

Civil Nuclear Constabulary



Attendance Management Policy and Procedure

POLICY

The Civil Nuclear Constabulary (CNC) is committed to promoting a healthy working environment which maximises the health, safety and wellbeing of all its employees, and recognises the importance of good attendance in delivering its mission.

This policy is designed to support individuals and promote high levels of attendance, with the provision of fair, consistent and compassionate practices to assist an individual when they are absent through ill-health, and effectively manage those who cannot maintain satisfactory levels of attendance. The CNC's objective is to help individuals maintain the highest possible levels of attendance.

SCOPE

This policy and procedure applies to all police staff and police officers including those in their probationary period. The term individual refers to police officers and police staff.

PROCEDURE

This policy and procedure aims to promote high levels of attendance in partnership with individuals. It provides a framework for managers and individuals in which to apply a fair and consistent approach to monitoring, managing and improving attendance levels. Short term sickness is defined as absences which are less than 28 continuous calendar days and long term sickness for the purpose of this procedure is defined as absences which are in excess of 28 continuous calendar days.

Key Principles

Individuals have a responsibility to make all reasonable efforts to attend work and to safeguard themselves and others, in doing so maintaining an appropriate level of health, fitness and well-being. Individuals are expected to be open, honest and transparent and disclose any information relevant to their absence.

Confidentiality

Everyone involved in managing attendance has a responsibility to maintain the confidentiality of sensitive personal data. Medical information will be treated with respect and handled in accordance with the Data Protection 1998 and Access to Medical Records Act 1998. Any unjustified disclosure may be subject to disciplinary action. Line managers will retain a record of all absences on the approved system.

Disability

If an individual is disabled or becomes disabled, the CNC are legally required under the Equality Act 2010 to make reasonable adjustments to enable the individual to continue working, for example, providing an ergonomic chair etc. We should ensure that the individual is not disadvantaged because of their disability and if absence is related to a disability the record of this should be recorded separately from other sickness absence. A management discussion will determine whether an individual case falls under the Equality Act.

Advice and Support Mechanisms

It is recognised that individuals may require support and assistance. The following sources of assistance may be available:

- Line Management
- Occupational Health Department (see Appendix 1)
- Employee Assistance Programme
- Health, Wellbeing and Fitness Advisor
- HR Department
- Equality and Diversity Lead
- Police Treatment Centre (subscription required) – Police Officers Only
- CNPF/Prospect/Superintendents Association
- Physiotherapy provision
- Dyslexia workplace assessors

Reporting as absent

If an individual is going to be absent from work they should speak to their line manager or deputy within two hours of their normal start time. They should also give a clear indication of the nature of the illness along with a likely return date.

The manager will check with individuals if there is any information they need about their current work. If the individual does not contact their line manager by the required time the manager will attempt to contact the individual at home.

An individual may not always feel able to discuss their medical problems with their line manager. Managers will be sensitive to individual concerns and make alternative arrangements.

Reporting as absent whilst at work

If an individual needs to report sick whilst at work they should notify their line manager. The manager may seek advice from Occupational Health, or consider alternative duties to enable an individual to remain in the workplace taking into consideration the nature of the sickness.

Provided individuals attend for a minimum of one hour on the day on which they either go home early or come in late because of sickness, no part of that day will count as sickness absence, nor will the time have to be made up. The absence will be recorded for monitoring purposes only and further action may be taken if this becomes a recurring pattern

If an individual reports sick on an overtime shift or bank holiday, this absence will not be recorded as sickness or contribute towards sickness absence triggers. However, the absence will be recorded and monitored and further action may be taken if a pattern of absence emerges causing concern.

Annual leave

Sickness whilst on annual leave

Individuals who become ill during annual leave must follow the normal sickness reporting procedures and report the illness/injury promptly. Individuals are required to provide a Fit Note for any sickness occurring whilst on annual leave, self-certification will not be accepted. The absence will be treated as sickness absence and the annual leave will be reinstated on the provision of a Fit Note.

It is accepted that in some circumstances, taking time away during a period of sickness absence can assist with recuperation and support recovery. In this instance, individuals will not be regarded as on annual leave (unless previously agreed). Individuals are required to inform their line manager if they intend to take leave away from home during a period of sickness absence and agree contact arrangements as appropriate. Fit Notes must be provided throughout periods of sickness absence where leave away from home is undertaken.

Absences not covered by a Fit Note or considered as annual leave may be considered as unauthorised absence, and further action may be taken.

If individuals leave the employment of the CNC from sick leave, their contractual annual leave entitlement will be recalculated as if their first day of sickness was the last day of service. They will accrue annual leave at the statutory rate during their period of absence.

