



# Workforce

## **Attendance Policy : guide for managers**

The following guide forms part of the standard for workforce policies that apply to all staff within NHSScotland regardless of which Board they are employed by.

Consideration needs to be given to the individual circumstances of each employee when applying the Attendance Policy. This guide is to help managers to encourage and support employees to maximise their attendance at work and supportively manage employees during sickness absence.

<b>Absence reporting</b> .....	<b>3</b>
Absence reporting arrangements	3
When an employee notifies you of their sickness absence	3
When an employee becomes ill at work	4
If an employee does not notify you of their absence	4
<b>Reasons for absence</b> .....	<b>5</b>
Injury or illness at work	5
Medical exclusion following infectious or notifiable disease	5
Medical suspension	6
<b>Sickness absence certification and recording</b> .....	<b>6</b>
<b>Supportive contact during sickness absence</b> .....	<b>7</b>
<b>Occupational health service (OHS) referral</b> .....	<b>7</b>
<b>Return to work discussion</b> .....	<b>7</b>
Phased return to work	8
<b>Frequent or patterns of sickness absence</b> .....	<b>9</b>
Identifying patterns of absence	9
<b>Long-term absence</b> .....	<b>10</b>
Planned long-term absence	10
Maintaining contact throughout long-term absence	10
Prior to return to work following long term absence	11
<b>Terminal illness</b> .....	<b>11</b>
<b>Reasonable adjustments</b> .....	<b>11</b>
<b>Maintaining relationships</b> .....	<b>12</b>
<b>Failure to engage</b> .....	<b>12</b>
<b>No possible return to work</b> .....	<b>12</b>
<b>Termination of employment</b> .....	<b>12</b>
<b>Grievances and bullying and Harassment Complaints</b> .....	<b>13</b>

# Absence reporting

## Absence reporting arrangements

You must make sure that:

- absence reporting arrangements are in place
- an alternative contact has been assigned that can be used either in your absence or to meet local requirements
- employees have been made aware of absence reporting arrangements and are able to achieve these. Where an employee highlights potential contact difficulties, alternative notification arrangements can be used
- employees are aware that they are required to telephone the workplace personally - in exceptional circumstances, for example, where they have been hospitalised, a friend or relative can phone on their behalf
- employees are aware that failure to follow the absence notification process may result in investigations that could lead to disciplinary action and that unauthorised absences may result in loss of pay

## When an employee notifies you of their sickness absence

Evidence indicates that a supportive conversation can make a difference in relation to how the employee feels about work and may impact on the duration of the absence and future absences. It is important that you have a supportive conversation with the employee. This discussion can include:

- enquiring about the employee's health and wellbeing
- the circumstances and nature of their illness
- when the illness first started
- their fitness for work
- whether they will be seeking medical advice and/or support
- whether they have appropriate arrangements in place at home during their absence
- whether there are any pieces of work that need to be covered during their absence
- how soon they think they are likely to be able to return to work
- absence certification requirements
- contact arrangements and the requirement to contact you as soon as they know when they will be returning to work

Depending on the nature of the illness you may wish to explore:

- whether there are any adjustments that would enable the employee to return to work

- whether there are any interventions or support that could be explored to help support recovery, such as a referral to physiotherapy for a musculoskeletal condition, employee counselling services
- Whether there are any interventions that you could offer – for example, if they are fit to work but physically unable to travel to their workplace, is there another location in the workplace that they can work in or could they work at home

Whilst there are likely to be conversations within the team around staffing arrangements to cover for any absence, details of the nature of the employee's absence are confidential and you must not share these with the employee's colleagues without the employee's consent.

## **When an employee becomes ill at work**

It is important that you have a supportive conversation with the employee to explore:

- the circumstances/nature of their illness
- their fitness for work
- whether there are any alternative duties or adjustments that may help the employee to remain at work

Before the employee leaves the workplace you or the agreed alternative contact should discuss and agree:

- that they are well enough to travel home safely
- any assistance that is required for them to travel home safely
- whether they will be seeking medical advice and/or support
- contact arrangements including frequency of contact
- that they will contact you as soon as they know when they will be returning to work

You must ensure that the actual hours of absence are recorded.

## **If an employee does not notify you of their absence**

If the manager or the alternative contact has not been notified of the employee's absence, to meet the duty of care to the employee, the manager must try to contact them.

Where unable to contact the employee, and there is concern for their welfare and/or their absence is prolonged the manager should contact HR to consider next steps.

All unauthorised absence must be recorded in the appropriate systems, for example, the Scottish Standard Time System (SSTS).

