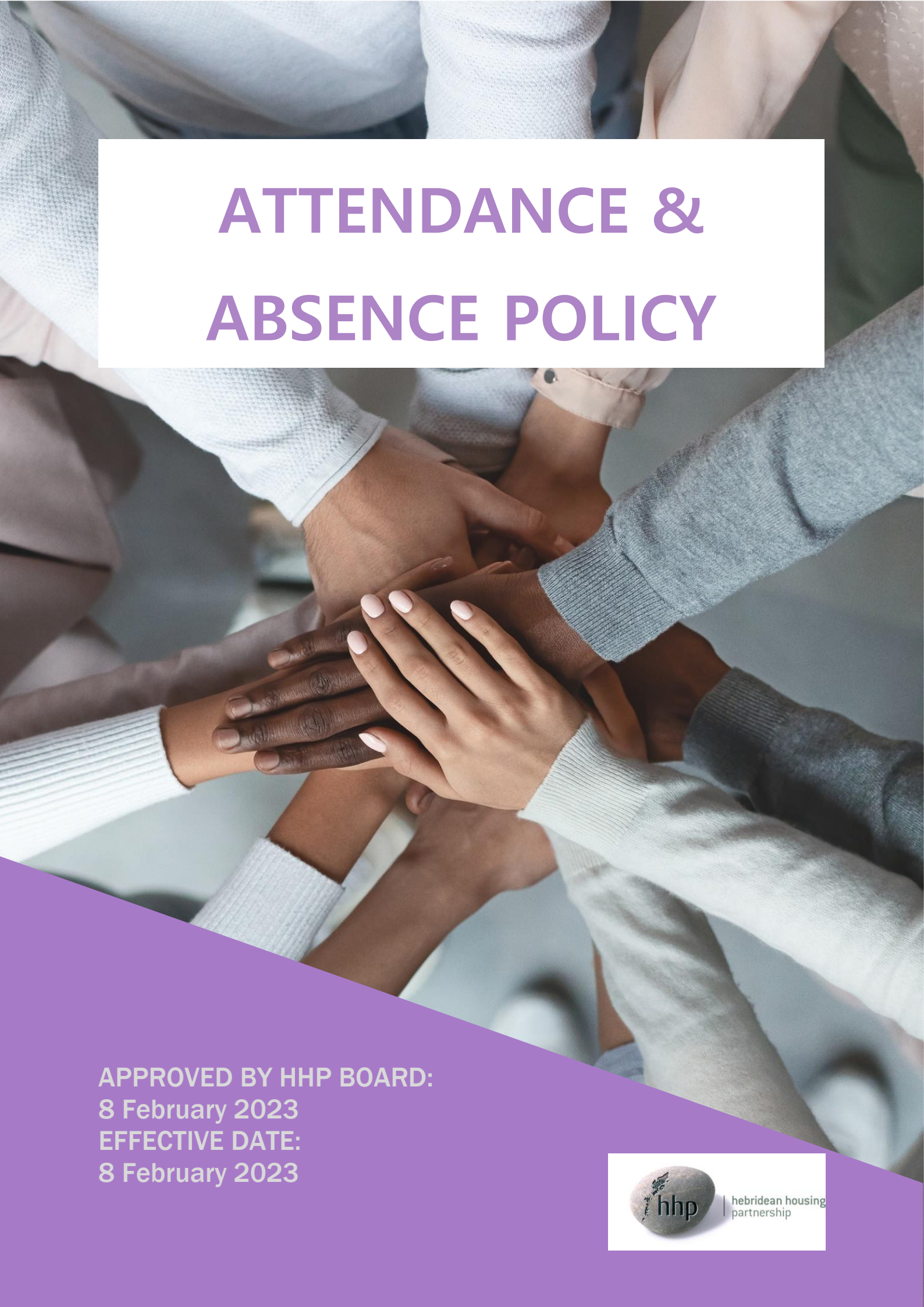

ATTENDANCE & ABSENCE POLICY

APPROVED BY HHP BOARD:
8 February 2023
EFFECTIVE DATE:
8 February 2023

hhp | hebridean housing partnership

TABLE OF CONTENTS

INTRODUCTION **2**
ABSENCE REPORTING PROCEDURES **2**
RETURN TO WORK **5**
ATTENDANCE MANAGEMENT **8**
ABSENCE MANAGEMENT **9**
DISHONEST ABSENCE **10**
OTHER PROVISIONS **11**
PENSIONS **15**
MONITORING AND REVIEW OF POLICY **15**
INTERPRETATIONS & ABBREVIATIONS **16**