Annual leave accrual

Individuals continue to accrue annual leave whilst they are off sick. If an individual has been long term sick for the majority or all of the full annual leave year, they will be able to carry over the statutory entitlement into the next leave year. Annual leave will normally only be carried over for a maximum of 15 months, this commences at the end of the relevant annual leave year.

If an individual has been sick for part of the annual leave year, they may be able to carry over the remainder of their statutory entitlement into the next annual leave year provided they have had insufficient time to take it.

Where an individual is absent due to sickness, they may be permitted to use annual leave if they wish to do so; this is entirely voluntary and is accessed by the standard annual leave request process. However, individuals must not undertake any activities during leave which may prolong their sickness absence or have a negative impact upon their recovery.

Where an individual has a period of annual leave approved during sickness absence, their half pay/pension rate pay trigger will be extended by the period of time equivalent to the amount of annual leave used. Individuals will receive their normal rate of pay for time taken as annual leave. Line managers must inform HR of any instances where an individual wishes to take annual leave during sickness absence to ensure the appropriate pay adjustment is made.

Certification and Fit Notes

Individuals must provide the appropriate documentation for recording sickness absence;

- Sickness absence up to and including 7 calendar days must be covered by a Sickness Absence Notification Form (SAN) constituting self-certification.
- Sickness absence exceeding 7 calendar days must be covered by a Statement of Fitness for work (Fit Note) from a GP/medical practitioner.

Individuals should submit copies of Fit Notes to their line manager, who will record this in Crown DMS. Individuals should keep the original fit note for their own reference or in case it is required for any benefit applications.

Fit notes must cover every day of sickness absence beyond the 7 day period of self-certification, even if an individual is receiving reduced or nil pay. Failure to provide a Fit Note in a reasonable timescale may affect sick pay during absence and may result in disciplinary action.

Individuals should be aware that the right to self-certification may be withdrawn, for example where there is a persistent short term absence that may be being managed under the relevant unsatisfactory performance procedure or there is concern whether an underlying medical condition may be present. Where the right to self-certify is withdrawn, the individual will be responsible for meeting any charges their GP may make for providing a Fit Note. In such cases, the line manager may refer an individual to Occupational Health for advice.

If the GP advises on the Statement of Fitness to Work that an individual 'may be fit for work' we will discuss with the individual ways of helping them get back to work. This might include talking about a phased return to work or restricted duties. Where appropriate, the manager should seek the advice of Occupational Health. It should be noted that the information contained on the Fit Note is advice only and the CNC are not legally obliged to accommodate the advice given.

Where an individual wishes to return to work before the expiry of a Fit Note, they may be asked to provide confirmation of their fitness to work from their GP. An Occupational Health referral may be required in certain circumstances.

Return to work

Individuals must notify their line manager at the earliest opportunity of their intended return to work date. Individuals should declare themselves "fit for duty" even if they are on a rest day/non-working day.

Individuals may be required to have an Occupational Health assessment either prior to their return to work, or on their first day back in the workplace. This will depend on the nature and circumstances of the absence.

Line managers must conduct the return to work interview on day one of the individual returning to the workplace, in order to establish;

- The reason for, and cause of absence
- Anything the manager or the organisation can do to help
- That the employee is fit to return to work

The meeting is informal and will be held in private. Wherever possible a face to face meeting should take place, however it is acceptable for the return to work interview to be conducted via telephone/video conference where operational requirements dictate.

Return to work interviews should be held for all absences attributable to sickness including part day absence (i.e. go home part way through a day) and absences following elective surgery. A return to work form for the individual will be driven via Crown DMS, the form will be completed in Crown DMS with the individual present and stored electronically. The manager and individual will have access to the stored document.

Recuperative Duties

Recuperative duties refer to a work arrangement where staff are temporarily assigned to different; duties, work pattern, hours of work over a defined period of time. Recuperative duties should not normally exceed 3 months. Where appropriate, advice from Occupational Health may be required to aid a successful return to work.

In these circumstances recuperative duties may be extended for a defined period with regular reviews in place. Any decision to agree an extension to recuperative duties should be made in a management discussion.

In all cases, a recuperative return action plan should be prepared, agreed and issued by the line manager with an appropriate risk assessment in place.

Where the return cannot be accommodated, the CNC will require the individuals to remain at home on certified sick leave.

Where a phased return to work has been agreed, any hours not worked in an individual's normal working pattern, will be considered as sickness absence and the appropriate sick pay rate applied. Individuals may request annual leave to support a phased return to work, which should be given careful consideration by the line manager. Where annual leave is agreed, the individual will receive full pay for any hours taken. See Appendix 2 for further detail.

Individuals undertaking a phased return to work will not, in normal circumstances be permitted to work overtime for the duration of the return to work plan. Individuals undertaking recuperative duties on normal hours may be permitted to work overtime as long as Occupational Health advise that the additional hours will not negatively impact on an individual's recuperation.

