



OVERVIEW AND SCRUTINY COMMITTEE - SITTING AS A SELECT COMMITTEE

Date: Tuesday, 15 January 2019

Time: 6.00pm,

Location: Shimkent Room - Daneshill House, Danestrete

Contact: Lisa Jerome - Tel 01438 242203

Members: **Councillors:** L Martin-Haugh (Chair), P Bibby CC (Vice-Chair),
S Barr, J Brown, M Downing, J Fraser, ME Gardner, J Hanafin,
L Kelly, J Mead, S Mead, A Mitchell CC, R Parker CC and S-J Potter

AGENDA

PART 1

1. APOLOGIES FOR ABSENCE AND DECLARATIONS OF INTEREST

2. REVIEW OF SBC SICKNESS MANAGEMENT

To consider the report and information provided by officers that Members requested at the evidence gathering meeting on 14 November 2018, including an outline of early recommendations for the review, and to interview further witnesses for the review.

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3. URGENT PART 1 BUSINESS

To consider any Part 1 business accepted by the Chair as urgent.

4. EXCLUSION OF PUBLIC AND PRESS

To consider the following motions –

1. That under Section 100(A) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as described in paragraphs 1 – 7 of Part 1 of Schedule 12A of the Act as amended by Local Government (Access to Information) (Variation) Order 2006.

2. That Members consider the reasons for the following reports being in Part II and determine whether or not maintaining the exemption from disclosure of the information contained therein outweighs the public interest in disclosure.

5. URGENT PART II BUSINESS

To consider any Part II business accepted by the Chair as urgent.

Agenda Published 7 January 2019

Meeting OVERVIEW & SCRUTINY (SITTING AS A SELECT COMMITTEE)

Portfolio Area RESOURCES

Date 15 JANUARY 2019

Authors Stephen Weaver Ext:2332 Clare Davies Ext:2164

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SICKNESS MANAGEMENT SCRUTINY REVIEW

1 PURPOSE

- 1.1 To provide Members with the information requested at the evidence gathering meeting on 14 November 2018, including an outline of early recommendations for the review.

2 RECOMMENDATIONS

- 2.1 That the information provided by officers, which is appended to the report, be noted as evidence for the review.
- 2.2 That Members agree or amend the early recommendations from the review below:
 - (i) When the third party sickness absence provider, First Care, provide their Nurse led sickness reporting programme to staff that a comprehensive communication plan is provided which, amongst other points, will highlight that this measure has been introduced to improve employee wellbeing which in turn should reduce sickness levels.
 - (ii) That the initial target of a 2% improvement on sickness levels for the Council in the first year of First Care’s contract be reconsidered by the Portfolio Holder and by officers and that a higher target, which is more in line with the providers average of a 4-5% improvement in their first year of operation at other work places, be established.

- (iii) That officers work with the Portfolio Holder to seek to reduce sickness absence which has been specifically associated with the undertaking of the Business Unit Reviews.
- (iv) That the seasonal variations and peaks and troughs in certain Business Units sickness levels be recorded by officers and be provided to Members through the quarterly performance report.
- (v) That the Portfolio Holder and officers consider specific measures which might help reduce sickness absence associated with stress, anxiety and depression (Please see Appendix E – Time to Change Action Plan and Section 4 of the Report dated 14 November 2018).
- (vi) Approximately half of all staff has little or no sickness leave each year, the other half account for the remainder of the sickness figures (16-18 days a year). As such, Scrutiny Members support the Senior Leadership Team's efforts and measures they have introduced to address this issue and request that an update report be provided in approximately one year to further consider performance in this regard.

2.3 That the evidence obtained from the witness interviews at the 15 January 2019 meeting and Members observations and further recommendations from this meeting be submitted to a future Overview and Scrutiny Committee to agree a final report and recommendations resulting from the review.

3 BACKGROUND

3.1 In October 2018 the Overview and Scrutiny Committee agreed a scoping document to scrutinise this issue and a meeting was arranged for 14 November 2018 where a number of witnesses provided evidence to Members. At this meeting Members requested further information and witnesses to be invited to a future review meeting.

3.2 The review has so far established (i) The introduction of First Care is a positive step by the Council to address its Sickness Management issues but care needs to be taken regarding its communication and delivery; (ii) Sickness Management remains within the control of SBC; (iii) Some Business Units which are going through reviews are experiencing higher sickness figures; (iv) SLT and Members share a commitment and passion for the health and wellbeing of SBC staff; (v) There are seasonal peaks and troughs in certain Business Units which are not always recorded; (vi) Approximately half of all staff have little or no time off work through ill health each year, the other half account for the remainder of sickness (16-18 days a year); (vii) Scrutiny Members support the measures that SLT have put in place so far to address sickness absence; and (viii) a focus on the issues that generate the highest number of absences is needed for stress, anxiety and depression.

4 INFORMATION THAT MEMBERS REQUESTED AT THE EVIDENCE GATHERING MEETING ON 14 NOVEMBER 2018

- 4.1 That officers from Customer Services and Housing Investment be invited to the next SBC Sickness Management review meeting.
- 4.2 That Union representatives be invited to the further Sickness Management review meeting.
- 4.3 That data collected for FirstCare's East of England clients be shared with the Committee – see Appendix A (First Care Case Study Nuneaton and Bedworth Borough Council); Appendix B (First Care Case Study London Borough of Hillingdon); and Appendix C (First Care Case Study Dacorum Borough Council).
- 4.4 That officers clarify the projections for reduction in sickness absence after the engagement of the third-party sickness absence provider (FirstCare) – see Appendix D (First Care Return on Investment Dec 2018).
- 4.5 That the “Time to Change” pledge be circulated to Members – see Appendix E (SBC Time to Change Action Plan).
- 4.6 That the SBC Volunteering Policy be submitted to the Committee - see Appendix F (Employee Volunteering Policy).
- 4.7 That the current and revised Sickness Policy (when available) be submitted to the Committee - see Appendix G (SBC Sickness Absence Policy & Procedure).
- 4.8 That details of the employee assistance programme be submitted to the Committee.
- 4.9 That details of East of England LGA Sickness Absence Survey be provided to Members – see Appendix H (East of England LGA Survey Summary October 2018).

5 IMPLICATIONS

Financial Implications

- 5.1 There are no direct financial implications within this report.

Legal Implications

- 5.2 There are no direct legal implications within this report.

Other Implications

- 5.3 All corporate implications will be addressed in the reviews final report and recommendations which will be presented to a future meeting of the Committee.

APPENDICES

Appendix A - First Care Case Study Nuneaton and Bedworth Borough Council

Appendix B - First Care Case Study London Borough of Hillingdon

Appendix C - First Care Case Study Dacorum Borough Council

Appendix D – First Care Return on Investment December 2018

Appendix E - SBC Time to Change Action Plan

Appendix F – SBC Employee Volunteering Policy

Appendix G – SBC Sickness Absence Policy & Procedure

Appendix H – East of England LGA Survey Summary October 2018



HOW NUNEATON & BEDWORTH BOROUGH COUNCIL REDUCED OVERALL ABSENCE BY 36% AND THE AVERAGE LENGTH OF MENTAL HEALTH ABSENCE BY 64%

KEY DETAILS:

Employees Covered: **612**

Overall Absence Reduction: **36%**

Service Type: **Essential Support**

Absence Reduction in Average Length of Mental Health: **64%**

"I would recommend FirstCare. They offer a fantastic management tool and provide live data which can be accessed whenever it's needed."

Mariam Khalifa

HR Support Officer, Nuneaton and Bedworth Borough Council

The client

Nuneaton and Bedworth Borough Council provides residents and visitors with a wide range of council services.

It is a local government district in northern Warwickshire, England, consisting of the towns of Nuneaton and Bedworth, the village of Bulkington, and the green belt land in between.

To ensure it operates efficiently and effectively, the attendance of its 612 staff is essential.

The requirement

Nuneaton and Bedworth Borough Council were experiencing high levels of frequent, short-term absence.

To combat this issue, it relied upon an absence management service provider that went bankrupt in 2014, so the council conducted a tendering process and became aware of FirstCare.

Mariam Khalifa, HR Support Officer at Nuneaton and Bedworth Borough Council, explains: "We found that there were not a lot of organisations out there that could offer what we wanted.

"FirstCare's absence management services appealed to us. We chose FirstCare, because they were the only attendance management services provider that tendered for our service and as far as we were aware were the only ones available in the market at the time."

“The alerts that FirstCare set-up enabled us to track and manage absences better. They’ve also helped us introduce reminders for welfare meetings and return to work interviews.”

Mariam Khalifa

HR Support Officer, Nuneaton and Bedworth Borough Council

The solution

With our reporting data, we were able to set-up alerts to enable line managers at the council to be informed when employees were off sick.

Mariam said: “We understood that short-term, frequent absence was an issue. The alerts that FirstCare set-up enabled us to track and manage absences better. They’ve also helped us introduce reminders for welfare meetings and return to work interviews.”

“Parul Hoque our account manager [at FirstCare] has been very helpful, as she tailored the alerts to our needs and made them dynamic, so they suit different line manager requirements.

“In addition, the reports give us access to staff absence history, and enable us to feed back to our director team with ease.”

The results

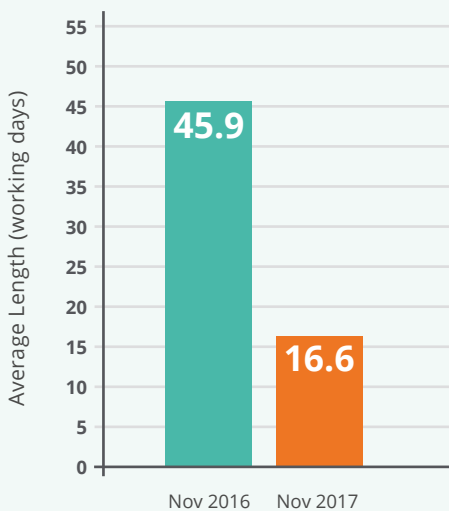
Our real-time data led to the council achieving a reduction in overall absence, and in particular, mental health absence.

Mariam said: “Overall we’ve seen a 36% reduction in our absence rates from 5.54%, to 3.55% in the rolling year of November 2017. This has resulted in 4.5 days saved per employee.

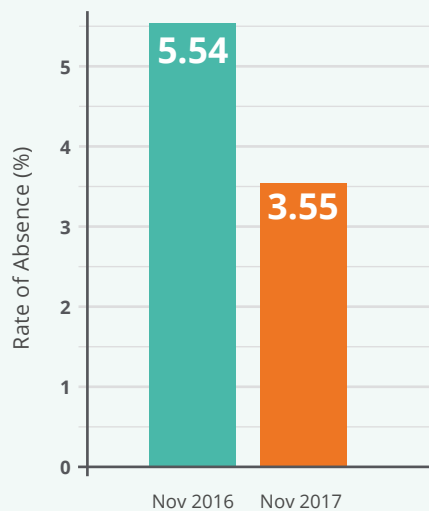
“By using FirstCare’s data we were able to spot trends in the number of employees suffering with mental health issues, which led to long term absence.

“This helped us respond proactively. We trained our staff to recognise

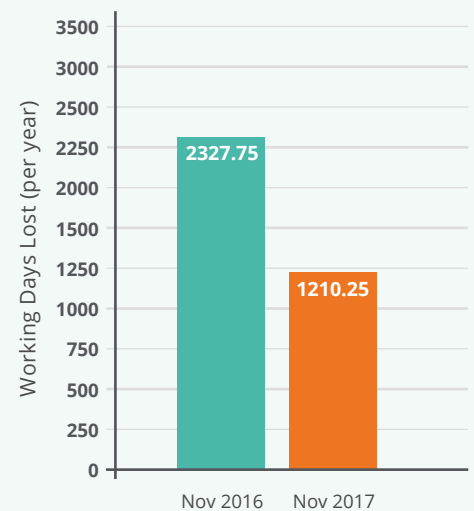
Mental Health Average Length (Days)



Overall Absence Rate (%)



Overall Working Days Lost



● Dec 2015 to Nov 2016 ● Dec 2016 to Nov 2017

ABSENCE RATE (%)



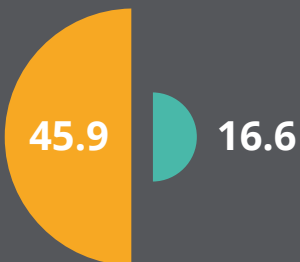
36% difference

DLPE



35% difference

MENTAL HEALTH (average length)



64% Difference

mental health symptoms, and introduced employee support officers and stress audits.

