

Your Attendance Matters Policy

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Lincolnshire Community Health Services NHS Trust

Your Attendance Matters Policy and Procedure

Version Control Sheet

Version	Section / Para / Appendix	Version / Description of Amendments	Date	Author / Amended by
1	New policy		July 2013	Rachel Madge
2	Full Policy Review		June 2015	Karla Richards
3	Full Policy Review		June 2017	Clare Nock
4	Minor Amendments	Removal of annual leave entitlement adjustments following long term absence. Addition of Disability leave (previously in Special Leave policy)	April 2018	Clare Nock
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Lincolnshire Community Health Services NHS Trust
Your Attendance Matters Policy

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Lincolnshire Community Health Services NHS Trust

Your Attendance Matters Policy Statement

Background	This policy is written to promote the health and well-being and attendance of all employees and to ensure that every member of staff is aware of their responsibilities in relation to periods of absence and the sickness absence attendance standards which are expected of them.
Statement	The organisation is committed to the promotion of the welfare of employees, through its policies and arrangements for joint consultation including Health and Safety, Occupational Health, Wellbeing initiatives and Management of Stress at Work Policy.
Responsibilities	For a breakdown of manager, employee, HR and Staff Side/Trade Union representative responsibilities, please see Appendix 1 of this policy.
Training	Health and well-being champions are available within the organisation to support colleagues. Team resilience training can be arranged through Occupational Health. Workshops are also available for managers on the Your Attendance Matters policy.
Dissemination	Website
Resource implication	Occupational Health referrals and information on take-up of ill health retirement by Equality and Diversity strand will be regularly monitored. Consultation needs to take place with disabled staff or staff with long-term health conditions and with the groups and organisations which support disabled people. Campaigns to support disabled staff to disclose and to make sure reasonable adjustments are made where necessary. Training to raise awareness of disability rights and reduce preconceived ideas about disability and its effect on the workplace. Protocols to ensure that managers' record disabled staff on electronic staff records where this is
Equality & Diversity	This policy aims to meet the requirements of the Equality Act 2010 and ensure that no employee receives less favourable treatment on the grounds of gender, sexual orientation, transgender, civil partnership/marital status, appearance, race, nationality, ethnic or national origins, religion/belief or no religion/belief, disability, age, carer, pregnancy or maternity, social status or trade union membership.

Your Attendance Matters Policy

1.0 Introduction

The Trust recognises that the success of our services is dependent upon the positive wellbeing and attendance of our employees.

This policy encourages managers and employees to clearly identify and understand the causes of non-attendance and in particular that of sickness absence to initiate timely, appropriate and responsive interventions which can support and facilitate return to work at the earliest opportunity.

Although every case will need to be handled according to the individual circumstances, this policy has been developed to provide a consistent, fair and clear approach.

To proactively support employees the Trust has in place a Health and Wellbeing Programme with regular initiatives, a Physio for You service and Occupational Health Service, both of which are accessible through self-referral.

This policy is a statement of the Trust's approach to managing attendance and is supported by guidance which provides further detail regarding the procedures.

2.0 Roles & Responsibilities

Employees must take personal responsibility to attend work in accordance with their contract of employment in order to fulfil their contractual hours. The Trust does recognise however that from time to time individuals may fall unwell.

Employees should take every reasonable step and be proactive in obtaining the medical care they need in order to enable their return to fitness and work as soon as possible. Employees who are not attending work due to ill health should remain contactable and available to attend meetings with management.

The prime responsibility for managing health and attendance is that of the line manager, leading on any action, support and interventions required under this policy.

For a full list of responsibilities please refer to *Appendix 1*

3.0 Reporting of Absence due to ill health

When unable to attend work due to ill health an employee must notify their manager (or agreed point of contact) by phone as early as possible prior to the start of their shift. It is important to also report the last day of sickness even if not required on duty [Notification of ill health via email, text message or leaving messages with colleagues is not acceptable].

Contact should be maintained between an employee and their manager on a regular basis as agreed on the first day of non-attendance.