INTRODUCTION

1.1 We are committed to improving the health, wellbeing and attendance of all employees and recognise the crucial role of sickness absence procedures as part of a wider organisational policy to establish a healthy workplace.

1.2 A fundamental feature of good attendance management is the accurate and timely recording of all absences. This is essential both in terms of the requirements of statutory sick pay arrangements and our sickness benefit scheme. Accurate information also allows patterns to be identified and can be an early indication of underlying problems. The sooner problems are identified and acted upon the more likely a successful conclusion for the employee and employer alike can be achieved.

1.3 Accurate recording is also an essential element is satisfying any concerns over the fairness of any actions taken by managers. The responsibility for maintaining such records rests with the Personal Assistant.

1.4 The policy applies to absence caused by personal illness or accident, not the need to take time off work because of the illness or accident of others e.g. children or partners.

1.5 You are entitled to be accompanied by another Employee or a Trade Union Representative to any meeting arising under this Policy.

ABSENCE REPORTING PROCEDURES

2.1 Procedures for notifying and certifying sickness and other absences are outlined in paragraphs 2.2 – 2.5.

REPORTING

2.2 You or your representative must phone your line manager before 9.30am to inform them when you are sick and unable to attend your work. You should let your manager know:

a) why you are unable to attend work;
b) how long you think you are going to be off for;
c) what action you are taking to alleviate the effects of the illness, e.g. visiting the doctor; and
d) if there are any pieces of work that need to be dealt with in your absence.

If you have contracts which means you have two line managers then you must speak to both managers. You must not rely on the information being passed on by one manager to the other.

2.3 If your line manager is not available you should ask for the Personal Assistant. Texting and e-mail are not considered an acceptable method of informing your manager that you are unable to attend work except in exceptional circumstances.

CERTIFICATION

2.4 Self-Certificates will be required for absences of seven consecutive calendar days or less and thereafter a healthcare professional's fit note will be needed. The fit note does not necessarily outline when an employee is deemed fit to return to work. It only states that they are not fit for work or may be fit for work with advisory notes. In exceptional cases a fit note may be required for absences less than seven days.

2.5 Saturdays and Sundays and Public Holidays are to be included e.g. if an employee is absent from work from Friday to Monday then Monday is the fourth day of absence.

2.6 Submitting fit notes in a timely manner (before, or as soon as seven calendar days have passed, the previous certificate expires) falls within the absence reporting procedure.

KEEPING IN TOUCH

2.7 The onus lies on the employee to keep their manager informed of the reason and progress of all absences. Generally speaking, if the period of absence is expected to be less than seven days then the employee should call their manager at least once every second day. If the period of absence exceeds seven days, the employee must contact his manager at intervals of seven days. Where an employee fails to keep in touch as outlined above, their manager will then initiate and maintain contact with the employee. If absence is certified by a doctor the employee should call at least once a week.

2.8 Where a healthcare professional's fit note covers a period of more than seven days e.g. statement cover 28 days, it will not be necessary to report to his manager after each period of seven days' however, employees will be expected to call their manager at least once in every six week period, or on at least one occasion if the fit note covers less than a six week period.

2.9 Where, for reasons related to their absence, an employee cannot call their manager in line with the above frequency, this should be communicated by a representative of the employee to the employee's manager or the Personal Assistant as soon as possible.

