Policy

Title: SICKNESS ABSENCE

Ref: HR/RT/Version 1.1  Last updated: 30 August 2012

1. Scope
The policy and procedure set out in this document applies to all employees of the University of Southampton and where appropriate to those engaged on placements and similar.

2. Purpose
To ensure that employees who are absent from work due to ill-health or injury are treated fairly and sympathetically and are provided with support towards a full recovery.
To provide consistent, fair and effective procedures to monitor sickness absence and to manage the consequences of absence due to ill-health.

3. Policy
The University recognises that there are many different causes of absence from work. The policies and procedures relating to sickness stem from a need to provide support for employees during sickness and the need to monitor and manage absence from work.
To ensure that employees who are absent from work are treated fairly the University will:

a. Operate an Occupational Sick Pay Scheme which provides sick pay to employees who are genuinely unfit for work in accordance with their conditions of service. It is expected that employees do nothing to aggravate their condition and prejudice their return to work.
b. Provide an Occupational Health service to which employees may be referred so that a professional medical opinion or advice may be obtained.
c. Show support to an employee who is, or anticipates to be absent for a period of six weeks or more, which may, if considered to be appropriate in the circumstances, include visits to such staff at home with their prior agreement.
d. Monitor levels of sickness/absence and make every effort to reduce such levels of absence.
e. Identify employees whose absence record is unsatisfactory. Investigate the circumstances of those identified to ensure that all possible steps are taken to assist the member of staff to improve their attendance record.
f. Investigate any underlying causes of high levels of absence within jobs or job groups and follow up with individuals/job groups/department/Academic Units as appropriate.

4. General principles
Employees who are ill will be treated with consideration and respect, with every effort being made to assist their recovery and to safeguard their employment. The University requires its managers to ensure the consistent and equitable implementation of the policy and at all times to exercise a duty of care to all employees.
It is the responsibility of all employees to look after their own general health and well-being and, as far possible, to minimise absence from work. Human Resources and the Occupational Health Department will advise on good practice, procedures and possible counselling/health care assistance.
Employees are expected to attend for work regularly at the times required. The University recognises that from time to time this will be impossible and is always ready to assist employees with genuine difficulties, whilst applying sanctions, in accordance with the disciplinary procedure, to those who seek to abuse such assistance.

The University requires its managers to take positive action to support the implementation of this policy, in particular:

a. to keep records of sickness absence for every employee and to identify and investigate any individual absence patterns emerging over time. The University is required by the Health and Safety Executive to establish effective arrangements to monitor and record sickness absence data on a corporate basis. Human Resources will be responsible for the monitoring of the Policy and the presentation of periodic reports to the University on the effectiveness of the procedures.  
b. to demonstrate concern for the employee’s physical and mental welfare by monitoring their progress towards recovery;  
c. to enable realistic arrangements to be made for cover or redistribution of the workload;  
d. to facilitate the return to work of employees who have been absent from work due to sickness, subject to clearance from the Occupational Health Department where appropriate;  
e. to involve the employee in discussions about their future where continued employment is in doubt, giving them the right of trade union representation at the meeting. If appropriate, options of reasonable adjustments to workplace, job modification, retraining, redeployment or retirement on the grounds of ill health will be considered as soon as all the facts are available;  
f. to develop an organisational culture which supports and promotes equitable working conditions and management practices which contribute to maximising regular employee attendance.

The University reserves the right to withhold payment of sick-pay in the event of an employee failing to cooperate/comply with reasonable requests/enquiries by the University to ascertain the employee’s true medical position and/or in the general application of these procedures.

If at any stage of this procedure the manager (or nominee) or Human Resources has reason to believe that the employee has been falsely purporting to be or to have been absent on health grounds, or has been engaging in activities whilst absent on health grounds which may appear to be inconsistent with the reason or reasons for the absence or which appear not to be conducive to recovery from the reason or reasons for the absence, he or she may refer the matter for investigation with a view to action, if appropriate, under the disciplinary procedure without prejudice to continuing with action under the ill-health procedure. For the avoidance of doubt, disciplinary action for whatever reason related to the employee’s conduct may be taken under the disciplinary procedure concurrently with action under this procedure.

