SES KITE

Staff Attendance Policy and Practice

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1 INTRODUCTION

Specialist Education Services expects members of staff to attend for work during all designated and directed hours.

The following document outlines the policies and procedures for managing absences.

Absence is a complex issue affecting the whole establishment in terms of consistency of provision for young adults, staff morale, performance and well-being, and last but not least financially.

2 PHILOSOPHY OF STAFF ATTENDANCE MANAGEMENT

Specialist Education Services believes that effective staff management is improved by a supportive and understanding model of staff absence management, which facilitates the recognition of individual needs but which is also consistent, and is not detrimental to service provision.

We aim to:

- establish a positive attendance culture
- address work related causes of absence
- promote staff well-being and occupational health
- proactively evaluate and monitor absence patterns

Preventative action is of key significance in maintaining a healthy workforce.

All staff at SES have a mutual responsibility towards the promotion and overall maintenance of health and wellbeing. All staff members should be considered as role models for the young adults in their care in relation to health and attendance, and indeed, all aspects of their work.

3 STAFF ATTENDANCE POLICY STATEMENT

3.1 RATIONALE

Staff wellbeing is recognised as vital to the effective and efficient running of SES. The staff at each establishment have mutual duties of care and co-operation, sharing responsibility for the promotion of a healthy and safe workplace environment, and the provision of a high quality service.

3.2 OBJECTIVES

The key objectives of the Staff Attendance Policy are:

- to ensure that all staff receive a fair, equitable and consistent approach.
- to ensure that all staff are fully aware of their responsibilities in terms of procedures for reporting absence.

- to ensure that confidentiality is respected and protected.
- to promote the concept that both SES and its members of staff have an equal responsibility in the promotion and maintenance of a healthy working environment.
- to ensure that staff are aware that SES is fully committed to an analytical approach to monitoring attendance, which includes establishing causes of absence and predicting future patterns, rather than focussing solely on the effects of absence.
- to ensure that attendance problems are dealt with promptly, sensitively and supportively.
- to ensure that staff are aware that SES recognises the distinction between genuine absence and issues of conduct. SES does not wish to place pressure on employees to work when they are genuinely ill but emphasises that not every minor ailment is a legitimate reason to take time off.

NB The suspected abuse of attendance requirements will be regarded as a disciplinary issue and may be investigated and dealt with as such.

4 PROCEDURES FOR STAFF ATTENDANCE MANAGEMENT

4.1 RECRUITMENT

The Equality Act 2010 limited the circumstances under which pre-employment health questions could be asked. However questions can be asked during the recruitment process to enable an employer to decide whether an applicant can carry out a function that is essential to the job. A key question is asked at the end of each interview and the required criteria outlined in the person specification about fulfilling the intrinsic demands of the job.

Members of staff are responsible for informing the Registered Service Manager (RSM) of any significant changes in their health, as soon as possible after diagnosis. 'Significant' is understood to mean having, or potentially having an affect on the work undertaken by the member of staff for SES.

Regular Health Screening plays a vital role in preventing ill health and in promoting health and well being, and is thus clearly in the best interests of individual staff members to make arrangements for this with their GP Surgery. Staff have access to health screening through the SES Vitality Health Insurance.

4.2 PROBATION

Staff members new to SES are subject to a six-month probationary period (as detailed in the Terms and Conditions of Employment). Absence levels will be part of the assessment as to whether permanent employment will be offered. A poor attendance record may mean that continued employment is not offered. The probationary period may be extended if it is felt a member of staff's poor attendance record will improve. In the case of an extended probation period, for whatever reason, the sickness allowance remains at Statutory Sick Pay only for the duration of the extension. The induction of new members of staff includes an overview of sickness absence reporting procedures in addition to sick pay entitlements.

4.3 REPORTING ABSENCE

Absence from work must be reported directly to the duty staff adult present in the SES Kite home. They will notify the RSM of the absence through email or via telephone. The duty staff adult will implement the SES Kite cover principles to ensure the home can be staffed. **The duty staff adult must not leave until the cover staff adult arrives, or the RSM authorises a different strategy.**

The person taking the call will complete an initial absence on Staffology. They will need to communicate:

- When they were due to start
- The reason for their absence
- Their likely return date
- Any action they are taking to assist a return
- Who needs to be informed
- Any special messages or instructions (e.g. lesson planning, tasks to be completed in their absence)
- Contact details if different from those recorded
- Date and time of next contact

Members of staff reporting absent should recognise the difficulties in covering absence and realise that early reporting of absence assists the smooth running of the establishment.