“This has resulted in a 48% reduction in our days lost to mental health absence, saving us 1118 days in the rolling year of November 2017.

“And, the average length of mental health related absence has reduced by 64% from 45.9 days in 2015/16, to 16.6 days in 2016/17 – representing a saving of 29.3 days.”

“I would recommend FirstCare. They offer a fantastic management tool and provide live data which can be accessed whenever it’s needed.”



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HOW WE HELPED THE LONDON BOROUGH OF HILLINGDON TRANSFORM ITS ABSENCE MANAGEMENT PROCESS

KEY DETAILS:

Employees Covered: **2825**

Service Type: **Complete Solution**

Absence Reduction: **35%**

With occupational health providers HML also recommending FirstCare, the council made the decision to implement our nurse-led service.

The London Borough of Hillingdon employs 2,800 staff over multiple sites, delivering a diverse range of services from refuse collection to planning, park and leisure facilities and social care.

The council approached FirstCare as inconsistencies in reporting meant that absence wasn't being captured and recorded accurately

Consistency across multiple sites is one of the main challenges for a complex organisation such as a local authority. Prior to our involvement, the council suspected that absence was not being accurately reported, and were unsure about which managers were following return to work (RTW) procedures. However, it didn't have the tools in place to confirm its suspicions.

Mike Talbot, Human Resources and Organisation Development Service Manager at the London Borough of Hillingdon, explains the position:

"Ensuring that managers and employees consistently adhered to absence management procedures was incredibly difficult, especially on sites where there was limited access to the council's ICT provision."

The council was considering a systems overhaul to introduce uniformity across the numerous sites. However, Mike was impressed with our approach to wellbeing in the workplace, in the form of our nurse-led service, describing us as "category busters".

Prior to the council's go live date in January 2014, we attended a number of meetings to address anxieties and reassure employees. From briefing management and trade unions to explaining process, Mike was impressed by our transparent approach.



Short-term absence reduced by 35% during the first year and days lost to absence decreased by 1,000 working days in both 2014 and 2015

The inconsistencies in reporting that led the council to approach us were resolved from day one. Not only are all absences recorded in our system but employees get medical advice to help them return to work as quickly as possible. What's more, return to work (RTW) interviews are now logged directly into the FirstCare system.

The council saw results fast, with a 35% reduction in short-term absence rates in the first year. With our help, it has also seen days lost to absence decrease by 1,000 working days in both 2014 and 2015.

RTW compliance also rose from 69% to 82% during 2014, and has continued to rise incrementally since to around 90% today.

Ultimately, the council is now in complete control of absence management.

The council's workforce have responded positively to the nurse-led service, with unclassified absence days down from 4,000 to 1,200

Mike has been struck by the sharp 70% reduction in unclassified absence since we've been working with the council. Down from 4,000 to 1,200 days of unclassified absence, he attributes the reduction to the willingness of staff to speak to nurses, particularly around mental health issues.

The statistics have also revealed some interesting trends about absence in the different sectors working at the organisations. While the council anticipated high levels of stress in front line areas – social work for example – in fact the highest rates of absence due to anxiety occurred in administrative roles.

However, while austerity has impacted many sectors at the organisation, Mike explains that front line jobs have been protected while those in administrative roles have been subjected to a series of change. This narrative has led to particular pressures on staff in these roles, which the council is working to resolve.

Based on the information about absence we've provided, the council has introduced measures to tackle the two top reasons for absence: musculoskeletal injury and stress and anxiety

Aligning with national trends, the top reasons for absence at the organisation are musculoskeletal injury and stress and anxiety. Mike explains that data about the causes of absence has been used to inform investment in a number of new initiatives.

"We are now able to monitor compliance against our set targets, and record any reasons why targets are not met"

Mike Talbot
Human Resources and
Organisation Development
Service Manager

Return-to-Work (RTW) compliance has continued to rise to around 90% today



“We felt that FirstCare provided a far better solution than any HRIS absence module could achieve”

Mike Talbot
Human Resources and
Organisation Development
Service Manager

To tackle the stress and anxiety, the council has introduced an occupational healthcare service, including providing a physiotherapy clinic. The take up has been strong, with clinics held every two weeks being consistently full.

The council has also become more proactive in health surveillance and monitoring of its workforce. For example, by testing machinery for noise pollution and having regard for the physical side to jobs in everything from refuse collection to social care.

What’s more, it’s introduced preventative wellbeing initiatives to tackle stress and anxiety, including managing stress programmes for managers and building resistance workshops for employees.

The council has recently extended its contract with us and is becoming more sophisticated at using the tools we provide to manage longer-term absence effectively

The London Borough of Hillingdon has recently extended its FirstCare contract to integrate with its new HRIS system.

The council is also upgrading its service to give line managers the power to record more detailed information, such as the outcomes of RTW meetings. Ultimately, it now has the tools and the data to tackle longer-term absence – still a significant issue, with 60% of absence being long term – for example by making earlier interventions.

Mike is looking forward to the future:

“FirstCare continue to provide analysis benchmarking information and best practice advice to help us to continue to lower our absence rates.”



Absence Management Solutions

Want to know more about effectively managing sickness absence? Or how we can help you reduce absence rates, increase productivity and reduce costs?

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HOW WE WORKED WITH DACORUM BOROUGH COUNCIL TO REDUCE ABSENCE AND IMPLEMENT CONSISTENT PROCESSES

KEY DETAILS:

Employees Covered: **740**

Service Type: **Nurse-led**

Absence Reduction: **19%**

“Working with FirstCare has felt like a true partnership.”

Anne Stunell

HR & Organisational
Development Manager at
Dacorum Borough Council

Dacorum Borough Council employs around 740 people in northwest Hertfordshire. Earlier this year, it moved to The Forum, a purpose-built town centre hub, and delivers a diverse range of services including refuse collection and recycling, planning, revenues and benefits, supported housing, front line services and children’s playgrounds.

The local authority has regenerated the centre of Hemel Hempstead as part of its £30 million Hemel Evolution programme. This has included work in the Old Town, making it a modern, accessible and attractive setting for a new generation of visitors to enjoy while preserving its historic character.

The council is also committed to providing further improvements including new homes and investing in local business.

Inconsistencies in absence reporting led to the Council’s decision to outsource its absence management

The council has a commitment to create a fitter and healthier workforce, by analysing sickness trends, current health and wellbeing trends to determine how to be healthier through creating a wellness strategy.

Prior to FirstCare’s involvement, it already had a bespoke HR system, which included a sickness absence module. The system had limitations on management information and self-service.

However, inconsistencies across departments and increases in absence – combined with a lack of meaningful reports – led to the decision to outsource to FirstCare and utilise its nurse-led approach.

“FirstCare delivers quality and consistency. With everything in one place and a high level of support, nothing is ever unachievable or too much trouble.”

Anne Stunell

HR & Organisational
Development Manager at
Dacorum Borough Council



19% REDUCTION

Overall reduction rates

Our nurse-led service fitted in with the Council's wider vision to tackle absence

Anne Stunell, Human Resources and Organisational Development Manager at Dacorum Borough Council, researched a number of options and was sceptical about implementing a new programme. However, she was referred to FirstCare by neighbouring Watford Borough Council.

She explains that our nurse-led service – where employees can seek the advice of registered nurses – was a big draw: “Bringing FirstCare on board is just one of the measures we’ve taken to dramatically reduce absence. Its nurse-led service and comprehensive range of reporting and monitoring tools played a central role in the council’s decision.”

We’ve been able to integrate with the council’s existing tools, and complement its wider policies that include:

- Monthly reviews of sickness cases.
- Training for managers.
- Wellness initiatives.
- Incentives for no / low sickness absence.
- An employee assistance programme.
- Monthly reviews of sickness absence by sickness scrutiny group.
- 50 mental health first aiders at different levels across the organisation.
- Occupational health.

On-going involvement of the trade unions – Unite and Unison – is also a key feature.

The Council and FirstCare worked in partnerships with the Unions

Right from the start, it was clear that we “offered the full package”. Anne elaborates: “Nothing was too much hassle, even after making various changes, and having to experiment a little. And, although the whole process was hard work, FirstCare made sure it all ran smoothly.”

Information from Unison and Unite has been heavily included, even in the FAQs that were created. As a result, everything the council sent to employees included the unions’ branding, which was vital in securing buy-in from the wider team.

We provided training for all relevant staff and even FirstCare COO James Arquette got involved in the project to ensure everything went well. Anne said: “Working with FirstCare has felt like a true partnership.”

Since implementation in August 2015, we’ve reduced absence by 19%

Year on year, the council’s absence target is 8 days lost per full time employee (or equivalent). Since working with us, the council has been able to reduce its absence figure from 10.3 days to 8.3 days.

Short term
DLPE

54%
reduction

“Bringing FirstCare on board is just one of the measures we’ve taken to dramatically reduce absence. Its nurse-led service and comprehensive range of reporting and monitoring tools played a central role in the council’s decision.”

Anne Stunell

HR & Organisational
Development Manager at
Dacorum Borough Council

Overall, we’ve helped the council achieve a 19% reduction when analysing absence rates as a whole. What’s more, long-term absence rates have been reduced by 26% and short term absences attributed to such as Gastroenteritis have seen a massive reduction of 54% in Days Lost Per Employee.

There have also been improvements in Return To Work (RTW) compliance and consistency

What’s more, while there’s still some work to do in this area, the council has been able to hit its RTW compliance target of 95% on a number of occasions, though this figure is more commonly in the region of 85%.

Also, there is now consistency across the whole organisation as everything is being drawn into one form.

Anne said that there’s also a higher level of consistency during the RTW process due to bespoke RTW interviews tailored to the sickness absence reason. She added: “The new system makes the return to work process much more meaningful. And managers now have the opportunity to talk to returning employees about the responsibility to be at work and what support they may need.”

Anne did, however, concede they could be doing more to make better use of the monthly reporting and intended to do so in the future.

The council is looking forward to continue to reduce absence and leverage the benefits of comprehensive absence reporting

As a result of the collaboration – which has support from councillors, directors and management team – previously high levels of absence have been significantly reduced.

Anne sees the council’s relationship with us as on-going and one that will only increase in value as we all continually work at keeping the absence rate down.

She has already recommended our service to organisations in both the private and public sector.

Anne said: “FirstCare delivers quality and consistency. With everything in one place and an incredibly high level of support, nothing is ever unachievable or too much trouble.”

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Absence Management Solutions

To find out more about how our service could help your organisation reduce absence rates and achieve consistency, get in touch.