The University, through its management structure, is committed to the effective implementation of the University Health and Safety Policy and will be responsible for providing employees with a safe and healthy workplace.

Individual employees are legally responsible for ensuring that they adopt safe working practices, utilising safety equipment provided to reduce the incidence of sickness caused by the working environment. (see University Health and Safety Policy.) Training will be given where appropriate.

5. **Role of the Occupational Health department**

The University’s Occupational Health Department employs qualified staff who can advise employees and/or managers on health problems (whether or not these result in absence).

Prompt action or discussion can often prevent a problem from becoming serious. The Occupational Health Department’s prime concern is to help the individual remain in employment and to advise on how this may best be done. It should not be seen as the place to go only when situations are desperate. Advice given to employees is strictly confidential. Medical reports will not be shown to managers without the employee’s written permission.

The Occupational Health Department can assist managers to minimise sickness absence by:

a. checking for any underlying causes of frequent short term absences;  
b. assisting managers and employees with the arrangements and timing of return to work following sickness absence;  
c. assessing the probability of an employee’s return to work and ability to continue in their current occupation;
d. liaising with GP and/or Consultant(s) regarding an employee’s condition and prognosis on behalf of managers. The Occupational Health Department will seek the employee’s permission for this in accordance with the Access to Medical Reports Act;

e. assisting Human Resources/managers to advise employees on re-deployment and retraining opportunities, including advice on suitable equipment/aids and safeguards to facilitate a safe return to work; workstation assessments and advice on manual handling/skin care/protective equipment.

Where ill health is, or may become a problem, the employee or the manager (in conjunction with Human Resources) may request a consultation with one of the Occupational Health Department staff (see Form A2 for Referral Procedure). A number of actions may be recommended by the Occupational Health Department, e.g.:

- counselling; referral to an appropriate source/agency;
- advice on treatment to help overcome problems, in consultation with other health care professionals;
- confirmation of the employee’s fitness to continue in his/her present role with recommendations for further treatment;
- confirmation of the employee’s fitness to continue in his/her present role with some form of permanent or temporary support, e.g. job reorganisation, part-time working, disability aids/enabling technology;
- assessment that the employee is temporarily unfit but may be fit to resume after a short period of recuperation/rehabilitation;
- assessment that the employee is permanently unfit to undertake their present duties, but potentially capable to continue work in a different capacity;
- assessment that the employee is permanently unfit for employment, in which case ill-health early retirement may be considered;
- a review of workplace conditions/environment and/or working practices, which may be contributory factors to employee ill-health/sickness absence. Human Resources will normally be involved with such a review, in consultation with the appropriate Head of Academic Unit/Service. Such a review may also include specialist advisers.

Where a direct and private approach to the Occupational Health Department is made by an employee, no details will be disclosed to any other party without the employee’s written agreement. In isolated cases, where Occupational Health consider there is a serious risk of harm to the employee or others, the permission of the employee to disclose information will be sought. Disclosure may still take place even if this is refused but it is stressed this is expected to occur only in very exceptional circumstances and will be strictly on a ‘need to know basis’.

Employees who may wish to discuss any concerns regarding their health or reasons for absence may also seek assistance from the University Counselling Service, their trade union and or Human Resources.

Where the manager makes the initial approach to Occupational Health it will be necessary for him/her to advise the employee why a medical opinion is being obtained and to get their consent. In such cases any recommendations will be given to the manager, following the employee’s referral to Occupational Health, who should discuss these with the employee so that actions may be agreed.

6. Reporting & recording sickness absence

Managers will ensure that every employee understands and follows the sickness reporting procedures. It should be explained to employees during their departmental induction that failure to observe the procedures may result in loss of sick pay or disciplinary action or both.

The University regards the action of falsely purporting to be absent on grounds of ill health as amounting to serious misconduct and an employee may render him/her self liable to disciplinary action which could result in dismissal.