FAILURE TO COMPLY

2.10 Any breaches of the absence reporting procedure should be dealt with by management in a consistent manner. The line manager should speak with the employee in the first instance to remind them of the procedure. After the initial reminder if the employee fails to follow the absence reporting procedure informal action would be required and thereafter a withdrawal of company sick pay may be applied as well as disciplinary action. Any informal action should be recorded and formal action would require a disciplinary hearing to be carried out in accordance with the disciplinary procedure. If an employee is on long-term sick leave and if they fail to produce a fit note on time without good reason, company sick pay may be witheld (SSP will not be withheld) and only resume when a valid fit note is submitted without backdating pay. If company sick pay is withheld, the manager should write to the employee confirming this.

STATUTORY SICK PAY (SSP)

2.11 Employees are entitled to SSP irrespective of their entitlement to occupational sick pay. SSP is reviewed by the Government every October. It is not paid for the first three days of absence and runs for 28 weeks after that. An employee who is no longer entitled to SSP may be entitled to benefits and they would need to visit their local benefits office to find out their rights.

OCCUPATIONAL SICK PAY

2.12 Employees who have completed 26 continuous weeks work for us are eligible for Occupational Sick Pay payment provided all of the conditions of this policy and procedures have been fully complied with and are fully satisfied.

2.13 The duration of payment of Occupational Sick Pay during sickness absence will, in addition to all the relevant conditions being met, depend on the length of the employee's employment as follows:

Continuous Employment	Full Pay Period	Half Pay Period
Less than 26 weeks	Nil	Nil
26 weeks or more but less than 1 year	5 weeks	5 weeks
1 years but less than 2 years	9 weeks	9 weeks
2 years but less than 3 years	18 weeks	18 weeks
3 years but less than 5 years	22 weeks	22 weeks
5 years and over	26 weeks	26 weeks

2.14 Employees entitlement to Occupational Sick Pay will be calculated by taking in to account the total number of sickness absence days in the immediately previous 52 week period of absence.

RETURN TO WORK

3.1 An informal return to work interview must be carried out after every period of absence. This will be done by the employee's line manager (or Director if he is not available) on the first day of their return to work, or as soon as practicable thereafter if the manager and the Director are not available on the first day of the employees return to work.

3.2 A formal return to work interview must be carried out following absences in excess of 7 days, or persistent short term absence. This will be done by the employee's line manager (or Director if he is not available) on the first day of their return to work, or as soon as practicable thereafter if the manager and the Director are not available on the first day of the employees return to work. Completed forms will be kept in the employee's personal file. The return to work interview forms contain confidential information and may only by viewed by authorised personnel.

3.3 Having maintained attendance records, managers will be expected to provide and discuss monthly team statistics at Managers meetings. The following statistics will be discussed:

	Days lost of sickness for month		Days list to sickness for the year	
	Actual	Target	Actual	Target
Overall				
Operations				
Resources				

3.4 The Personal Assistant will prepare the report for each Management meeting using the information from our HR system.

3.5 Individual cases will not be discussed at Management Team meetings as they form a confidential record of each employee.

3.6 If a doctor made recommendations for any modifications to the workplace or work pattern then these will be discussed at a return to work interview, along with suggestions that the employee or line manager could have also made. Where possible, we will implement the doctor's suggestions to accommodate employee's prompt return. If any adjustments are made, timescales and reviews will also be agreed.

3.7 If your manager has cause to be concerned about your health e.g. you have had a number of periods of sickness for the same reason in a short period, then your line manager may suggest that you visit the doctor for a check-up. In certain circumstances especially if your long-term employment is in doubt because of your sickness record, then you may be asked to see a medical practitioner of HHP's choosing. Failure to comply with any request to attend an appointment with a medical practitioner of the HHP's choice will be a disciplinary matter.

3.8 An Employee will not be pressurised into returning to work prematurely. If they have been signed off, a Doctor's Statement of Fitness for Work will outline when they are deemed fit to return to work.

PHASED RETURN TO WORK

3.9 A Phased Return to Work (PRW) recognises that staff who have experienced a prolonged period of absence from work due to illness or injury may require particular

support in returning to their normal hours and duties of work. It aims to assist staff in such circumstances to return to work in an effective and productive way which does not compromise their recovery or long-term health by facilitating appropriate measures to support rehabilitation.