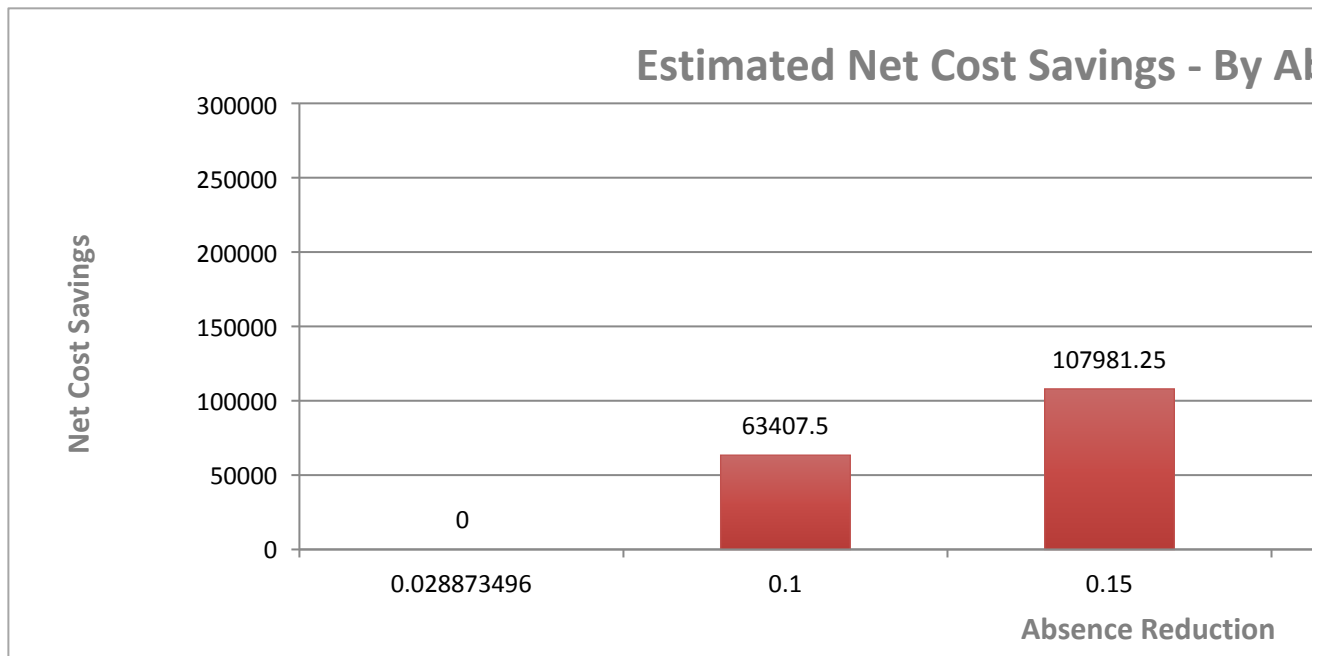
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SECTION C: POTENTIAL RESULTS AND RETURN ON INVESTMENT

Based on the Estimated Cost of Absence provided in Section A, and the anticipated cost of the FirstCare service

Absence Reduction (AR)	New Absence Rate (NAR)	Annual Days Saved (ADS)	12 Month Contract Fee (MCF)
2.9%	4.10%	181	£25,740
10%	3.80%	625	£25,740
15%	3.59%	938	£25,740
20%	3.38%	1251	£25,740
25%	3.17%	1564	£25,740
30%	2.95%	1876	£25,740
45%	2.32%	2814	£25,740



SECTION E: ABOUT THE WATFORD FRAMEWORK AGREEMENT



Notes Concerning Use of the Watford Borough Council Framework Agreement



The Watford Borough Framework Agreement permits any Public Sector
 This report has been configured in-line with Schedule 3 of the Framework, concerning
 In accordance with clause 2.1 of the schedule, the price per employee per month
 In accordance with clause 2.2 of the schedule, the price per employee can be adjusted

Quarterly	Annual		
3.032512028	2.880886427		38305.41509
2.880886427	2.736842105		36390.14434
2.736842105	2.6		34570.63712

3.30	3.30
3.22	3.22
3.16	3.16
3.16	3.16
3.16	3.16
3.10	3.10
3.10	3.10
3.05	3.05
3.05	3.05
2.95	2.95

Quarterly			
	0	3.30	999
	1000	3.22	1999
	2001	3.16	3000
	3001	3.16	4000
	4001	3.16	5000
	5001	3.10	6000
	6001	3.10	7499
	7501	3.05	7499
	7501	3.05	9999
	10000	2.95	99999

Quarterly	Annual		
1.947805803	1.850415512		24603.86277
1.850415512	1.757894737		23373.66963

1.757894737

1.67

22204.98615

2.11	2.00
2.07	1.96
2.02	1.92
1.98	1.89
1.94	1.85
1.91	1.81
1.87	1.77
1.83	1.74
1.79	1.70
1.76	1.67

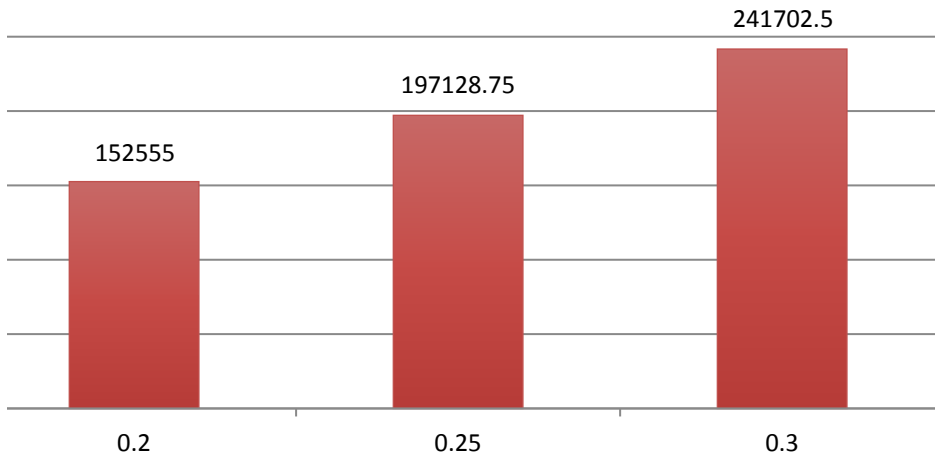
Quarterly

0	2.108425134	999
1000	2.066256631	1999
2000	2.024931498	2999
3000	1.984432868	3999
4000	1.944744211	4999
5000	1.905849327	5999
6000	1.86773234	6999
7000	1.830377694	7999
8000	1.79377014	8999
9000	1.757894737	9999

ce in Section B, provided below is an absence reduction and Return on
ings that would be realised based upon different levels of absence reduction.

Cost Savings (CS)	Net Cost Savings (NCS)	ROI%
£25,740	£0	100%
£89,148	£63,408	346%
£133,721	£107,981	520%
£178,295	£152,555	693%
£222,869	£197,129	866%
£267,443	£241,703	1039%
£401,164	£375,424	1559%

Absence Reduction



ment

or organisation to purchase the FirstCare service.
 ning 'Prices and Charging Structure'.
 is adjusted based upon the Headcount of the organisation.
 based upon contract length, early payment and additional services.

36390.14434	34570.63712
34570.63712	32842.10526
32842.10526	31200

Annual		
	0	3.30
	1000	3.22
	2001	3.16
	3001	3.16
	4001	3.16
	5001	3.10
	6001	3.10
	7501	3.05
	7501	3.05
	10000	2.95

23373.66963	22204.98615
22204.98615	21094.73684

21094.73684

20040

Annual

0	2.003003877
1000	1.962943799
2000	1.923684923
3000	1.885211225
4000	1.847507001
5000	1.810556861
6000	1.774345723
7000	1.738858809
8000	1.704081633
9000	1.67

Employer Pledge Action Plan

Action plan principle	Activity description	Internal lead(s)	Timescales	Performance measure(s)
<p>Demonstrate senior level buy-in</p> <p>How will you show that your senior leaders are committed to addressing mental health in the workplace?</p>	<p>We will engage our Senior Leadership Team (SLT) and elected members in supporting the Time to Change initiative for Stevenage Borough Council. One member of SLT and one Elected member will be nominated to champion the pledge</p> <p>Criterial presented to SLT to gain commitment to signing the pledge</p> <p>Confirmation to be obtained that:</p> <ul style="list-style-type: none"> • The Pledge will be signed (date) • SLT and members will fully support the activities and the pledge • The Chief Executive – Mr Scott Crudgington and (elected member) will sign the Pledge • The Chief Executive Mr Scott Crudgington will produce an internal statement to all making them aware of the pledge and the council's commitment. 	<p>SLT</p> <p>Elected Member</p> <p>Scott Crudgington</p>	<p>Time to Talk Day 1st Feb</p> <p>Action plan to be sent to Time to Change 6 weeks before (21.12.17)</p>	<p>Outline how you will monitor impact and success</p>

<p>Demonstrate accountability and recruit Employee Champions</p> <p>How will you ensure that this action plan is successfully implemented?</p> <p>How will you recruit Employee Champions to support your work?</p> <p>More information on Employee Champions here.</p>	<p>Health and Wellbeing as a standing item on the Corporate Health and Safety Group Agenda Produce/incorporate mental health staff survey Renew workplace champions + provide additional training – explore the support offered by TTC/Employee Champions Officer.</p> <p>Trade union engagement. Develop a rolling action plan/key objectives (needs senior level oversight KPI's assigned to nominated 'SLT champion'</p> <ul style="list-style-type: none"> • Reduce Mental health related sickness by 10% in year 1 • All members of the leadership forum to have received Mental Health First Aid Lite training • Complete the actions within the Pledge 	<p>H&S Manager</p> <p>HROD Manager</p> <p>Trade Unions</p> <p>SLT Champion</p>	<p>Post Feb 18</p>	
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<p>Raise awareness about mental health</p> <p>How will you get your employees talking about mental health?</p>	<p>Have a launch day (ideally to coincide with a national) Staff briefings throughout the day with mental health being the main topic but will involve a variety of speakers Local Mind EAP Hannah Marsh SLL Time to Change speaker Need to consider Cavendish Road?</p> <p>Publicise event though social media and invite local media</p> <p>Promote national awareness events, Mental health awareness week etc.</p> <p>Measurements regarding launch day and activities - direct feedback on the day, where applicable feedback forms, HR sickness management procedures.</p>	<p>H&S Manager H&S Advisor HR resource Communications Manager</p>	<p>1st Feb ongoing</p>	
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<p>Update and implement policies to address mental health problems in the workplace</p> <p>How easy is it for an employee struggling with a mental health problem, or their line manager, to find out how your organisation will treat them?</p> <p>How can you change your policies to encourage those with mental health problems to come forward?</p>	<p>We will ensure that all employees are aware of the support and options available to assist employees experiencing mental health issues (EAP Occupational health, face to face counselling).</p> <p>We will update the stress management policy</p> <p>HR to review the relevant policies Sickness absence Disciplinary procedure Grievance Capability</p> <p>Create a Health and wellbeing Policy, to be reviewed by the Corporate Health and Safety Group and utilise the existing Employee Health and Wellbeing Strategy. Explore the resources offered by TOC Wellness Action Plans for managers and Employees.</p>	<p>H&S Manager H&S Advisor HR resource</p>	<p>Feb 18 ongoing</p>	
<p>Ask your employees to share their personal experiences of mental health problems</p> <p>How will you get your employees to share their experience of mental health problems at an organisation-wide level? e.g through intranet posts or newsletters</p>	<p>Workplace wellbeing champions to share experiences</p> <p>Workplace workshops (See TTC website) Introduction to Mindfulness Emotional Resilience Five Ways to Wellbeing Starting the Conversation</p>	<p>Workplace champions L&OD officer HR resource</p>	<p>April 18</p>	

time to change

let's end mental health discrimination

<p>Equip line managers to have conversations about mental health</p> <p>How will you ensure all of your line managers feel comfortable discussing mental health with their line reports?</p>	<p>Mental health First Aid Lite to all line managers</p> <p>Create a managers toolbox/share managers resource from MHFA</p> <p>Mind booklets</p>	<p>L&OD</p> <p>H&S Manager</p> <p>H&S Advisor</p>	<p>Sept 18</p> <p>Ongoing</p>	
<p>Provide information about mental health and signpost to support services</p> <p>How will you ensure your employees have easy access to information on mental health and where to find help?</p>	<p>We will use our intranet to sign post employees to support on mental health issues. This will include our EAP provider.</p> <p>We will signpost support services in our employee magazine 'Link'</p>	<p>H&S Manager</p> <p>H&S Advisor</p> <p>Communications Manager</p>	<p>Feb 18</p> <p>Ongoing</p>	

Tell the world about your Employer Pledge commitment!

Website summary

Once you have signed the Pledge we will add your logo to our pledge wall of [employer case studies](#) within **five working days** of your event. Please supply us with a summary of your pledge commitment and any activity you are planning on doing to accompany your logo. **Please note:** we may edit the text before it is published on the website.

Stevenage Borough Council are committed to the promotion of mental health awareness, with the aim of removing the stigma associated with all types of mental ill health in the work environment. Our aims include supporting all employees and managers to have the confidence to freely talk about mental health within the workplace.

We will be inviting managers and key personnel to attend Mental Health training and aim to produce a managers toolbox to help provide support to all staff. For all staff, we plan to arrange lunch time drop in sessions during the year, to be facilitated by speakers to discuss a range of mental health topics. Our existing Employee Health and Wellbeing sites will continue to signpost and promote a mixture of mental health literature with additional coverage in our quarterly staff magazine.