All sickness absences must be reported by the employee, or a person acting on his/her behalf, to the relevant manager or other nominated person, before or as soon as possible after the start of the working period that is missed, and normally not later than one hour after normal commencement time. It is expected that in the majority of cases the report will be made by telephone, however, it is recognised that on occasions this may not be possible. The notification should include a provisional diagnosis and a likely return date. It is not acceptable to leave messages reporting absence with telephonists or anyone else at random.

Managing sickness absence is part of every manager’s role. The University aims to manage sickness absence to within acceptable national standards. Each Academic Unit/Service will establish arrangements to facilitate
the collection of absence data and the presentation of statistical reports to Human Resources on an annual basis.
Managers will keep records of all sickness absences and the process is as follows:

7. **Academic Units/Services with MyView Access**
   a. All sickness absence must be recorded via MyView. Depending on the configuration that has been agreed with the Academic Unit/Service absence data will be entered either by the line manager or an administrator. Where a line manager uses the A1 form to record sickness absence, this should be passed to the administrator for inputting to MyView.
   b. The employee must complete a Self Certificate Form S2 if the absence extends to four consecutive days or more. This should be given to the manager who will enter the details on MyView or forward to an administrator to record the information on MyView, but is not required by Payroll Services Office. The Forms S1 and S3 can still be used within the Academic Unit/Service but are not required to be sent to Payroll Services Office.
   c. On the eighth day of absence the employee must provide the manager with a medical certificate from his/her GP/Consultant/hospital. The manager will enter the details on MyView or forward to an administrator to record the information on MyView.
   d. Subsequent certificates must be submitted running consecutively for the duration of the absence by the employee to his/her manager, who will forward it to the Payroll Services Office. It is the manager’s responsibility to notify the Payroll Services Office if there is a break in certificates.
   e. On return from sickness, the manager will enter the details on MyView or forward details on the A1 Form to an administrator to record the information on MyView.

8. **Academic Units/departments without MyView Access**
   a. The A1 Form should be used to record the date of the first day of sickness, the absence reason and the date of return. This will enable short periods of illness or patterns of absence to be identified. If an employee reports for work but subsequently becomes ill, this can count towards Statutory Sick Pay (SSP) and should also be recorded on A1 Form. Access to employees’ sickness absence records will be restricted to authorised persons, i.e. manager (or nominee), Human Resources and the Occupational Health Department.
   b. Managers will complete an Absence from Work S1 form on the first day of an employee’s absence and send it to the Payroll Services Office.
   c. The employee must complete a Self Certificate Form S2 if the absence extends to four consecutive days or more. This should be given to the manager who will note receipt on Form A1 and send Form S2 to the Payroll Services Office.
   d. On the eighth day of absence the employee must provide the manager with a medical certificate from his/her GP/Consultant/hospital. The manager will note the dates covered by the certificate on Form A1, ensure that the employee’s staff number is on the certificate and forward it to the Payroll Services Office.
   e. Subsequent certificates must be submitted running consecutively for the duration of the absence by the employee to his/her manager, who will forward it to the Payroll Services Office. It is the manager’s responsibility to notify the Payroll Services Office if there is a break in certificates.
   f. On return from sickness, the Notification of return from sickness form S3 should be completed and signed by the manager and sent to the Payroll Services Office.

9. **Workplace injury**
In the event of an absence resulting from an injury or disease which is attributable to University employment, employees should report the matter to their manager who will then report, or arrange for the matter to be reported, to the Head of Academic Unit/Service and University Health and Safety Office using Form S24 – Incident Report Form.
Where it is established that an attendance problem may be related to the misuse of alcohol (or another substance) the University’s Substance Misuse Policy should be used in conjunction with these procedures.

10. **Unauthorised absence**
Where an employee fails to attend duty with no explanation, the following action should be taken by the manager:

a. Attempts must be made to contact the employee to determine the reason for the absence and to ascertain whether or not the employee intends to return to duty. Failure to report absence or to follow procedures for notification of sickness without good cause, are disciplinary offences and should be dealt with as misconduct.

b. The manager should inform Human Resources if the employee fails to respond to enquiries and it is believed that the employee has no intention of returning to work. If necessary, Human Resources will arrange for a recorded delivery letter to be sent making it clear that failure to respond within a defined period of 7 days may result in the termination of their employment.

