



ELHAP Managing Attendance Policy

Contents

- 1. Purpose and Scope**
- 2. Roles and Responsibilities**
- 3. Legislation**
- 4. Assessment of risk**
- 5. Definition of terms**

Managing Attendance

Policy Statement

ELHAP (A Special Needs Adventure Playground) is committed to providing an effective environment to maintain and promote its local and national reputation for the quality of its service provision. As part of this aim it is essential that both managers and staff are committed to maintaining minimum levels of absence. Higher standards of attendance lead to higher levels of service, higher levels of moral and better use of resources in ELHAP.

This policy and procedure provides advice and guidance to line managers/supervisors, and sets out a general approach as to how ELHAP is to maintain the attendance of its workforce and manage instances of recurring absence such as that associated with several occurrences of unrelated sickness absence.

It is recognised that some forms of absence from work are outside management control, but often levels of absence can be reduced when positive action is taken to improve working arrangements and improve motivation.

ELHAP recognises that some degree of absence due to ill health is unavoidable for most people. ELHAP also recognises that some staff members through no fault of their own and due to an ongoing health problem, may have higher than average sickness and that this is not a reflection of their work performance.

However, an unduly high level of absence with no underlying recognised cause is a costly time consuming problem which reduces the level and standard of service and lowers the morale of the good attendees who have to carry the burden of their absent colleagues. These and other costs associated with poor attendance are a huge drain on ELHAP resources leading to the necessity to use large numbers of relief and agency staff resulting in a strain upon both the continuity of services and scheme budgets.

Therefore, ELHAP aims to take a proactive approach to managing attendance in order to reduce the costly effects (both direct and indirect) it has on the service and staff.

Although all steps will be taken to avoid taking drastic action, line managers can dismiss staff who continually have a poor attendance record so long as the proper process is followed and the matter dealt with sensitively and fairly, with individual circumstances being taken into account.

The policy and procedure sets out the process that is to be applied when dealing with poor attendance issues within ELHAP in a way that is fair and consistent as well as following guidelines as detailed in ELHAP Equal Opportunities in Employment Policy.

1. Purpose and Scope of Policy

- 1.1 This policy and procedure applies to all staff employed by ELHAP (including staff on relief, temporary or fixed term contracts).
- 1.2 This policy and procedure sets out ELHAP principles in dealing with matters of attendance, in particular, sickness absence, that comply with legal requirements and best practice, as well as ensuring that a consistent and fair approach to the management of attendance is taken within ELHAP (as detailed in the Equal Opportunities in Employment Policy).
- 1.3 This policy and procedure is to remind employees of their responsibility under their contract of employment to attend work regularly and conform to sickness reporting arrangements and certification when not able to attend.
- 1.4 This policy and procedure gives employees the opportunity to improve their attendance to an acceptable standard, by providing a means for them to be formally advised of the effect and potential consequences to their employment, should the pattern/level of absence not improve to the required level.
- 1.5 This policy and procedure has been drawn up to ensure that every attempt is made to investigate, with the full involvement of ELHAP Occupational Health Service, the employees ability to adequately perform the responsibilities of their post
- 1.6 This policy and procedure is to encourage individuals to recognise the provisions of ELHAP Leave Policy, and not claim sickness absence when this is not warranted. Therefore, guidance is provided as to the links with the Disciplinary Policy regarding breaches of ELHAP sickness reporting procedures.
- 1.7 This policy and procedure provides a mechanism (similar to the ELHAP Disciplinary Procedure) for dealing with employees whose attendance record is poor and thereby questions their capability to carry out their job role.
- 1.8 This policy and procedure sets a target for each individual department of no more than 2% of working days/hours lost per year due to sickness absence.
- 1.9 Line managers/supervisors should refer to this policy as soon as they become concerned about an employee's attendance and/or the employee has been absent on three or more occasions in any twelve-month period.

2. Roles and Responsibilities

- 2.1 ELHAP believes that it is essential to have a clear, consistent and fair procedure for managing attendance issues that cause concern.
- 2.2 In order to have in place a set of such procedures, ELHAP recognises that all the parties involved in the attendance of staff have a responsibility to ensure that this process is carried out according to ELHAP policy and in line with legal requirements. These roles and responsibilities are as follows:

2.2.1 Trustees/Management Team has a responsibility to ensure that:

- appropriate action is taken following recommendations from the Occupational Health Department.
- attendance levels are monitored and the direct and indirect cost to the organisation are assessed.
- a strategy is determined that will effectively reduce absence figures to a more manageable and affordable level, e.g. 2%.
- decisions are taken relating to long-term sickness and the needs of the business, taking into account the medical evidence provided and likelihood of an employee returning to work and fulfilling their contract, without other than reasonable adjustments being made.

2.2.2 Managers/supervisors have a responsibility to ensure that:

- they take a proactive approach to managing attendance, endeavouring to identify the avoidable causes for non-attendance and putting in place a strategy to address these.
- all non-attendance is recorded appropriately. For example, if a member of staff reports absent due to the need to deal with a domestic crisis or for child care reasons, then this should be reported under the appropriate leave such as Special or Dependents Leave. Such incidents should not be recorded as sickness absence.
- all employees are aware of the various types of leave available (see Leave Policy) and in particular the sickness absence reporting procedure through the induction process.
- they work with the employee who is absent with a view to aiding their return to work at the earliest opportunity.
- contact with the employee who has reported sick is managed and maintained sensitively and in accordance with local agreed practices.
- the appropriate sickness certificates are completed/received.
- employees who are absent for more than 7 days send in regular G.P certificates.
- employees who have been placed on *first day certificate* should provide a medical certificate as of the first day of their absence due to ill health. They should not wait until they return to work as this may delay submission of the certificate, but either post the certificate or ask a relative or colleague to hand the certificate into the appropriate person and should be advised as such by the line manager/supervisor.
- they complete and sign any self-certificates (F2).
- they carry out a return to work interview with any employee who has been absent through sickness using the pro-forma F3.
- they monitor employee's absences using pro-forma F4 and for sickness absence and that they address any concerns through the supervision process. If no improvement then a Welfare Review meeting would be organised through

the Human Resources Team to identify the reasons for non-attendance and agree a strategy for improving the attendance record.