Reporting absence via a text message is not acceptable, neither is it appropriate to pass information through a colleague. The duty staff member will record the absence on Staffology as soon as possible. The RSM will be able to check the absence through Staffology to ensure that the reason for absence is legitimate.

- During periods of **short-term self-certificated absence**, members of staff must telephone in daily to report on progress. They will be expected to report their return to work by telephoning on the day preceding return to work (the only exception to this would be where an alternative contact plan has been agreed and sanctioned by the RSM).
- For **long-term absence**, or absence supported by a Doctor's certificate, the member of staff should telephone on the day prior to the certificate's expiry to report **either** their return to work, **or** the likely extension of the certificate, or the issue of a fit note. In the case of an extension a confirming telephone call will be expected subsequently, with a new expiry of certificate date or to discuss the doctor's recommendations detailed in the fit note.

Failure to report absence in advance of duty or failure to report a return to work may result in the Attendance Panel recommending disciplinary investigation. *(See Managing Unauthorised Absence, Section 3.7)*

Members of staff failing to give adequate notice of their intended return to work may be sent home without pay if arrangements have been made to cover their duty.

Reported absence from staff is recorded on the ***Daily Record Sheet***. In cases where a member of staff reports late for duty, or when a member of staff leaves during a duty, a record should also be made on the Daily Record Sheet. Where the latter occurs, the member of staff should then follow the reporting procedures outlined above regarding their return to work. Any member of staff leaving during a duty must clear their departure with the RSM. A precise time of arrival on duty, when late, should also be recorded on the Daily Record Sheet.

Members of staff should be assured that they will be treated with respect and that confidentiality regarding medical matters will be maintained at all times.

4.4 CONTACT THROUGH ABSENCE

The staff member's record of absence on Staffology must be updated following an incoming or outgoing contact communication by the RSM. These updates will form a full record of absence and communication.

Short-term or self-certificated (up to 7 consecutive days inclusive of any days off between rota days)

During periods of short-term or self-certificated absence, in addition to the member of staff's daily contact with their establishment, they should expect to be contacted by the RSM to enquire about their progress and expected return. This may afford the member of staff the opportunity to voice any concerns they may have regarding their absence and return to work.

The necessary frequency of such calls will be determined by the situation. However, over an episode of short-term or self-certificated absence a minimum of one such phone call is to be expected.

The co-ordination of such calls should be undertaken by the RSM. To assist the RSM can view the full absence record on Staffology.

Long-term (more than 7 consecutive days inclusive of any days off between rota duties)

During periods of long-term absence, contact with the member of staff, which is intended to be supportive, is of particular importance in order to ease subsequent return to work. It also facilitates early identification of any potential difficulties or needs connected with returning to work.

The RSM is responsible for the *co-ordination* of regular contact. Contact should be at least weekly, though the frequency of such calls will be determined by the situation.

In cases of long-term absence extending over more than 14 days, and in exceptional circumstances as necessary, consideration may be given for regular visits to be made to the member of staff. This should be offered to all members of staff in this category, with precise details being individually negotiated depending upon need. A record of such visits and telephone calls should be recorded on the relevant Staffology absence record.

It should be recognised that whilst the RSM is responsible for the co-ordination of such visits, they may opt to delegate this task to another appropriate senior staff member.

4.5 TYPES OF ABSENCE

4.5.1 Attending Appointments

Every effort should be made to avoid making medical, dental or other appointments when on duty. Therefore all staff requiring time off during normal working hours to attend appointments must have this agreed in advance by the RSM. The staff member requests this through Staffology by selecting Request Leave and choosing Appointment, this will need to be authorised by the RSM before attending.

Concerns relating to the frequency, pattern or length of such appointments will be addressed by the Attendance Panel.

Time off for appointments will be deducted from the sick pay allowance except where in exceptional circumstances, or by prior arrangement with their RSM, hours are offset against time owed or are subsequently repaid.

4.5.2 Civic Duties

Time off for civic duties will be paid as per national guidelines. The staff member requests this through Staffology by selecting Request Leave and choosing Civic Duties, this will need to be authorised by the RSM before attending.

4.5.3 Compassionate Leave

Up to five additional days leave per annum can be classified as compassionate (i.e. allowed in respect of a bereavement). Any other requirements would have to be specially requested through the RSM who will consult with the Directors, who will determine entitlement and financial details.

Should a bereavement occur, it will be classified as compassionate if it involves a member of staff's:

a. partner
b. child
c. parent
d. grandparent
e. sibling
f. other close family members

In all cases compassionate leave has to be agreed with the RSM, the staff member requests this through Staffology by selecting Request Leave and choosing Compassionate, this will need to be authorised by the RSM.