11. Failure to comply with sickness absence procedures
11.1 Non-compliance with reporting procedures

Managers should ensure that all employees are aware of reporting procedures. If an employee does not comply and there are no extenuating circumstances then sick pay may be withheld. Persistent failure to comply could also result in disciplinary action. Managers should consult with Human Resources for further guidance.

11.2 Doubts as to the genuineness of the illness(es)

The manager should consult with the employee and explain his/her reasons for doubting the genuineness of the illness/reasons for absence. If following such consultation the manager continues to doubt the grounds for absence, then he/she should inform the employee accordingly and arrange for a referral to the Occupational Health Department for a medical assessment.

Individuals are required to state on the Self Certificate that they are genuinely ill and to do so falsely could result in disciplinary action which could result in dismissal.

12. Checklist – Reporting & recording sickness absence

<table>
<thead>
<tr>
<th>Non MyView User</th>
<th>MyView User</th>
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</thead>
<tbody>
<tr>
<td>1. Ensure that all employees are aware of sickness absence reporting procedures.</td>
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</tr>
<tr>
<td>2. Absences should be recorded on Form A1 – Employee Absence Record Form.</td>
<td>2. Absences should be recorded on Form A1 if Administrator used to record sickness absence.</td>
</tr>
<tr>
<td>3. Complete Notification of Sickness Form S1 on the first day of employee’s sickness absence and send the form to the Payroll Services Office.</td>
<td>3. Not required by Payroll Services Office but can be used internally.</td>
</tr>
<tr>
<td>4. The employee should complete a Sickness Self Certificate Form S2 if the absence is for four days or more and hand it to his/her manager. The manager should send Form S2 to the Payroll Services Office.</td>
<td>4. The employee should complete a Sickness Self Certificate Form S2 if the absence is for four days or more and hand it to his/her manager. The manager should update MyView or pass to an administrator to update. Not required by Payroll Services Office.</td>
</tr>
<tr>
<td>5. Employee to supply manager with medical certificate on eighth day of absence. Details to be recorded on Employee Absence Record Form A1. The manager should then forward the medical certificate to the Payroll Services Office.</td>
<td>5. Employee to supply manager with medical certificate on eighth day of absence. Manager to update MyView or details to be recorded on Form A1 and passed administrator to update MyView then forward the medical certificate to the Payroll Services Office.</td>
</tr>
<tr>
<td>6. Check that medical certificates continue to be supplied by the appropriate date. Inform the Payroll Services Office if there is a break.</td>
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</tr>
<tr>
<td>Non MyView User</td>
<td>MyView User</td>
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<tr>
<td>7. Complete Form S3 – Notification of Return from Sickness, when employee returns to work and send the form to the Payroll Services Office. Record date of return on Employee Sickness Absence Record – Form A1.</td>
<td>7. Manager to update MyView when employee returns to work or record on Form A1 and passed to administrator to update MyView. Not required by Payroll Services Office.</td>
</tr>
<tr>
<td>8. Complete a standard accident report form in the event of sickness absence/injury attributable to University employment, and report to the Head of Academic Unit/Service and Health &amp; Safety Office.</td>
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</tr>
<tr>
<td>9. Refer to Substance Misuse Policy if absence is known to be attributable to misuse of alcohol (or some other substance). Seek further guidance from Human Resources.</td>
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</tr>
</tbody>
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13. **Suspension on medical grounds**

A manager may suspend an employee on medical grounds without prejudice if:

- an employee returns to work after a sickness absence and the manager has doubts about their ability to perform the full range of their duties in a safe way;
- the employee appears to be unwell or seems to have a condition which causes the manager concern and might present a risk to the employee or to others.

During any period of suspension on medical grounds (that is not covered by a medical certificate) the employee will be paid at their normal rate of pay.

Immediately following (or beforehand if possible) the suspension of an employee on medical grounds, the manager should contact the Occupational Health Department urgently for an opinion on the employee’s fitness for work. The Occupational Health Department may contact the GP (with the employee’s permission) as appropriate.

