure to attend will result in the Agency accepting the assessment of the Occupational Health Service as the only medical assessment upon which it will determine future action.

10. **Confidentiality:**

Managers should note that they have an obligation to maintain confidentiality at all times. Any breach of confidentiality may be regarded as a disciplinary offence.

11. **Review of Policy and Procedure:**

The operation and effectiveness of this policy and procedures will be reviewed within eighteen months of its date of implementation.

May 2003

# **PROCEDURES FOR MANAGING SICKNESS ABSENCE**

## 1. **Procedures for Managing Attendance:**

If you are unfit for work due to ill-health you must notify your manager of your intended absence at the earliest opportunity. This manager must be at least Grade 4 level. In the absence of your manager, you must notify either the alternative nominated officer or another manager more senior than yourself. Notification should be via a telephone call and certainly no later than 10.00 am on the first morning of the first day of your absence. If you do not contact your manager on the first day of absence, this will be taken as unauthorised absence.

If you are at work and become ill during your time at work, you must report to a manager, who must be at least Grade 4 level, who will discuss with you the most appropriate course of action. Under no circumstances must you leave your place of work without consulting with a manager. Failure to comply with this procedure will result in classification as absent without consent.

Employees must ensure line managers are informed about inability to attend work as early as possible on the first day of absence and certainly no later than the specified deadline for notification of absence. You must provide information on the general nature of your illness, and, if possible, some indication of the expected duration of this illness. Your manager needs to obtain this information so that arrangements may, if necessary, be made to cover your work.

If you continue to be absent beyond the initial period of time indicated to your line manager, you are expected to advise of the new anticipated date to return to work. Again, this is necessary so that the line manager can continue to organise the work necessary to be completed during your absence.

## 2. **Documentation and Certificates Required:**

If you are absent for four days or more, you are required to complete a self certificate. Upon your return, a return to work interview will be held. A return to work form (Appendix 3) will be signed by you and your line manager on completion of the interview and then held on your personal file in the Human Resources Directorate.

### (a) Absences Longer than Seven Days:

If your absence is longer than seven days, you must submit a doctor's certificate. Further medical certificates required when the sickness continues and must be supplied **within two days of expiration of previous certificates**. Failure to submit timely and regular certificates may result in action being taken under the disciplinary procedure.

Situations where employees are found to be acting in a manner incompatible with their declared recent absence, as stated on the GP's medical certificate, will be treated as gross misconduct and the disciplinary procedure will be followed. Where this behaviour is found to have been fraudulent, this may result in civil and or criminal prosecution.

The Agency reserves the right, in the most exceptional circumstances, where it is indicated to management and evidence-based that an employee is either working or behaving in a manner which is incompatible with the reason for their absence and, subject to Chief Executive approval, to have the individual investigated by using a private firm of investigators, or other appropriate means. If an employee is found, as a result of the investigation, to be abusing the sick pay scheme, the Agency will bring the individual to a disciplinary hearing and their behaviour may result in the termination of their contract with the Agency.

3. **Medical Referral to Occupational Health Service:**

You may be required to attend Occupational Health Service at any time. This is a contractual requirement and you must attend. If you fail to attend Occupational Health Service you may be subject to disciplinary procedures. You must contact either your line manager or the Human Resources Directorate if you cannot attend. Referral to Occupational Health Service will be accompanied by a form, attached as Appendix 1, which will be completed by the line manager and the Human Resources Directorate. The purpose of this form is to provide Occupational Health Service staff with appropriate background information as to why the individual employee is being referred in the first place and the purpose of the referral and what information both the line manager and Human Resources Directorate need to facilitate the individual's return to work. As an employee, you are entitled to a copy of this referral document and it will be sent to you at your home address by Human Resources prior to the Occupational Health appointment.

4. **Stress-Related Absence:**

If an employee is absent due to stress-related illness, anxiety or depression, as determined on the GP certificate, it is essential that immediate action is taken. The appropriate action on receipt of such a certificate is for the line manager to notify Human Resources Directorate who will make an appointment with Occupational Health Service. The line manager must then complete the Occupational Health Service referral documentation and process immediately to Human Resources Directorate. Adequate and proper support for reasons of absence due to stress, anxiety or depression cannot be adequately and appropriately managed without medical opinion and advice.

5. **Bradford Scoring System (BSS):**

The BSS is a method of monitoring absenteeism which identifies those staff who have a recurring absenteeism record. It weights the score in such a way as to identify those with a number of short spells of absence which require management attention.