Unplanned compassionate leave will be recorded by the duty staff member in liaison with the RSM in the same way as the sickness absence, choosing Compassionate as the reason for absence.

4.5.4 Absence to Care for Dependents in Unforeseen Circumstances

Dependency absence describes when unforeseen circumstances occur that staff have taken time off to care for dependants. The Department of Trade and Industry in its guide to employers and employees defines dependents as:

> *"….the husband, wife, child or parent of the employee. It also includes someone who lives in the same household as the employee. For example, this could be a partner or an elderly aunt or grandparent who lives in the household. In cases of illness or injury, or where care arrangements break down, a dependent may also be someone who reasonably relies on the employee for assistance. This may be where the employee is the primary carer or is the only person who can help in an emergency."*

The emphasis here is extreme or emergency situations.

SES expects individuals to have, wherever possible, contingency care plans for their dependents, though recognises that unforeseen circumstances may arise.

The RSM has the discretion to classify up to 5 days paid dependency absence per annum, deductible from their paid annual sickness entitlement (for part time staff a pro rata allowance is made). In exceptional circumstances staff may ask the Attendance Panel to consider enhancing the paid dependency absence classification deductible from their sickness entitlement.

If circumstances are such that absence related to dependency exceeds the five days per annum then it will be unpaid. Where patterns, or frequency of dependency leave requirements give cause for concern, the Attendance Panel, or a representative of, may meet with the individual.

In all cases classification of absence as dependency has to be agreed by the RSM and if known in advance the staff member should request through Staffology by selecting Request Leave and choosing Dependency.

Unplanned dependency leave will be recorded by the duty staff member in liaison with the RSM in the same way as the sickness absence, choosing Dependency as the reason for absence.

(N.B. Pets are not considered to be dependents)

4.5.5 Maternity Leave

The maternity leave arrangements accord with the Statutory Maternity Pay Leave legislation *(for details please contact the Administrator).*

4.5.6 Paternity/Adoption Leave and Maternity Support Leave

The Paternity/Adoption Leave and Maternity Support Leave arrangements accord with current statutory legislation *(for details please contact the Administrator).*

4.5.7 Sickness Absence

Sickness Absence may be **short-term** *(up to 7 days in total, inclusive of any days off within this period)* or **long term** *(in excess of 7 days).* ***A Sickness Absence Record must be completed on Staffology in all cases.***

- Short-term sickness absence must be self-certificated.
- Long-term sickness absence must be supported by a Medical Certificate.
- Medical Certificates must be produced for the whole period of absence.

The member of staff is responsible for completing the Sickness Absence Record on Staffology within seven days of their return to work. Staff members will receive an automated reminder email.

4.5.8 House Moving

One day per annum is allowed with pay for members of staff who move house. The staff member requests through Staffology by selecting Request Leave and choosing Moving Day, this will need to authorised by the RSM in advance.

4.5.9 Interviews

A maximum of three days per annum will be paid for members of staff who attend interviews. Staff needing further time off than this should arrange to take days from their leave allocation. The staff member requests through Staffology by selecting Request Leave and choosing Interview, this will need to authorised by the RSM before attending.

4.5.10 Domestic Emergencies

In the case of unforeseen domestic emergencies, up to one day (eight hours) paid leave may be allowed per annum: further leave to manage domestic emergencies will be unpaid. Absence must be reported as soon as possible to the duty staff member who will complete the absence entry on Staffology.

4.5.11 Attendance at Training/Courses/Conferences for Professional Development

Attendance at Training/Courses/Conferences is not recorded as absence provided that it is sanctioned in advance by the RSM. The staff member requests through Staffology by selecting Request Leave and choosing Professional Development.

4.5.12 Unauthorised Absence

All unreported absence is classified as unauthorised absence, (see Section 3.7). This falls into three categories:

Type 1	Non-attendance that is not reported to SES initially, following the correct procedures described in Staff Attendance policy.
Type 2	Non-attendance where no regular daily update is received (except when an alternative contact plan has been agreed).
Type 3	All absences where no sickness absence record is completed within seven days of return.

4.5.13 Punctuality

Punctuality is an important aspect of staff attendance, and is essential to the safe and effective functioning of each establishment.

Poor punctuality and attendance issues are addressed through the Line Management system. If problems with punctuality or absence persist then matters will be dealt with following the Grievance, Capability and Disciplinary procedures.

4.5.14 Adverse Weather

SES recognises that staff may face difficulties attending work and returning home during periods of adverse weather conditions such as heavy snow falls or flooding. However, while SES is committed to protecting the health and safety of all its staff, it must ensure that disruption caused to its core services remains minimal, especially as our children require 24 hour care.

