

## THE BIRMINGHAM & MIDLAND INSTITUTE

9 Margaret Street Birmingham B3 3BS

Charity No. 522852

# SICKNESS ABSENCE MANAGEMENT AND OTHER TYPES OF ABSENCE POLICY

## 1. Overview

- 1.1 This policy covers the procedure for reporting and managing absences and sick pay, and sets out other types of leave available.
- 1.2 This policy does not form part of your contract of employment, and we reserve the right to amend this policy at any time.
- 1.3 This policy applies to all employees. It does not apply to self-employed contractors.
- 1.4 If you are arranging a medical appointment, please do your best to arrange it outside working hours. If it is likely to involve taking most of the day off, please try to use a day's holiday (referring to our Holiday Policy)

## 2. If you know you will be absent

- 2.1 You should tell your manager as soon as possible if you know you need time off work for a medical appointment, for example and get their permission. We will not normally pay you. However, you do have the right to ask us to treat this type of time off as paid holiday, and you should proceed as set out in our Holiday Policy.
- 2.2 You should tell your manager by telephone or face to face. Unless there is a good reason, text or email notifications are not acceptable.

## 3. If you are sick or injured

- 3.1 If you are sick or have suffered an injury, you should let your manager know as soon as possible that you will be absent, and no later than 9:00am on the first day.
- 3.2 You must speak to your manager yourself unless you are medically unfit to do so, in which case you can ask somebody else to make contact for you.
- 3.3 You should contact your manager on each subsequent day you are off work, unless you have a doctor's certificate, return-to-work plan, or have agreed a different process.

- 3.4 Always contact your manager by telephone, not by (for example) email or text. That is because your manager might want to ask you questions about your absence and how long you are expecting to be absent.
- 3.5 Your manager may also contact you to ask for updates, or to ask work questions where s/he cannot get the information any other way (although s/he will not contact you for work issues, if you have said you do not want to be contacted, unless it is particularly important).

## 4. Evidence of sickness or injury

- 4.1 You must complete a sickness absence self-certification form when you return to work if you are absent for less than a week (7 calendar days).
- 4.2 You must give us a GP's Statement of Fitness for Work (revised MED3) confirming that you are unfit for work and the reason why if you are absent from work for more than a week. We will need further Statements if you remain absent beyond the expiry date of the first one.

## 5. Payment for sickness or injury

- 5.1 Statutory Sick Pay (SSP) is paid instead of your salary. It starts on the fourth day you are absent from work due to sickness or injury (the first three days are unpaid), and can be paid for up to 28 weeks. If you are entitled to SSP under the statutory requirements, it will be taxed and NI contributions will be deducted. The amount of SSP is set by the government.
- 5.2 You will qualify for Institute sick pay after you have successfully progressed beyond your probationary period. You will be paid as long as you comply with this policy and your other contractual obligations.
- 5.3 Under Institute Sick Pay, we will pay you your full basic salary as sick pay (including SSP) if you are off work for up to a maximum of one of your normal (or average) working months in respect of any single absence or in any rolling calendar year. After Institute Sick Pay is exhausted, you will be paid Statutory Sick Pay if the absence continues and/or if further absences occur during the rolling calendar year. With regard to the specific illnesses listed in Appendix A the Board of Governors may extend the limitation of one month at its discretion.
- 5.4 If you do not provide us with one or more Statement(s) of Fitness for Work (revised MED3 form) signed by a doctor to cover the whole of your absence after the first 7 days, you may lose your right to sick pay.
- 5.5 The Institute will not normally pay you sick pay, other than SSP (if you are eligible), if:-
  - you are suffering from self-inflicted injury or illness, such as from substance misuse
  - the absence results from hazardous activities, such as extreme sports

- there appears to have been an abuse of the system (for example, the absence appears not to be genuine or is in response to an employment matter such as a disciplinary or grievance investigation)
- the correct notification and reporting procedures have not been followed
- your injury is caused by other paid work
- the absence is as a result of surgery or medical treatment which you have elected to have, unless undertaken upon the advice of a registered medical practitioner and confirmed as necessary by any doctor appointed by the Institute

## 6. Returning to work

- 6.1 If you receive a doctor's Statement of Fitness for Work saying you may be fit to return to work you must tell your manager this straight away and provide us with a copy.
- 6.2 We may ask you to come to a return-to-work interview after you have been off work due to sickness or injury. At the interview, we will discuss why you were off work, check you are fit to return and consider any advice from your doctor.
- 6.3 Occasionally people say they are fit to return to work and we do not agree. If we do not think you are fit to return to work, even when you tell us you are, we might obtain our own medical evidence.