Using the BSS ensures that there is consistency in management's approach to initiating:

- (a) Formal return to work interviews (72 points in any 52 week period);
- (b) Referral to Occupational Health (160 points in any 52 week period).

The Bradford score formula can be found at Appendix 2.

6. **Return to Work:**

It is the employee's responsibility to notify you of their intention to return to work. This should be done at the earliest opportunity. Return to work medical referrals can be carried out by the Occupational Health Service at the request of their supervisor/line manager.

A return to work medical is appropriate where:

- (a) The employee has a recurring condition that is interfering with attendance at work;
- (b) There is concern about an employee's capability to do their job;
- (c) Where the manager and/or employee requires advice about the suitability of working arrangements;
- (d) Where there is concern that work may be a causative factor in illness;
- (e) Where the employee's absence results in a Bradford score of 160, within a 52 week period.

The decision to refer staff to Occupational Health rests with line management in accordance with the rules set out in this document, although the Human Resources Directorate should be informed and consulted to ensure that the correct procedure is followed.

7. **Return To Work Interviews (Informal):**

Following each absence from work, due to sickness, the employee must be interviewed by the supervisor/line manager. This is an essential part of the procedure. These interviews should be conducted fairly and consistently and follow a basic 4 part structure. Arrangements must be made in each Directorate for appropriate accommodation to be available for these interviews. The documentation is attached as Appendix 3.

The interview should be conducted in the following manner:

- (a) **Enquire about their general health.** You need to be sure that staff are fit for work and it is your duty to be sure that the Occupational Health Service/General Practitioner (if appropriate) has confirmed that the person is fit for work on that date. If a medical referral has not been made, you may need to make a layperson's assessment as to whether the person is fit for work.

When a staff member returns to work from a period of non attendance, you should gently explore the reason for absence. In most cases, you will not challenge the reasons given for the absence but it is important that you explore and probe the situation.

You need to satisfy yourself:

1. that the employee is fit to resume duties;
2. whether the absence is work related;
3. what preventative measure they have taken to ensure that it does not occur again;
4. what arrangements may be needed to facilitate return. Please refer to Section 8, Page 7.

It is important that you demonstrate care and concern during this stage of the interview. This is best demonstrated by active listening. Listen carefully and fully to what the staff member has to say and respond appropriately.

**The information you obtain must be treated with absolute confidentiality.**

- (a) **Consequences and observations.** You should explain that every member of staff has a responsibility to come to work when required. We can only maintain the appropriate level of service if the workforce attends fully.

You should remind staff of the necessity for full attendance wherever possible and you should point out actions that you or other colleagues have had to take as a result of their non-attendance.

Using the sickness absence records, available from the Salaries Department, you should bring to the staff member's attention, the facts regarding their attendance during the previous 12 months. This might include observations as to the number of days being taken off.

It is appropriate to make observations if non-attendance seems to form a pattern. If appropriate, it should be pointed out that the Agency takes non-attendance seriously and that it could lead to action being taken under the disciplinary or incapability procedures. You should use this opportunity to explore ways in which you can help a staff member to attend as required by the Agency and discuss what they can do to better manage their own attendance.

If the non-attendance is due to reasons not associated with medical conditions, other options should be explored.

The employee should be reminded that sickness absence should not be used to deal with other circumstances.

- (b) **Completion of formalities.** It is only after this discussion has taken place that you are in a position to complete the certification with the member of staff and ask them to counter sign it. You will be signing to confirm completion. This interview should not be conducted in a manner which consists of simply completing a check list.
- (c) **Future action.** Before terminating the interview, you should make it clear, once again, to the staff member that the Agency expects full attendance. You should also point out what will happen to the staff member if they fail to attend in the future.

You should confirm that the employee understands what you have said, what is required of them in the future and what action the Agency may take next time they fail to attend for work.

These interviews are essentially informal in nature but if a problem exists in regard to attendance then the procedure can be escalated.

If the employee's attendance record hits the trigger levels as set out in the Bradford Index, the type of return to work interview will change.

In such cases, where the trigger points are met and non attendance becomes persistent, or gives cause for concern, the interviews should become more formal and should include your senior manager and a Trade Union representative as appropriate.

The outcome of formal and informal interviews are also quite different. The formal interview could lead to the initiation of disciplinary or incapacity procedures and it may lead to the termination of employment due to non-attendance, inability to carry out the duties or ill health retirement.