Staff should make every effort to attend work during adverse weather conditions without putting their personal safety at risk. However, if it is unavoidable for staff to be absent from the workplace, and following discussion and agreement with the RSM, the following options can be considered:

- Work from home (if practicable, depending on role)
- Make the lost time up at an agreed time
- Time be added to banked hours balance (care staff only)
- Take annual leave
- Take unpaid leave

(Or apply a combination of the above options)

In the event of adverse weather conditions staff will take all reasonable steps to report their inability to attend work following standard absence reporting procedures outlined in section 4.3. In these exceptional circumstances the RSM will be notified to ensure early decisions are taken to maintain the safety and running of the establishment. This will apply for each day that the member of staff is unable to attend work. Please note that failure to comply with reporting arrangements may amount to unauthorised absence and could therefore be unpaid.

Care staff may in rare circumstances be required to work longer shifts to cover the home until relief from other care colleagues can be facilitated.

4.6 RECORDING ABSENCE

All absences are recorded, and stored electronically in the individual staff record on Staffology. On return to work **the absentee** is responsible for completing the sickness absence record within 7 days depending on the type of absence.

Absences will be unpaid if the record is not completed within seven days of return to work.

Self certificated absence (7 days or less), sequential days illness or unavailability for work are internally recorded by the Administrator, in order to support the RSM in their management of staff absence. However, only absence reported for direct rostered time will be recorded against sickness entitlement. It is therefore very important that staff notify the RSM as soon as they are well enough to work. This fits with the expectation that staff give a daily update of their status. This allows for the RSM to have a full picture of the staffing resources available to them at any one time.

4.7 MANAGING UNAUTHORISED ABSENCE

Unauthorised Absence as defined at 4.5.12 above falls into three categories.

Type 1	Non-attendance that is not reported to SES initially, following the correct procedures described in Staff Attendance policy.
Type 2	Non-attendance where no regular daily update is received (except when an alternative contact plan has been agreed).
Type 3	All absences where no sickness absence record is completed within seven days of return.

<u>For Type 1</u>

- The absentee will be asked to meet one or more of the Attendance Panel (see 4.8) on return to work: a verbal or written warning may be issued, or disciplinary investigation may be recommended.
- Further unauthorised absence of Type 1 may result in the Attendance Panel issuing a written warning or recommending disciplinary investigation.
- Written warnings will be spent after a period of one year. Subsequent unauthorised absence of Type 1 will result in reactivation of the system at the disciplinary investigation stage.

<u>For Type 2</u>

The absentee will be asked to meet one or more of the Attendance Panel on return to work, and a verbal warning may be issued. Further unauthorised absence of Type 2 will result in a written warning being issued, and subsequent failure to improve may result in disciplinary action.

Types 1 and 2

- The initial response to unauthorised absence of types 1 and 2 will be to attempt to make telephone contact with the absentee to clarify the current situation.
- Where this is not achieved the absentee will be contacted by letter and asked to make urgent contact with their establishment to clarify the current situation.

Type 3

- On return to work a sickness absence record must be completed on Staffology for all absences.
- **Until the sickness absence record is completed absence remains unauthorised and unpaid.**
- The Attendance Panel will review persistent unauthorised absences, and individuals will be asked to meet one or more of the panel, which will set improvement targets and may issue a verbal warning. Where no improvement is made within the identified time a written warning may be issued, and subsequent failure to improve will result in disciplinary action.
- Written warnings will be "spent" after a period of one year, however, further unauthorised absences will result in reactivation of the process at the verbal warning stage.

4.8 THE ATTENDANCE PANEL

The Attendance Panel consists of:

- Administrator
- RSM
- A Director

Meetings require a quorum of two members to be present.

The panel meets on a monthly basis. The general remit of the panel is to review the analysis of absence statistics as provided by the Administrator, and to discuss patterns of absence (either general, specific or individual) and appropriate preventative action. Other issues of concern in relation to staff attendance, and consequent recommended action may also be discussed including issues related to fitness to work, and work related risk assessments. Members of staff are invited to submit written concerns relating to attendance issues, or may request to meet with the Attendance Panel. The panel may also ask individuals whose absence is causing concern to meet with them. The Panel may also consider target setting in relation to attendance.

In addition, should the Attendance Panel receive direct evidence of dishonesty, fraud or malpractice relating to attendance, (which may be a reason for dismissal on grounds of misconduct), they will pass on the detail to be dealt with as a disciplinary matter.

The Attendance Panel – Recommendations for Absences Causing Concern

The Attendance Panel recognises the importance of managing issues relating to absence and attendance promptly and effectively, and aims to provide an approach that whilst sensitive to individual circumstances, is also fair and equitable, and respects confidentiality.