14. **Managing short term absence**

Every employee should normally be seen on return from each episode of sickness absence to demonstrate concern for their welfare, confirm the cause of the absence and to update departmental records. Managers may choose a formal or informal approach depending on the situation and may delegate the responsibility to a supervisor. Managers or supervisors should not insist upon detailed self-diagnosis by the employee and any personal information obtained about causes of absence will be treated as confidential. Breaches of confidentiality may result in disciplinary action.

Managers will notify the Occupational Health Department of any absence caused by or exacerbated by the duties of a post (e.g. a back injury or stress related illness). Any absence resulting from an accident or incident must also be reported to the Head of Academic Unit/Service and Health & Safety Office using Form S24 – Incident Report Form.

Each manager will initiate follow up action after four incidents of sickness absence of whatever length in a consecutive twelve month period or any absence period greater than 20 working days whatever the number of incidences. This trigger should be publicised and applied to all employees within the department. When the trigger is reached managers will counsel employees and may refer to the Occupational Health Department using form A2 – Notification to Occupational Health form.

If the employee is referred, Occupational Health will check if there is any underlying cause for the absences. If there is a need for the Occupational Health to contact the employee’s own GP, or some other medical practitioner, they will seek the employee’s permission and proceed in accordance with the provisions of the Access to Medical Reports Act 1988.

The Occupational Health Department may be able to identify an underlying cause for the absences which may be:
a. a medical condition which can be treated. The manager may wish to consider light work, job
modification, flexible working arrangements, the use of adaptive technologies, redeployment or
retraining. The manager should seek advice from Human Resources;
b. a long term medical condition which results in a series of intermittent absences. If the level of
absences becomes unacceptable to the Academic Unit/Service the manager may need to advise the
employee of the consequences which may ultimately be retirement on ill–health grounds or
dismissal. The manager should seek advice from Human Resources.

Where the Occupational Health Department is not able to identify an underlying cause, the manager should
counsel the employee that the level of absence is unacceptable and cannot continue and indicate the
improvement required. It is important to make clear what action is likely to result if there is no improvement.
A record should be kept of the counselling and a date agreed on which to review the situation.

Frequent short–term absences due to a variety of unrelated complaints may indicate personal or domestic
problems, low morale, difficult working conditions, and/or poor management practices. The manager should
investigate, as far as is possible, and be prepared to offer support to the employee and consider, where
appropriate, the use of flexible working arrangements to alleviate the situation. Failure to consult with an
employee over their sickness absence and to consider flexible working arrangements etc., could be
considered unfair or discriminatory and lead to the individual making a claim of unfair treatment against the
University.

If the absences continue, the manager must decide whether the employee’s failure to attend work regularly
justifies action under the capability or disciplinary procedure. If appropriate the manager will follow due
process in accordance with the appropriate capability or disciplinary Procedure, which may eventually lead to
dismissal. Managers should seek advice from Human Resources.

If an employee refuses to cooperate with a referral to Occupational Health, the manager must decide on
further action according to the facts available. The manager may continue as if no underlying medical cause
has been identified. The refusal should be fully documented by the appropriate manager, and Human
Resources consulted.

Managers are entitled to investigate absences supported by self–certificates or medical certificates if there is
evidence to suggest that the employee was not genuinely ill or was abusing sick leave provisions (e.g. they
have been seen working elsewhere). This situation should be dealt with under the disciplinary procedure.

**Checklist – A fair procedure to manage short term absence**

1. Counsel the employee if appropriate.
2. Investigate the causes of absence thoroughly and openly with the employee.
3. Any absence resulting from an accident or incident must also be reported to the Head of Academic
   Unit/Service and Health & Safety Office using standard report form (S24).
4. Seek medical advice through the Occupational Health Department who will seek the employee’s
   permission to approach the GP (Access to Medical Reports Act 1988).
5. Where there is an underlying cause consider other options; alternative duties, job modification,
   redeployment, light work, flexible working arrangements, retirement on the grounds of ill health.
6. If illness absences are intermittent but of an unacceptable level and other solutions are inappropriate,
   advise the employee accordingly.
7. Where there is no underlying cause counsel the employee that action under the capability procedure
   may result if there is no improvement in the absence.
8. Set a time limit to review the situation for improvement.
9. If no improvement consult Human Resources with a view to initiating the capability procedure.