If an individual becomes ill and leaves work in the first half of their shift this will be recorded on their attendance record as a full day's sickness. If an employee goes home more than halfway through their shift it is not recorded as sickness absence.

4.0 Medical Certification

For the first 7 calendar days of sickness absence an employee is able to self-certify.

An employee must provide a Medical Certificate covering the 8th day of sickness absence onwards. Should the illness continue, further medical certificates should be provided on or before the expiry date of the previous medical certificate. Employees should retain the original Medical certificate and managers are required to forward a copy of this to Workforce Services.

Whilst certified sick an employee must not return to work prior to their fit note expiring unless their GP signs them back to work.

Medical certificates originating from EEC countries are acceptable. The organisation has the discretion to disregard certificates that originate outside the EEC. Non-EEC certificates will not be eligible for SSP, but Occupational Sick Pay may apply.

Where there is a question regarding the validity of any certificate this will be investigated by the Local Counter Fraud specialist prior to being accepted.

5.0 Occupational Health Services

Employees can self-refer to Occupational Health and can access counselling services through self-referral. An employee's manager may also make a referral, particularly in circumstances where an individual is likely to be absent due to ill health for 14 days or more.

With the consent of the employee, Occupational Health investigations may include enquiries to the employee's General Practitioner or Consultant and/or examination of the employee by a Medical Practitioner nominated by the organisation. It is a condition of employment that an employee will undergo at any reasonable time a medical examination.

Where there is a conflict of opinion between an employee's GP and Occupational Health advice on the impact and management of an individual's health, this will be referred to an appropriate third party specialist for independent assessment.

6.0 Return to Work

On return to work from any duration of sickness absence employees must have a Return to Work discussion within 3 days of their return. This can be done face to face or over the phone.

The return to work enables the manager to fully understand the reasons for the sickness absence and where appropriate identify and implement any support and/or reasonable adjustments to support the employee's return to work and assist in sustaining their attendance moving forward.

As part of the return to work the manager will also review the employees' attendance record over the past 12 rolling months.

7.0 Attendance Triggers

If the employee has reached one of the Trust's attendance trigger points detailed below this will initiate an Attendance Improvement Target being discussed as an extension to the Return to Work Interview:

- 3 episodes of sickness absence during the previous 12 month rolling period
- 8 calendar days of sickness absence during the previous 12 month rolling period
- Any indication of a particular pattern of absence occurring, which causes concern

8.0 Attendance Improvement Target

As a guideline it is suggested that manager's issue the below attendance improvement target for a period of 6 months:

The employee is not to reach 2 episodes or 3 calendar days of absence during the 6 month review period.

If during the 6 month review period the employee fails to achieve their Attendance Improvement Target there will be the requirement for a Stage 2 Formal Attendance Management Meeting. If attendance has improved to a satisfactory standard at the end of the 6 month review period, no further action will be needed.

9.0 Manager's discretion on trigger points / attendance improvement targets

When reviewing absences against the trigger points it may be necessary in exceptional circumstances for managers to use their discretion on what the trigger points are. This particularly applies when an employee has an underlying medical condition that is covered under the Equality Act 2010 and this should be supported with advice from Occupational Health & Workforce. Any extensions/amendments to the trigger points as a reasonable adjustment resulting from OH advice should be regularly reviewed.

10.0 Formal Attendance Meetings (Stages 2-4)

Where non-attendance remains at an unacceptable level and an attendance improvement target is exceeded, an employee will be invited to a formal attendance management meeting. Stages 2-4 in the absence management process will apply.

A formal meeting can result in a formal attendance warning being issued when it is considered an employee's attendance remains at an unsatisfactory level following the issuing of an attendance improvement target.

Formal Stage	Possible Outcomes	Attendance Warning Duration
Stage 2 - Formal Meeting	No formal action Stage 2 Warning Issued	12 months
Stage 3 - Formal Meeting	No formal action Stage 3 Warning Issued	12 months

Stage 4 - Formal Meeting	No formal action Termination of contract on the grounds of ill health	N/A
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Please note further attendance improvement targets should be set on receipt of any of the above formal warnings with a continued monitoring of attendance for the duration of the warning.