All absence is of concern, however, persistent, regular and long term absence are of particular concern.

(I) Absence Experienced During the Probationary Period

Where a pattern of absence starts to give cause for concern, line managers will in the first instance seek to investigate sensitively with the individual to identify any possible causes, and feedback to the panel. Depending upon the circumstances the panel may then recommend:

- that the individual meets with their RSM to negotiate resolution
- that Occupational Health advice is sought
- that employees are made aware of support available through SES Vitality Health Insurance
- that further investigation is required

Employees must be aware that deliberately omitting or providing misleading information may lead to Disciplinary Action.

Employees must be aware that they are responsible for informing the Principal and RSM of any significant changes to their health that may affect their ability to work.

(ii) Long Term Absence

For any single period of absence extending beyond 4 weeks and for which no projected return date is provided by a Doctor, referral to an Occupational Health Physician, prior to return to work will be recommended.

A second period of absence within 2 years of the beginning of the first episode and extending beyond 4 weeks should result in the automatic referral to an Occupational Health Physician.

(iii) Frequent Short Term Absence and Patterns of Absence

The following guidance measures will act as triggers for consideration by the Attendance Panel:

- any 2 single episodes of absence in any 4 week period
- 3 episodes of absence in any 10 week period
- 3 episodes of absence of more than 3 days in any 15 week period
- a notable pattern of absence developing over a period of any length; the period being a minimum of at least 3 weeks

The attendance panel may choose to apply The Bradford Factor (available on Staffology) to help inform views on absence; this is a simple formula that allows SES to apply a relative weighting to employee unplanned absences (sickness, doctors appointments, emergency childcare, etc). The Bradford Factor supports the principal that repeat absences have a greater operational impact than long term sick. The score generated by the Bradford Factor provides an indicator that is not subjective and can support the attendance panel when managing absence. The context and personal circumstances surrounding an individual employee's absence will always be taken into account when interpreting the Bradford Factor score.

The Attendance Panel then has the discretion to:

- Take no action.
- Make further informal enquiries.
- Write to the individual to inform them their attendance is a matter for concern, and to arrange that they meet with a member of the Attendance Panel.

Once a decision has been taken to meet with an individual, a series of sequential stages apply:

a. Meet with the individual and set targets for improvement/resolution as appropriate. The outcome of the meeting will be notified to the individual in writing, and where the outcome requires it, will serve as a written warning should no improvement occur.

b. Review the individual's attendance on a monthly basis for three months, with a final review six months after the initial meeting.

   * Should the identified improvements/resolution be attained and maintained over the six month period, the individual will be notified of this in writing.
   * Should the identified improvements/resolution not be attained or maintained at any time within the six months following the initial meeting, the individual will be notified in writing that their attendance is of serious concern, and that a further meeting with the Attendance Panel is to be convened.

c. Meet with the individual and review identified targets for improvement/resolution, which may include the requirement for a GP certificate, (for which SES would pay), for all absences over the next 6 months, or other specified time period.

   The panel may alternatively recommend that the advice of an Occupational Health Physician be sought regarding the individual's fitness to work. The outcome of the meeting will be notified to the individual in writing, and where the outcome requires it will serve as a written warning.

The individual's attendance will continue to be monitored on a monthly basis over the next 6 months, and failure to achieve and sustain identified targets/resolution may result in:

* referral to an Occupational Health Physician;
* investigation.

Following a further meeting with one or more representatives of the Panel, a letter detailing the outcome of this meeting will serve as a final warning, after which, if identified improvements are not achieved and sustained, a recommendation for termination of contract may be made.

At each stage the individual may:

* be accompanied by a representative to observe the panel meeting
* appeal against the warning to the Directors, whose decision will be final.

4.9 ATTENDANCE, PERFORMANCE AND PROMOTION

Attendance will also be considered as an integral part of Performance Management Reviews, Audits and Appraisals, and staff must be aware that poor punctuality and poor attendance records may adversely affect promotion prospects, and could affect whether permanent or fixed term contracts of employment are offered. Internal promotion decisions will take into account both punctuality and attendance.

4.10 ABSENCE STATISTICS

In compiling thorough and accurate data relating to staff absences it is essential that both qualitative and quantitative information is obtained.

The compiling and analysis of absence statistics is beneficial in that it enables an objective view of absence to be undertaken. This may either confirm or refute subjective views of absence. Analysis should also be used to:

- identify whether either general or specific problems exist in relation to staff absence
- identify as closely as possible any particular times and staff groups affected, i.e. patterns of absence
- identify the types of absence involved

Effective data analysis can then be used to:

- target any general or specific problems
- inform staff duty rosters and planning
- inform staff recruitment needs

Quantitative data will be compiled from the Daily Recording Sheets, supported by absence records, completed by staff on their return to work. The compilation of this data will be carried out by the Administrator.