3.10 A PRW is a supportive arrangement which may be put in place to assist an employees' rehabilitation if they have had a continuous period of absence from work as a result of illness or injury. We will facilitate a phased return to work programme only where this is supported by written medical advice from the employees GP.

3.11 The purpose of a PRW is to rehabilitate the employee to their full duties and to enable them to gradually progress to undertake their full normal working hours within an agreed timescale.

3.12 Any agreed PRW programme will be time-limited and will normally not exceed a period of six weeks.

3.13 The agreed arrangements for the PRW will be discussed between the employee and manager and detailed in an agreed Return to Work Plan which will include the:

- start and end date of the PRW programme;
- attendance pattern (your hours of work should increase incrementally over the period of the phased return to work programme);
- date for a formal review of the return to work arrangements.

Once the PRW programme has been agreed a copy will be sent to the employee and to the line manager.

3.14 The employee will be paid their normal contractual pay for the time they are in work during PRW period. The time that the employee is not in work during the PRW period will be classified as sick days. If you are absent due to illness during your PRW, you will be classified as being on sick leave. Alternatively, you can request annual leave or unpaid leave to be used instead.

3.15 Periods of annual leave will not be permitted through the PRW period, unless it is an absence for a specific reason, for example to attend a wedding. Periods of annual leave immediately prior to a PRW may be taken into account when structuring the overall plan and the PRW period reduced accordingly. Any extended periods of absence would only undermine the aim of the PRW which is to gradually support the employee return to their normal duties and hours of work.

3.16 Managers will take into account that an employee may feel very anxious about returning to work after a lengthy period of absence and worried about how they will be perceived and treated by colleagues and management. In such cases, managers will take positive steps to make the employee feel at home and facilitate their reintegration into the workplace

ATTENDANCE MANAGEMENT

4.1 We aim to secure good attendance by way of support and encouragement to employee concerned in the first instance. This involves maintaining accurate records, ensuring return to work interviews take place and investigating and addressing any underlying causes of absence.

4.2 Where this fails to secure an improvement, we may invoke the terms of this disciplinary procedures. Unsatisfactory attendance reviews may result in disciplinary action, including dismissal. If at any stage during this process it becomes apparent that an underlying health issue is involved, the alternative procedures for dealing with long-term sickness will be used.

4.3 Absence periods relating to pregnancy or an underlying medical condition that fall within the scope of the Equality Act 2010 in particular Disability Discrimination will not be counted for the purpose of the attendance management process.

ATTENDANCE REVIEW TRIGGERS

4.4 In some cases it may be necessary for managers to review attendance and causes of absence in greater detail with the employee. Such an attendance review will be triggered by:

- two absences within a four week period;
- a pattern of absences, e.g. regularly absent on the same weekday or regularly absent around long weekends;
- 6 periods of absence within six months;
- 12 periods of absence within twelve months; and
- absent at any time without permission.

ABSENCE MANAGEMENT

5.1 Our managers will adopt a sympathetic and understanding approach to any employee dealing with a long-term and/or chronic health problem. Staff who find themselves in such a position should be confident that their manager will react in a supportive fashion when approached.

5.2 The following points should always be considered in relation to long-term absence:

- the nature of the illness;
- any contributing factors;
- the likely duration of the employee's absence;
- the nature of the employee's duties in relation to his health problems;
- our Business needs and the impact that the employee's absence is having upon these.

ENTITLEMENT OF SICKNESS BENEFIT

5.3 Throughout the duration of an employee's absence it will also be expected that he will keep in touch and advise of progress. Managers will, where and when appropriate, also seek to obtain medical reports and assessments during the absence and will arrange to discuss these with the employee when received. Medical reports may also be requested where the employee may be suffering from an underlying medical condition even though the employee has not been off sick for a prolonged period. The line manager will ask the employee for consent (preferably in writing, where this is possible)

to obtain a medical report from the employee's GP or other medical professional, and/or refer the employee to an occupational health provider for a medical assessment. Where the employee disagrees with the nature of any medical reports he will be free to seek and offer alternative medical evidence. Where the employee refuses access to medical records or does not turn up at an independent medical assessment, the process will be managed and decisions made based on the information available at the time.