11.0 General Principles at Formal Meetings;

Notice of Meeting - the employee will be given 5 working days written notice of the meeting.

Details of Sickness Absence - the employee will be provided a breakdown of the dates and reasons for their non-attendance and any documents of relevance to be discussed during the formal meeting (e.g. OH reports, RTW records)

Right to Representation - the employee will be notified of their right to be accompanied by a trade union, professional organisation representative or fellow employee.

Decision in Writing & Right of Appeal - Confirmation of any decision made at a formal meeting, the reasons for it, and of the right of appeal in the case where formal sanctions are issued will be given to the employee in writing following the meeting.

Attendance at Meetings - the employee must take all reasonable steps to attend formal meetings. If the employee or their representative is unable to attend, the employee should seek to agree an alternative date. If the employee declines the second date without good reason, the meeting will be heard in their absence and/or the absence of their representative.

12.0 Long Term Absence

Long term sickness absence is any period of sickness absence 28 calendar days or more.

Maintaining Contact	Occupational Health Referral
The manager should discuss and jointly agree with the employee a plan to maintain regular contact during long term sickness absence. Whilst it is recognised that the frequency of contact will depend on the circumstances surrounding the absence, as best practice it is recommended that such contact takes place every 1-2 weeks.	A referral to Occupational Health will be made to ensure the employee is receiving support and advice about their condition, but also to ensure that the Trust receives information regarding prognosis and likely return to work.

13.0 Stage 1 Long Term Absence Meeting(s)

If an employee has reached 28 days absence, the manager will arrange a *Stage 1 Long Term Absence Meeting* to take place soon as possible.

The Stage 1 Long Term Absence meeting is to discuss the following:

- a) The reasons for absence, obtaining a health update from the employee and progress of treatment;
- b) The anticipated period of absence and projected return to work date;
- c) Discussion of the advice received from Occupational Health & review of any recommended reasonable adjustments that could facilitate the employees to return to work;
- d) Discussion of any support available & applicable to the employee within the organisation (e.g. Physio for You, OH counselling etc.);
- e) Discussion of any opportunities for temporary redeployment with clear timeframes (e.g. non-clinical administrative placements for clinical staff can be explored and reviewed on a monthly basis);

Depending on the employee's ill health prognosis, it may be possible following this discussion to agree a return to work plan. If however the employee's absence prognosis cannot indicate a return to work date a further Stage 1 Long Term Absence Meeting will be arranged for the following month, with further referral to Occupational Health as appropriate.

Contact between employee and their manager should continue throughout the period of the employee's sickness absence. When an employee reaches 3 months of long term sickness absence this will trigger, in most cases, a Stage 2 Long Term Absence Meeting.

Please note in some cases where medical advice is received sooner advising that the employee is unable to undertake the duties of their substantive post and the likelihood is they will not ever be able to return to work, a Stage 2 Long Term Absence Meeting may be initiated sooner.

14.0 Stage 2 Long Term Absence Meeting

When an employee moves to a Stage 2 long term absence meeting, further discussion will take place regarding their possible return to work and ways in which the Trust can support this (Further exploring points a-e as detailed above)

Consideration of the impacts of the employee's absence on the service will be considered and whether the long term absence can continue to be sustained. Stage 2 long term absence meetings will take place with the manager and a Workforce representative.

A possible outcome of a Stage 2 long term absence meeting is that the employee will be invited to a Stage 3 long term absence meeting which will consider their future employment with the Trust and this could result in the employees' contract of employment being terminated on the grounds of ill health.

15.0 Stage 3 Long Term Absence Meeting

A supportive approach will always be taken with regard to long term absence. However, the difficult reality is that in some circumstances there may be no prognosis for a return to work within a reasonable timescale.