#### 8. **Formal Interviews:**

The first formal interview will occur after the employee returns to work having hit the trigger points highlighted above. The conduct of the interview will follow on the same lines as an informal interview. However, you should ensure that the procedure is understood and that you have completed all the necessary formalities.

The formal interview is attended by up to four people:

- (a) Relevant Senior Manager;
- (b) Supervisor/Line Manager;
- (c) Employee;
- (d) Employee's Trade Union Representative or Work Colleague.

The interview will follow the same process but the options for the future will now include (depending on circumstances) action to be taken on a disciplinary or incapability procedure or application for ill health retirement. The employee should be told under what circumstances they will be seen again under this procedure.

A copy of the record should be given to the employee.

#### 9. **Successive Interviews:**

If there is no improvement in the attendance of the employee, a second formal interview should be held and attended by:

- (a) Relevant Senior Manager;
- (b) Supervisor/Line Manager;
- (c) Employee;

(d) Employee's Trade Union Representative or Work Colleague.

At that meeting, it should be made clear that:

1. All future episodes of sickness will require a medical statement from a General Practitioner;
2. Disciplinary or Incapability Procedures may be initiated;
3. There may be a referral to Occupational Health to identify if there is any underlying medical reason for non attendance, as a result of a formal return to work interview.

If there is ongoing non attendance without underlying medical reasons, then the matter will be escalated into the disciplinary procedure, normally on the grounds of the abuse of the sick pay scheme.

If there is ongoing non attendance and there is an underlying medical condition which is unlikely to be cured or relieved, then the incapacity procedure will be initiated.

10. **Maintaining Contact During Long-Term Absence:**

During long-term absence, it may be necessary and/or appropriate to make contact with individuals. The necessity of these meetings will be informed by Occupational Health. The meeting can either be at the employee's home, somewhere in the Agency or at an agreed location. These meetings must be notified in advance and agreed with the employee.

In view of the purpose of the meeting, the manager must be suitably empowered to facilitate these arrangements.

The meeting will be carried out by either an Occupational Health Nurse, Occupational Health and an appropriate manager suitably empowered or Occupational Health in conjunction with Human Resources.

*This policy has been screened for equality implications as required by Section 75 and Schedule 9 and of the Northern Ireland Act 1998. Equality Commission guidance states that the purpose of screening is to identify those policies which are likely to have a significant impact on equality of opportunity so that the greatest resources can be devoted to these.*

*Using the Equality Commission's screening criteria, no significant equality implications have been identified. The policy will therefore not be subject to equality impact assessment.*

CENTRAL SERVICES AGENCY

OCCUPATIONAL HEALTH SERVICE REFERRAL FORM (OHS)

(Information contained on this form will be copied to the referred employee by the Human Resources Directorate)

**General Notes:**

All absenteeism must be addressed through discussion between manager and employee prior to referral to OHS.

Managers must ensure that employees are advised that a referral to OHS is being made and the reasons for it. A referral should be made once the Bradford Score has reached 160 points or the employee has been off work for four weeks or he/she is suffering from depression/anxiety or stress, or as a result of a formal return to work interview.

Please ensure that this form, (including the employee's personal details) is completed in full.

**Referring Manager**

**Name:** \_\_\_\_\_

**Grade/Job Title:** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Tel No.:** \_\_\_\_\_

**Employee's Personal Details:**

Name:	
Grade:	
Location:	

<b><u>To be completed by Human Resources Directorate</u></b>	
Home Address:	
Telephone Number:	
Date of Birth:	

Is the employee currently on sick leave?

YES

NO

If yes, what is expiry date of sick cert.?

Details of Most Recent Absence:

Dates of Absence:

From	To

Reason for Absence:

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Comments about Previous Absences (if any):

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Has the employee reported any work related problems in relation to the present or previous absences?	YES	NO
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If yes, give details:

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Description of Principal Duties of Employee's Post:  
(It may be easier to attach an up-to-date job description)

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Reason/s for Referral:

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Have you discussed the contents of referral with your Employee?	YES	NO
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If No, explain reasons:

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Has the employee's performance been affected by their illness?	YES	NO
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If yes, please state in what way/s their performance has been affected:

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Please detail what action you, as manager, have taken to date, to assist in the resolution of this matter:

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Please tick questions which are relevant to this specific referral and which you need answered

**General Questions:**

Is the individual fully fit for work?	
When are they likely to return?	
What is the likelihood of recurrence of the problem?	