#### 7. If you are off work long-term, or persistently absent

- 7.1 We may have to take formal steps if you are away from work on a long-term sickness absence, or we are concerned about the number of days you take off for sickness or injury. As a guide only, we might consider taking such steps if you are absent for four weeks or more, and there is no indication that you will be fit to return to work; or if you've had three short-term absences within six months, or five short-term absences within any rolling calendar year; or if you have had a total of 7 or more days of absence in short-term episodes during any rolling calendar year. If you are or may be disabled, these 'triggers' would be modified (upwards) as a reasonable adjustment for the disability.
- 7.2 What we will do depends on why you are absent from work and the pattern of your absences. We may want to talk informally with you (and we may get medical evidence so that we can better understand your situation). We may want formal meetings to review your absence in more detail and to explore whether we need to make reasonable adjustments to help you either to return to work, or to work for longer periods without being absent.
- 7.3 If we want medical evidence, we will usually ask you to be examined by an occupational health expert, or another specialist of our choice. We will pay for this and all reports will be kept confidential. We will ask for your consent for us to have full access to medical reports and to discuss the contents with the relevant medical practitioner. You do not have to consent, but if you do not we will make decisions based on existing medical and

other information. We will consider making reasonable adjustments to your role and/or work space if you are found to have a disability.

7.4 We understand that this process is difficult and upsetting if you suffer from a serious health condition, and you might feel as if you are being pressured into returning to work before you are ready. We do not want to make you feel that way and we want to treat you fairly. But no business can continue employing people indefinitely if they are not able to work. We feel it is better to keep you fully informed of our thought processes (rather than the alternative of not communicating with you and perhaps eventually deciding to dismiss you, without having told you in advance what the consequences of continued absence would be).

## The procedure

- 7.5 We will write to you before we hold a formal meeting and explain when, where, and why it is taking place. You must let us know as soon as possible if you can't attend and we will try to find a mutually acceptable alternative date.
- 7.6 At the meeting, we will want to discuss why you are off work, how long you expect to remain off work, and whether you are likely to be off work for the same reason in the future. We will also review medical evidence, and explore whether further reports are needed and if there is anything the Institute can do to help improve your health and/or make it easier for you to attend work. If you have been off work long-term, we may suggest you take part in a return-to-work programme. If you are persistently absent, we may set you targets to improve your attendance against a deadline. We may warn you that you may face dismissal if your attendance does not improve.
- 7.7 Should you be unable to return to work, or you fail to meet the targets set for improved attendance, you will be asked to attend another meeting. Our aim at this meeting will be to find out if the situation is likely to improve and we will discuss with you any information or concerns you may have. We may decide to set a further review period in which you would be expected to return to work if on long-term absence (with a return-to-work programme in place if appropriate), or with more targets to demonstrate continued improved attendance. If it seems to us that you are either unlikely to return to work, or your attendance will not improve sufficiently in the short term, then we may decide to issue you with notice of dismissal. Before doing so, we will also explore redeploying you elsewhere within the Institute (if there are any suitable roles available) and we will consider any other issues you want to discuss.
- 7.8 You may face action under the Institute's disciplinary procedure if we conclude that you are not off work for a medical condition and you are unable to offer any other satisfactory explanation and/or have falsely claimed sick pay. This may lead to your dismissal for misconduct or gross misconduct.

## Your right to appeal

7.9 You have the right to appeal if we dismiss you on the grounds of your long-term absence. To do this, you need to respond within a week of being told you have been dismissed by writing directly to whoever is named in the letter you received. In your response to that letter, you must explain exactly why you are appealing. 7.10 Wherever possible, the appeal hearing meeting will not be led by the manager who took the decision to dismiss you. The Institute's final decision will be sent to you in writing and we try to do this within two weeks of the appeal hearing. You do not have any further right to appeal against your dismissal.

## Your right to be accompanied

- 7.11 You have the right to take a colleague or a trade union representative with you to any formal meeting called under this procedure, including the appeal meeting. You should tell us as soon as possible who will accompany you and it is your responsibility to arrange for them to attend. If you choose a work colleague, we will not prevent them from attending, but we may rearrange the meeting if their absence from work causes operational problems.
- 7.12 Your colleague or union representative can, if this is your preference, explain the key points of your case to the meeting and can respond on your behalf. You can also confer with them during the meetings. They must not however answer questions put directly to you or try to prevent the Institute asking questions or outlining its arguments.

## 8. Other types of absence from work

## Jury service

8.1 If you are called for jury service, you must tell your manager as soon as possible. While you are on jury service, you will not be paid and should therefore claim all allowances made available by the court.

## Other public duties

8.2 We will allow you time off to carry out duties in some public roles, including magistrate and school governor. As soon as you know what your duties are, and have dates for meetings you must attend, you should tell your manager so that we can plan for your absence from work. While carrying out these duties, we will not pay you for time taken off work.

## Compassionate Leave

- 8.3 We understand that you may have to cope with the loss or serious illness of a relative or partner or other person who is in a close relationship, and we will consider all reasonable requests to take a period of compassionate leave. We will also consider granting compassionate leave when you have to deal with an urgent and/or distressing problem.
- 8.4 While we do not set definitive limits on the amounts of leave which may be granted, in the interests of consistency and equitable treatment of all employees the following guidelines will be used:-

#### Bereavement:

- Funeral attendance for a close friend or relative: one day's leave.
- Death of a very close relative, partner or other person who stands in a close relationship with you: maximum of five days' leave.