**15. Managing long term absence* (over 4 continuous weeks absence)**

The manager or nominee should maintain regular contact with the employee by the most appropriate means,
i.e. letter, telephone or home visits by prior agreement with the employee or other person nominated by
him/her. It is important to establish the possible duration of the sickness and the employee (or nominated
person) should be asked to update the manager regularly on progress or future medical consultations which
may provide further information and the possible date of return to work.

Where there are indications that the sickness will be prolonged or indefinite the manager will need to review
the situation and discuss this with the employee giving him/her the opportunity of representation by a fellow
employee, relative or trade union representative. The meeting may be held at the employee’s home if necessary. Human Resources will normally accompany the manager when meeting with an employee in these circumstances.

After 4 weeks absence the Manager should request a report from the Occupational Health Department about the employee’s condition, prospects for a return to work, any special needs, and ability to continue working in their current or any other occupation. The request should indicate the information required, (See A2: Referral Procedure). Occupational Health will seek the employee’s permission to approach their GP or consultant for further information, if necessary, having due regard to the provisions of the Access to Medical Reports Act. Employees may also, if they wish, seek a second opinion from an independent medical adviser at their own cost.

If medical opinion suggests a prospect of recovery within the entitlement to sickness absence then the employee should be supported in that recovery and in a return to work. An employee can be dismissed before sick pay is exhausted if referral reports indicate that the employee will not be fit to return to work within an acceptable period of time.

If the employee refuses to cooperate with a referral to Occupational Health, the manager will make a decision, in consultation with Human Resources, on the continued employment of the individual in the light of the information available at the time.

Once the manager has enough relevant information regarding the situation, the employee will be invited to a further meeting(s) attended by Human Resources. The employee will be given the right of representation by a fellow employee, relative or trade union representative and consulted on the manager’s proposed action (e.g. phased return to work, part–time or flexible arrangements, job modification, reasonable adjustments, redeployment, retraining, ill–health early retirement or dismissal on the grounds of ill health. All options will be fully investigated and discussed with the employee and his/her representative as appropriate.

If all other options are inappropriate or considered unsuitable the manager may consult with Human Resources with a view to invoking the Incapacity on Health Grounds Procedure (for levels 4 and above) or dismissing on the grounds of ill health.

Guidelines for temporary rehabilitation programmes and ill health retirement can be found at the end of this section. The Incapacity on Health Grounds procedure and Redeployment procedure can be found on the HR website.

16. Checklist – A fair procedure to manage long term absence
   1. Keep in touch and consult the employee.
   2. Investigate the reasons for continued absence thoroughly.
   3. Tell the Occupational Health Department of sickness absence of more than six weeks duration.
   4. Any absence resulting from an accident or incident must also be reported to the Head of department/Academic Unit and Safety Office using standard report form (S24).
   5. If permission is refused to obtain medical report, make decision based on information available.
   7. If recovery anticipated, set time limits for reviewing the situation.
   8. Consider other solutions, i.e. adaptations to workplace, job modification, redeployment, retraining, light duties, retirement on the grounds of ill health.
   9. If all other options are inappropriate/unsuitable consult with Human Resources with a view to invoking the Incapacity on Health Grounds Procedure (for levels 4 and above) or dismissing on the grounds of ill health.

17. Ill–health early retirement

(US, PASNAS or NHSS members)

Subject to certain qualifying conditions, employees who are current members of one of the above pension schemes may be granted a pension early in the event of permanent ill–health which prevents the employee from continuing in employment. Full details of the relevant conditions should be consulted in the appropriate pension scheme guide books. Further advice is available from the Payroll Services Office or Human Resources.