Have you:

- ✓ Completed your action plan?
- ✓ Written a website summary of your activity?
- ✓ Got a copy of your logo in JPG format?
- ✓ Arranged a date for your signing?
- ✓ Got the name of who is signing the pledge on behalf of your organisation?
- ✓ Arranged a location for the signing?

time to change

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If the answer to all of the above is yes, please submit this information to our website [here](#).

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Stevenage Borough Council Employee Volunteering Policy



Version No: 01

Date Live: October 2018

Approved by SLT: July 2018

Approved by Staff side: October 2018

Employer
of choice

1. Introduction

1.1 Stevenage Borough Council is fully committed to employer supported volunteering (EVS) and the Council encourages our employees to get involved in volunteering activities within the local community.

1.2 Employee volunteering is when volunteers are supported by their employer, either during work time or their own time, to undertake volunteering activities.

1.3 We want to encourage more people in Stevenage to volunteer. We know that employees who volunteer will gain skills and abilities which will benefit their work and many of our employees have professional skills, such as legal and financial knowledge, which will be invaluable to local groups.

2. Purpose

2.1 The purpose of the Employee Volunteering Policy is to encourage all our employees to get involved in volunteering within the local community.

2.2 Stevenage Borough Council believes “The Heart of a Town Lies in its People”. Many of our employees live within Stevenage and care about the town, the community and its people. Volunteering has a vital role to play in achieving this.

3. Operation of this policy

3.1 This policy will be operated in line with Stevenage Borough Council's values, which are:

- Excellent
- Innovative
- Caring
- One Team
- Responsive
- Straightforward

4. Benefits of Volunteering

4.1 Volunteering is a rewarding and worthwhile activity for all who participate. There are numerous benefits to be gained by undertaking volunteering activities; to you, the Council and the partner organisation.

4.2 *Benefits to the Employee*

Volunteering and community involvement could give you the opportunity to:

- Develop new skills that have been identified either by you personally or as part of a performance review. It can also enable employees to develop their skills in a way not necessarily possible in the day to day job e.g. managing a project;
- Further develop existing skills in a contrasting environment;
- Increase motivation in the workplace by working together and being rewarded for volunteering within the community. Most employees enjoy volunteering enormously, seeing it as an opportunity to do something completely different from their day job;
- Build the 'One Team' approach as employees can build relationships within existing teams as well as enabling employees to meet and network with colleagues from other services through team working. Volunteering can also provide networking opportunities with people working for other organisations;
- Improve morale, having taken part in a personally rewarding experience;
- Increase your confidence, volunteers can improve their skills and self-confidence by trying new activities and building new relationships;
- Increase your awareness of the local community. Volunteering will help employees to get a wider perspective of some of the issues in the local community. It also provides employees with an opportunity to contribute to an issue they really care about.
- Volunteering can enable employees to demonstrate the Council's corporate values and behaviours.

4.3 *Benefits to the Council*

The Council benefits from:

- Employees with improved skills and personal development. Employees have the opportunity to develop and practice a wider range of skills, especially leadership, communication, creative thinking, problem solving, decision making, project management and team working;
- Employee volunteering can enhance the Council's profile within the community. Employee volunteers make great ambassadors and will help make the Council an Employer of Choice and a great place to work;
- Employees having a better understanding of the voluntary and community sector. The Council recognises the importance of playing an active part in the local community and believes it is important for employees to get involved in community activities as a way to give something back;
- Developing local links with the community that can support business priorities. Employee volunteering will also help the Council to establish beneficial relationships in the wider community.

4.4 *Benefits to the Partner Organisation*

As a result of Council employees volunteering, the organisation should:

- Gain individuals with skills that they need;
- Have targeted support to meet specific needs;
- Gain a better understanding of the Council and how they can work more effectively with us;
- Have made ongoing links with the Council; a key employer in the local area.

Employee volunteers contribute time, skills and enthusiasm. Skilled employee volunteers can not only provide the professional skills which voluntary organisations struggle to find or afford, but also help the organisations own employees.

The voluntary sector relies on outside support to meet the needs of the community it serves.

4.5 *Benefits to the Local Community*

Volunteering can also support the local community in completing projects that they may no longer be able to maintain e.g. Ascot Crescent pond.

There are also opportunities for the community to get involved in these projects. Please speak to your line manager, The Green Space Team and/or The Community and Neighbourhood Team.

5. What does it mean to volunteer?

5.1 Many employees already volunteer locally, outside their normal working hours. Employee volunteering in working hours aims to complement this. The time allocated to employees for the purpose of volunteering is not intended for placements outside of normal working hours. However, employees may use their volunteering hours in a familiar environment, known to them outside of work, during normal working hours if they can show that this will be of benefit to them and the volunteer organisation.

5.2 There are three types of volunteering activities:

- a) **Team Activities** – A ‘one off’ practical task completed by a group of employees, often in one day. This offers great team building opportunities, as well as the chance to work with colleagues from other services across the Council. Employees have a day away from their usual working environment where they can develop new skills and go home with a real sense of achievement. Teams can do full or half day activity, working on projects such as painting buildings or undertaking a community garden project.
- b) **Individual Activities** – Individual activities are a great way to develop individual skills in specific areas of work and to work with different community groups. These can be

a regular input for a set period of time. It could also be working with other volunteers with a large national charity. It could even be a whole team activity to support team building, through challenges which can strengthen relationships.

Examples include:

- Supporting adults at risk and those with disabilities
 - Reading and listening activities in schools
 - Organising sports activities, clubs or events
 - Acting as a trustee for a charity
- c) Council Activities – An organised activity within the council which can support fundraising events and are usually organised by volunteers within the Council. Not all of these examples would form part of the paid time for volunteering. Please discuss this with your line manager/HR Business Partner in the first instance. These activities are Council approved and can include the following examples:
- Dress down Friday i.e. Christmas jumper day
 - National fundraising activities e.g. Macmillan Coffee Morning/Children In Need
 - Other fundraising activities (this would need to be discussed with your line manager/HR Business Partner).

Appendix 1 details the evidence required to be obtained before the discussion takes place with you Line Manager/HR Business Partner.

5.3 Volunteers who wish to get involved with organising events

If you are interested in organising any events please see your Line Manager and/or your HR Business Partner.

5.4 In addition;

- Volunteering is work undertaken on your own initiative, without payment, for the benefit of others;
- Employees can undertake volunteering on an individual basis, or as a one-off team event, or as a mixture of the two;
- If a team volunteering event is undertaken, for example to complete a 'challenge', this will normally be seen as part of the paid time off given to individuals for the purpose of undertaking volunteering and should be recorded with HR/Payroll accordingly.
- However, at your line manager's discretion, team volunteering may be seen as a team building event outside of an individual volunteering, in which case you may still be entitled up to 2 days for individual volunteering.

- Before deciding on volunteering, you should discuss with your line manager and obtain his/her agreement after completing Appendix 1.

5.5 Do I need to take leave to do voluntary work?

- Each employee will be given the equivalent of 2 days per year (pro rata for part-time and temporary staff) to undertake volunteering in the community. This can be taken as full days or in hours totalling 2 days over the year. Volunteering during office hours will be classed as normal working hours (you do not have to take leave to do this).
- Volunteering must not adversely affect the work of your team and will only be agreed by your line manager if deemed to be operationally viable.
- The volunteering 'year' will run from April to March each year, for the purpose of the 2 day's allowance.
- Time off for volunteering is required to be recorded on MyView.

6. What types of volunteering can I do?

6.1 Employees make their own decisions on what type of voluntary activity they want to get involved with. This could be:

- As part of team building;
- By signing up to a local skills bank where they share their professional and business skills and expertise in the community;

Or;

- By doing something in the community totally unconnected with their employment, as personal development.
- Employability events, such as being a Mentor.
- If any volunteering activities could cause a conflict of interest this should be discussed with your Line Manager and or HR Business Partner.

6.2 What do you want to get out of volunteering?

- Have you identified an area of personal development that you are unable to pursue in your current job?
- Do you need to find out more about an existing or new policy area e.g. working with a partner or delivery organisation?
- Do you need to gain practical experience to support your knowledge and understanding of your current job?

- Would you or your team benefit from stronger links with the community?
- Are you confident that volunteering will help you to meet your personal/professional objectives?

6.3 What about Royal Navy Reserves opportunities?

Please see the Reservist policy.

7. Criteria for Volunteering

7.1 Employees may be released during work time to undertake volunteering that meets one or more of the following criteria:

- It supports improving knowledge and understanding of a policy area or involvement in existing policy developments that utilise volunteers;
- It supports a personal development need identified by you and/or your Line Manager;
- It develops stronger links with the local community.

7.2 The volunteering activity must take place within the borough of Stevenage in order to benefit the local community however the Council recognises that not all employees live in the Borough and if there are opportunities within your local community that you would like to get involved in, please speak to your line manager.

7.3 Managers/teams may consider developing a team event involving volunteering, e.g. a one-off community activity linked to the team's area of work. Managers will discuss ideas with staff to decide on an activity appropriate and acceptable to everyone.

7.4 Managers should ensure that when considering team volunteering activities they avoid activities that may exclude certain individuals or groups within the team, for example, those staff with a disability or those from different cultural backgrounds. The participation of individuals in any team volunteering activity is voluntary and those not wishing to participate should not suffer any detriment.

8. Discussing Volunteering with your Line Manager

8.1 Before agreeing to undertake any type of volunteering activity during working hours, you will need to speak to, and get agreement from, your line manager.

Can my Line Manager say "No" to my volunteering?

Yes. Although the Volunteering Policy is supported throughout the council, line managers can refuse to let you volunteer if this is due to operational needs.

In doing so however, they should make their reasons for refusal clear.

8.3 If you feel that your request to undertake volunteering during work time has been turned down unreasonably you may contact your HR Business Partner for advice.

8.4 If the volunteering was for personal/professional development, you should discuss alternatives that could assist with your development.

9. Guidance for Line Managers

9.1 Although the Council encourages employee volunteering, the final decision to release employees must rest with line managers. As a line manager, you must be sure that agreeing to a volunteering opportunity will be beneficial to the employee, the wider team and/or the council.

9.2 Work pressures will obviously play a part in line managers being able to release people. However, managers will be encouraged to support their staff who want to volunteer. Flexibility from managers and staff will be key to making volunteering work. Managers may need to share the time available for volunteering across the team and therefore arrangements will need to be reviewed regularly.

9.3 Line managers should be consistent in approach. Volunteering is open to all employees, whatever their grade or work pattern. Therefore all employees should be encouraged to volunteer. Line managers should also ensure that they adhere to the Council's equality policies to ensure that there is no discrimination or unfair treatment against any employees.

10. Choosing your Volunteering Opportunity

It is acceptable for you to find your own volunteering placement, or staff can take up an opportunity provided by the Council; this may need to be discussed with your line manager beforehand.

Council opportunities will be available via the intranet and any ideas/suggestions will be welcome. If you wish to gather volunteers for your volunteering project the intranet will be the ideal place to discuss this.

11. Recording Voluntary Work

11.1 As well as providing much needed support to the local community, volunteering allows you to develop new skills both for your own personal development and for the benefit of the council. It is therefore important that we capture this information in a similar way to training undertaken. This will enable the council to keep records and monitor the effectiveness of all volunteering undertaken.

11.2 After completing your opportunity you may, if you wish, send a case study to your line manager, for inclusion in future publicity material/good news stories. This highlights successful individual projects and team challenges, to encourage others to volunteer in the future.

11.3 All volunteering hours should be recorded on MyView.

12. Feedback and Evaluation of Placements

12.1 As part of your negotiations with your line manager, you may have agreed to feedback regarding your volunteering work, for example as part of a performance review, REAL conversations or one-to-one meeting.

12.2 You may also complete a formal evaluation of your volunteering upon completion of your placement. A version is available in Appendix 2.

13. Risk Assessment

13.1 The council's personal liability for all employees in the workplace will be extended to any volunteering placements undertaken during normal working hours, provided that the volunteers are under the Councils control and/or supervision, subject to the following criteria:

- The voluntary organisation must provide a working environment that complies with health and safety regulations; employees must ensure they abide by the health and safety at work regulations at all times whilst volunteering;
- A risk assessment needs to be completed on all volunteering activities with the aim of reducing or eliminating any risk associated with an activity;
- Managers should actively support their employee's involvement in employee volunteering and should seek guidance from the voluntary sector if they are unsure about any proposed activity;
- Employee volunteers will be covered by the council's insurance, provided that the volunteers are under the Councils control and/or supervision, so long as they are part of the Employee Volunteering Scheme when undertaking volunteering activities and any activities that need to be discussed with Health and Safety, have taken place if required.