5.4 Along with considering any medical reports, the manager will keep the employee fully appraised as to whether/for how long the absence or absences can be borne by HHP. In cases where dismissal through medical incapacity is being considered, full discussions with the employee will take place first, and he will be afforded the opportunity to express views on any such course of action. Alternatives to dismissal will always be considered where appropriate such as, reasonable adjustments and/or any current vacancies we may have will be considered, in line with business needs.

5.5 Employees must not attend work if they are, or reasonably believe they could be carrying an infection or have infectious symptoms. Where an employee is physically well enough to work, but not in the office to reduce the risk of infecting others, they will be entitled to work at home with the prior agreement of their Manager. Normal sickness reporting must be adhered to if an Employee is sick such that they are not able to work from home.

5.6 In cases where employees do leave employment due to ill health, managers will make every effort they can to help secure appropriate access to their pension and/or other relevant financial benefits that may be available.

DISHONEST ABSENCE

6.1 If an employee is found is falsify or exaggerate their absence, this will be treated as gross misconduct. An investigation will be carried out in accordance with our disciplinary procedure and disciplinary action may be imposed, including dismissal or future withdrawal of any organisational sickness benefit.

OTHER PROVISIONS

ABSENCE AND HOLIDAYS

7.1 If during an authorised period of annual leave, you fall ill, and you produce either a self-certification or fit note, we may count the period as sick leave and not as annual leave. You must speak to your manager on the first day of your return to work or earlier if possible and provide them with the necessary certification.

7.2 If there is a public or general holiday during your period of sickness, and you provide a self-certification or fit note this will be counted as sick leave and you will receive the holiday at another time.

7.3 We acknowledge that a holiday may aid in the recovery of an employee who is on sick leave. Where an employee intends to go on holiday while on sickness absence, they must inform their line manager as soon as is reasonably practical. The line manager will decide, considering the employee's reason for absence, if appropriate medical advice should be sought in such circumstances. Where an employee goes on holiday without authorisation, a full investigation will be initiated and depending on the outcome, disciplinary action may be invoked.

CARERS LEAVE

7.4 If you need time off to provide or arrange care for a dependant with a long term care need, we will grant you one week of unpaid leave in any 12 month rolling period. This can be taken as a block of one week or multiple shorter periods throughout the year.

CARRYING FORWARD ANNUAL LEAVE

7.5 All leave should be taken within the current leave year. However, you can carry five days over to the next leave year. This is pro-rated if you work part-time or compressed hours. For example, if you work three days a week, you can carry forward the equivalent of these three days in hours. This time must be used by 31 March or it will be lost, unless affected by absence per this Policy.

7.6 You can't carry forward a negative leave balance to the following year. For example, you can't borrow leave from the next leave year to make up for having taken too much leave in the current one.

7.6 In exceptional circumstances and with the agreement of your manager, you may be able to carry forward more than five days, if:

- you have been on maternity, adoption or shared parental leave and weren't able to take your leave before the end of the leave year;
- an exceptional business need precluded you from taking your leave that year. This must have been pre-agreed by the Chief Executive. The Board's Chairperson will approve any requests for the Chief Executive's carry forward over and above the five days.

LONG TERM SICKNESS AND CARRY FORWARD OF ANNUAL LEAVE

7.8 Employees who are on certified sick leave accrue statutory annual leave. Statutory annual leave, which includes public holidays is 28 days. Statutory annual leave remaining on 31 December due to being on certified sick leave can be carried forward for a period of 15 months after the end of the leave year in which it was accrued.

7.8 Any enhanced annual leave accrued in addition to statutory annual leave and remaining on 31 December due to being on certified sick leave can be carried forward for a period of 4 months after the end of the leave year in which it was accrued.

DOCTOR/HOSPITAL/DENTAL APPOINTMENTS

7.10 Doctor and hospital appointments should be arranged out with working hours, wherever possible. If it is not possible, then employees should request time off from their line manager. Arrangements could include using annual leave, FLEXI or unpaid time off this includes appointments for physio where generally there is flexibility in the time an appointment can be arranged.