Qualitative data will also be accumulated through the 'Return to Work' process, and through informal support mechanisms.

Analysis of the quantitative and qualitative data will be undertaken and a monthly summary provided for discussion by the Attendance Panel.

Cumulative analysis will be of value in terms of long term planning and projections as regards rostering, recruitment and budgeting.

5 OCCUPATIONAL HEALTH

5.1 WORKLIFE SUPPORT

- It is recognised that both SES and individual members of staff have responsibilities in terms of maintaining good health and preventing ill health.

- SES takes staff wellbeing in all regards as a serious issue. A supportive ethos and culture is promoted within SES, and many systems and structures are established to ensure staff wellbeing is paramount.

- Safety issues concerning positive handling are addressed within the Positive Management of Behaviour Policy and Practice document and in Team Teach training.

- Specialist Education Services maintains Employer's Liability Insurance cover for staff. All claims must be discussed with the Principal. Applications can be made by a member of staff, or his/her representative, to the Administrator who will assist in servicing the claim. Accidents occurring in the work place must be recorded in the Accident Book.

- A Health and Safety Sub-committee exists which examines all health and safety issues relating to the operation of each establishment.

- SES provide Vitality Health Insurance for all staff with range of benefits, including:
  - access to online GP service
  - sessions of Cognitive Behaviour Therapy
  - advanced cancer cover
  - full cover for eligible in-patient and day-patient hospital and consultant fee
  - therapies cover; physiotherapy, osteopathy, acupuncture etc
  - access for to an independent, confidential 24-hour advice, support and counselling service

- Members of staff are individually responsible for keeping up to date with personal vaccinations for Tetanus, BCG etc. and for seeking advice and information from their GP regarding any health concerns. However in the case

of Hepatitis B injections a letter of support will be made available for staff to approach their GP, and SES will reimburse staff who are required to pay for such injections.

- All members of staff have access to the Staff Support and Development Programme. In particular, Personal Support Meetings are facilitated regularly with a senior colleague, providing the member of staff the opportunity to discuss issues, both work-related and on a more personal level.

5.2 RETURN TO WORK

On return to work following an absence line managers will always make a polite enquiry about a staff member's wellbeing, and facilitate a **'Return to Work Meeting'.** The RSM will conduct return to work meetings for all absences at the earliest opportunity. The nature and length of these meetings will vary according to circumstances and length of absence.

In significant and exceptional circumstances the return to work meeting must be held prior to a staff member's return with the RSM. This is likely to be after an extended or prolonged absence or following a significant incident.

Every member of staff has a right to a 'Return to Work Meeting' for any kind or length of absence.

Return to Work Meetings are an essential aspect of SES's commitment to Occupational Health in that it affords the member of staff the opportunity to discuss any concerns they have relating to their health and working environment. During this meeting it is important that the RSM ensures the staff member is well enough to return to their role. It also enables potential or real problem areas to be addressed and, where necessary, allows for any support mechanisms to be established for the member of staff. It also serves as an opportunity to update the staff member with any information about events or changes that may have an impact on their return to work. The content of such meetings is confidential, and information will only be passed on with the consent of the staff member. The length of the meeting will vary upon need.

Prior to a return to work meeting, the RSM should consider:

- The staff member's previous attendance records as this will form part of the discussion should there be wider issues and a pattern of absence.
- Any discussion that has been held with the staff member following advice from their GP on the 'Statement of Fitness for Work'.

During the meeting, specific details regarding the return to work may be discussed, taking into account the Statement of Fitness to work from the GP. Further guidance related to this is summarised in the next section (5.3)

The RSM will diary an appointment for their meeting which will take place at the first possible opportunity, or in the case of absences of more than 15 days, prior to return to work.

During the meeting, section 2 of the sickness absence record on Staffology must be completed. This will then be submitted electronically and saved on the individual staff record.

5.3 PROCEDURE FOR STAFF RETURNING TO WORK, REQUIRING GRADUAL/PART TIME RETURN OR TEMPORARY PART TIME HOURS

It is envisaged that gradual, part-time returns or temporary part time hours may be necessary in some instances, notably following extended absences due to ill health.