# Reasons for absence

## Injury or illness at work

If an employee advises that the reason for absence is because they have:

- been injured at work
- have a disease or condition which is caused or aggravated by their job

You must:

- obtain information regarding the nature of the illness or injury
- seek advice from occupational health services (OHS) as to whether the injury, disease or condition meets the definition of injury at work
- record the absence in accordance with OHS advice, such as if it is confirmed that the absence should be categorised as illness or injury caused by work
- consider whether there are any temporary alternative duties or adjustments that may help the employee to remain at work, for example, to prevent exacerbation of an existing ill-health condition or where they are awaiting a planned operation
- report to the Health and Safety Executive any incidents covered by Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) in line with statutory requirements

You should be aware that the employee may be eligible for an injury allowance. Arrangements regarding this are set out in [Section 22](#)<sup>1</sup> of the Agenda for Change Terms and Conditions service handbook. If the employee is not covered by the Agenda for Change terms and conditions of service, any provisions will apply as specified in their contract of employment.

## Medical exclusion following infectious or notifiable disease

Where an employee is fit to attend work but may continue to be a risk to others you should explore whether medical exclusion is appropriate.

An employee may be excluded from work because they are at particular risk of ill-health or may be a risk to others, for example, a pregnant employee who may be exposed to an infectious illness, or an employee who is symptom free but is still considered to be infectious.

The manager should:

- obtain information regarding the nature of the illness
- seek advice from infection control or occupational health as to whether a period of medical exclusion is required
- fully consider alternatives – for example, an employee who has recovered from illness but would be considered still to be infectious may be able to work at home
- record for payroll purposes that the absence is a medical exclusion/control of infection leave

Medical exclusion will not count towards sickness absence triggers. Where the control of infection advice requires the employee to remain off work for a period after expiry of symptoms, this period will be regarded as medical exclusion with full pay.

## **Medical suspension**

Where there is a health-related concern that may mean the employee is a risk to themselves or others, medical suspension may be appropriate as a supportive action. This may relate to physical or mental health issues.

Appropriate and supportive action includes:

- a medical opinion is required in all situations
- suspension should be for the shortest period possible to allow a medical assessment to be undertaken - the employee will be entitled to full pay during this period
- the manager must record for payroll purposes that the absence is a medical suspension
- medical suspension will not count towards sickness absence triggers until a medical opinion confirms the employee should be absent from work

## **Sickness absence certification and recording**

An employee can self-certify for up to and including 7 calendar days. This will be a verbal notification during the absence notification process and contact conversations. It will be recorded on the return to work meeting form.

A medical certificate such as a Fit Note is required for absences of more than seven calendar days to ensure payment in accordance with the employee's entitlements. The employee must provide these to the manager in accordance with agreed process and timescales.

You are required to record this information in the appropriate system, for example, SSTS, as soon as possible to ensure employees are paid correctly for periods of absence.

You must ensure that the employee is aware of these requirements.

## **Supportive contact during sickness absence**

You and the employee must discuss and agree arrangements for contact. Discussions during sickness absence can include:

- enquiring about the employee's health and wellbeing
- updates on progress in relation to the employee's health
- planning for their return to work and identifying any support which might aid the employee in their recovery and return, for example, engaging with occupational health
- ensuring up-to-date information regarding the workplace is shared with the employee
- any arrangements to cover the employees work during their absence if applicable
- depending on the length of absence, information regarding pay status
- highlighting sickness absence triggers that may involve use of the formal stages of the attendance policy

Where the absence becomes long-term, such as 29 calendar days or more, please refer to supportive contact during long-term absence.

## **Occupational health service (OHS) referral**

Where supportive discussions lead you to agree that a referral to Occupational Health would assist in maintaining attendance or facilitating a return to work:

- review the [OHS referral guide](#)<sup>2</sup>
- complete the OHS management referral form
- discuss the content and reasons for the referral with the employee and obtain their consent
- share a copy of the referral with the employee

Where you are made aware that the employee has already progressed an OHS self-referral, you should discuss whether the employee would consent to sharing the report. This can be used to inform discussions, either ahead of or instead of a management referral.

## **Return to work discussion**

When an employee returns to work following a sickness absence you must:

- have a return to work discussion, ideally within 2 working days of the employee's return to work.
- use the [Return to work form](#)<sup>3</sup> to inform and record the discussion
- Record the return to work discussion on the appropriate information system, for example, the Electronic Employee Support System (eESS) Manager Self Service

The return to work discussion:

- is a supportive conversation about how the employee is feeling about returning to work
- should be face-to-face - teleconference or video-conference facilities would only be used where the employee and you are content that all other options have been fully explored
- may be undertaken by an identified deputy in exceptional circumstances or where arrangements are in place to facilitate duty management

The discussion can include:

- discussion of any contributing factors and adjustments, for example, dependency issues, stress, work-related impacts - your employer's policies may be a useful reference with regard to any contributing factors
- the impact on service delivery and the employee's responsibility for their health and wellbeing to maintain a satisfactory level of attendance at work
- how the employee can be supported to maintain and improve their attendance

You should make the employee aware that high levels or patterns of absences may lead to formal review of their attendance through attendance policy. This can lead to dismissal if the employee does not achieve the agreed levels of attendance.