This can be the case despite positive interventions by the Trust, including the exploration of all reasonable alternatives that may allow an employee to sustain a satisfactory level of attendance as explored within the Stage 1 and Stage 2 Long Term Absence Meetings.

Where there is no reasonable prospect of the employee returning to work within a reasonable timescale, the Organisation will consider termination of employment on the grounds of ill health as the only option.

Where it is considered necessary to terminate the employee's service, written notice will be given, in accordance with contractual terms. Payment during (or in lieu of) the notice period will comply with the provisions of the Employment Rights Act 1996.

16.0 Right of Appeal

The employee will have the right to appeal the decision to terminate their contract on the grounds of ill health. A request to appeal must be made in writing, stating the reasons for appealing against the decision. This must be received within 7 working days on receipt of the appeal outcome letter.

Following an appeal hearing the original decision may be confirmed, revoked or replaced with a different decision. The final decision will be confirmed in writing and there will be no further right of appeal.

The lodging of an appeal will not suspend notice of dismissal, or in cases of summary dismissal, the actual dismissal. In the event of reinstatement/re-engagement following appeal, the employee will be compensated for loss of income between the date of dismissal and the date of reinstatement/re-engagement.

Please note that the organisation will make any decision regarding dismissal independently of the NHS Pension scheme and the outcome of the pension application will have no bearing on this decision. In certain situations, the organisation is obliged to advise certain bodies of the dismissal of individuals for reasons of ill health. This can be, for example, the appropriate registering body, if it is considered that the level of attendance makes them unsuitable for work within the registered profession.

17.0 Phased return to work plans

Phased return to work plans are not an entitlement but may be considered where the employee has had a significant illness and/or there are barriers to returning to work.

Where Occupational Health recommends a gradual return to work to aid rehabilitation the manager will have discretion to agree a phased return to work plan.

The employee can receive full pay for a maximum period of one month whilst undertaking a phased return. Should this period need to be extended beyond one month an employee would need to use annual leave or unpaid leave.

18.0 Redeployment

It may be that the employee is no longer able to perform the job they were employed to do. In this situation, the organisation will explore options for redeployment constituting alternative suitable duties and retraining opportunities.

Employees who are redeployed for ill health reasons to a post on a lower pay band/reduced hours or in a different location which involves additional travelling costs either without a trial period or after the trial period has ended, will not be entitled to pay protection or excess mileage.

If the employee opts to consider redeployment, they will be required to apply for available posts that have been identified as suitable.

19.0 Disability Related Absence

Under the Equality Act 2010 a person is disabled if they have a physical or mental impairment which has a substantially adverse and long-term effect on their ability to carry out normal day-to-day activities. Cancer, HIV and Multiple Sclerosis are regarded as disabilities from the point of diagnosis.

Where employees have a chronic illness or disability, the manager should consider; what is a 'reasonable' and 'sustainable' level of absence.

As part of a reasonable adjustment, consideration may be given to amending the attendance trigger points applicable. This modification should be done in accordance with advice from Occupational Health and Workforce.

The manager should also work with the employee to review working practices and consider environmental risks and any reasonable adjustments that may be required to the role to help the employee achieve an acceptable level of attendance.

Disability related absences should still be recorded on an employee's sickness absence record.

Disability Leave

Disability Leave is to enable paid time away from work for pre-planned appointments or treatments, related to an employee's disability, that help maintain health and wellness.

It is not intended for use when an employee is not well enough to attend work which should be recorded as sickness absence,

Disability leave is a form of reasonable adjustment in line with the requirements of the Equality Act 2010 and can cover a range of disability related appointments. Examples of when Disability leave may be appropriate are outlined below however this is not an exhaustive list:

- Treatment related to an employee's disability
- Hearing aid tests
- Counselling/therapeutic treatment
- Physiotherapy
- Assessment for conditions such as dyslexia
- Dialysis treatment
- Having equipment serviced or fitted
- Blood tests for diabetes

Employees wishing to take disability leave should speak to their manager directly to request this. Managers may grant a reasonable amount of paid time off dependent upon the specific requirements.