13.2 It is vital that a risk assessment is carried out on all volunteering activities undertaken by council employees as this is a requirement of the council's insurers and good risk management practice. If this is not completed by the volunteering organisations then line managers are required to do this.

13.3 Line managers are required to use the corporate Health and Safety Risk Assessment template found on the intranet.

13.4 To enable risk assessments to be completed before volunteering commences, the checklist should be completed as quickly as possible after a volunteering placement or team challenge has been agreed. If any health and safety concerns arise during or after these checks, these should be raised with the Health and Safety Team.

NB: Volunteering cannot commence until the risk assessment has been completed and approved by line managers and this should be considered in any timescales.

14. Expenses

14.1 Volunteer organisations will normally supply any necessary tools or other equipment necessary for placements. All equipment must be safety checked as per Appendix 1. However, employees may claim for travel expenses to and from the placement, which will be met from Business Unit budgets. Such expenses are likely to be minimal as all placements are within the borough of Stevenage.

14.2 For team challenges, teams may wish to purchase materials to enhance team-building. Again, these expenses will be expected to be found from within Business Unit budgets as with any other team events.

15. Problems

15.1 The aim is that your volunteering will be a positive experience that meets all your objectives. Remember, you are under no obligation to keep volunteering for an organisation that you feel unhappy in.

15.2 If the volunteer placement is not working out as you had planned, you should talk to someone at the partner organisation. Initially, this could be someone who is responsible for you while volunteering. You can then discuss with them your concerns and what you feel would improve your time as a volunteer in their organisation.

15.3 Alternatively, you can discuss any concerns with your line manager.

16. How to Apply for Volunteering:

16.1 Please speak to your line manager in the first instance to apply for volunteering. An application form is found in Appendix 1.

APPENDIX 1:

Applying for Volunteering Checklist:

Employee Responsibilities:

Consideration	Comments
Are you clear about what you want to get from the volunteering opportunity?	
What skills and experience can you offer the organisation?	
Does the organisation already use volunteers?	
How much time can you give?	
Which days and at what time of day would you like to volunteer?	
Does the organisation provide an induction? What date and time is this?	
Where is the volunteering due to take place? i.e. is this outside of Stevenage?	
Have you completed a risk assessment and returned to your line manager?	
If you need to use equipment has this been safety tested and do you have evidence of this?	
Have you recorded your time in MyView? Will you need to undergo DBS clearance?	
If your activity supports vulnerable adults or children, please provide supporting information for the activity.	
Is there a potential conflict of interest?	
Is the organisation that you would like to support a registered charity?	
Please provide a brief outline of the volunteering activity that you wish to undertake - i.e. what will your day/hours of volunteering involve?	
Has the organisation/your line manager	

APPENDIX F

completed a risk assessment which covers all the activities you will be undertaking?	
Do you have your line manager's approval?	
Check with HR Business Partner. If you have a disability is there any reasonable adjustment required to help you undertake the volunteering activity?	

APPENDIX 2:

Evaluation:

Your Name:	
Business Unit:	
Your Line Manager:	
Where did you volunteer?	
Date/s of your placement	
What was the duration of your volunteering placement?	
What were the key activities undertaken?	
What were your objectives for completing this volunteering?	
Please explain how the placement met/did not meet your objectives?	
Please give any suggestions on how your volunteering experience could have been improved?	
Has the volunteering placement provided you with any new skills to take back into your team?	
If so, how will you now be taking this forward?	

Stevenage Borough Council
Sickness Absence Policy and Procedure

Version No: 6

Date: 14 June 2018

0

Approved by SLT on: 10th October 2017

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1. Purpose

- 1.1** Stevenage Borough Council values the contribution of its employees in the delivery of quality services to the community and is keen to support the well-being of all employees. Whilst the Council has a supportive approach, it will achieve a balance between the needs of individuals and the organisation. Where there is frequent and persistent absence from work or a long term absence where there is little or no prospect of return within a set timeframe, it may become necessary from a business perspective, to consider termination of employment.
- 1.2** The Council recognises that employees will, from time to time, be unable to attend work for short and sometimes long periods due to ill health. This Policy and Procedure provides a fair and consistent method of managing both frequent short term and long term sickness absence.
- 1.3** The Council takes seriously its responsibilities under the Equality Act 2010 and this Policy and Procedure therefore ensures that these responsibilities are adhered to.

2. Operation of this policy

2.1 This Policy and Procedure will be operated in line with Stevenage Borough Council's values, which are:

- Excellent
- Caring
- Responsive
- Innovative
- One Team

Version No: 6

Date: 14 June 2018

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Approved by SLT on: 10th October 2017

- Straightforward

3. Scope

- 3.1** This Policy and Procedure applies to all Stevenage Borough Council employees employed on NJC Red and Green book terms and conditions, and to all employees employed on JNC terms and conditions for Chief Officers. This Policy does not apply to employees who are in their Probationary Period, please see the Probation Policy for further details on sickness absence for those on probation.
- 3.2** This Policy and Procedure is not designed to deal with unauthorised absence, or failure to provide appropriate certificates. Those are disciplinary matters and are dealt with through the Disciplinary Policy and Procedure.
- 3.3** Absence for other reasons such as that relating to time off to care for dependants or special leave for personal or domestic reasons is addressed through separate Council policies. Please refer to the staff Intranet or to your manager for further guidance.
- 3.4** This Policy and Procedure is non-contractual.

4. Principles

- 4.1** All employees will be treated fairly, consistently during times of illness and are encouraged to make use of the support mechanisms available to them. In addition to support from the line manager and Human Resources (HR), the Council has an Employee Assistance Programme. Details of this can be found in Section 7 of this policy.
- 4.2** All sickness matters should be dealt with confidentially and information will only be made available to those involved where this is necessary and appropriate.

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- 4.3 Managers have a structured framework to assist them in managing sickness absence.
- 4.4 All employees understand their responsibilities and follow sickness reporting arrangements.
- 4.5 The highest levels of quality and service are maintained to allow the Council to fulfil its obligations to all service users.
- 4.6 Managers will implement reasonable adjustments to the roles of employees, where applicable, to support attendance at work.
- 4.7 Where there is medical evidence that an employee is no longer fit to fulfil the requirements of their role, the role cannot be sufficiently adjusted, and the employee cannot be redeployed to a suitable alternative post (where one exists and is appropriate), the Council reserves the right to terminate employment before the expiry of contractual sick pay, in accordance with this Policy and Procedure.
- 4.8 The Policy and Procedure aims to support an employee's return to work. Where employees are absent for a considerable amount of time or no longer able to carry out the duties of their role, employees will be reasonably supported throughout this time and also made aware that the outcome of this procedure could be dismissal.

5. Sickness Absence Definitions

- 5.1 Short term absence is where an employee is absent for a period of less than 20 continuous working days (pro rata based on the number of hours worked for part time employees). Frequent short term absence involves episodes of sporadic absence of a short duration, usually due to minor illnesses, that are either connected or unconnected. It may be evidenced by a self-certificate or a medical Fit Note.

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- 5.2** A Fit Note is a medical certificate issued by a doctor, typically for continuous absences of more than 7 calendar days, i.e. from the 8th day onwards.
- 5.3** Long term absence is any period of absence from work due to ill health lasting or expected to last more than 20 continuous working days (pro rata based on the number of hours worked for part time employees). Long term absence must be medically certified.
- 5.4** In circumstances where an employee has episodes of both long term and short term and/or frequent absence, the line manager must obtain guidance from HR on the most appropriate procedure to apply.

6. Responsibilities

Roles and responsibilities in relation to this Policy and Procedure are outlined below.

6.1 Employees

Employees are responsible for:

- Making every effort to maintain full attendance at work.
- Complying with statutory requirements and the Council's policies and procedures to ensure a healthy and safe environment.
- Familiarising themselves with the requirements of this Policy and Procedure and co-operating fully in its application, including providing sickness absence certificates as may be required.
- Contacting their manager at the onset of their absence and keeping their manager informed and updated with regard to their absence.
- Informing their line manager of any changes in their health, which may affect their ability to undertake their duties effectively to enable the Council to make reasonable adjustments where appropriate.

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- Taking responsibility for managing their own health and well-being, and not undertaking any activity that could compromise their ability to attend work.
- Making appropriate use of the support available, including Occupational Health (OH) services and the Employee Assistance Programme.
- Participating in return to work interviews and informal and formal meetings.

6.2 Managers

Managers are responsible for managing sickness absence sensitively and compassionately, and ensuring they follow this Policy and Procedure. This includes:

- Reminding employees as necessary to familiarise themselves with the requirements of how and when to notify managers when they are not able to attend work due to ill health.
- Ensuring that all sickness absence is logged and reported to HR for recording, as detailed in this Policy and Procedure
- Maintaining contact with employees during periods of sickness absence and ensuring Fit Notes are requested when required.
- Conducting return to work interviews with employees following all periods of sickness absence and keeping notes of these.
- Monitoring absence levels and where an employee's absence reaches the trigger points for either short term or long term sickness, as defined within this Policy and Procedure, managing them accordingly and consistently for all employees.
- Considering reasonable adjustments for employees (where applicable), including discussing with the employee advice given in a Fit Note. When the Equality Act 2010 applies, for example in matters relating to disability or pregnancy, managers need to ensure that they investigate any possible

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reasonable adjustments and that they accommodate these when it is reasonable to do so. Managers can obtain guidance on reasonable adjustments from their HR Business Partner.

- Ensuring that referrals to the OH provider are made when appropriate, to seek medical advice on fitness for work, reasonable adjustments and medical redeployment (where applicable), and planning the next steps (with guidance from their HR Business Partner) when the medical advice received.
- Advising their staff on the operation of this policy.
- Providing a written record of all meetings and reviews, to the employee and HR.

6.3 Human Resources and Organisational Development (HR & OD)

HR is responsible for:

- Providing specialist information, training, and advice to managers on managing individual cases of sickness absence, to ensure consistency, fairness and compliance with the law.
- Attending formal meetings as may be required in accordance with this Policy and Procedure to provide guidance to the line manager.

Providing sickness absence data for managers and SLT when required.

Employee Assistance

- 6.4** Stevenage Borough Council understands that a sickness management process can be a difficult time for any employees affected. The Employee Assistance Programme, (EAP) through Livewell-Optum is available to support employees with issues of sickness absence during the process.

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6.5 Livewell-Optum provides employees with the opportunity to talk confidentially to an independent third party about any issues. The advice line is open 24 hours a day, 365 days a year and offers the following services:

- A confidential free phone counselling and advice service.
- A confidential free, face-to-face counselling service.
- Free advice about work, financial, tax, legal and personal issues.
- A free, confidential website. Username/Password: **Stevenage**

Telephone (free number) 0800 282193 or log onto www.livewell.optum.com for more information.

7. Trade Union or other representative

7.1 An employee has the right to be accompanied at any formal meetings and Hearings held under this Policy and Procedure by a Council work colleague or an accredited Trade Union Representative.

7.2 The same standards will apply to Trade Union Representatives as to all other employees. However, where application of formal action that may lead to dismissal is being considered in respect of a Trade Union Official or Representative, the case must first be discussed with a Senior Trade Union Representative or full time official of that trade union or the employee's designated representative, by the Senior HR Manager , if they wish.

8. Notification of Absence

8.1 All employees who are unable to attend work must inform their line manager of their absence personally, by telephone (not text or email), within a reasonable time or where applicable, in line with the standard local arrangement. If for a good reason, the employee is unable to speak

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to their line manager, then the employee must speak with the most appropriate manager available or leave a message for the manager, together with their contact details. The line manager or another manager within the service area will call the employee as soon as practicable.

8.2 In exceptional circumstances, employees may have genuine difficulties in making personal contact (e.g. hospital admittance). In these circumstances contact from a spouse, partner, family member or friend would be appropriate.

8.3 In cases where an employee's disability might make personal contact difficult, the line manager should ensure that alternative contact arrangements are in place.

