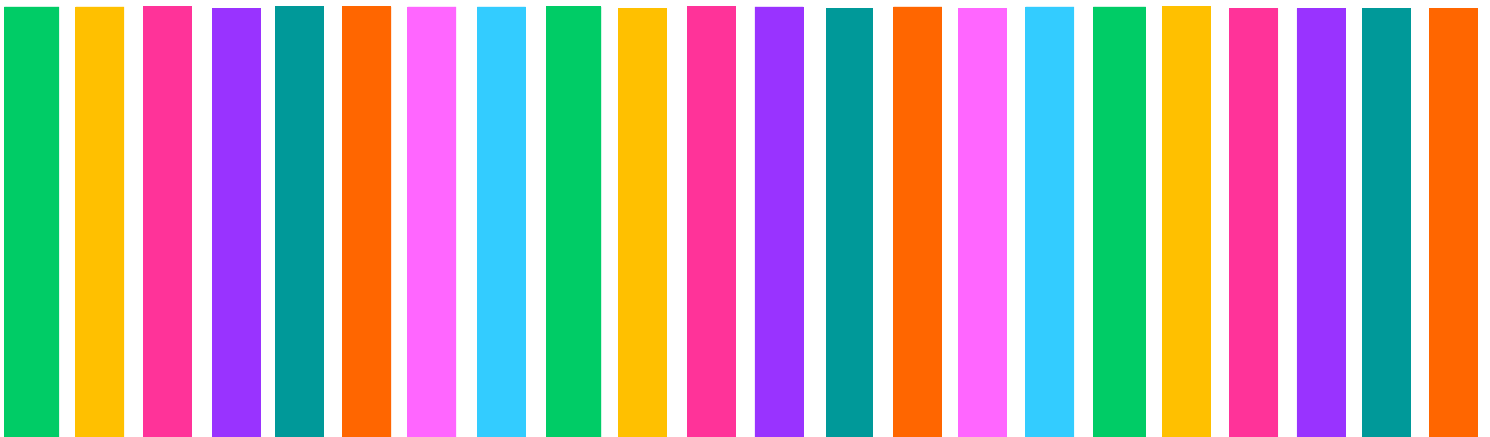


GlasgowLife™

Maximising Attendance Policy

Version 1 – March 2019



Policy Aims and Objectives

1.1. Glasgow Life is committed to delivering high quality services to the citizens of and visitors to Glasgow. This policy aims to support our employees to maintain high levels of attendance, thereby minimising the detrimental effects of sickness absence on our service provision, our citizens, visitors and colleagues.

1.2. Glasgow Life recognises that employees will experience periods of ill health from time to time which will result in absences from work. In many cases, these will be short spells of illness from which employees quickly recover and in others there may be more significant health problems requiring prolonged treatment and time away from the workplace. Application of this policy will ensure that attendance issues are managed in a fair, legal and consistent manner across all services.

1.3. In all cases Glasgow Life is committed to supporting employee attendance levels for two main purposes:

- To respond effectively to actual and potential problems with service delivery and
- Provide assistance to employees with health problems at an early stage.

1.4. Glasgow Life recognises it's responsibility for the health, safety and well-being of it's employees and in conjunction with other policies and contracted service providers seeks to support employees suffering from both physical and psychological health problems.

Standards of Attendance

2.1 The Organisation will set Corporate and Service attendance targets and the Chief Executive, Executive Directors and all levels of management will be responsible for ensuring that these are achieved.

***Note:** The standards set are not a target for each individual employee to achieve but employees should strive to achieve the highest level of attendance possible. However, where an employee's level of attendance regularly falls below the set targets, this may be an indication of an unsustainable level of sickness absence.*

Responsibilities and Expectations

3.1 The policy reaffirms Glasgow Life's commitment to protecting the comprehensive sickness allowance provisions made for employees. While managers at all levels are responsible for the implementation of it, there is an expectation that employees will fully engage with the policy; engaging with occupational health referrals, management discussion and agreed return to work plans, thus ensuring that the provisions are not abused.

Health Issues in the Workplace

4.1 While this Policy predominantly addresses sickness absence, the principles will be applied where an employee develops a health problem which impacts on their ability to perform their duties despite having no associated periods of sickness absence.

4.2 In such cases the employee should bring the matter to their manager's attention at the earliest opportunity and the manager will consider how best to support the employee to maintain their attendance.

Absence Reporting

5.1 Employees must report all periods of sickness absence as detailed in the Conditions of Service (Sickness Absence Leave and Pay), on 1st, 4th, 7th and every 7th day thereafter.