7.11 Time will be credited to FLEXI where a hospital appointment has been arranged by the health service e.g. a scan.

7.12 Time will be credited for attendance at Hospital appointments on the mainland as follows:

Travelling from	Inverness	Glasgow
Stornoway	7:05 max	7:05 max
Balivanich	10.10 max	10:10 max
Castlebay	10:10 max	10:10 max

(the above excludes attendance at a mainland hospital for long term treatment)

HOME VISITS

7.12 Where an employee is off long term sick it will usually be necessary to visit them in their own home. The visit will discuss the ongoing absence from work and what if any support can be given to facilitate a return to work. The meeting may also take place within the HHP offices or another mutually agreed venue. Home visits will only take place with the consent of the employee.

CONDUCT WHILST OFF SICK

7.13 When on sick leave, employees are still expected to adhere to the terms in their contract of employment. Employees are expected not to participate in activities that would be at odds with their medical condition, or their employment. Any breach in respect of this will be dealt with under the disciplinary procedure.

COSMETIC PROCEDURES

7.14 Absence due to cosmetic procedures (whether carried out in the UK or abroad) will not fall under the sick leave or pay. In these cases, the employee should request time off and agree with their line manager how the absence will be processed, e.g. annual leave or unpaid leave. Where cosmetic surgery is connected to an underlying health condition normal sick leave and pay procedures will apply.

7.15 In some cases cosmetic procedures can cause medical complications and further surgery is required on a corrective basis. In these circumstances normal sick pay and leave procedures will apply.

IVF TREATMENT

7.16 Absences resulting from IVF treatment will not be processed as sick leave or pay unless they have been signed off by the employee's Doctor as a consequence of, or otherwise in relation to such treatment in which case they will be treated in accordance with this Policy. The same relates to a partner of a person that is undergoing such treatment. Instead, employees should discuss with their line manger how time off for the treatment could be accommodated, e.g. annual leave, flexi time or unpaid leave. Absences relating to IVF treatment will also not be treated as relating to pregnancy unless the employee falls pregnant.

STRESS MANAGEMENT

7.17 Stress is not an illness but a state. It can result from an illness or lead to one but it is not an illness in itself. The same relates to "nervous debility". If an employee goes off sick with stress, the manager will endeavor to find out the underlying cause so that it can be determined whether the conditions at work cause or contribute to the condition, and whether action can be taken to assist in a return to work. If the absence is certified by a doctor, the manager may ask the employee's doctor to clarify the underlying cause for stress. Our Stress Management Policy provides further information on dealing with stress in the workplace.

DISABILITIES

7.18 If an employee's absence is because of a disability or an illness leaves them in a mental or physical condition which falls within the definition of a disability, the organisation will do whatever it can to make all reasonable adjustments to his job to enable him to carry on working. If, using all reasonable endeavours, effective adjustments cannot be made, dismissal may have to take place.

7.19 If an employee has a disability, time off for rehabilitation will be paid, subject to medical confirmation, and will not be counted as sickness absence.

7.20 If an employee's absence is because of his association with another person who is disabled, then the organisation will consider reasonable adjustments to enable him to keep his absence to a minimum.

PENSIONS

8.1 If there is any impact to an Employees Pension contributions or entitlement as a result of taking leave in accordance with this Policy, this shall be dealt with in accordance with the Local Government Pension Scheme (Scotland), and following the advice of our Pensions Administrator, Highland Council.

MONITORING AND REVIEW OF POLICY

9.1 This Policy will be reviewed every three years in line with the Policy Review Schedule.

9.2 The Policy will be monitored through quarterly reports to Executive Team and annual reports to the Board in the Information Bulletin.

INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

WORD	INTERPRETATION
HHP or Partnership	Hebridean Housing Partnership
Board	Means the Board of the Hebridean Housing Partnership
Board Members	All Members of the Board including co-opted Members
RTO	Registered Tenants' Organisation
PRW	Phased Return to Work
All references to the masculine gender in this policy shall read as equally applicable to the feminine gender	