20.0 Pregnancy Related Absence

All pregnancy or pregnancy related illnesses should be recorded separately and are discounted in absence trigger review points.

21.0 Absence & Annual Leave

▪ Ill Health during Annual Leave

If an employee falls sick during a period of annual leave, the correct sickness absence reporting procedure must be followed and the period covered will be treated as sickness absence, allowing the employee to take annual leave at another time.

Please note employees will not be entitled to an additional day off if sick on a statutory holiday (i.e. bank holiday) in line with Agenda for Change Terms and Conditions.

▪ Untaken Annual Leave

An employee will only be allowed to carry forward any outstanding statutory annual leave entitlement into a subsequent leave year. If the employee is able to take their outstanding annual leave on their return to work before the leave year expires, they should do so.

▪ Annual Leave during Long Term Absence

It is recognised that employees on long term sick may wish to take their accrued annual leave, particularly when their occupational sick pay reduces to half or nil pay, or when there is already a pre-existing planned holiday. In such circumstances, the line manager must advise payroll by e-mail of the dates of annual leave so that the correct payment is made. It is important to note however that the employee will still be regarded as unfit for work.

22.0 Absence resulting from an accident at work

If an employee sustains an injury or accident at work, the employee should notify their manager who must also notify the Occupational Health Department. Reporting accidents and ill health at work is a statutory legal requirement. For further information managers should refer to the Incident Reporting Policy

The RIDDOR regulations should be followed in the event of a death or major injury or accident at work resulting in over 7 days absence, reportable work related disease or a dangerous occurrence. It is the manager's responsibility to ensure a RIDDOR form has been completed either by themselves or the Health and Safety Advisor. The Health and Safety Advisor should always be notified that an incident has been reported (see Incident Reporting Policy).

23.0 Absence resulting from an accident out of work

Sick pay is not normally payable for an absence caused by an accident due to active participation in sport as a profession or where contributable negligence is proved.

Where an employee is absent as a result of an accident out of work they are not entitled to sick pay if damages are received from a third party. The organisation will advance to an employee a sum not exceeding the amount of sick pay payable providing the employee repays the amount of sickness allowance to the organisation when damages are received. Once received, the absence will not be taken into account in relation to the amount of sick leave accrued.

24.0 Elective Cosmetic Surgery and Laser Eye Surgery

Employees will be required to take annual leave to cover any absence for elective cosmetic and laser eye surgery, unless there is a letter of support from a GP or specialist, to indicate the surgery needs to be undertaken for health reasons. Employees should discuss this in advance with their manager, ensuring they give at least 6 weeks' notice. Where the entitlement to annual leave has been exhausted the manager may agree a period of unpaid leave, subject to service needs.

25.0 Ill health Absence during Investigation / Formal Processes

In cases where there is a need to interview an employee who is absent due to ill health a part of one of the above processes and the employee states that they are unfit to participate, an immediate referral should be made to Occupational Health for an opinion on their fitness/ability to participate.

If it is the opinion of Occupational Health that the employee is fit to participate in an Investigation or a formal procedure, then it is reasonable to expect the employee to comply with this. Failure to do so, without good cause should be considered under the organisation's Disciplinary Policy.

If in the opinion of Occupational Health the employee is unfit to participate in an investigation or a formal procedure, the Organisation reserves the right to continue the relevant process in the employee's absence, up to and including making a decision on terminating employment.

26.0 Medically Enforced Absence

Medically Enforced Absence may be applicable in the below circumstances:

- When there are concerns regarding an employee's safety / fitness to continue working – the employee may be required to remain off duty until Occupational Health Advice is obtained
- Risk of infection to others (in accordance with the Control of Infection Policy)

In cases where an employee is asked to remain away from work for one of the above reasons they will receive full pay for the recommended period imposed. This includes any allowances for enhancements based on the employee's rota pattern.

Medically enforced absence should only be considered when all other options have been exhausted (such as temporary or permanent redeployment, working from home, reasonable adjustments, etc.).

