



Workforce

Attendance Policy : guide for employees

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 will be given to the individual circumstances of each employee when applying the attendance policy. This guide details what to do when your health impacts on your ability to be at work and how your manager can support you. The guide covers:

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Absence reporting

Absence reporting arrangements

You must make sure that:

- you know the absence reporting arrangements
- you know who to contact when you are reporting an absence
- you have highlighted any potential difficulties in following these arrangements to your manager so that alternative notification arrangements can be used
- You telephone the workplace personally - in exceptional circumstances, for example, where you have been hospitalised, a friend or relative can phone on your behalf
- you follow the agreed absence notification process - if you do not, this may result in investigations that could lead to disciplinary action and that unauthorised absences may result in loss of pay.

When you notify your manager of your sickness absence

Your manager will have a supportive conversation with you than can include:

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

Depending on the nature of the illness your manager may wish to explore:

- whether there are any adjustments that would enable you to return to work
- whether there are any interventions through OHS or other support that could be explored to help support your recovery, such as a referral to physiotherapy for a musculoskeletal condition, employee counselling services

- Whether there are any interventions that they can offer – for example, if you are fit to work but physically unable to travel to your workplace, is there another location in the workplace that you can work in or could you 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 your absence are confidential and will not be shared by your manager with your colleagues without your consent.

When you become ill at work

Your manager will have a supportive conversation with you to explore:

- the circumstances and nature of your illness
- your fitness for work
- whether there are any alternative duties or adjustments that may help you to remain at work

Before you leave the workplace, you should discuss and agree:

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

Your manager will ensure that the actual hours of your absence are recorded.

If you do not notify your manager of your absence

If your manager or the alternative contact has not been notified of your absence, they will, to meet their duty of care to you, try to contact you.

Where they are unable to contact you, they are concerned for your welfare and / or your absence is prolonged they may contact HR to consider next steps.

The manager will ensure that the unauthorised absence is recorded in the appropriate systems, for example, the Scottish Standard Time System (SSTS).

Reasons for absence

Injury or illness at work

If you advise that the reason for your absence is because you have:

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

Your manager will:

- obtain information regarding the nature of the illness or injury
- seek advice from occupational health services (OHS)
- record the absence in accordance with OHS advice, such as if it is confirmed that your absence should be categorised as illness or injury caused by work.
- consider whether there are any temporary alternative duties or adjustments that may help you to remain at work – for example, to prevent exacerbation of an existing ill-health condition or where you 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 may be eligible for an injury allowance. Arrangements regarding this are set out in [Section 22](#)¹ of the Agenda for Change Terms and Conditions service handbook. If you are not covered by the Agenda for Change terms and conditions of service, the provisions will apply as specified in your contract of employment.

Medical exclusion following infectious or notifiable disease

Where you are fit to attend work but may continue to be a risk to others your manager will explore whether medical exclusion is appropriate.

You may be excluded from work because you may be 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 you are symptom free but still considered to be infectious.

Your 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, if you have recovered from illness but are considered still to be infectious you may be able to work at home
- record for payroll purposes that the absence is a medical exclusion or control of infection leave.

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

Medical suspension

When you are experiencing a health-related concern which may mean you are a risk to yourself or others, medical suspension may be appropriate as a supportive action. This may relate to physical or mental health issues.

A medical opinion is required in all situations:

- suspension should be for the shortest period possible to allow a medical assessment to be undertaken - you will be entitled to full pay during this period
- your 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 that you should be absent from work

Sickness absence certification and recording

You can self-certify for up to and including 7 calendar days.

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

Your manager will record this information in the appropriate system, for example, the (SSTS) as soon as possible to ensure that you are paid correctly for periods of absence.

You should be aware of these requirements and engage with the process.

Supportive contact during sickness absence

You and your manager must discuss and agree arrangements for contact.

Discussions during sickness absence can include:

- enquiring about your health and well-being
- updates on progress in relation to your health
- planning for your return to work and identifying any support which might aid in your recovery and return – for example, engaging with occupational health
- sharing up to date information regarding the workplace
- any arrangements to cover your work during your absence where applicable
- depending on the length of absence, include information regarding your pay status
- highlighting sickness absence triggers that may involve use of the formal stages of the attendance policy

Where your 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, your manager will:

- complete the OHS management referral form
- discuss the content and reasons for the referral with you to obtain your consent
- share a copy of the referral with you

If you have already progressed an [OHS self referral](#)² you may choose to share the report with your manager. This can then be used to inform discussions that may help you back to work sooner, either ahead of or instead of a management referral.