5.2 When an employee reports their absence the line manager will identify how best to support them. The discussion will cover the following:

- What is reason for absence?
- Has any medical advice been sought?
- Is there anything we can do to help?
- Are there any workplace issues contributing to absence?
- Are there outstanding work items that require to be completed?
- What is the expected return date if known?
- When they are next due to make contact?

5.3 In order to give employees the best support it will be appropriate in most cases of psychological or musculoskeletal conditions to organise early intervention arrangements.

The Return to Work Discussion

6.1 Following every spell of sickness absence the line manager will meet the employee and engage in a return to work discussion:

- Ideally this discussion will take place prior to undertaking duties on the day of the return to work or as soon as is reasonably practicable.
- The manager will meet the returning employee to welcome them back to the workplace.
- The meeting will be informal and the discussion will focus on the reasons for absence, fitness to return to work and any support required to facilitate the return to work.
- A spell of absence will often require further intervention under the terms of this policy, where possible the line manager should familiarise themselves with the next steps and communicate this to the employee during the discussion.
- The self-certificate form will be completed at the close of the return to work discussion.

Note: *It is important that return to work discussions take place close to the point of return to work to ensure that the employee is fit to return and identify if any support is required. Unnecessary delays in arranging such meetings should be avoided.*

Attendance Management Interviews

7.1 Attendance Management interviews* will be arranged with employees whose absence record, including periods of industrial injury, falls into the following categories:-

- 3 certified (Self Certified (SC) or Medically Certified (MC)) absences within 6 months or 5 certified (SC or MC) absences within 12 months. **Note:** *This criteria is not applied on a pro rata basis.*
- 6 working days (or hours equivalent) within 6 months or 8 working days (or hours equivalent) within 12 months (applied on a pro rata basis); or
- any period of unauthorised absences.

7.2 Attendance Management Interviews* will be arranged promptly following the absence to which they relate to ensure that decisions taken are current and relevant.

Note: Interviews for all employees will be conducted by Managers / Immediate Supervisors who are suitably trained and / or experienced in attendance management.

Employees may choose to be accompanied by a colleague or trade union representative to any formal meeting convened with management under the Attendance Management Policy.

*All attendance management interviews must be recorded using the appropriate documentation.

Management Considerations

8.1 Throughout the attendance management process managers will consider appropriate interventions and reference to other Glasgow Life Policies and arrangements to support recovery and return to work:

- Arrangements to support mental health in the workplace
- Engagement with Employee Assistance
- Occupational Health Referral
- Health and Safety Policy
- Work life Balance arrangements
- Alcohol and Drugs in the Workplace Policy
- Employee Harassment Policy
- Employment of Disabled People

Note: This list is not exhaustive

Early Intervention

9.1 Where an employee reports absent due to a psychological or musculoskeletal condition, the line manager will establish if an Early Intervention discussion meeting, Employee Assistance Provider referral or an Occupational Health Provider referral, is appropriate, referring to the maximising attendance toolkit for advice.

9.2 The purpose of early intervention is to provide assistance to an employee at an early stage of certain absences as evidence shows an early intervention activity can aid an employee's recovery and increase the likelihood of a full recovery.

9.3 An Early Intervention discussion meeting will generally take the form of a face to face meeting at which the line manager will try to establish any further support that might be provided to assist the employee's recovery and return to work, this is particularly important where workplace issues are identified.

Employee Assistance

10.1. Glasgow Life have contracted an Employee Assistance Provider (EAP) to provide counselling and information services to employees.

10.2. In all cases of absence due to psychological conditions, line managers will remind employees of the EAP support services available and the routes to make contact.

10.3. Periods of absence, particularly long term, can lead to anxiety about health, returning to work and finances. Therefore it will often be appropriate to bring the EAP service to employee's attention even when the absence is not related to mental health.

10.4. In cases of absence related to allegations of workplace bullying and harassment, the employee should be reminded of the contact details of the EAP's dedicated Bullying and Harassment helpline.

10.5. In circumstances in which employees consent to EAP progress reports being submitted to management, the line manager will meet with the employee to discuss the content of the report.

Occupational Health Consultation (Attendance Management Related)

11.1. Glasgow Life have a contracted Occupational Health Provider (OHP) to provide management with information and advice in relation to employee health and the workplace.

11.2. The primary role of occupational health is to provide independent management advice, the undertaking of diagnosis and treatment lies with the employee's primary health care provider (NHS).

11.3. In most long term absence situations and some short term intermittent absences, referral to occupational health will be made to establish:

- The impact of the employee's health condition on their ability to perform their duties
- The likelihood of full recovery and time frame
- A timescale for return to work
- What duties the employee may be capable of performing and in what timescale
- If the Equality Act 2010 is likely to apply
- Suggestion of reasonable adjustments which may support the employee to return to work / maintain attendance at work

11.4. Occupational health reports enable managers to make informed decisions when managing an employee's attendance within the terms of this policy. Any decision relating to the employee is the responsibility of Management and not the Occupational Health Provider.