9. Maintaining Contact

9.1 When an employee is unsure how long they will be absent they must contact their manager on the 1st, 2nd, 4th and 7th day, or where appropriate, the next available working day. If, at the onset of absence, it is known that the individual will be absent for a longer period, the manager will confirm frequency of contact.

9.2 If the employee does not return to work at the anticipated time they must contact their manager.

9.3 If an employee fails to comply with the Council's notification procedures, this may result in the absence being regarded as unauthorised and therefore unpaid. This may also, depending on the circumstances of the case, result in disciplinary action being taken against the employee concerned.

10. Certifying Absence

In order to qualify for sick pay, employees must comply with the absence reporting procedure. They must provide evidence of sickness or injury. Proof

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of sickness should be a self-certificate and after 7 calendar day's absence, a Fit Note must be submitted to you line manager by the 9th day of absence.

10.1 Self-Certification

10.1.1 All employees must complete a Self-Certification Absence and Return to Work form on the first day back at work. The form is available from the line manager.

10.1.2 In certain circumstances, such as repeated short term absence, an employee may be required to provide a Fit Note for periods of absence of 7 days or less. Where this is necessary the Council will reimburse the doctor's charges upon submission of a receipt.

10.2 Fit Notes

10.2.1 A Fit Note must be sent to the employee's manager as soon as it is obtained and no later than the 9th day of absence. If the Fit Note is a second or subsequent one, it must be provided to your line manager within 2 days of the expiry of the current Fit Note.

10.2.2 Employees must provide the manager with the original Fit Note, however, the original must be returned to the individual (this may be required for claiming benefits or other purposes). The manager must take a copy of the original, date, sign and endorse it and send the verified copy to HR.

10.2.3 The Fit Note that the employee will receive from their doctor will say whether the employee is either:

- (a) not fit for work or
- (b) may be fit for work

If the doctor chooses option (b) they should make recommendations for adjustments to help a return to work and it is for the line manager to determine whether they can be implemented. HR Business Partners can

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provide the line manager with advice in considering such matters. It should be noted that reasonable adjustments are only recommendations from the GP and do not have to be followed.

10.2.4 If the recommended adjustments cannot reasonably be made, and the employee cannot return to work, the Fit Note can be used to cover the employee's sickness absence.

10.2.5 Where a doctor has stated on the Fit Note that they do not need to assess the employee again, this means the employee should be able to return to work at the end of the stated period without obtaining confirmation of this from the doctor.

10.2.6 If an employee considers they are fit to return to work prior to the Fit Note expiring, there is no requirement for the employee to seek a further Fit Note from their GP confirming their fitness for work. However, this must be noted on the return to work interview form.

11. Dual Employment

11.1 Employees should make their manager aware if they have more than one job with the Council so that their manager can liaise with the other manager and determine the best course of action.

11.2 It is important to recognise that jobs may have different responsibilities and therefore different impacts on an employee's health and any reasonable adjustments which may be required.

11.3 If an employee is being referred to OH both jobs should be stated on the referral form and both JDs provided so that OH can provide advice regarding both jobs and make a fully informed decision on fitness for work or otherwise. The absence management meetings can take place to cover both roles, with one manager agreeing to take the lead on the return to work interview and providing a copy to the other manager.

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12.Types of Sickness Absence

12.1 Accident or Injury at Work

12.1.1 It is an employee's responsibility to report an accident or injury at work immediately to their line manager or to the most appropriate manager available at the time. The manager must ensure an accident reporting form is completed without delay. Failure to comply with accident at work reporting procedures may result in any resulting absences being inadmissible for industrial injury sickness pay.

12.1.2 If sickness absence is related to an accident at work, the Council may have a duty to report the incident to the Health and Safety Executive (HSE). For advice on this please contact the Health and Safety Team.

12.1.3 Sickness which is related to an accident at work should be treated with particular care and sensitivity. The Council's Sickness Absence Policy and Procedure should be followed in the normal way with advice and guidance initially from OH, HR Business Partner and the Health and Safety team where appropriate.

12.2 Third Party Accidents

12.2.1 An employee has a responsibility to inform the Council of any successful third party claim. The Council reserves the right to reclaim any sick pay already paid to an employee and included in compensation in these circumstances.

12.2.2 Sickness which is related to a third party accident should be treated with particular care and sensitivity. The Council's Sickness Absence Policy and Procedure should be followed in the normal way, but discretion may be needed as to how the specific case is dealt with dependent on the particular circumstances. Further advice and guidance should be sought from OH, HR Business Partners and the Safety, Health and Environment (SHE) organisation as may be appropriate.

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12.3 Pregnancy Related Absence

12.3.1 Pregnancy related sick absence must be recorded in the normal way and in absences of more than 8 days, a Fit Note to certify absence must be submitted. However, this absence should not be counted towards the trigger points or in relation to any informal or formal action for sickness absence management. For further information relating to sickness during pregnancy, please refer to the Maternity Leave Policy.

13. Medical Suspension

13.1 In exceptional circumstances it may be appropriate to medically suspend an employee on a neutral basis, for example (this is not exhaustive):

- Where there is reasonable belief that an employee may be suffering from an infectious or other condition and it is necessary to take such action to protect the workforce, customers or residents. Wherever possible, prior to initiating medical suspension, alternatives such as adjustments to their substantive role and temporary redeployment should be carefully considered and HR Business Partner advice must be obtained.

13.2 Any decisions to suspend need to be based upon a health and/or safety justification and the manager, with advice from HR/OD, should be able to demonstrate this through a risk assessment.

13.3 If the Assistant Director or the most senior manager available is satisfied there are sufficient reasons to suspend, they will convene a suspension meeting as soon as possible where circumstances permit. The employee does not have a statutory right to be accompanied at this meeting. However, the employee will be given the opportunity to be accompanied by a Trade Union representative or work colleague where this is reasonably achievable. The non-availability of the representative

must not delay the meeting. The decision to medically suspend will be confirmed in writing.

13.4 Medical suspension will be on contractual pay and will not impact upon sick pay. If the suspension is lifted and the employee commences sick leave, sick pay and this procedure will apply from the commencement of sick leave.

14. Illness During Working Hours

14.1 Employees who have reported for work but then need to leave work due to becoming unwell must speak to their manager, or if not present, the most senior manager, prior to leaving work. The absence will be recorded on the employee's sickness record as either a ½ day or full day. Absence for more than 50% of the employee's working day will be recorded as a full day of sickness absence.

15. Medical Appointments

15.1 Wherever possible, employees should make medical/dental appointments outside of their normal working hours. However, where this is not practical employees should arrange lunchtime, early or late appointments, with approval from their line manager, to cause minimal disruption to the working day and make up the time lost through the flexi time scheme.

15.2 For those employees not covered by the flexi time scheme, time off with full pay for these purposes may be allowed at the discretion of the manager. However, there is no absolute right to this time and prior approval needs to be given before the time is taken. Employees must produce evidence of appointments if requested. Where it is considered that an excessive amount of time off is being requested, the manager can review their decision.

15.3 Where an employee has no control over the time of the appointment, for example hospital, consultant appointments, the manager may allow time off with full pay. Employees should provide their manager with proof of their appointment (e.g. an appointment card or copy of the appointment letter) when requesting the time off.

15.4 Employees with a disability are allowed reasonable paid time off to attend for treatment related to their disability and further information may be required from the employee. Employees must provide evidence of appointments if requested.

Elective Surgery

15.5 The Council will be supportive of elective related surgery (etc) where it supports (a) the health and well-being of an employee and (b) their full attendance at work. Line Managers may request medical evidence to support absence in these cases. All related absences as a result of and following this surgery (etc), where applicable, will be recorded as sickness absence and will be managed under this policy. Special leave (paid) will not be granted under these circumstances.

It is important to recognise the Council has a duty to the effective use of public funds, so should an employee wish to undergo surgery (etc) where the criteria (a) and (b) mentioned above are not met, then staff would be expected to use their annual leave and would not be entitled to sick pay. Staff who are unwilling / unable to provide evidence of reasons for the elective surgery (etc) will fall into this category. Staff may also request unpaid special leave in these circumstances however paid leave will not be allowed.

16. Annual Leave and Sickness

- 16.1** Employees continue to accrue paid annual leave whilst absent due to sickness and may request to take annual leave during a period of long term sickness absence (not applicable to short term absences). Any employee wishing to take leave during long term sickness absence should make this request in writing to their line manager and the annual leave should be recorded in the normal way. The line manager must notify HR/OD of this to ensure the employee is paid correctly.
- 16.2** Where an employee returns to work in the current leave year, every effort should be made to encourage them to take their remaining annual leave, and this may be taken as part of any agreed phased return arrangements. If they did not have an opportunity to take all of their leave, an employee will be able to carry forward any unused statutory leave to the next annual leave year, in line with the Working Time (Amendment) Regulations 2007.
- 16.3** Where an employee returns to work in a new leave year, they still have the right to the *statutory leave* they accrued whilst off sick, during the previous leave year, and this can be carried forward into the new leave year, provided there was no opportunity to take it.
- 16.4** Any employee who falls sick prior to commencing pre-booked annual leave or during their annual leave will be able to reclaim their annual leave, from the day they notify their manager of their sickness absence, provided they comply with normal notification procedures and submit medical evidence (Fit Note) for the whole of the period of sickness.

Sick Pay

- 16.5** Employees are entitled to Statutory Sick Pay and, depending on length of service, Occupational Sick Pay in line with their contract of employment, provided that they comply with the Council's notification procedures. Details of the Sick Pay Scheme are available on the Staff Intranet.

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Failure to comply with the Council's procedures may result in withholding of pay and may result in disciplinary action depending on the circumstances of the case.

17. Return to Work Interviews

17.1 Return to work interviews must be conducted by line managers after every period of absence, including absence as a result of an accident at work. Where possible managers should carry this out on the day an employee returns to work, or as soon as practicable. These will usually be face-to-face interviews; however, they can be conducted by telephone where managers/employees work at differing geographical locations and appropriate arrangements made for the employee to sign the self-certification form.

17.2 The return to work interview needs to be separate to any First or Second Formal Meetings and Hearings; these meetings cannot be combined. The Self Certification Absence and Return to Work form must be used to record the discussion and completed forms must be sent to HR by the manager.

17.3 Return to work interviews are an important part of absence management and can help to identify short and long term absence problems at an early stage. They also provide a manager with an opportunity to start a dialogue with staff about underlying issues which may be causing the absence and allow them to make changes to support the employee.

18. Flexitime, Overtime and Sickness Absence

18.1 To support the wellbeing of employees and ensure complete recovery from illness, non-contractual overtime will not be offered to employees who have been absent due to illness. Equally, employees working under the flexitime scheme should not accrue flexi hours on their return. This will normally be for a period of seven consecutive days immediately after

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an employee's return, unless in exceptional circumstances, and with the agreement of the Assistant Director or their designated representative.

18.2 Overtime should not be assigned or undertaken by employees who are in a period of a phased return to work following sick leave.

18.3 Particular care should be taken where employees are undertaking amended duties to allow recovery following sick leave. Overtime should not be scheduled or undertaken in these circumstances.

19. Phased Returns

19.1 There may be a recommendation from an employee's doctor and/or OH, to provide a phased return for employees, to support a successful return to their substantive post. The line manager will agree an appropriate phased return plan with the employee, taking account of the medical advice and the needs of the Business Area.

19.2 Phased returns should not usually exceed 4 weeks in duration. Periods in excess of 4 weeks must be agreed with the Assistant Director . A temporary adjustment to the employee's contract of employment in respect of working hours or duties may be considered in circumstances where a 4 week phased return period may be insufficient. Where possible, for periods in excess of 4 weeks, the use of remaining annual leave should also be considered.

19.3 Phased returns must be recorded on the appropriate form (refer to the Staff Intranet) and submitted to HR for the employee's file.

20. Trigger Points

20.1 At any stage, managers have absolute discretion to meet with employees with regard to their sickness absence. To manage sickness absence, the Council considers the following absences as a cause for concern; these are referred to as trigger points and require action from the line manager:

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- Accumulation of 8 working days' of sickness absence over a rolling 12 month period (pro rata for part time employees)

and/or

- 5 episodes of absence over a rolling 12 month period
- Recognisable patterns of absence, such as regular occurrence before or after flexi or annual leave or at the end or beginning of a week

20.2 When reviewing absences against the trigger points it may be necessary in exceptional circumstances for managers to use their discretion on what the trigger points are. This particularly applies when an employee has an underlying medical condition that is covered under the Equality Act 2010. Each case should be considered on the individual circumstances relating to the condition and guidance should be sought from the HR Business Partner for the area

20.3 In the exceptional circumstances, when managers are considering applying their discretion or changing the trigger point for absences, the manager must first obtain advice from HR and must record the reason for the discretion in writing to the employee.