27.0 Sick Pay Entitlements

Periods of sickness absence will be paid in accordance with the relevant Agenda for Change or Medical and Dental terms and conditions of employment.

Where the reason for the absences is perceived to be due to work-related injury or disease, the employee should notify their manager who will undertake further investigation in conjunction with Workforce and Occupational Health prior to making any adjustments to sick pay entitlement.

28.0 Abuse of Sickness Scheme

Where abuse of the sickness policy is suspected, which may include failure to report sickness absence at the appropriate time; non-attendance at OH appointments without reasonable cause; failure to submit GP Fit Notes at the appropriate time; submission of forged or false Fit Notes; deliberate conduct prejudicial to recovery from sickness/injury; or due to the employee's misconduct or neglect, sick pay may be suspended and consideration given to disciplinary action.

Appendix 1

Role Accountability / Responsibilities in Promoting and Maintaining Employee Attendance

<ul style="list-style-type: none">• Managers Responsibilities
<ul style="list-style-type: none">• To manage and monitor employees' attendance and sickness absence. The manager is the first point of contact for an employee who is absent from work through sickness.• To ensure that all employees in their service area are provided with a copy of the Your Attendance Matters Policy and that they have read and understand their responsibilities.• Take a fair, supportive and equitable approach;• To liaise with HR (and other relevant sources of expertise including the Local Counter Fraud Specialist) without delay to obtain guidance and information;• Seek to maintain appropriate contact with the employee who is absent;• Take action to make sure the employee provides medical certificates to cover all longer periods of absence;• Conducts return to work meetings with employees as soon as possible on their first day back at work and within a maximum of 3 days;• Ensure accurate and timely inputting of absence information into ESR within a maximum of 3 working days;• To analyse the reasons for absence, consider underlying causes, identify patterns and trends• Identify and /or implement reasonable recommended changes needed in working practices and environments;• To consult with their teams and implement strategies to promote and maintain health and well-being• Keep any personal information they obtain about an employees' health or personal life confidential in line with the organisation's Data Protection Policy and Records Management Guidance;• Refer the employee to, and liaise with, Occupational Health, ensuring the Occupational Health referral document is appropriate and shared with the employee prior to submission• Liaise with other appropriate professionals in line with Occupational Health guidance;• Ensure that employees are kept informed regarding developments in the workplace and are consulted as necessary regarding changes in the workplace that affect their role;• Where applicable, provide information (in conjunction with HR) on schemes such as the NHS Injury Benefit Scheme and Temporary Injury Benefit;• Undertake skills training on Managing Sickness Absence.
<ul style="list-style-type: none">• Employee's Responsibilities
<ul style="list-style-type: none">• To ensure that they are aware of and understand their contractual obligation to attend work.• To make positive and healthy lifestyle choices in order to ensure their fitness for work.• To advise their line manager or the nominated deputy of any non-attendances due to ill health and the likely duration in line with Absence notification procedure.• Provide appropriate medical certification in a timely way, failure to do so may result in deduction from pay for unauthorised absence;• Take all reasonable steps to assist with their own recovery and return• Maintain regular communication (in line with agreed arrangements) with their line

manager (or agreed other person) throughout the course of their absence and notify their manager of their expected return to work date as soon as they are in a position to do so;

- Co-operate fully in the application of this policy including being available to attend sickness absence review meetings and Occupational Health appointments during their period of absence (unless medical circumstances prevent this from being possible);
- To not perform any other form of work (whether paid or unpaid) whilst not attending work due to ill health or during a phased return to work. If work is to be undertaken during these times, it must be clearly stipulated in any 'fit note' provided for that period of ill health and agreed with their line manager.
- To not participate in any other activity whilst not attending work due to ill health (e.g. sport, travel, education, charity events), which could be seen to hinder their return to work
- Maintain statutory registrations throughout any periods of absence or immediately advise their manager if this is not possible;
- Advise their manager, or other appropriate person, if they develop a medical condition that could affect their ability to carry out their job. This will enable appropriate support and reasonable adjustments to be put in place where applicable.
- Advise and seek permission from their manager, or other appropriate person, if they intend to undertake other paid or unpaid work whilst off sick from their post with the organisation.