11.5. The outcome report following an Occupational Health consultation should be discussed with the employee and a copy of the report provided to the employee if requested.

Occupational Health Consultation (Musculoskeletal Interventions)

12.1. Where an employee is suffering from an untreated musculoskeletal condition which is impacting upon attendance or performance at work, a musculoskeletal referral to occupational health will be made to provide advice to the employee and manager.

12.2. The occupational health provider will triage the referral and identify an appropriate course of action which may include telephone and/or face to face consultation. Where appropriate employees will be advised of exercises to improve their condition and in some instances treatment by means of physical manipulation will be provided.

12.3. The outcome report following an Occupational Health consultation should be discussed with the employee and a copy of the report provided to the employee if requested.

Note: *Musculoskeletal referrals often result in provision of advice from a physiotherapist over the telephone and do not require "hands-on" manipulation. The occupational health provider will decide upon the appropriate method of delivery of advice and treatment.*

Phased Return to Work

13.1. Glasgow Life recognises that returning to work following a long term absence can be physically and mentally challenging and that an employee may require additional support at this time.

13.2. In order to support a return to work, management will, in consultation with the employee, consider a paid phased return to work of up to four weeks.

13.3. A phased return may be suggested by management, occupational health, the employee or their GP.

13.4. A number of factors will be considered in agreeing the phased return to work plan; the operational needs of the service, the nature of the employee's role, the employee's current state of health, advice from occupational health, advice from the employee's GP and the employee's engagement with the attendance management process.

13.5. Throughout the phased return, the manager will monitor progress towards a full return to work and discuss progress with the employee prior to resuming full duties.

Note: *Where appropriate, leave entitlement should be recalculated in accordance with Conditions of Service: Leave.*

Sickness or Disablement due to Accident in the Course of Employment

14.1 Where an employee is absent due to sickness or disablement as a result of a workplace accident arising out of and in the course of employment, or due to industrial disease, the employee shall be entitled to a separate allowance calculated on the same basis as the sickness allowance.

14.2 The allowance in respect of normal sickness and that of absence due to a workplace accident or disease are entirely separate. Periods of absence in respect of one shall not count against the allowance for the other.

14.3 An absence due to a workplace accident shall only be accepted and qualify for payment when an entry the Accident Book is appropriate and has been completed, and in the subsequent investigation by Glasgow Life the facts so recorded are found to be accurate and there has been no negligence on the part of the employee in terms of that individual complying with the recognised safe methods of work.

14.4 In determining what if any action should be taken where an employee's overall absence record includes period(s) of accepted industrial injury, Managers / Supervisors must carefully evaluate the reasons for absence when assessing the record, and must take full account of accepted industrial injuries when dealing with employees under the terms of this policy.

14.5 Wherein applying this procedure a Manager / Supervisor identifies an employee who regularly sustains industrial injuries additional training and or advice may be required. Glasgow Life's Health and Safety Team will be available to assist Managers.

Sickness Absence Categories

15.1 For the purposes of managing attendance this policy identifies two categories of sickness absence:

- **Short Term Intermittent Absence:** any spell of absence of up to and including 19 working days. (pro-rated for non-standard working patterns)
- **Long Term Absence:** any single spell of absence of 20 or more working days. (pro-rated for non-standard working patterns)

15.2 When managing either category of absence managers will be mindful of the requirements of the Equality Act 2010 which makes specific provisions to prevent discrimination against any employee on the grounds of a protected characteristic. Of particular relevance to attendance management is “disability”. The Equality Act 2010 identifies a person as disabled if they have ‘a physical or mental impairment’ which has ‘a substantial and long-term adverse effect’ on their ‘ability to carry out normal day-to-day activities’:

- **Impairment** - may be a physical or mental impairment, or both.
- **Long-term** - lasting at least a year, or likely to be for the rest of the person’s life or recur
- **Substantial adverse effect** - more than minor, but it may fluctuate or change, and may not be present all the time
- **Normal day-to-day activities** - not defined by the Act, but in and out of the workplace they are taken to be common things for most people.

Note: *Additional information regarding the Equality Act and protected characteristics may be found in the Equalities section of the HR pages on the intranet.*

Managing disability related sickness absence can be complex and managers should consult with their service Human Resources in relation to such situations.

Managing Short Term Intermittent Sickness Absence

16.1 Short Term Intermittent Sickness Absence will generally be managed via the Formal Attendance Management Interviews as required in Paragraph 7.