21. Referral to Occupational Health

21.1 An OH referral should be arranged to obtain medical advice, after due consideration of each individual case:

- Where there is frequent short term absence or
- After 20 continuous working days' absence (pro-rata for part time employees), or sooner if the reasons for absence indicate a long term absence or may indicate an impact on the employee's ability to undertake their role.

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- The manager may also arrange a referral in the case of ongoing concerns about the employee's wellbeing.

21.2 Advice should be sought in relation to the potential duration of absence and the ability of the employee to return to or continue in their role.

21.3 Medical advice from OH is guidance. It is up to the line manager, with advice from the HR Business Partner, to determine whether it is reasonable to apply the guidance in full, in light of the circumstances of each case.

22. Short Term and/or Frequent Sickness Absence Procedure

In consideration of the individual circumstances managers may apply discretion at every stage of this procedure, specifically in cases where the Equality Act may apply. The manager must record the reason for applying discretion in this way and confirm this in writing to the employee.

22.1 Measures

At any stage of this procedure the manager may consider initiating any or some of the following measures, where such measures may help to reduce the number or duration of further episodes of sickness absence:

- An employee may be required to submit a Fit Note from the first day of sickness absence. The cost of Fit Notes in such circumstances will be reimbursed by the Council on submission of a receipt.
- Setting attendance targets for an employee.
- An employee may be required to phone their manager at regular intervals during their absence.
- An employee may be required to attend their place of work for a review or where necessary, a manager may arrange with the employee to make a home visit during their absence.

22.2 Informal Meeting

22.2.1 Where an employee's absence record reaches or exceeds any of the trigger points detailed in the above section, the line manager will hold an informal meeting with the employee to discuss the level of absence and its impact. Discussion should also cover what steps could be taken to improve attendance, including where appropriate, temporary adjustments, redeployment or ill health retirement. Where there is evidence of an underlying medical problem contributing to absence, a referral to OH may be arranged.

22.2.2 The employee will be advised that their level of absence is a cause for concern, and that it will be monitored for a period of 3 months from the date at which the trigger point was reached. During this time the employee will be expected to show a significant reduction in their absence levels. A

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significant improvement is measured against the Council's triggers, the current pattern of occurrences or duration of the individual's sickness absence as well as the trend. The manager must provide the employee with the outcome of the informal meeting in writing and outline the frequency of future review meetings to monitor the employee's progress.

22.2.3 At the expiry of this informal review period, if the manager determines that the employee's sickness absence has reduced to a satisfactory level, they should confirm this in writing, advising the employee that they are no longer subject to monitoring, but that any further periods of absence will involve a move into the formal procedure from the outset.

22.3 Stage One Formal Meeting (Potential Outcome – First Written Warning)

22.3.1 Where an employee fails to show significant improvement in their attendance during the informal monitoring period they will be invited to a Stage One Formal meeting. The letter will explain their right to be accompanied by a Trade Union representative or work colleague and that a possible outcome of the meeting may be a First Written Warning. A First Written Warning may only be issued by a manager of at least Grade 6 and above. The manager chairing the meeting will be supported by their Assistant HR Business Partner.

22.3.2 At the meeting the manager will give consideration to the employee's sickness absence record, including the reasons for absence and other areas possibly associated with the absences and OH advice where this has been obtained. The employee will have the opportunity to put forward any information they would like the manager to take into account before reaching a decision.

22.3.3 The outcome of the meeting will be confirmed to the employee in writing and may include measures outlined at Section 24.1. If the matter is considered to be an ongoing cause for concern, the employee will be

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issued with a First Written Warning. A First Written Warning should be issued within 5 working days of the formal meeting and will usually be effective for 12 months from the date on which it is issued. The manager must outline the frequency of future review meetings in the outcome letter.

The employee's absence will be monitored for 3 months following the meeting and the employee will be warned that a failure to improve their attendance during this period may result in escalation at any time to the next stage of the Policy and Procedure.

22.4 Stage Two Formal Meeting (Potential Outcome – Final Written Warning)

22.4.1 Where an employee fails to show significant improvement in their attendance or exceeds the level of absence stipulated during the 3 months, they will be invited to a Stage Two Formal meeting. The letter will explain their right to be accompanied by a Trade Union representative or work colleague and that a possible outcome of the meeting may be a Final Written Warning. A Final Written Warning may only be issued by a manager of at least Grade 8 and above. The meeting must be supported by their HR Business Partner.

22.4.2 The manager will give consideration to the employee's sickness absence record, including the reasons for absence and other areas possibly associated with the absences and OH advice. The employee will have the opportunity to put forward any information they would like the manager to take into account before reaching a decision.

22.4.3 The outcome of the meeting will be confirmed to the employee in writing and may include measures outlined at Section 24.1. If the matter is considered to be an ongoing cause for concern, the employee will be issued with a Final Written Warning. A Final Written Warning should be issued within 5 working days of the Stage Two meeting and will usually be

effective for 12 months from the date on which it is issued. The manager must outline the frequency of future review meetings in the outcome letter.

The employee's absence will be monitored for a 3 month period following the meeting and the employee will be warned that a failure to improve their attendance during this period may result in escalation to the next stage of the Policy and Procedure, which may result in their dismissal.

22.5 Monitoring and Escalation

22.5.1 Where an employee fails to show a significant improvement in their attendance levels during the monitoring periods, it is not necessary to wait until the end of the 3 month review period before taking action. Action may be taken from the time absence exceeds the required level. Managers may, at their discretion, commence the process at any stage, dependant on the circumstances of the case.

22.6 Expiration of warning

22.6.1 Copies of warnings will be held on the employee's file but will no longer remain live from the date on which they expire.

22.7 Stage Three Formal Meeting (Potential Outcome – Dismissal)

22.7.1 Where the employee fails to meet the levels of improvement required at the Stage Two Formal monitoring stage of the procedure, a dismissal hearing should take place. The hearing will be chaired by an Assistant Director or above (with authority to dismiss), supported by the relevant HR Business Partner. The employee will receive a written invitation to the hearing, detailing their right to be accompanied by a Trade Union Representative or work colleague and also a copy of any information which may be referred to during the hearing. The letter should be issued at least 7 working days in advance of the hearing.

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22.7.2 The employee will be given the opportunity to explain their absence record and make any representations they would like considered before a decision is reached.

22.7.3 Depending upon discussions at the Hearing, the manager may:

- Adjourn the hearing to make a referral to OH for further guidance or seek other medical evidence
- Make the decision to dismiss the employee with contractual notice
- Make recommendations as to an alternative appropriate sanction e.g. an extension to Final Written Warning
- Agree that the name of the employee should be added to the Redeployment Register in line with OH guidance and that the employee will be subject to the Redeployment Policy and Procedure.

22.7.4 In cases of dismissal, a letter informing the employee of the decision to dismiss should be sent to the employee within 5 working days. The letter should include a brief factual summary of the case, grounds for the dismissal and reasons for termination of employment, with the right of appeal in accordance with the Council's Appeal Policy and Procedure.

23. Long Term Sickness Absence Procedure

It is important when dealing with long-term sickness absence that there is on-going, regular communication between the manager and employee throughout the employee's absence. The frequency of communication will be determined by the manager depending on the nature of the absence.

23.1 Case Review Meetings

23.1.1 Once an employee has been absent for a period of 20 continuous working days (pro rata based on the number of hours worked for part time employees) the employee will be invited to a formal Absence Review

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Meeting with the manager to discuss the situation and consider measures to achieve a successful return to work. The letter will explain the employee's right to be accompanied by a Trade Union Representative or work colleague and what will be discussed at the meeting. Please refer to Management guidance on an Absence Review Meeting.

23.1.2 Absence Review Meetings will usually be held at Stevenage Borough Council premises. However, in the event that the employee is unable to attend a meeting at their workplace, the manager may write to obtain information or offer to visit the home of the employee.

23.1.3 Further formal Absence Review Meetings should take place at intervals not exceeding 2 months and up to date OH advice will be sought in advance of the meeting as may be appropriate. Absence review meetings may be held more frequently depending on the circumstances of the case.

23.1.4 In situations where it becomes evident that there is little or no prospect of a return to work within a foreseeable timeframe, the manager should arrange an Absence Review Hearing, after seeking advice from their HR Business Partner. At this Hearing, the employee's continued and future employment with the Council will be considered.

23.2 Return to Work Adjustments

23.2.1 In order to facilitate a return to work, the following options should be considered by those involved, subject to the needs of the service:

- adjustment to the work or equipment, work patterns or work environment
- extra supervision or a mentor
- additional training
- phased return

23.3 Ill Health Redeployment

23.3.1 If redeployment is recommended by OH, advice must be sought from HR and for employees who have an underlying medical condition and are likely to meet the disability definition under the Equality Act 2010, the Council's Redeployment Policy and Procedure will apply in searching for suitable alternative employment.

23.4 Ill Health Retirement

23.4.1 Where an employee is a member of the Local Government Pension Scheme and there is a recommendation by OH or the employee wishes to pursue ill health retirement, an application can be made, which would be assessed by an independent registered medical practitioner, approved by the administering authority, to determine whether they satisfy the criteria to certify ill health retirement. Details of the current Ill-health Retirement rules and procedures can be found on the HCC pensions website.

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23.5 Final Absence Review Hearing (potential Outcome – Dismissal)

23.5.1 Where it has been identified that an employee on long term sickness absence will be unable to return to their substantive role, or where it becomes evident that there is no foreseeable prospect of a return to work within a reasonable timescale, the manager will arrange a Final Absence Review Hearing, after taking advice from their HR Business Partner.

23.5.2 The employee will be invited to the Final Absence Review Hearing, giving them at least 7 working days' notice of the hearing. The letter will confirm their right to be accompanied by a Trade Union Representative or work colleague, the purpose of the hearing and that termination of their contract on the grounds of capability due to ill health may be an outcome.

23.5.3 The hearing will be chaired by an Assistant Director or above (with authority to dismiss), with support from a HR Business Partner. Please refer to the Management Guidance for the procedure to follow at this hearing.

23.5.4 A decision to dismiss an employee on the grounds of capability, with contractual notice, due to ill-health should not be made until all other courses of action have been considered.

23.5.5 The outcome of the hearing will be confirmed to the employee in writing and should be issued within 5 working days of the hearing.

23.6 Terminal Illness

23.6.1 Managers should deal with such situations compassionately taking into account the wishes of the employee and their financial situation, as well as the needs of the organisation. Each case will be considered dependant on the circumstances and advice should be sought from the HR Business Partner who will in turn liaise with the pensions team at HCC and OH.

23.6.2 There are occasions where an employee with a terminal illness wishes to take up the option of termination of employment and may be eligible for early release of pension benefits or commutation of part or all of the pension into a lump sum if they are a member of the local government pension scheme. The HR Business Partner will direct the employee to expert advice on this from the pensions team at HCC.

23.6.3 In exceptional circumstances, the employee will be kept on the payroll on nil pay, half pay or full pay, at the discretion of the Assistant Director, in discussion with the Senior HR Manager. This removes the need to add further distress by formally dismissing someone, where remaining in service could enable access to death in service benefits.

24. Appeals

24.1 Employees have the right of appeal against formal warnings issued and dismissal. The employee should submit their appeal within 7 working days of receiving the decision and any appeals will be managed in accordance with the Appeal Policy and Procedure.

25. Audit and Record Keeping

25.1 Any warnings issued and dismissal decisions will be recorded and monitored electronically by HR/OD to ensure that the procedure is operated fairly and consistently. Remedial action will be taken where appropriate, for example, additional training for managers.

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26. Equality and Diversity

26.1 Stevenage Borough Council is committed to achieving equal opportunity, celebrating diversity in all our staff policies. This Policy and Procedure will be operated in accordance with the Requirements of the Equality Act 2010.