- where an employee's sickness absence level is unacceptable (e.g. more than three unrelated occasions in any twelve month period), the line manager/supervisor must present the employee with a sickness absence report and investigate the reasons for absence, including a referral to Occupational Health.
- in consultation with the Human Resources Team, they make a management referral to Occupational Health using pro-forma F6 when the following grounds apply:
 - expected return to work following an absence of 4 weeks or more or related to an injury that may require reasonable adjustments or a graduated return.
 - As part of the Welfare Review process following more than three occasions of sickness absence.
 - As part of an investigation into an employees attendance/capability to fulfill their contractual obligations.
- Where the Occupational Health report suggests either adjustments (reasonable accommodation) to the job, redeployment, or retirement through ill health, the line manager/supervisor will review the position with the Human Resources Team, following the procedure for managing long term sickness absence (W6). They will also need to take account of the European Union Council Directive 2000/78/EC of 27th November 2000 in that as of 2006 the employer will be required to provide '*reasonable accommodation*' rather than just make '*reasonable adjustments*', except where to do so would impose a "*disproportionate burden*" on the employer.
- they carry out a risk assessment for an employee returning to work following an accident/injury.
- where the Occupational Health report does not identify any underlying cause for sickness absence(s) and there is no improvement in attendance, the line manager/supervisor should put together a Capability case.
- they request the employee to obtain a first day G.P certificate where the level of sickness absence is high and Occupational Health can find no underlying reason for the absences. This is to be used as a means to verify sickness as well as enabling the employee to seek early medical advice and treatment that in the long term may improve their health.
- they take notes of all meetings to discuss sickness absence levels as part of the personal/supervision record, which may be used in any resulting formal Welfare Review Meeting or Capability Hearing.
- where an employee is found to be absent without authorisation, (e.g. not following the appropriate sickness reporting procedure) then the line manager/supervisor should request a stop of pay (other than statutory sick pay entitlements) during the period of unauthorised absence, although a letter warning the employee of this action should be drafted in consultation with Human Resources Team.

2.2.3 Employees have a responsibility to ensure that:

- they maintain a good attendance record and where absence is unavoidable, they report their reasons for non-attendance accurately (e.g. special or

dependents leave if appropriate) as required.

- they inform their line manager/supervisor of any sickness/absence by telephone no later than half an hour after your normal start of work on your first day of absence.
- they keep line managers/supervisors updated as to their illness and where possible give an indication of when they are likely to return to duty.
- where it is not initially possible for the employee to speak to the line manager/supervisor then a friend or family member should do so. As soon as the employee is able to contact the scheme in person they should do so.
- they must provide a self certificate F2 if unable to attend work due to illness between 1 to 7 days, this must be received by the line manager/supervisor no later than the 9th day from the commencement of the sickness absence. To ensure this requirement is met, staff can be supplied with copies of this form to be kept at home. Alternatively, a Doctors Self Certificate will suffice.
- where sickness absence lasts for longer than 7 days then a medical certificate must be provided from the 8th day and be sent to the place of work within 5 days of the first certificate being required.
- they must ensure that sickness certificates run on from the previous expiry date with no gaps in between. To ensure this requirement is met, staff should book doctor's appointments in advance of the current certificate running out if they are still unfit to return to work. Back dated certificates will not be accepted unless exceptional circumstances prevail and this will be at the line manager's/supervisors discretion in discussion with the Human Resources Team.
- they provide evidence as required to support the reasons for their non-attendance e.g. record of hospital appointments/visits etc.
- where an employees absence record gives cause for concern, or is unacceptably high, then the employee may be required to attend an Occupational Health Interview.
- if persistent absences occur then the employee has a duty to aid their own recovery and must follow advice given by their own G.P or Occupational Health.
- they produce a first day medical certificate for each absence if requested by the line manager/supervisor.
- upon returning to work after any period of sickness absence they attend a return to work interview with their line manager/supervisor.
- they maintain an acceptable level of attendance and sickness absence levels which should not exceed three occurrences in any 12-month period.

2.2.4 Administration/Payroll has a responsibility to ensure that:

- their systems are robust and confidential, ensuring that all employees reporting absence due to sickness receive the appropriate sick pay.
- where an employees sickness absence has been such that the employee is due to go onto half pay/no pay then the payroll department will write to the employee with the relevant information before pay reduction is effected. Such information

needs to be copied to relevant line manager/supervisor.

- any final payment made to an employee dismissed on the grounds of capability receives all their entitlements such as the statutory minimum notice pay, dependent upon their length of service, as well as any unused annual leave (e.g. if the employee has been absent for a long period and has accrued annual leave according to the Working Time Directive).

2.2.5 Human Resources Team a responsibility to ensure that:

- attendance levels are monitored
- advice is provided to line managers/supervisors and staff on sickness absence procedures and how to deal with an employee whose attendance record is a cause for concern.
- upon receipt of a referral form F6 from line managers/supervisors, will take responsibility for directing the letter and explicitly detailing medical issues to be assessed, following a discussion with the line manager/supervisor.
- advice and support is provided to line managers/supervisors conducting an investigation into poor attendance, including a member of the Human Resources Team attending a Welfare Review meeting.
- advice and support is provided to line managers/supervisors should an employee's absence level result in formal action being taken.
- advice and support is provided to line managers/supervisors should an employee be in breach of the sickness reporting procedure and therefore the formal disciplinary procedure is to be invoked.
- ongoing advice and support is provided to line managers/supervisors who have an employee on long term sickness absence.