16.2 Where an employee regularly meets the criteria defined in Paragraph 7, management will utilise the facilities described in Paragraph 8 to support the employee to maintain an acceptable level of attendance.

16.3 Where management interventions and support do not result in an employee maintaining an acceptable level of attendance, the employee's attendance record will be reviewed and considered as a capability issue (see Paragraph 20 Capability Considerations)

Managing Long Term Absence

17.1 Where an employee is absent due to long term sickness absence, management will meet with the employee on a regular basis throughout the period of absence. The frequency of meetings will be dependent upon the circumstances of the specific absence and will give due consideration to the health of the employee, their treatment plan, prognosis and return to work plans.

17.2 Regular meetings are an important part of managing long term sickness absence as they provide an opportunity to maintain the relationship between the employee and the manager, allow the employee to provide updates on their health and their thoughts about a future return to work, allow the manager to update the employee on relevant workplace situations and to discuss any management decisions relating to the absence.

17.3 Meetings will normally take place at the employee’s usual place of work or an alternative Glasgow Life premises. In some circumstances it may be appropriate to meet at an alternative and

mutually agreed location. The location should be appropriate to facilitate discussion about health and workplace matters privately.

17.4 Throughout the long term sickness absence, management will utilise the facilities described in Paragraphs 8 to 13, as appropriate to the situation, with a view to gaining medical advice on the employee's condition and support the employee's recovery to facilitate a return to work.

17.5 On return to work following a long term absence, the return to work discussion described in Paragraph 6 will be carried out and an attendance management interview as described in paragraph 7 will be arranged.

17.6 Where an employee is unable to return to work due to ill health, the Capability considerations in Paragraph 20 will be initiated.

Managing Combinations of Absence Categories

18.1 An employee's sickness absence record may comprise of a combination of short and long term absence. In such circumstances, each individual absence will be managed as described in Paragraphs 16 and 17 above.

18.2 In such cases, management will review the employee's attendance record and where satisfied that the overall record is unacceptable the Capability consideration in Paragraph 20 will be initiated.

Managing Terminal Illness

19.1 Employees diagnosed with a terminal illness will be managed in a dignified and compassionate manner. Glasgow Life have adopted the Trade Union Congress' "Dying to Work Charter" and will not dismiss any person with a terminal diagnosis because of their condition, unless in the employee's best interests.

Capability Considerations

20.1 Where an employee's level of attendance is becoming a serious concern and cannot be sustained, the matter should be addressed as one of capability and may result in the termination of employment.

20.2 This may arise due to:

- Regular spells of short term intermittent sickness absence or
- A spell of long term absence or
- A combination of short and long term absences.

20.3 As each employee's health, duration of absence, spells of absence and capacity to undertake duties will be unique to their circumstances there is no single trigger for capability considerations.

20.4 The employee must be formally advised of the concern regarding their attendance and that their continued employment is at risk. All relevant available options to support the employee improve to an acceptable level of attendance should be fully explored, including:

- Advice from occupational health
- Phased return to work

- Redeployment
- Alternative/restricted duties
- Redesign of duties
- Flexible working/part time working
- Additional training/retraining
- Allow reasonable time off during working hours for rehabilitation/treatment

Note: *This list is not exhaustive*

20.5 Where reasonable options have been explored and assessed, are not viable and an employee is unable to provide an acceptable level of attendance, management may consider termination of employment on the grounds of capability.

20.6 Where appropriate, if an employee is a member of the Local Government Pension scheme, management will establish if the employee will meet the criteria for ill health retiral prior to any decision to terminate employment on the grounds of capability.

20.7 In all cases, before taking a decision to dismiss on the grounds of capability the following points must be fully addressed:

- Has full consideration been given to the reasons why employment cannot be sustained?
- Has the employee been fully consulted about their health and ability to give regular and effective attendance?
- Has up to date medical advice been sought and considered?
- Has consideration been given to the employee's length of service?

Note: *Managers must consult with their service Human Resources Team before taking any decision to dismiss on the grounds of capability.*

20.8 Employees have the right to appeal against dismissal on the grounds of capability in accordance with the Appeals procedure detailed in the Code of Discipline: Disciplinary & Appeals Procedure.

Disciplinary Considerations

21. Disciplinary action may be considered if there are breaches of conduct at any stage of the attendance management process (including the return to work process) in accordance with the organisation's Discipline and Appeals Procedure such as;

- Unauthorised absence,
- A failure to comply with absence reporting procedures,
- An abuse of the sick pay provisions,
- Fraudulent conduct

Note: *In the application and interpretation of this policy further detailed guidance is provided for Managers / Supervisors within the supporting documents available on the HR pages of the Intranet. Advice and guidance on the application of these procedures is also available from service Human Resources team.*