27. Policy Review

27.1 This Policy and Procedure will be reviewed by HR/OD every three years or sooner in line with legislation and best practice.

Version No: 6

Date: 14 June 2018

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Approved by SLT on: 10th October 2017

Version Control

DOCUMENT HISTORY & VERSION CONTROL

Version	Date approved	Approved by	Description
1.	11 August 2015	SMB	Creation of original document
2.	18 August 2015	Christina Hefferon, Head of Service, HR & OD	Amendment to Section 20: Overtime and Sickness Absence
3.	6 November 2015	Clare Davies, Senior HR Manager	Amendment to Section 20: Flexitime, Overtime and Sickness Absence
4.	1 December 2015	Clare Davies, Senior HR Manager	Amendment to Section 20: Flexitime, Overtime and Sickness Absence
5.	Nov 2017	Alison Thompson and HR BP Team	Amendments to entire policy to enable a more robust approach to sickness absence management
6.	14 June 2018	Clare Davies, HR BPs and approved by Staffside	Addition of management information relating to Elective Surgery (section 15.5)

Version No: 6

Date: 14 June 2018

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Approved by SLT on: 10th October 2017

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Email Survey Response Form



Topic	Sickness/ Absence
From	Dacorum Borough Council
Date	Oct 18
<ol style="list-style-type: none"> 1. Please could you provide your sickness absence rates for your organisation over the last 2 years for both short and long term sickness absences 2. How far back do you review an individual's sickness absence record – 12 months, 24 months or over a longer period? 3. What are the top 3 reasons for sickness absence in short term absences in your organisation? 4. What are your top 3 reasons for long term sickness absences in your organisation? 5. What interventions did you find the most useful in helping a successful return to work after long term sickness absence? 6. What interventions have you found most useful in reducing sickness absence levels overall? 7. What is your intervention/support for stress (both personal and work place stress)? 8. Do you offer a health insurance benefit to your employees eg Simply Health? If yes, has this impacted your sickness absence rates? 	
Responses Received: 8	

Authority and Contact	Response	Documents Shared
Luton Borough Council	Q1: Figures not available which separate short and long term sickness rates. 2017/18 = 11.65 days per FTE, 2018/2019 = 11.72 days per FTE Q2: Rolling 12 months. Q3: 1) Gastro; 2) Musculoskeletal; 3) Respiratory Q4: 1) Musculoskeletal; 2) Mental Ill Health; 3) Medical Procedure Q5: Phased Return to Work, Reduced Hours Q6: Dedicated HR Advisor for managers to seek advice/support from. Senior management hold managers accountable. Q7: Stressor Assessments, OH referral, Employee Assistance Programme	

APPENDIX H

Authority and Contact	Response	Documents Shared																												
	Q8: No.																													
Central Bedfordshire Council	<p>Q1: 2016/2017 Long Term Sickness = 4.84 days per FTE, 2016/2017 Short Term Sickness = 4.07 days per FTE, 2016/2017 Total = 8.91 days per FTE. 2017/2018 = Long Term Sickness = 5.42 days per FTE, Short Term Sickness = 4.32 days per FTE. Total = 9.74 days per FTE. Q2: Rolling 12 months. Q3 and Q4:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 30%;">Top 3 ALL</th> <th style="width: 30%;">Top 3 Long</th> <th style="width: 30%;">Top 3 Short</th> </tr> </thead> <tbody> <tr> <td rowspan="3" style="text-align: center; vertical-align: middle;">Oct 16 - Sep 17</td> <td>01 - Anxiety/stress/depression/other mental health</td> <td>01 - Anxiety/stress/depression/other mental health</td> <td>04 - Cold, cough, flu - influenza</td> </tr> <tr> <td>04 - Cold, cough, flu - influenza</td> <td>03 - Musculoskeletal problems</td> <td>16 - Gastrointestinal problems</td> </tr> <tr> <td>16 - Gastrointestinal problems</td> <td>02 - Back problems</td> <td>01 - Anxiety/stress/depression/other mental health</td> </tr> <tr> <td rowspan="3" style="text-align: center; vertical-align: middle;">Oct 17 - Sep 18</td> <td>Top 3 ALL</td> <td>Top 3 Long</td> <td>Top 3 Short</td> </tr> <tr> <td>01 - Anxiety/stress/depression/other mental health</td> <td>01 - Anxiety/stress/depression/other mental health</td> <td>04 - Cold, cough, flu - influenza</td> </tr> <tr> <td>16 - Gastrointestinal problems</td> <td>16 - Gastrointestinal problems</td> <td>16 - Gastrointestinal problems</td> </tr> <tr> <td></td> <td>04 - Cold, cough, flu - influenza</td> <td>03 - Musculoskeletal problems</td> <td>01 - Anxiety/stress/depression/other mental health</td> </tr> </tbody> </table> <p>Q5: Phased Return agreed between the employee and line manager whilst seeking advice from OH. Q6: Currently under review. Q7: Occupational Health and/or Employee Assistance Programme, Health Assured. Q8: N/A.</p>		Top 3 ALL	Top 3 Long	Top 3 Short	Oct 16 - Sep 17	01 - Anxiety/stress/depression/other mental health	01 - Anxiety/stress/depression/other mental health	04 - Cold, cough, flu - influenza	04 - Cold, cough, flu - influenza	03 - Musculoskeletal problems	16 - Gastrointestinal problems	16 - Gastrointestinal problems	02 - Back problems	01 - Anxiety/stress/depression/other mental health	Oct 17 - Sep 18	Top 3 ALL	Top 3 Long	Top 3 Short	01 - Anxiety/stress/depression/other mental health	01 - Anxiety/stress/depression/other mental health	04 - Cold, cough, flu - influenza	16 - Gastrointestinal problems	16 - Gastrointestinal problems	16 - Gastrointestinal problems		04 - Cold, cough, flu - influenza	03 - Musculoskeletal problems	01 - Anxiety/stress/depression/other mental health	
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	04 - Cold, cough, flu - influenza	03 - Musculoskeletal problems	01 - Anxiety/stress/depression/other mental health																											
Colchester Borough Council	<p>Q1: 2017/18 = Long Term Sickness = 6.1 days per FTE, Short Term Sickness = 3.46 days per FTE. Q2: Use Bradford Factor over 12 month rolling period. Q3: 1) Cold/Coughs & Flu; 2) Gastro; 3) Musculoskeletal</p>																													

APPENDIX H

Authority and Contact	Response	Documents Shared
	<p>Q4: 1) Musculoskeletal; 2) Mental Health – Anxiety, depression, other psychiatric illnesses; 3) Mental Health – work related stress. Q5: Home visits, Employee Assistance Programme, OH Q6: Bradford Factor for short term absence, Employee Assistance Programme Q7: Employee Assistance Programme, Mental Health First Aiders, Wellbeing Champions, OH. Q8: Discounted rates available. No data collected.</p>	
Suffolk Coastal & Waveney District Councils	<p>Q1: 2016/2017 = Long Term Sickness = 3.02 days per FTE, Short Term Sickness = 2.13 days per FTE, 2017/18 = 4.93 days per FTE, Short Term Sickness = 2.0 days per FTE. Q2: 12 months. Q3: 1) Gastro (abdominal pain, gastroenteritis, vomiting); 2) Respiratory (cold/cough/flu); 3) Mental Health – stress. Q4: 1) Mental Health – Stress; 2) Other Known Causes; 3) Hospital/Post Operative. Q5: OH, Regular Contact, Phased Returns/Reduced Duties. Q6: OH, Regular Contact, Phased Returns/Reduced Duties. Q7: Mental health first aiders, stress policy, stress risk assessment part of annual team reviews. Q8: No.</p>	
North Hertfordshire District Council	<p>Q1: 2016/2017 = Long Term Sickness Absence = 1.69 days per FTE, Short Term Sickness Absence = 3.25 days per FTE 2017/2018 = Long Term Sickness Absence = 2.96 days per FTE, Short Term Sickness Absence = 4.23 days per FTE Q2: We review the rolling 12 month period for employee triggers under the attendance procedure policy. However, the HRBPs also review overall absence history to establish possible recurrent health issues/absence history patterns etc and advise the line manager on further action to consider. Q3: Reviewed the last 6 months 1) Stomach issues; 2) Musculoskeletal; 3) Colds/Infections Q4: 1) Stress; 2) Musculoskeletal; 3) Cancer Q5: HR BPs liaise with line managers/OH referrals, Meetings between manager and employee and HR/Employee Assistance Programme. Q6: HR BPs review all triggers under the attendance procedure policy and advise manager of action to consider. Q7: OH, Employee Assistance Programme. Q8: Yes but not impacted sickness absence rates that aware of.</p>	
East Herts Council	<p>Q1: 2016/2017 = Long Term Sickness Absence = 2.8 days per FTE, Short Term Sickness Absence = 3.2 days per FTE 2017/18 = Long Term Sickness Absence = 3.1 days per FTE, Short Term Sickness Absence = 3.1 days per FTE Q2: We have a trigger of 7 days in 12 months however we may look back over the previous year to see if there is a pattern.</p>	

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Authority and Contact	Response	Documents Shared
	<p>Q3: 1) Minor illnesses (colds/flu, headaches/migraines, stomach upsets, minor ops) – 71% of all short term absences; 2) Musculoskeletal injuries (eg neck strains and repetitive strain injury but excluding back pain) – 9% of all short term absences; 3) Acute Medical Condition (eg stroke, heart attack, cancer) – 5% of all short term absences.</p> <p>Q4: 1) Acute Medical Condition (eg stroke, heart attack, cancer) – 43% of all long term absences; 2) Minor Illnesses (eg colds/flu, headaches/migraine, stomach upsets and minor ops) – 15% of all long term absences; 3) Musculoskeletal injuries (eg neck strains and repetitive strain injury but excluding back pain) – 15% of all long term absences.</p> <p>Q5: Manager maintaining contact including a home visit where necessary, referral to OH, Phased return and adjustments where appropriate.</p> <p>Q6: Return to work interviews after every absence, training managers on absence policy, managers taking action when trigger has been met.</p> <p>Q7: Referral to OH, HSE stress risk assessment questionnaire, reminder of Employee Assistance Programme for eg counselling, will be introducing Mental Health First Aiders later this year.</p> <p>Q8: No.</p>	
North Norfolk Council	<p>Q1: 2017/18 = for both long and short term sickness = 6.35 days per FTE 2018/19 = for both long and short term sickness = 5.88 days per FTE</p> <p>Q2: 12 months</p> <p>Q3: 1) Cold and/or Flu; 2) Diarrhoea and/or vomiting; 3) Headaches & Migraines</p> <p>Q4: 1) Anxiety/Stress/Depression; 2) Organ problems; 3) Stomach and digestive problems</p> <p>Q5: -</p> <p>Q6: Introduction of short term absence triggers (this was years ago but not having them in place before had a dramatic impact). More recently, I would say the overall wellbeing drive in our organisation has really assisted in bringing levels down.</p> <p>Q7: HSE stress risk assessments, OH, Employee Assistance Programme, Wellbeing Programme, Mental Health First Aiders, Access to counsellor (but only by HR referral).</p> <p>Q8: Yes Simply Health although ours is a cash plan, not health insurance. No evidence either way but as it's a cash plan, then I would say doubtful.</p>	
Babergh & Mid Suffolk District Councils	<p>Q1: We currently report on total (no short term/long term split) = 1.14% days per FTE.</p> <p>Q2: We used Bradford Factor over 52 weeks.</p> <p>Q3: 1) Virus/infection; 2) Headache/Migraine/Neurological; 3) Gastro (abdominal pain, gastroenteritis, vomiting, diarrhoea)</p> <p>Q4: 1) Mental Health; 2) Musculoskeletal; 3) Hospital/Post Operative</p>	

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Authority and Contact	Response	Documents Shared
	<p>Q5: Close relationship with the manager definitely helps and phased return to work.</p> <p>Q6: One to one meetings with the individuals, manager and HR Advisor when Bradford Factor is over 100.</p> <p>Q7: Access to Employee Assistance Programme (free to all employees, online, phone, a mobile app); in house Mental Health First Aiders.</p> <p>Q8: Simply Health, Benenden (Health Scheme), BHSF, BUPA – difficult to say as we have been with them for so long. When they were first introduced we didn't have any metrics or sickness stats so nothing to compare to.</p>	

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