In the event of an employee initiating an application to be considered for ill–health early retirement or in accordance with a recommendation from the Occupational Health Department, the following procedure should be adopted:
The employee should meet with their manager and the procedure and likely timescale explained. It should also be stressed that the application will not be approved automatically and will be dependent on Occupation Health recommendation and the Trustees of the appropriate pension scheme accepting the medical evidence. An application to be considered for ill-health early retirement will normally be made only after all other possibilities have been investigated and exhausted.

The appropriate manager will consult with Human Resources and arrange for consent forms to be issued to the employee, authorising the University to approach the employee’s GP and/or Consultant for a medical report, in accordance with the provisions of the Access to Medical Reports Act.

Upon receipt of the consent forms Human Resources will arrange for Occupational Health to write to the GP/Consultant seeking medical reports. At least two independent reports are required by the trustees of the pension scheme in order to consider a request for ill-health early retirement. Medical reports supplied to the University will be held as confidential and only released to the trustees of the appropriate pension scheme or to other persons with the written consent of the employee.

Upon receipt of the medical reports Human Resources will refer the application and supporting information to the relevant trustees. Human Resources will inform the employee and his/her manager when this has taken place and indicate the likely timescale for the outcome to be known.

The decision of the Trustees with respect to the application for ill-health early retirement will be notified to Human Resources. Upon receipt, Human Resources will inform the employee and employing department/Academic Unit of the outcome. In the event of the application being approved Human Resources will consult with the employee and finalise arrangements for retirement and payment of the pension.

If the Trustees do not accept the application for ill-health retirement Human Resources will inform the employee and Academic Unit/Service and advise of the right to lodge an appeal under the relevant pension dispute procedure. (For further details please consult the relevant pension scheme handbook).

18. Rehabilitation Programmes
18.1 Introduction

Where, following a period of ill-health/sickness absence the employee’s health does not allow a return to the full duties of the post, but a full recovery is expected within the entitlement to sick pay, the manager should consider the possibility of arranging a rehabilitation programme. The manager, in conjunction with Human Resources, will consult the employee of proposals for a rehabilitation programme.

The aim of such a programme would be to:

- Provide the opportunity for an employee to be gradually reintroduced to the workplace at an earlier stage, in a reduced capacity;
- Provide an opportunity to assess capability without the pressures of a return to full work duties;
- Provide cost effective assistance for departments that may be employing temporary staff to cover long term sickness absence.

Options may include:

- Normal work at reduced hours
- Specified duties only, in usual work area.
- Temporary redeployment to an alternative work area or alternative type of work within the Academic Unit/Service or University.

18.2 Principles of a Rehabilitation Programme

All rehabilitation programmes must be for a pre-defined period within the employee’s entitlement to sick pay.

The appropriate manager must inform Human Resources of any proposed rehabilitation programmes; detailing dates, reduced working hours, etc. Extensions/alterations to programmes must also be notified. The Rehabilitation Programme is a return to the job the employee is contracted to perform in a limited capacity for a fixed period.

All rehabilitation programmes will be voluntary and before any offer is made to a member of staff, there must be full relevant consultation between the University’s Occupational Health Physician, the appropriate Manager and Human Resources.
The employee will receive pay on commencement of the rehabilitation programme appropriate to the work being done, but not less than their sick pay entitlement would have been.

Employees undergoing a rehabilitation programme should be subject to periodical medical review by the University’s Occupational Health Department.

18.3 Medical authority for rehabilitation

Employees on long term absence will be under the care of their General Practitioner and possibly a Consultant. The University’s Occupational Health Department will advise on the suitability of a proposed rehabilitation programme and will refer to the employee’s GP/Consultant as necessary. Medical consent from the Occupational Health Department will be required before a rehabilitation programme is offered to an employee. Human Resources will ensure that this authority is in place before a programme is initiated.

When the pre-determined period of rehabilitation ends or as soon as the employee is fit they will be expected to return to work in their normal employment capacity. Where this is not possible the Manager will consult with Human Resources and Occupational Health as required, with a view to investigating the suitability of:

a. Permanent redeployment
b. Ill health early retirement
c. Dismissal on incapacity on ill health grounds.