## **Phased return to work**

A phased return to work may be recommended by the employee's GP and / or OHS, or requested by the employee in order to support their return to work.

Taking into account service delivery requirements you and employee should discuss and agree:

- suitability
- implementation of recommendations
- timescales and review periods



Where the request comes from the employee or is recommended by the GP, you may wish to seek further advice from OHS.

Where a management referral to OHS has resulted in an OHS recommendation for a phased return to work, you must:

- fully consider the recommendation and liaise with OHS if further clarification or discussion over the recommendation is needed
- discuss the OHS report with the employee to agree implementation of recommendations including duration
- discuss and agree review periods

The pay arrangements to support employees during a phased return to work were agreed by the Scottish Terms and Conditions Committee (STAC) in [STAC\(TC02\)2020](#)<sup>4</sup>. These are:

- any employee who returns to work on a phased return as recommended by Occupational Health will be entitled to be paid for a period of up to 4 weeks at their normal contractual pay
- if the phased return needs to extend beyond this period, the employee will be expected to contribute any untaken accrued annual leave. However, if an employee does not wish to use their annual leave they can opt to be paid according to the actual hours worked during the phased return period
- phased returns should not normally last for periods of longer than 8 weeks
- the type of work and the work pattern that the employee is asked to undertake during a phased return needs to take into account any advice received from occupational health

## **Frequent or patterns of sickness absence**

### **Identifying patterns of absence**

Identifying patterns of absence can help inform conversations with the employee to explore any contributing factors and offer support. Examples can include:

- frequently leaving work because of illness
- increased absences associated with particular shift patterns or periods of on-call
- patterns associated with a reduction in sick pay or triggers
- sickness absence on the same day of the week or on a fortnightly, monthly or annual cyclical basis
- absences before or after public holidays or annual leave

- absences which are associated with particular outside events, for example, school holidays

Where, following return to work discussions, there has been no improvement, progression to formal stages should be considered. The [Attendance steps that should be taken before moving to formal procedure](#)<sup>5</sup> provides a helpful checklist.

## **Long-term absence**

### **Planned long-term absence**

When an employee advises that they will be absent from work, for example to undergo an elective procedure, you must:

- have a conversation with the employee in advance of their absence
- discuss how you can support the employee throughout their absence and on their return to work, if known
- consider any arrangements for the employees work in their absence

### **Maintaining contact throughout long-term absence**

When an absence has been 29 calendar days or more, you will normally arrange to meet with the employee. Where this is not possible or appropriate the discussion can be by telephone and a record of the discussion and any return to work plan agreed should be confirmed to the employee in writing within 7 calendar days, using the [standard letter template](#)<sup>6</sup>.

It is important that you maintain contact with the employee to facilitate supportive and meaningful conversations around their wellbeing and return to work. In the first instance you should agree:

- the frequency of contact arrangements
- the format of these discussions, such as whether these will be by telephone conversation and / or through face-to-face discussions
- the location for these discussions, which may or may not be the employee's normal place of work

Discussions during long term sickness absence may include:

- the nature of the employee's illness / condition and any developments in their treatment and recovery that will help inform the support required and timescales for their return to work
- medical certification requirements to enable sick pay
- consideration of advice provided on medical certificate, such as a Fit Note

- how a [referral to OHS](#)<sup>2</sup> can help by advising whether there are any adjustments and / or support that would help the employee to return to work
- consideration of how any recommendations in the OHS report could be implemented
- any changes to salary or sickness pay, such as moves to half / nil pay. See [Section 14](#)<sup>7</sup> of Agenda for Change Handbook for employees who have Agenda for Change Terms and Conditions of Employment
- annual leave entitlement balance in view of Carry Over of Statutory Leave provisions [CEL17 \(2009\)](#)<sup>8</sup>, including whether the employee wishes to take any annual leave during their sickness absence

## Prior to return to work following long term absence

You should seek up to date advice from OHS as early as possible in advance of the employee's return to work, by progressing a [management referral](#)<sup>2</sup>. OHS recommendations will inform discussion with the employee about:

- re-introduction to the team and job role
- benefits of a recommended phased return to work
- any workplace adjustments
- the employee's options if they are unable to return to their original role or work environment

## Terminal illness

Where an employee is terminally ill, opportunities should be considered to support their preferred course of action. This may include any wish they may have to continue in employment.