Restricted Duties

Restricted duties may also be considered in certain circumstances, for example where reasonable adjustments are appropriate to accommodate an individual's disability. Such duties are of a more permanent nature. It will be necessary to consider the appropriateness of restricted duties at a risk assessment panel.

Where an absence/illness is attributable to an Equality Act condition which the employer has accepted and determined, reasonable adjustments must be discussed with the individual to assist them in achieving and maintaining a satisfactory level of attendance, wherever possible. It should be noted that the employer does not have to 'create' a job for the individual. The line manager should refer to the Disability Management Procedure, when they become aware that an individual's condition is covered by the Equality Act.

Restricted duties must be in agreed, scoped, and budgeted posts, and consideration should be given to opportunities at other sites if appropriate.

Monitoring and Managing Attendance

Short term absence

Monitoring levels of attendance is undertaken to ensure all individuals are treated fairly and consistently, and to manage levels of attendance across the CNC. Frequent, short term absences can cause disruption and burden on other team members, but may also be a sign of an underlying issue. Line managers are required to monitor absence levels within their teams, and identify any potential emerging trends or patterns of short term absence, investigating potential causes and provide support at an early stage. Further action must be taken where an individual has reached any of the following triggers:

- The 4th episode of sickness absence in a 12 month rolling period (This will reduce to 3rd episode in rolling 12 month, 1 year from the date of policy adoption by JCC, 9th June 2017)
- And/or when sickness absence reaches 14 days (excluding long term sickness) in any rolling 12 month period (pro rata for part time individuals)
- Any pattern of absence which gives cause for concern.

If attendance levels reach the sickness triggers, line managers must discuss this with the individual concerned, and inform them whether formal action will be taken

Individuals with less than 12 months service and those already subject to management under the formal procedures will have different triggers applied.

Month	Absence Exceeds (days)	Episodes of absence exceeds	Action required
1	2	1	Next Stage – Appropriate Procedure
2	3	1	Next Stage – Appropriate Procedure
3	4	2	Next Stage – Appropriate Procedure
4	5	2	Next Stage – Appropriate Procedure
5	6	2	Next Stage – Appropriate Procedure
6	7	2	Next Stage – Appropriate Procedure
7	8	3	Next Stage – Appropriate Procedure
8	9	3	Next Stage – Appropriate Procedure
9	10	3	Next Stage – Appropriate Procedure
10	11	4	Next Stage – Appropriate Procedure
11	13	4	Next Stage – Appropriate Procedure
12	14	4	Next Stage – Appropriate Procedure

Discountable Absence

There are some circumstances where specific short term absences may be considered to be discountable for trigger purposes; such as:

- Any pregnancy related illness (OHD referral may be required);
- One short-medium term, non-culpable, CNC recognised injury at work injury
- One hospital admission due to requirement for operation

Nb: Where an individual has a recognised disability and on the advice from OHD, adjustments have been made to accommodate this, any subsequent absence relating to the disability will not normally be discounted.

Managing Persistent Short Term Absence

Prior to reaching formal triggers as part of the return to work process or where any management concern should arise, it is part of normal line management activity to consider support.

Line managers may agree a plan with an individual to support them in improving their levels of attendance. Progress will be monitored throughout the duration of the action plan. If there are no further concerns there will be no requirement to take formal action at that time.

If attendance levels remain a cause for concern other formal proceedings may be applied, these include:

Individual	Procedure
Police Officer – 2 or more years' service	Unsatisfactory Performance (and/or Attendance) Procedure (Police Officer) (UPP) – The Police (Performance) Regulations 2008
Police Officer – less than 2 years' service	Termination of Employment of Probationer and Former Home Office/Scottish/Other Police Officers in their first 24 Months of Service with the CNC. CNC/PP/0623
Police Staff	Managing Absence Procedure (MAP) CNC/PP/0579
Police Officers ¹ , probationary Officers and Police Staff	Capability Management Procedure

Federated and Superintendent Ranks

Long Term Absence

Where an absence has exceeded or is likely to exceed the long term sickness trigger (28 consecutive days), the line manager must arrange a referral to Occupational Health for a full assessment to determine diagnosis, prognosis and treatment options being explored. When an individual reaches the long term sickness trigger a home visit should be arranged. In the event of an individual preferring not to have a visit to their home, an alternative venue may be considered.

Line managers are responsible for ensuring that individuals are aware of available support mechanisms, including the relevant staff associations. The line manager will contact the individual regularly to check on their well-being, and progress and identify any welfare requirements they may have.

A management contact report form will be completed following each contact made. In addition, a Senior Officer/Manager may request to contact an individual on long term sickness absence, depending on the specific circumstances, however the individual will always be given prior notification of this.

Responsibility for maintaining contact during an absence sits equally with the individual and their line manager. The individual is expected to keep in contact with their line manager to keep them informed of progress, and enable them to support the individual with their return to work at the appropriate point.