NB. Any person declared not fit for work by a Medical Practitioner cannot return to work under normal circumstances whilst their certificate is current. However, in some situations the employee may be able to return to work whilst certificated at their personal request if it is deemed appropriate to do so through discussion with the RSM or a member of the SES Senior Executive Group. Doctors have the facility to write a sickness/fit note that describes an employee as "may be fit for work taking account of certain conditions and criteria". SES does not expect employees to return before they are able but there may be many aspects of a person's role that can still be performed and we expect all employees to reasonably explore those options in their conversations with their doctor and their line manager.

Where necessary a risk assessment will be carried out and a Return to Work schedule compiled, prior to return. Ideally this should be completed in a face to face meeting, or alternatively via telephone.

A similar process is used for arranging part-time working hours, if necessary, leading up to and following Maternity Leave.

6 ADDITIONAL INFORMATION

6.1 FITNESS FOR WORK

Seeking a Medical Opinion

It may, in certain circumstances, be necessary for the RSM to ask for a professional opinion from a staff member's GP, or specialist, about their medical capability to perform their job to the required standard, without adversely affecting their health. This can be termed as making an 'ill-health' referral, and enables SES and the member of staff to identify the precise nature of the difficulties and, where appropriate, to find solutions.

There are no set criteria for a referral, but the following list offers a guide:

- **Work-related injury/illness assessment.**
- **Persistent short-term absence** because of sickness.
- **Poor work performance** that may be attributed to a medical condition.
- **Difficulties at work** because of health problems.
- **Long-term illness.**

Advice may include:

- steps that can be taken to aid recovery and return to work
- suggestions for accommodating specific medical problems in the workplace
- recommendations about the continuing employment of the member of staff
- prevention of ill health

If an employer wishes to contact the employee's doctor or other specialist treating them for a medical report, he or she must notify the employee in writing that they intend to make such an application and they must secure the employee's consent in writing.

Staff have the right to:

- withhold consent to the application being made
- state that they wish to have access to the report
- request amendments to the report
- withhold consent to the report being supplied to the employer
- expect the issue to be dealt with confidentially and sensitively.

It may, in rare and exceptional circumstances be necessary to ask for a professional opinion from an independent Occupational Health Physician.

Obtaining the Member of Staff's Written Consent for Access to Medical Records

This may be done at the same time as discussing the reason for seeking a medical opinion. It is important that this is approached sensitively because the member of staff may be fearful about their health and the referral process may raise anxiety about their future employment. If the member of staff is absent from work because of sickness, this meeting may take place at the member of staff's home with their consent, or at a mutually agreed venue.

It must be explained to the member of staff that medical information supplied to the RSM will remain confidential to them only or senior managers as necessary.

Refusal to give consent for access to Medical Records

The majority of members of staff appreciate that it is in their best interests to give consent for a request for a medical report from their doctor. However, consent is not mandatory.

Should a staff member refuse to give consent, the company can insist upon their attendance at an appointment with a designated Medical Officer or an Independent Occupational Health Physician who will advise on the staff member's capability to continue in their present post.

If the advice is that the member of staff is medically capable to continue to work a disciplinary investigation may be undertaken if the member of staff's attendance or performance fails to improve.

Equally where an employee refuses to cooperate in providing medical evidence, or to undergo an independent medical examination, the employee will be told in writing

that a decision will be taken on the basis of the information available and that this could result in dismissal.

Recommendations

Members of staff will be informed about the results of the enquiries and deliberations and this will be done at a time and place convenient to the member of staff.

Recommendations may include:

- retirement on grounds of ill health
- redeployment (where this is feasible and appropriate)
- fit to return to work with rehabilitation advice
- fit to return to work with or without a review period
- dismissal on the grounds of incapacity

Appeal against medical decision

A member of staff may wish to appeal to the Directors against the medical opinion. In such cases no further action will be taken with regard to the future employment of the individual until the appeal procedure has been completed. This would normally be within two weeks. The individual will continue to be paid at whatever rate payment was agreed at the time of posting of the medical opinion.

The intention to appeal against a medical opinion must be submitted in writing to the Administrator within ten days of the posting of the written notification of the medical opinion.

The member of staff should provide an alternative medical opinion within 30 days of the posting of the written notification.

The consideration will be given to the alternative medical opinion and may require a further physical examination of the member of staff.

6.2 SICK PAY

SES operates a Sick Pay Scheme where entitlement to sickness payments is linked to length of service. All sick pay (except Statutory Sick Pay) is at the Director's discretion.

Sickness entitlements will be paid according to the following scales*:

Payment will not be more than:

a. During the probationary period statutory sick pay only is available.
b. After the probationary period, but less than one year's service, full pay for 5 working days.
c. During the second year of service (Y1-Y2) full pay for 5 working days and then half pay for 5 working days.
d. During the third year of service (Y2-Y3) full pay for 25 working days and then half pay for 25 working days.

e. During the fourth year of service (Y3-Y4) full pay for 50 working days and then half pay for 50 working days.
f. During the fifth year of service (Y4-Y5) full pay for 75 working days and then half pay for 75 working days.
g. For all following years of service full pay for 100 working days and half pay for 100 working days.