Further information on this can be found in the [Dying to Work Charter](#)<sup>9</sup>.

## Reasonable adjustments

If an employee has a health condition which falls, or is likely to fall, within the definition of the Equality Act, you may receive advice from OHS about recommended adjustments that should be made to the workplace to assist them in performing their duties and maintaining their attendance at work. The adjustments will be particular to the employee and their health condition but can cover things such as:

- acquiring or modifying equipment
- altering working hours, which may include part-time working, flexible hours or changes to shift times
- making physical alterations to the work environment
- redeployment where adjustments to the current role are not possible

- adjusting trigger levels for supportive management within the Attendance policy

There is a statutory requirement to actively consider and implement reasonable adjustments wherever possible. You should therefore make every effort to comply with these requirements and where this is not possible to discuss with the employee the reasons for this and what other options are available to them.

## **Maintaining relationships**

There is an expectation that people will continue to work together at all stages wherever possible. You should offer appropriate support to enable this to happen.

## **Failure to engage**

There may be occasions where the employee feels unable to attend a hearing. Where this is for health reasons, you should refer the employee to the occupational health service to obtain advice as to when the employee will be able to do so or if there are alterations to the process which can be made to support their attendance.

If the employee intends to be supported or represented, then the availability of all parties will be considered to agree a suitable date for all parties. If employee's representative is unavailable, you should offer further dates to allow the hearing to happen.

Where the employee decides not to attend and there is no reasonable explanation for this, a second meeting should be offered. If the employee fails to participate, the panel will consider any reasons for this and whether to progress the hearing in their absence.

## **No possible return to work**

Whilst it would normally be the case that each stage of the process would be followed sequentially, there may be circumstances where it is appropriate to enter the process at Stage 2 or 3. Where it has been agreed that there is no possible return to work for an individual, it may be appropriate to enter the process at Stage 3.

## **Termination of employment**

In the event of a Stage 3 hearing outcome being dismissal, you as the manager should have made the employee aware of their contractual position regarding any payment in lieu of notice.

It is possible that in some circumstances an individual may request pay in lieu of notice. In these circumstances the employee should be made aware that their superannuable service and annual leave will be reduced accordingly. In addition unless there is a specific clause in the contract of employment allowing for pay in lieu of notice this agreement will be in breach of contract. The employee should confirm that they are in agreement to continue on this basis.

## **Grievances and bullying and Harassment Complaints**

Where an employee raises a grievance or bullying and harassment complaint during the attendance process, the process may be temporarily suspended in order to deal with the grievance or complaint. Where the grievance or complaint and matters under consideration are related, it may be appropriate to deal with both issues concurrently.

## References

<sup>1</sup> Section 22 of the Agenda for Change Terms and Conditions Handbook  
<https://www.msg.scot.nhs.uk/wp-content/uploads/AfC-Handbook-Master-Scottish-Sept-2019.pdf>

<sup>2</sup> Attendance Policy : Guide to Occupational Health Service referrals  
<https://workforce.nhs.scot/supporting-documents/guides/attendance-policy-guide-to-occupational-health-service-referrals/>

<sup>3</sup> Attendance Policy : return to work form  
<https://workforce.nhs.scot/supporting-documents/form/attendance-policy-return-to-work-form/>

<sup>4</sup> STAC(TCS02)2020: Phased Return to Work – 16 March 2020  
<https://www.stac.scot.nhs.uk/wp-content/uploads/STACTCS022020-Phased-Return-to-Work.pdf>

<sup>5</sup> Attendance Policy : manager's checklist prior to formal stages  
<https://workforce.nhs.scot/supporting-documents/tool/attendance-policy-manager-checklist-prior-to-formal-stages/>

<sup>6</sup> Attendance Policy : long term sickness meeting outcome letter  
<https://workforce.nhs.scot/supporting-documents/letter-template/attendance-policy-long-term-sickness-meeting-outcome-letter/>

<sup>7</sup> Section 14 of the Agenda for Change Terms and Conditions Handbook  
<https://www.msg.scot.nhs.uk/wp-content/uploads/AfC-Handbook-Master-Scottish-Sept-2019.pdf>

<sup>8</sup> CEL 17 (2009)  
[https://www.sehd.scot.nhs.uk/mels/CEL2009\\_17.pdf](https://www.sehd.scot.nhs.uk/mels/CEL2009_17.pdf)

<sup>9</sup> Scottish Government website news item : Protection for health workers with life-limiting illnesses – 24 March 2021  
<https://www.gov.scot/news/protection-for-health-workers-with-life-limiting-illnesses/>