Appendix 1 - Occupational Health

Individuals may be required to attend Occupational Health in the following situations;

- All absences where Long Term Sickness is indicated
- Absence/ill health attributable to a high risk condition
- Persistent or short term absence with potential underlying medical conditions
- Where an absence is alleged as work related
- Where there are concerns in relation to an individual's fitness to attend work
- All other cases where the manager feels a referral is required

The line manager must complete an Occupational Health referral form (see intranet) which they should discuss with the individual prior to submission. Occupational Health will seek an individual's consent to share any information with the line manager following a management referral.

Individuals are required to make every effort to attend Occupational Health appointments, and notify their line manager as soon as possible if they are unable to attend.

The primary care provider for an individual is their GP. Where necessary Occupational Health will liaise with other health professionals, including GP's and treating specialists, subject to appropriate consent from the individual concerned. The employee is encouraged to provide this consent to enable Occupational Health to advise on their case in a timely manner. All medical information will be treated as medical in confidence within the Occupational Health team.

In certain circumstances and subject to approval from the CMO/HR Manager, the CNC may fund specialist referrals and diagnostic assessments (e.g. MRI scans) to ascertain an early prognosis and diagnosis. The appropriate consent will be sought from individuals prior to making referrals or discussing resulting reports.

Appendix 2 – Case Management

Risk Assessment Panel

In circumstances where an individual has a medical condition or injury which are likely to prevent them carrying out their normal duties on a permanent/indefinite basis in line with the medical standards where OHD advice has been exhausted or they are seeking to return to work following prolonged or recurrent mental/emotional ill health, a Risk Assessment Panel (RAP) will be convened to determine:

- Return to work (on full/restricted/recuperative duties)
- Indefinite restriction
- Recommendations regarding changes to medical standards

RAP members may include:

- Chief Superintendent – Chair
- Line Manager/HR Representative
- Chief Firearms Instructor
- Staff Associations/Trade Unions
- HR Manager
- CMO/Senior OHA
- Health and Safety Manager
- Legal Advisor
- Individual
- Other professional advice as required

Line managers will inform individuals of any decisions made, or action to be taken as a result of a RAP. RAP minutes will normally be provided to the individual by the line manager. Following a RAP which permanently restricts an individual, a management discussion will be convened to discuss the next steps.

Divisional Health Committee Meetings

Each Division will hold monthly DHCs, covering all sites. Members are required to maintain confidentiality relating to any personal information received or discussed at all times. Where appropriate, members may be requested to leave the group for discussions regarding the management of individual cases.

Management Discussion

Management discussion provides a structured approach for managing long and short term sickness absence issues. Where concerns are raised in relation to an individual's level of attendance, a case conference may be convened by operational management. A case conference may be called at various stages for example:

- Consideration/review of restricted/recuperative duties
- Consideration of continued employment (capability management/IHR or other grounds)
- Where individuals are absent due to sickness absence for more than one month where no return to work date has been identified, and there is no confirmed diagnosis or prognosis.

Attendees may include, but is not restricted to HR Representative, HR Manager, H&S Manager, Chief Medical Officer, Legal Advisor, relevant operational management. Attendees will consider any available medical evidence, and may request further medical reports through OHD, from the individual's GP and/or any specialist. An individual and their representative will be invited to attend a case conference periodically.

POLICY IMPLEMENTED: 9TH JUNE 2016

REVIEW DATE: 9TH JUNE 2017

POLICY OWNER: EMMA ALDRED

APPROVED BY: JOINT CONSULTATIVE COMMITTEE

ASSOCIATED POLICY: PROCEDURE INCLUDED

IS THE POLICY

New Revised

IF REVISED, PLEASE COMPLETE TABLE BELOW

VERSION NO	DATE	SUMMARY OF CHANGES	AUTHOR(S)
1	8 th June 2016	First Draft after consultation	Emma Aldred

Links to other policies

DOCUMENT NAME	DOCUMENT NUMBER
Unsatisfactory Performance (and/or Attendance) Procedure (Police Officer) (UPP) – The Police (Performance) Regulations 2008	CNC/PP/0110
Termination of Employment of Probationer and Former Home Office/Scottish/Other Police Officers in their first 24 Months of Service with the CNC.	CNC/PP/0623
Managing Absence Procedure (MAP)	CNC/PP/0579
Capability Management Procedure	CNC/PP/0686

Endorsed by:

Prospect

NAL HARRISON
Dalt

Date

9 JUNE 2016

Police Superintendents Association of England and Wales

[Signature]

Date

9th June 2016

Civil Nuclear Police Federation

N. P. JENNIS

Date

09/ JUNE 2016

HR Policy

[Signature]

Date

9th June 2016