2.2.6 Occupational Health is contracted to provide:

- a report answering questions specified in the referral letter.
- advice as to the appropriate action to facilitate a return to work i.e. light duties, adjustments to duties/accommodation etc., taking account of the outcome of a risk assessment undertaken by the line manager/supervisor.
- advice to the employee to help them to manage their condition, where appropriate.
- Occupational Health can, with the employee's consent, refer to an external medical practitioner for a second opinion.

3. Legislation

- 3.1 ELHAP recognises the importance of complying with current legislation whilst ensuring that a fair and equitable approach is taken in the management of staff absence throughout the organisation. In this respect it is considered necessary within ELHAP to take account of the following pieces of legislation:

3.1.1 Employment Relations Act 1999

- 3.1.2 Employment Rights Act 1996
- 3.1.3 Sex Discrimination Act
- 3.1.4 Race Discrimination Act
- 3.1.5 Disability Discrimination Act 1995
- 3.1.6 Age Discrimination Act 2006
- 3.1.7 Health and Safety at Work Act
- 3.1.9 Data Protection Act 1998
- 3.1.10 Access to Medical Records
- 3.1.11 Relevant European Council Directives that become legislation

4 Assessment of Risk

- 4.1 As part of the continuous quality audit process and the impact of the concept of *Professional Accountability*, ELHAP consider it is of paramount importance to assess the risks involved if the law and current best practice is not adhered to. With regard to the failure to comply with the legislation given at paragraph 3, either wholly or partly, in the management of poor attendance within ELHAP, these risks are assessed to be as follows:
 - 4.1.1 Where an employee feels they have been unfairly treated in relation to their attendance record and are subsequently dismissed or resign from ELHAP, they may make a claim to an Employment Tribunal (if they have fulfilled the qualifying period of employment) for unfair dismissal. Current compensatory awards are capped at £60,600.
 - 4.1.2 However, if this claim is for unfair treatment on the grounds of sex, race, disability, sexual orientation, religious belief or age, they do not have to be employed for a qualifying period to be eligible. Successful claims of this nature currently provide for unlimited sums of compensation, and in recent years, nationally reported successful claims have been awarded in excess of £60,600.
 - 4.1.3 There will also be the requirement for *reasonable accommodation* rather than *reasonable adjustments* as of 2006 and if not fulfilled, an employee may have a case under the Disability Discrimination Act, where compensatory sums are currently unlimited.
 - 4.1.4 Other potential claims include personal injury, breach of contract, pension-related claims and claims relating to breaches of the Data Protection Act 1998 (e.g. if stipulations in paragraph 8 are not adhered to) and Human Rights Act 2000.
- 4.2 As well as the legal risks, there are also risks in terms of direct costs to the organisation. For example, the yearly costs of poor attendance, based on 100 staff earning an average of £250 per week, with a sickness absence level of 4.39% will cost an organisation approximately £50,000.
- 4.3 There is also the risk to the quality of service that can occur with the indirect costs associated with poor attendance. For example, increased management time, increased administration, lack of continuity of service, less productive/inexperienced temporary staff, reduced morale and motivation, stress in colleagues as well as the cost of Occupational Health provision.

5 Definition of Terms

5.1 The key terms used throughout this policy and procedure are considered to be and are defined as follows:

5.1.1 Absence

The inability to attend work for any reason other than sickness absence.

5.1.2 Sickness Absence

The inability to attend work due to incapacity through illness or injury.

5.1.3 Occupational Health Department

The medically qualified body under contract to ELHAP to report on sickness absence

5.1.4 Statutory Sick Pay (SSP)

The amount payable by the Department of Social Security following 3 or more consecutive days absence due to sickness.

5.1.5 Self Certificate of sickness absence

A self completed certificate covering up to 7 days absence due to sickness.

5.1.6 G.P./Doctors Certificate

a medical certificate provided by a G.P./Doctor for sickness absences of more than 7 days.

5.1.7 Back/Return to Work interviews

An interview carried out by line managers/supervisors for all staff returning from any period of sickness absence

5.1.8 Risk Assessment

Risk assessments are carried out on all staff returning from long term sickness absence, following either surgery or injury.

5.1.9 Sickness Absence Report

A report taken from the collected sickness records held by the Administration Department.

5.1.10 Adjustments to the job

Where medical advice or a discernable risk has been identified, temporary and reasonable accommodation/adjustments to the job will be considered.

5.1.11 Redeployment

Where medical advice indicates that the person is no longer able to carry out their duties, every effort will be made to find suitable alternative employment within ELHAP.

5.1.12 Long Term Sickness Absence

Sickness absence lasting for more than 21 consecutive days (including non-work days and rostered days off).

5.1.13 Normal Office Hours

Are between the hours of 9:00 a.m. and 5:00 p.m., Monday to Friday.

5.1.14 Welfare Review Meeting

A meeting to discuss with the employee the reasons for continued sickness absence (e.g. more than three unrelated occurrences during any 12 month period) which may result in a medical report being received from Occupational Health.