For the purpose of calculating allowances the year shall be deemed to begin on 1 April and end on 31 March. In the case of (e, f and g) above the company reserves the right to calculate absence on a rolling twelve month period commencing with any month of its choosing.

In the event of a period of sickness extending beyond 31 March, the staff member shall not be entitled to a fresh allowance until he/she has resumed full duties.

The sickness entitlement for a member of staff relates to the level of service they have accrued at the time of their period of sickness commencing. For example, in a circumstance where a staff member is initially sick during the period in which they are entitled to 25 working days full pay and 50 days at half pay, this entitlement will continue to apply if their sickness extends into their next period of service.

Continued absence for related illness will count towards the same entitlement; therefore if a staff member returns to work and is subsequently sick for the same reason, this will count as part of the same allowance.

The Attendance Panel can review individual cases and recommend to the Directors that sickness entitlement is enhanced, this will be based on past attendance levels and any other relevant information.

Payment is only made when the sickness absence record has been completed and the relevant documentation has been submitted on Staffology, within the specified time frame.

*All staff who were employed by SES on or before 12 July 2024 have protected sickness entitlements; details can be requested from the administration team.

6.3 SICKNESS ENTITLEMENTS FOR PART TIME / TERM TIME ONLY CONTRACTS

Part Time Contracts

The above sickness entitlements will be reduced proportionately for those staff on part-time contracts.

Term-Time Only Contracts: Full-Time Hours

Term- time only contracts include seven weeks paid leave (for example, teaching assistants). A further seven weeks are unpaid. Thus sickness entitlements will be reduced proportionately. The unpaid weeks are identified as:

- First five weeks of the summer holiday.
- First week of the Christmas holiday.
- First week of the Easter holiday.

Unpaid days/hours are not included when counting the number of days absent due to sickness.

Term-Time Only Contracts: Part-Time Hours

The amount of paid leave is reduced proportionately according to the number of hours worked. Thus the amount of unpaid leave is increased and sick entitlements decreased. Unpaid leave dates are as above, plus additional days identified on a staff members individual terms and conditions.

Unpaid days/hours are not included when counting the number of days absent due to sickness.

6.4 ABSENCE/SICKNESS DURING ANNUAL LEAVE

If a staff member is certificated by a qualified practitioner and signed off as unfit for work prior to pre-booked annual leave, and their Statement of Fitness for Work covers their annual leave period, the requested annual leave can be cancelled and re-imbursed onto the staff members annual leave entitlement. This would be discussed with the staff member, as in some circumstances they may choose to use annual leave days as a preference.

If a staff member is sick during a period of annual leave there may be the option to have annual leave for the days that they are unwell to be credited back to their leave entitlement. In order to qualify for this, the staff member will need to report their sickness in the standard way outlined in this policy by contacting the duty staff member or RSM on the first day of absence. If the sickness continues into further annual leave days, contact must be made daily by the employee to SES to report that they remain unwell. If the member of staff requests to have their annual leave allowance re-imbursed then the days of absence during their annual leave period will be paid in line with statutory sick pay only (not SES sickness payments). All decisions relating to absence during annual leave will be at the discretion of the RSM in liaison with the Directors.

6.5 WORKING ADDITIONAL HOURS

There are structures in place to record and monitor any variance in hours over time as a result of the necessity to work a rota shift pattern and fulfil roles and responsibilities.

Staff absence may well necessitate short term changes in rotas or the pattern of working. We recognise that a sensible limit must be set on additional hours to prevent, as far as possible, further staff absence due to overwork/stress/exhaustion. A reasonable upper limit should also assist in the preservation of high standards of work.

- Staff should not generally be offered any additional hours in the first week of return following significant sickness absence.
- The RSM must monitor additional staff working hours with full reference to the Working Time Regulations 1998. Individual staff may choose to opt out of the

Working Time Regulations and work in excess of the hours specified, although this must be notified in writing to SES.

- Part time members of staff may negotiate additional hours with the RSM but this should not amount to more than a total number of 60 working hours per week

In complying with the European Working Time Directive SES Ltd must ensure staff take a minimum of 20 days (148 hrs) annual leave per year. In order to do this, where staff do not book leave totalling 20 days (148 hrs), or are likely to run out of time to book such leave, leave days will be designated. Any remaining leave days not taken or not carried over will be lost.