- **HR Representatives**

- To provide expertise in the area of sickness absence management;
- To provide guidance & training on policy implementation and practice;
- Assist in the organisation's compliance with Disability Discrimination regulations in accordance with the Equality Act 2010;
- Where applicable, provide information (in conjunction with managers) on schemes such as the NHS Injury benefit Scheme and Temporary Injury Benefit;
- Promote the fair and equitable application of this policy across the organisation.
- Monitor employee attendance and work with managers to ensure that all cases of sickness absence are being proactively managed in accordance with the policy.

- **Staff side/Trade Union Representatives**

- Represent, advise and support employees as required throughout the processes associated with this policy;
- Bring any mutually beneficial improvements to this policy to the attention of the Organisation;
- Assist in ensuring the organisation's compliance with the Equality Act and other related Statutory requirements;
- Maintain detailed knowledge of the procedures set out in this policy in order to provide informed advice to members who are involved in sickness absence concerns;
- Liaise with relevant managers and HR where appropriate to resolve issues arising in the policy's implementation

Appendix 2

NHSLA Monitoring

Minimum requirement to be monitored	Process for monitoring e.g. audit	Responsible individuals/ group/ committee	Frequency of monitoring/ audit	Responsible individuals/ group/ committee (multidisciplinary) for review of results	Responsible individuals/ group/ committee for development of action plan	Responsible individuals/ group/ committee for monitoring action plan

Appendix 3

Equality Analysis

Introduction

The general equality duty that is set out in the Equality Act 2010 requires public authorities, in the exercise of their functions, to have due regard to the need to:-

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

The general equality duty does not specify how public authorities should analyse the effect of their existing and new policies and practices on equality but doing so is an important part of complying with the general equality duty. It is up to each organisation to choose the most effective approach for them. This standard template is designed to help LCHS staff members to comply with the general duty.

Please complete the template by following the instructions in each box. Should you have any queries or suggestions on this template, please contact Rachel Higgins Equality and Human Rights Lead.

Name of Policy/Procedure/Function*

Your Attendance Matters

Equality Analysis Carried out by: Clare Nock

Date: 12.06.17

Equality & Human Rights Lead: Rachel Higgins

Date:

Director/General Manager

Date:

*In this template the term policy/service is used as shorthand for what needs to be analysed. Policy/service needs to be understood broadly to embrace the full range of policies, practices, activities and decisions: essentially everything we do, whether it is formally written down or whether it is informal custom and practice. This includes existing policies and any new policies under development.

Section 1 – to be completed for all policies

A.	Briefly give an outline of the key objectives of the policy; what it's intended outcome is and who the intended beneficiaries are expected to be	This policy is written to promote the health and well-being and attendance of all employees and to ensure that every member of staff is aware of their responsibilities in relation to periods of absence and the sickness absence attendance standards which are expected of them.		
B.	Does the policy have an impact on patients, carers or staff, or the wider community that we have links with? Please give details	This has an impact on all employees within the Organisation.		
C.	Is there is any evidence that the policy\service relates to an area with known inequalities? Please give details	No		
D.	Will/Does the implementation of the policy\service result in different impacts for protected?	No - due to measures as discussed in this policy in relation to disability related and pregnancy related absence.		
		Yes	No	
	Disability		X	
	Sexual Orientation		X	
	Sex		X	
	Gender Reassignment		X	
	Race		X	
	Marriage/Civil Partnership		X	
	Maternity/Pregnancy		X	
	Age		X	
	Religion or Belief		X	
	Carers		X	
	If you have answered 'Yes' to any of the questions then you are required to carry out a full Equality Analysis which should be approved by the Equality and Human Rights Lead – please go to section 2			
	The above named policy has been considered and does not require a full equality analysis			
	Equality Analysis Carried out by:	Clare Nock		
	Date:	12.06.17		