W1

Instructions for reporting non-attendance for duty

1. Employees are required to inform their line manager of their non-attendance, by telephone no later than half an hour after your normal start of work on your first day of absence.
2. The absent employee will state the reason for their non-attendance, e.g.. special leave, dependants leave, sick leave, etc. If due to sickness, they must explain the nature of their illness and provide some guidance to their line manager as to when they expect to be well enough to return to work. If it is not possible to predict this, they must state clearly when they will next contact the line manager/supervisor with an update.
3. If the reason is other than sickness, then it should be agreed with the line manager/supervisor upon what basis they are absent. (Please see Leave Policy).
4. The employee must make arrangements to contact their line manager/supervisor at agreed intervals, providing further information about their progress towards recovery.
5. If the employee is unable to report sick him/herself, then a friend or relative must do so on their behalf – the same reporting procedure will apply. The employee must then make arrangements to contact their line manager/supervisor at the next earliest opportunity, should the absence continue.
6. If no notification whatsoever is received, the employee will not be entitled to any Occupational Sick pay, and may be subject to disciplinary action for unauthorised absence. Such action should follow a warning to the employee following a first breach of the procedure and should be recorded in writing.
7. At the end of a period of absence, the employee must either:
 - report as being 'fit to work',
 - report back to work,
 - request to take or continue any pre-booked leave
8. All staff that have had any period of absence due to sickness must attend a return to work interview with their line manager/supervisor as soon after their return as is practicable.

W2

Instructions to be followed for certification of sickness absence

1. Self Certification

- 1.1 For absences, due to sickness, between one and seven calendar days, the employee must complete a Self Certificate Form F2 (or a Self Certification Form from their own GP surgery), which will be available from either their line manager/supervisor, or the Administration Department.
- 1.2 An employee reporting to work, but who only remains for a short period of time, will be classed as absent and required to produce a Self Certificate Form F2 unless they have undertaken a sufficient amount of their contractual daily duties, e.g. completed several tasks over a period in excess of 2 hours. This example is a guide only and the decision for the member of staff to produce a completed F2 form is at the line manager's/supervisors discretion although advice can be sought from the Human Resources Team.
- 1.3 Self Certificates should be provided to their line manager/supervisor upon their return to work or within 9 days of the absence first occurring, whichever is soonest. It is the line manager's responsibility to ensure that Self Certificates are submitted by staff as required and filed on their personal file.
- 1.4 In order to prevent a delay in submitting a Self Certificate (F2) if a member of staff goes onto remain absent after 7 days, staff can be provided with the form which can be kept at home. Although some medical certificates may cover this initial period of absence, some doctors will not sign off a patient prior to the date they attended the surgery which may be after the initial 7-day period and therefore it will not be covered unless a Self Certificate (F2) is submitted.

2. Medical Certification

- 2.1 If the absence is longer than seven days, a medical certificate must be produced from the eighth day of absence and at continuous intervals thereafter.
- 2.2 The line manager/supervisor should receive medical certificates within 5 days of the first certificate being required, with any further certificates being received within two calendar days of the expiry of the previous certificate.
- 2.3 If certificates are not received by the specified time-limit the line manager/supervisor can decide to withhold payment of the employees occupational sick pay entitlement.
- 2.4 If no notification whatsoever is received, the employee will not be entitled to any Occupational Sick pay, and may be subject to the formal disciplinary procedure being invoked due to an alleged breach in procedure.
- 2.5 Original copies of sick certificates should be forwarded to the Administration Department at the earliest possible opportunity by the line manager/supervisor, so as to prevent any delay in payment, or inaccurate sickness monitoring.

3. Requirement to produce a medical certificate from day one of absence

- 3.1 ELHAP normal procedure is to accept self-certificates F2 for absences of up to seven calendar days. However, where an individual employees absence record

gives cause for concern, this procedure may be stopped and they will be required to obtain a medical certificate (GP or hospital) for any subsequent period of sickness absence of one day or more. This is known as '*first day certification*'.

- 3.2 This requirement is at the line manager's/supervisors discretion, but may only be implemented following discussion with the Board of Trustees Human Resources Team and the staff member being informed accordingly. The cost of obtaining first day medical certificate will be reimbursed by ELHAP – up to £20 - for the first three occasions in any twelve month period, and on production of a valid receipt.

W3

Instructions for recording absence

1. Recording of absence

- 1.1 It is essential that line managers/supervisors maintain a comprehensive attendance record for each employee, and that reviews of absence levels are carried out on a regular basis.
- 1.2 As a minimum, all absences must be recorded correctly on the Weekly Staff Return F1, which should be forwarded to the Administration Department, who will keep a rolling record of employee sickness absences.
- 1.3 Sickness records will be available through the Administration Department and should be used to review attendance and sickness absence levels during supervision on a regular basis. The Administration Department records will also be required where there are concerns regarding an employee's attendance record and a Welfare Review meeting is to be held.

2. Data Protection Act 1998 requirements

- 2.1 Under the Data Protection Act 1998, ELHAP must be specific as to where and how these records are to be stored, the purpose for keeping this information and who may have access.
- 2.2 In this respect, this procedure makes it known that attendance records are to be maintained by the Administration Team on paper and computer as well as by the line manager/supervisor in the supervision record.
- 2.3 These records are to be stored securely with access being restricted to the Administration/Payroll department, relevant Board of Trustees, line manager/supervisor, individual employee and where the record is subject to an investigation, the investigating officer. It may also be also be access by a statutory body with the legal right to access.
- 2.4 The purpose for collecting this information is:
 - 2.4.1 To enable accurate and up-to-date absence reporting to payroll.
 - 2.4.2 To enable line managers/supervisors to review an employees attendance record using a fair and evidence based approach.
 - 2.4.3 To enable the Board of Trustees Human Resources Team to monitor and review attendance levels of individual employees or the organisation as a whole.
 - 2.4.4 To enable the Administration Team to make reports as to attendance levels to line managers/supervisors and the Board of Trustees as required.

3. The '*Back to Work*' interview

- 3.1 In order to verify the reasons for the absence and thereby ensure accurate recording, the immediate line manager/supervisor is to meet with an individual upon their return from each period of absence. This is to be done in the context of a '*back to work*' interview.