Urgent and distressing situations (examples only):-

up to two days' leave for

- terminal illness of a close relative or friend;
- difficult divorce proceedings;
- severe financial crisis;
- fire damage to home;
- the need to seek urgent legal advice on a serious matter.
- "Day" here means a normal working day, and for employees working less than 5 days per week, a pro-rata entitlement would apply.
- 8.5 You must follow the same procedure as for sickness leave, and contact your manager as soon as you know you will be requesting time off. This leave category is separate to that set out below.
- 8.6 Compassionate or bereavement leave is normally paid at your full basic rate. In certain cases, we may offer additional unpaid leave at our discretion. Annual leave can of course be requested in addition to compassionate or bereavement leave.

## Emergency time off to look after dependants

- 8.7 You may take reasonable time off work to deal with emergencies involving your dependants. This does not cover general home issues, like wanting time off to deal with a problem with your boiler. We define a dependant as your spouse, civil partner, children (including adopted children), or a parent. Also included are other people who live in your household or anyone else who relies on you for example, an elderly family member. You must follow the same procedure as for sickness leave, and contact your manager as soon as you know you will be taking time off.
- 8.8 We always consider the circumstances of each case to allow for some flexibility, but the time you take off must be both reasonable and necessary for you to deal with something immediately and/or respond to an emergency. Normally this means hours, or a maximum of one or two days, and this type of leave is not designed to provide care over the longer term.
- 8.9 We do not pay you when you take time off for dependants.

## Other family-related absences

8.10 We cover all other types of time off for family-related matters — including maternity, paternity, shared parental, parental and adoption leave — in our separate Maternity and Family Friendly Policy.

#### Carrying out trade union duties

8.11 If you are elected as a trade union official, you are legally entitled to reasonable time off to fulfil your obligations and you will be paid at your full basic rate for all related absences during working hours. We will not pay you for duties carried out outside working hours.

#### **APPENDIX A – SPECIFIC ILLNESSES**

The specific illnesses referred to in Section 5.3 are:

| Illness  | Definition   |
|--|--|
| Aorta graft surgery                              | requiring surgical replacement                             |
| Aplastic anaemia                                 | with permanent bone marrow failure                         |
| Bacterial meningitis                             | resulting in permanent symptoms                            |
| Benign brain tumour                              | resulting in either surgical removal or permanent symptoms |
| Blindness  | permanent and irreversible                                 |
| <u>Cancer</u>                                    | excluding less advanced cases                              |
| Cardiac Arrest                                   | with insertion of a defibrillator                          |
| Cardiomyopathy                                   | of specified severity                                      |
| Coma   | with associated permanent symptoms                         |
| Coronary artery by-pass<br>grafts                | with surgery to divide the breast bone or thoracotomy      |
| Creutzfeldt-Jakob<br>disease (CJD)               | resulting in permanent symptoms                            |
| Deafness   | permanent and irreversible                                 |
| <u>Dementia</u> including<br>Alzheimer's disease | of specified severity                                      |
| Encephalitis                                     | resulting in permanent symptoms                            |
| Heart attack                                     | of specified severity                                      |

| Illness                              | Definition                                      |
|--------------------------------------|---|
| Heart valve<br>replacement or repair | with surgery                                    |
| Kidney failure                       | requiring permanent dialysis                    |
| Liver failure                        | of advanced stage                               |
| Loss of hand or foot                 | permanent physical severance                    |
| Loss of speech                       | total permanent and irreversible                |
| Major organ transplant               | from another donor                              |
| Motor neurone disease                | resulting in permanent symptoms                 |
| Multiple sclerosis                   | where there have been symptoms                  |
| Multiple system<br>atrophy           | resulting in permanent symptoms                 |
| Open heart surgery                   | with median sternotomy                          |
| Paralysis of limb                    | total and irreversible                          |
| Parkinson's disease                  | resulting in permanent symptoms                 |
| Primary pulmonary<br>hypertension    | of specified severity                           |
| Progressive<br>supranuclear palsy    | resulting in permanent symptoms                 |
| Removal of an eyeball                | due to injury or disease                        |
| Respiratory failure                  | of advanced stage                               |
| Spinal stroke                        | resulting in symptoms lasting at least 24 hours |
| <u>Stroke</u>                        | resulting in symptoms lasting at least 24 hours |

| Illness                         | Definition  |
|---------------------------------|---|
| Systemic lupus<br>erythematosus | with severe complications   |
| Third degree burns              | covering 20% of the surface area of the body or 20% of the face or head |
| Traumatic brain injury          | resulting in permanent symptoms   |

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Incepted: October 2020 Reviewed: September 2023 Next Review September 2024