Return to work discussion

When you return to work following a sickness absence your manager will:

- have a return to work discussion with you, ideally within 2 working days of your return to work.
- use the [Return to work form](#)³ to inform and record the discussion
- record Return to Work discussions on the appropriate information system, for example, the Electronic Employee Support System (eESS) Employee Self Service

The return to work discussion:

- is a supportive conversation about how you are feeling about returning to work
- should be face-to-face - teleconference or video-conference facilities would only be used where you and your manager are content that all other options have been fully explored
- may be undertaken by a deputy identified by your manager 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 your responsibility for your health and wellbeing to maintain a satisfactory level of attendance at work
- how you can be supported to maintain and improve your attendance

Your manager will make you aware that high levels or patterns of absence may lead to formal review of your attendance through the attendance policy. This can lead to dismissal if you do not achieve the agreed levels of attendance.

Phased return to work

A phased return to work may be recommended by your healthcare professional and / or OHS, or you and your manager may agree that this could support your return to work.

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

- suitability
- implementation of recommendations
- timescales and review periods

Where you have suggested a phased return to work or this has been recommended by your healthcare professional, your manager may seek further advice from OHS.

Where a management referral to OHS has resulted in an OHS recommendation for a phased return to work, your manager will:

- fully consider the recommendation and liaise with OHS if further clarification or discussion over the recommendation is needed

- discuss the OHS report with you 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](#). 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

Patterns of absence

If your manager has identified patterns of absence, they will discuss these with you 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 will be considered.

Long-term absence

Planned long-term absence

If you know that you will incur an absence from work, for example, to undergo an elective procedure, you should inform your manager as soon as possible. This will enable the manager to:

- have a conversation with you in advance of your absence
- discuss how you can be supported throughout your absence and on your return to work, if known
- consider any arrangements to cover your work in your absence

Maintaining contact throughout long-term absence

When your absence has been 29 calendar days or more, your manager will normally arrange to meet with you. 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 you in writing within 7 calendar days.

It is important that you maintain contact with your manager to allow supportive and meaningful conversations around your 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 your normal place of work.

Discussions during long term sickness absence may include:

- the nature of your illness or condition and any developments in your treatment and recovery that will help inform the support required and timescales for your 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](#)² can help by advising whether there are any adjustments and / or support that would help you to return to work.
- consideration of how of any recommendation in the OHS report could be implemented
- any changes to your salary or sick pay, such as moves to half or nil pay - see [Section 14](#)⁵ 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 \(2009\)](#)⁶ including whether you wish to take any annual leave during your sickness absence

Prior to return to work following long-term absence

You are encouraged to seek up to date advice from OHS as early as possible in advance of your return to work, by engaging in the management referral process. OHS recommendations will inform discussion with you about:

- your re-introduction to the team and job role
- the benefits of any recommended phased return to work
- any workplace adjustments
- your options if you are unable to return to your original role or work environment

Terminal illness

If you are terminally ill, you should discuss your preferred course of action with your manager. This may include any wish you may have to continue in employment.

Further information on this can be found in the [Dying to Work Charter](#)⁷.

Reasonable adjustments

If you have a health condition which falls, or is likely to fall, within the definition of the Equality Act, your manager may receive advice from OHS about recommended adjustments that can be made to the workplace to assist you in performing your duties and maintaining your attendance at work. The adjustments will be particular to you and your 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)
- physical alterations to the work environment
- redeployment where adjustments to your current role won't assist or are not possible
- adjusting trigger levels for supportive management within the Attendance Policy

Your manager will make every effort to comply with these requirements and where this is not possible will discuss with you the reasons for this and what other options are available to you.

Maintaining relationships

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

Failure to engage

There may be occasions where you feel unable to attend a hearing. Where this is for health reasons, occupational health advice will be obtained to consider when you will be in a position to do so or if there are alterations to the process which can be made to support your attendance.

If you intend to be supported or represented then the availability of all parties will be considered, in order to agree a suitable date for all parties. If your representative is unavailable, further dates will be agreed to allow the hearing to happen.

Where you decide not to attend and there is no reasonable explanation for this, you will be offered a second meeting and if you fail to participate, the panel will consider any reasons for this and whether to progress the hearing in your 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, your manager should have made you aware of the contractual position regarding any payment in lieu of notice.

It is possible that in some circumstances that an individual may request pay in lieu of notice. In these circumstances you should be made aware that your 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. You should confirm that you are in agreement to continue on this basis.

Grievances or bullying and harassment complaints

If you raise 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 at the same time.

References

¹ 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>

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

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

⁴ 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>

⁵ 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>

⁶ CEL 17 (2009)
https://www.sehd.scot.nhs.uk/mels/CEL2009_17.pdf

⁷ 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/>