- 3.2 The purpose of the meeting is to establish the reasons for the absence and whether there are any underlying causes that could be addressed and whether it is likely to reoccur. In this respect, the line manager/supervisor needs to make the employee aware that it is their responsibility to attend work in accordance with their contract and that they have a responsibility to resolve any issue that is preventing them from doing so.
- 3.3 The line manager/supervisor also needs to establish whether some form of support is required or training provided in order to improve the situation and this can be done either during the *back to work* interview or the next scheduled supervision.
- 3.4 Where it appears that there may be an underlying medical problem the line manager/supervisor should consider whether any assistance from ELHAP Occupational Health Department would help.
- 3.5 A brief note of the *back to work* interview should be made and retained in the employee's personal file/supervision record as well as a review date.
- 3.6 Training for managers and supervisors in undertaking the *Back to Work* interview (as well as other aspects of implementing this policy) is provided through the Board of Trustees Human Resources Team.

HR10 W4

Instructions for reviewing an attendance record

1. Purpose of reviewing an attendance record.

- 1.1 The purpose of reviewing attendance records is for the following reasons:
 - 1.2.1 to assess the amount of leave taken to ensure that it meets policy requirements. For example, there is a set number of days that can be taken in any twelve month period as given in the Leave Policy.
 - 1.2.2 to assess the number of occasions and proportion of contractually required working hours an employee is absent due to ill health and whether this gives cause for concern, for example more than three occasions in any twelve-month period.
 - 1.2.3 to identify at the earliest opportunity any health and/or disability issues that may require support, further investigation, reasonable accommodation, medical help, etc., to enable the employee to maintain reasonable health and remain effective in their employment with ELHAP, thus avoiding dismissal on capability grounds wherever possible.
 - 1.2.4 to identify any underlying reasons for a poor attendance record such as motivation issues, personal difficulties such as a domestic crisis, a breakdown in certain working relationships and so on. The line manager/supervisor will then be able to act upon the information given with a view to improving the situation.

2. Requirements when reviewing an attendance record.

- 2.1 All attendance records should be reviewed on a quarterly basis (or more frequently if considered necessary), through ELHAP Supervision process for the purpose given above in paragraph 1.
- 2.2 When reviewing an employee's attendance record, the line manager/supervisor should not solely note the number of days but the number of occasions a member of staff is absent. For example, once an employee has been absent due to ill health on more than three occasions in any 12-month period, then the line manager/supervisor should initially investigate this through a Welfare Review meeting (see W5).
- 2.3 The line manager/supervisor should inform staff through the supervision process of the requirement to review attendance records and when they have identified any areas for concern and the process to be followed to address this concern.
- 2.4 Line managers/supervisors should also exercise discretion throughout the review process and give full consideration to the individual's particular circumstances and health problems.

3. Issues to be considered when reviewing an attendance record.

- 3.1 When reviewing an employee's absence record, the line manager/supervisor should assess whether the record:
 - 3.1.1 indicates a discernable pattern.
 - 3.1.2 indicates the likelihood of future absences e.g. general debility with a variety

of ailments.

3.1.3 indicates a disabling health problem, such as a back injury and that further investigation is required (see 3.1.5 below).

3.1.4 is attributable to an industrial injury, operation, accident or hospitalisation

3.1.5 indicates a capability issue (i.e. due to a health issue are not capable of fulfilling the contract of employment) and if further investigation is required to determine whether it is reasonable for ELHAP to continue with their contract of employment (following advice as to what reasonable accommodations could be made to enable them to fulfil their contractual obligations).

3.2 Line managers/supervisors should seek advice from the Human Resources Team when an individual employee's attendance gives cause for concern (such as more than three occasions in any twelve month period), and must involve them when addressing this issue as given at W5 and W6.

N.B. ELHAP reserve the right to require an employee to be seen by ELHAP Occupational Health Department and for a medical report to be provided to the organisation. (F6)

W5

Instructions for dealing with frequent and persistent short term sickness absence

1. What is persistent sickness absence?

- 1.1 Persistent sickness absence is defined as when an employee has been absent due to sickness on more than three occasions in any 12-month period.
- 1.2 When this occurs, a line manager/supervisor should consider the fourth occasion as the trigger point for implementing this procedure.
- 1.3 However, as stated previously, full consideration must be given to the individual's particular circumstances and health problems when deciding to implement the following stages. Therefore, it is advised that the line manager/supervisor consult with the Human Resources Team where it is felt that this may be a factor.

2. Procedure to be followed when dealing with persistent sickness absence.

The procedure to be followed when dealing with frequent and persistent sickness absence is broken down into four stages and these are given below in paragraphs 2.1-2.4.

2.1 Stage One

- 2.1.1 Where an employee's absence record gives rise for concern the line manager/supervisor should meet informally with the member of staff, to establish the reasons for the persistent sickness absence and to identify any solutions that can be implemented. This is known as a Welfare Review Meeting and although part of the formal process for dealing with sickness absence issues, it is **not** a formal hearing to decide the capability of an employee in fulfilling their contractual obligations and whether they should be dismissed. It is however, part of the investigatory process that may lead to a formal hearing.
- 2.1.2 Where an employee is required to attend a Welfare Review Meeting, they will have the right to be accompanied by a staff representative, colleague or friend acting in an unofficial capacity.
- 2.1.3 The line manager/supervisor may prefer a member of the Human Resources Team to be present, particularly if they feel the matter is complex and requires specialist advice.
- 2.1.4 An up to date report of the sickness absence record should be sought from the Administration Department and used as evidence during the Welfare Review Meeting.
- 2.1.5 A record must be kept of the Welfare Review Meeting, and be signed by the employee that they agree that it is a true record and that they understand it may later be used as evidence in a Capability Hearing.
- 2.1.6 A review date should be set to assess any improvement in attendance e.g. three months.
- 2.1.7 The outcome of the Welfare Review Meeting is also to be summarised in a letter to the employee giving details of when the matter is to be reviewed and the outcome/next stage if it is not achieved.