**Questions Appropriate to Casual Absence:**

Will s/he be able to provide a reliable service in the future?	
Have absences been caused by an underlying medical condition?	

**Questions Appropriate to Long-term Absence:**

Will they have any short or long-term limitation on their ability to work?	
Is there anything which can be done to speed up their return?	
Will they ever be able to return to their particular job?	
Could they come back to another job, and if so, what type?	
Is any sort of adaptation or change to working methods needed?	
Would a contact meeting be helpful to the employee?	

I have spoken to this employee and the reasons for referral are known.

Signed: \_\_\_\_\_  
Manager

Date: \_\_\_\_\_

**To be completed by Human Resources Directorate**

Appointment Date:

Doctor's Name:

Time of Appointment:

Sickness Record to OH:

**THE BRADFORD SCORING SYSTEM**

The Bradford Formula is used to assist in the management of attendance but moderates relevant attendance statistics to take account of the number of spells of absence and the number of days absent in a relevant time period.

The formula is as follows:-

$$(S \times S \times D)$$

Where S = number of spells of absence in last 52 weeks

D = number of days of absence in the last 52 weeks.

**Examples**

1. An employee has 4 episodes each of three days in the last 52 weeks.

$$S \times S \times D = \text{Bradford Score}$$

$$S = 4, D = 12$$

$$4 \times 4 \times 12 = 192$$

2. An employee has 1 episode of 24 days.

$$S \times S \times D = \text{Bradford Score}$$

$$S = 1, D = 24$$

$$1 \times 1 \times 24 = 24$$

It will be seen, therefore, that those with more frequent absences will achieve higher scores and, therefore, receive more attention under this policy.



CENTRAL SERVICES AGENCY

ATTENDANCE MANAGEMENT POLICY

RECORD OF FORMAL INTERVIEW

**In Attendance:**

1. Employee: \_\_\_\_\_

2. Senior Manager: \_\_\_\_\_

3. Supervisor / Line Manager \_\_\_\_\_

4. Trade Union Representative: \_\_\_\_\_

Reasons for meeting \_\_\_\_\_

Absence Record shown to employee: \_\_\_\_\_

It is accepted by the employee that previous meetings have been held and have the outcomes of those meetings been adhered to \_\_\_\_\_

Explanations provided by employee for absence: \_\_\_\_\_

**Future Action:** (eg referral to Occupational Health, change in working arrangements, Disciplinary action)

Disability Discrimination Legislation

Do the reasons for absence require any reasonable adjustments under the Disability Discrimination Legislation?

Signed: 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

## HELPING YOUR PATIENT RETURN TO WORK AFTER ILLNESS OR INJURY

This information has been developed for General Practitioners who provide healthcare for Central Services Agency employees about the range of support available to staff to help him/her return to work following illness or injury.

The Central Services Agency is keen to provide appropriate assistance to staff who are absent through illness or injury in order to facilitate a return to work by offering a range of options as listed in this leaflet.

CSA recognises that it has responsibilities to staff to accommodate, where possible, individual needs which will enable a staff member to return to work, as soon as is practicable, following illness or injury. We recognise that staff members also have responsibilities to co-operate with line managers and Human Resources in making such arrangements.

The range of options are as follows and represent an approach which reflects CSA's commitment to rehabilitative care and support:-

**Phased Return to Work** – Easing back into work, following medical advice, with reduced weekly hours. This can be facilitated in most cases by the use of the employee's annual leave which has accrued.

**Work-Life Balance** – CSA is committed to getting the right balance between work and life outside work and can discuss, on an individual basis, alternatives to the standard working week by:

- Adjusting existing working patterns
- Job-share
- Part-time
- Reduced hours
- Term-time
- Change of Duties/Transfer

It may be possible to offer staff a temporary change of duties either within their existing section/business unit or to transfer to another section/business unit. This will be considered when, following medical advice, the staff member, while able to return to work, is not yet ready to carry out all the duties associated with their job description/grade.

**Maternity Leave** – 26 weeks paid maternity leave and a maximum of 26 weeks unpaid leave with effect from 6 April 2003.

**Career Break** – A complete break from work, unpaid, for one year .

**Flexible Working** – CSA operates a flexi scheme which enables employees to vary their start and finish times and the length of their lunch breaks.

**Occupational Health** – This service offers a range of support services to staff including:

- Counselling
- Individual advice
- Individual assistance
- Referral to Specialist

**Staff can self-refer which ensures complete confidentiality.**

If you require any further details please contact:

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