- 2.1.8 If, following a review meeting, no improvement has been established within an agreed time (e.g. 3 months) the line manager/supervisor should proceed to stage two.

2.2 Stage Two

- 2.2.1 If there is no improvement in the employee's attendance, the line manager/supervisor should request an Occupational Health referral, by sending a Management Referral Form F6 to the Human Resources Team.
- 2.2.2 If the employee should object to such a referral, it will be open to the line manager/supervisor to refer the individual under the terms of their contract of employment.
- 2.2.3 If the employee is uncooperative, they should be reminded of the reasons why ELHAP is seeking advice and information.
- 2.2.4 If appropriate, they should be advised that refusal to co-operate may lead to a decision being made about their continued employment with ELHAP in light of only limited information.
- 2.2.5 The Administration Department in consultation with the Human Resources Team will write to the employee confirming the details of the Occupational Health Appointment.
- 2.2.6 The Administration Department will enclose a *Consent to obtain a Medical Report* Form F7, which the employee should sign and take with them to the Occupational Health appointment.
- 2.2.7 The Occupational Health Department may at their discretion, and with the employee's written consent, refer the employee to an external medical practitioner for their opinion.
- 2.2.8 Once a medical report has been produced, the employee may view the report and has the right to refuse their line manager/supervisor having sight of it.
- 2.2.9 However, should this occur, the line manager/supervisor may be able to obtain a medical report from the employee's own doctor although such information can only be sought in accordance with the Access to Medical Records Act and in this respect, advice should be sought from the Human Resources Team.
- 2.2.10 If ultimately a medical report is not available then the line manager/supervisor in consultation with the Board of Trustees will have to make a decision regarding the employees attendance without the benefit of medical evidence or opinion.
- 2.2.11 Once the medical report has been received the line manager/supervisor should proceed to stage three.

2.3 Stage Three

- 2.3.1 Once the medical report has been received, the line manager/supervisor will need to decide the appropriate course of action to take.
- 2.3.2 If the poor attendance record has arisen as a result of a medical condition which precludes the employee from continuing to perform the duties of their

post, consider the possibility of:

1. redeployment to alternative employment; or
2. retirement on the grounds of ill health (if the employee is a member of the Pension Scheme); or
3. If neither of the above is feasible, the employee's contract of employment should be terminated on the grounds of incapability due to ill health. Although advice must first be sought from the Human Resources Team in order to avoid a discrimination claim under the Disability Discrimination Act.

2.3.3 If there is an underlying medical cause for their poor attendance, but it is not sufficiently serious to prevent them from continuing to undertake the duties of their post, the following action is to be taken:

1. The employee should be advised to ensure that they follow the advice given by the Occupational Health Department (e.g. give up smoking, lose weight, take certain forms of medication etc.) to help improve their attendance
2. The line manager/supervisor should provide reasonable support to assist the employee, including setting review dates, holding more frequent supervision sessions, etc.

2.3.3 If the employee fails to follow the advice given to them by Occupational Health and their absence continues to be high the line manager/supervisor should proceed to stage four of this procedure.

2.3.4 If the employee follows all advice given, but their attendance fails to improve, then they should be also dealt with as referred to in paragraph 2.4 (stage 4).

2.3.5 If no underlying medical cause is discovered by the Occupational Health Department, the following action should be taken:

1. The line manager/supervisor should advise the employee that their level of absenteeism is not acceptable in terms of fulfilling their contractual obligations.
2. The line manager/supervisor should advise the employee that their attendance will be closely monitored over a period of three months and it is expected that there should be a significant improvement. If this is not achieved then the line manager/supervisor should refer to stage four given below in paragraph 2.4

2.3.6 If the employee's attendance record has significantly improved they should be encouraged to continue this good attendance and one further review meeting should be arranged for six months time to ensure that this has been maintained.

2.4 Stage Four

2.4.1 If no significant improvement has been achieved during the review period then a Capability Hearing should be arranged to consider relevant evidence as to whether the employee is capable of fulfilling their contractual obligations and if not whether they should be dismissed from their contract of employment.

- 2.4.2 Such a decision will be made upon the evidence presented by their line manager/supervisor to an appropriate panel (e.g. one senior manager, one member of the Board of Trustees, supported by the Human Resources Trustee). For example:
- attendance record for the previous 12-24 months
 - medical reports
 - record of *Back to Work* interviews
 - record of Welfare Review meeting and any subsequent review meeting
- 2.4.3 The procedure to be followed when notifying the employee of such a hearing and the process to be followed at the hearing is similar to that applied in a Disciplinary Hearing and therefore HR8 should be referred to for guidance as well as consulting with the Human Resources Team.
- 2.4.4 Where an employee is dismissed on the grounds of capability following a formal hearing, this outcome must be confirmed to them in writing by the Trustee acting as Chair for the hearing panel within 5 days. Reasons for the dismissal should also be confirmed and the process for appeal against this decision.

W6

Instructions for managing long term sickness absence

1. What is long term sickness absence?

- 1.1 Long term sickness absence is defined as one occasion of continuous sickness absence that is a period longer than 21 days.

2. Factors to consider when dealing with long term sickness absence

- 2.1 Where an employee is absent for a long period of time due to ill health, there are a number of factors to be considered by the line manager/supervisor in determining the appropriate course of action. These include:
- 2.1.1 the nature of the illness or disability
 - 2.1.2 the prospect of an early return to work
 - 2.1.3 the length of absence and the likelihood of a return to work
 - 2.1.4 where it is known the employee will make a full recovery and return to work within a reasonable time period
 - 2.1.6 the work problems caused by the employee's absence, including the serious impact on service delivery and the effect on the morale of other employees.
 - 2.1.7 the difficulty in continuing with any temporary cover arrangements (a reasonable period of time should be used to determine this)
 - 2.1.8 the special circumstances of the case, i.e. It may be that the line manager/supervisor knows when the employee will be returning to work or, that s/he may be about to have, or has just had a serious operation or, the employee maybe suffering from a gender related condition or a degenerative disease. Examples of these circumstances relate to situations where employees are recovering from a car crash, open-heart surgery, hysterectomy, or suffering from HIV/AIDS, motor neurone disease or a terminal illness.
- 2.2 This list is not exhaustive, and line managers/supervisors should have access to medical information and consult with the Human Resources Team before determining the course of action to be taken.
- 2.3 However, in the final analysis, and without becoming unsympathetic, the need to consider the operation of the services will override the need to provide long-term security of employment. So, although it will not be the aim of this procedure, one outcome may be that the employee is dismissed to enable a long-term solution for covering the service e.g. recruitment.

- 2.4 The basic questions which have to be determined in every case is whether, given the circumstances, the employee will again provide a regular and efficient service, and is it reasonable for the line manager/supervisor to wait any longer for the employee to return to work, if so, how much longer?

3. The difference between absence related to a disability and absence related to sickness

- 3.1 Line managers/supervisors also need to differentiate between an employee who has an absence related to their disability and absences related to sickness. There is not always a clear line between the two; each case needs to be looked at on its own merits and in the spirit of a positive approach to equal opportunities.
- 3.2 Line managers/supervisors have an *essential duty* to give *due consideration to the possibility of reasonable accommodation*. This must include:
- greater flexibility in terms of absence from work, for rehabilitation, assessment or treatment,
 - changes to work environment, equipment, working practices etc. which should be considered.
- 3.3 Where disability is concerned the line manager/supervisor should refer to the Human Resources Team who assist with seeking professional advice from the Occupational Health Department and the Commission for Disability Discrimination.
- 3.4 Should an employee feel they have not been treated fairly in respect of their disability, they may be entitled to make a claim to an employment tribunal on the grounds of discrimination due to a disability.

4. Procedure to be followed when dealing with long-term sickness absence.

The procedure to be followed when dealing with long-term sickness absence is broken down into four stages and these are given below in paragraphs 4.1-4.4.

4.1 Stage One - Contact

- 4.1.1 When an employee has been absent due to sickness for 21 days continuously, the line manager/supervisor, with assistance from the Human Resources Team, will write to the employee to establish the state of health, and a likely date of return to work. The letter will reflect a reasonable, sympathetic and sensitive tone.
- 4.1.2 The line manager/supervisor will maintain contact with the sick employee by telephoning them from time to time to ask about their progress and possible dates of a return to work. However, implications under the Human Rights Act and contacting members of staff when away from work should be considered and advice sought from the Human Resources Team as to the relevant level of contact.

- 4.1.3 Once an employee is approaching being absent for 6 weeks or no response has been received from the letter of enquiry, it is reasonable to visit the sick employee at their home (or at a venue nominated by the employee) with the employee's consent. Such a visit should not be carried out by the line manager/supervisor alone and they should be accompanied by a member of the Human Resources Team. However, the sick employee should not be harassed and may seek redress through the ELHAP Grievance Procedure and/or Harassment procedure if the action taken by a line manager/supervisor makes them feel they are being harassed.
- 4.1.4 Where it has not been possible to make direct contact with the employee, the line manager/supervisor should write to the employee requesting that contact be made as soon as it is possible to do so (taking into account the degree of incapacity).
- 4.1.5 Where there has been a delay in sending in Doctor's certificates, the line manager/supervisor must take into account the circumstances surrounding the employee's absence, and where in doubt seek advice from the Human Resources Team.
- 4.1.6 Failure to follow the procedure for the submission of medical certificates is a breach of their terms and conditions of employment and consideration should be given to dealing with such a breach under the ELHAP Disciplinary Policy and Procedure (HR8).
- 4.1.7 Line managers/supervisors also have the right to stop payment of Occupational Sick Pay should an employee continually fail to supply medical certificates, as they will then be considered to have taken unauthorised absence. Although the employee should first be notified in writing that this action is going to be taken. Once again, advice should be sought from the Human Resources Team before taking this approach.

4.2 Stage Two - Medical Investigation

- 4.2.1 It is important to investigate the employee's medical condition through the ELHAP Occupational Health Department. This can be for various reasons, for example:
- To assess any underlying causes of frequent or persistent sickness absence.
 - To assess the level of incapacity of an employee who is absent due to long term sickness with a view to determining when they are likely to be fit to return to work so that decisions can be made regarding the covering of their post.
 - To obtain a clear diagnosis, particularly where medical certificates are unclear, e.g. "*Un-wellness*" or "*Investigation*".
 - To assess whether an employee is fit to return to their full duties of their role or whether they should return on a *graduated* basis, with some reasonable accommodations being made.
 - To assess whether their illness could be classified as a disability under the Disability Discrimination Act that will affect the way the case will be managed.
 - To provide medical evidence for a Capability Hearing which will determine whether it is reasonable for ELHAP to continue to employ someone who has been absent due to long term sickness (e.g. longer than 6 months).

- 4.2.2 An Occupational Health appointment should be arranged 6 weeks from the first day of continuous sickness to assess the level of incapacity and the prognosis as to when it is medically foreseen that the employee will be fit to return to work. Alternatively, it may be agreed that a referral to Occupational Health is required following a home visit by the line manager/supervisor and a representative of the Human Resources Team. However, where this is not practical due to the nature of the illness, then the referral will take place as soon as it is practicable for the employee to attend.
- 4.2.3 The line manager/supervisor should first discuss his/her intentions with the employee concerned. Giving reasons why the referral to Occupational Health is deemed necessary. The line manager/supervisor may wish to refer to the Human Resources Team before discussing this with the employee.
- 4.2.4 The line manager/supervisor will then complete a Management Occupational Health Referral form (F6) and send it to the Human Resources Team. The referral should include questions to be answered i.e. the long term prognosis, the likelihood of a return, the ability to fulfil duties etc., together with any relevant information that will aid the Occupational Health Doctor in his/her assessment.
- 4.2.5 The Human Resources Team will support the line manager/supervisor to arrange an appointment at the earliest opportunity and communicate this in writing to the employee, enclosing a Consent to Obtain a Medical Report Form (F7).
- 4.2.6 All reasonable expenses incurred as a result of being required to attend an Occupational Health Appointment will be reimbursed through the completion of an Expenses Claims Form (which can be obtained from the Administration Department).
- 4.2.7 If the employee should object to such a referral, it will be open to the line manager/supervisor to refer the individual under the terms of their contract of employment.
- 4.2.8 If the employee is uncooperative, they should be reminded of the reasons why ELHAP are seeking advice and information.
- 4.2.9 If appropriate, they should be advised that refusal to co-operate may lead to a decision being made in light of only limited information.
- 4.2.10 The Human Resources Team will also support the line manager/supervisor to write to the Occupational Health Department detailing the illness and questions that we expect to be answered.
- 4.2.11 The Occupational Health Department may at their discretion, and with the employee's written consent (F7), refer the employee to an external medical practitioner for their opinion.

4.3 Stage Three – Procedure to be followed upon receipt of the medical report

- 4.3.1 Once a medical report has been produced, the employee may view the report and has the right to refuse to allow it to be supplied to their line manager/supervisor. However, should this occur, the line manager/supervisor will have to make a decision regarding the employees attendance without the benefit of medical evidence or opinion.

- 4.3.2 Once the employee has given consent for the report the Occupational Health Department will send the report to a member of the Human Resource Team, who will communicate the contents of the report to the line manager/supervisor.
- 4.3.3 The report will provide the line manager/supervisor with information requested i.e.:
1. the nature of the illness (where appropriate)
 2. when a return to work is expected
 3. the likely employment significance of any underlying medical condition and treatment
 4. the likelihood of a full return to work
 5. whether a phased return to work is more appropriate
 6. whether it might be appropriate to seek alternative work/temporary alternative work for the employee. This may be particularly important where the employee is suffering from a work related condition. For example, the employee may be allergic to a product used in the workplace, or perhaps is unable to undertake lifting for a temporary period of time.

4.4 Stage 4 – Deciding the appropriate action

- 4.4.1 Any decision taken by the line manager/supervisor should be taken in consultation with the Board of Trustees and the Human Resources Team and be based upon current and valid medical evidence such as a report from Occupational Health or a medical report from the employee's doctor.
- 4.4.2 Depending on the advice given by Occupational Health the line manager/supervisor should consider the following courses of action:
1. whether the employee is permanently incapable of working, in which case ill health retirement or dismissal on the grounds of capability (dependant upon pension arrangements) must be considered
 2. whether alternative work is available
 3. whether a phased return to work following a serious illness or injury is appropriate
- 4.4.2 In exceptional circumstances it may be appropriate to accept sickness absence at current levels and take no further managerial action, particularly in cases where the employee is suffering from a terminal illness.

5. Action to be taken where the medical report suggests the employee is permanently incapable of returning to their contractual duties.

- 5.1 Where the line manager/supervisor (in consultation with the Board of Trustees) considers the employee is permanently incapable of returning to their contractual duties, then every effort should be made to identify a suitable alternative post (that is appropriate to that advised in the medical report) before pursuing the route of dismissal on the grounds of capability.

- 5.2 If no suitable alternative post is available, then the line manager/supervisor (in consultation with the Human Resources Team) should make arrangements for a Capability Hearing to be held where the medical evidence will be considered and a decision taken as to whether to dismiss the employee on medical grounds.
- 5.3 Alternatively, where the employee is a member of the Pension scheme, they may be entitled to retire early on medical grounds with either full or partial benefits. This course of action should be pursued in preference to dismissal wherever appropriate.
- 6.1 Whatever the final course of action, all parties involved in dealing with a case of permanent incapability, should at all times be sensitive to the impact of this decision upon the employee concerned and the anxieties this is likely to cause. Where appropriate and practicable, additional advice and support should be made available (such as counselling, alternative career advice) to enable them to make the transition. This should initially be the responsibility of the line manager/supervisor but can also be arranged through the Human Resources Team.

6. The taking of annual leave whilst an employee is absent due to long term sickness.

- 6.1 Annual leave can accrue whilst an employee is absent due long term sickness (although case law may potentially change and therefore clarification should be sought from the Human Resources Team before advising staff on this issue).
- 6.2 If an employee is well enough to travel and go on holiday but not fit to work (e.g. this may be on medical advice or that their absence is related to an injury that prevents them from working but not taking certain types of holiday) then consideration should be given to requesting that they use some of their annual leave entitlement for this part of their absence.
- 6.3 Should an employee be dismissed following a long period of sickness absence, then their final salary should not only include the minimum statutory notice pay but also any outstanding annual leave that has accrued during their period of absence. Once again, case law may potentially change in this respect and therefore, advice should first be sought from the Human Resources Team before authorising any such payments.

7. Death in service benefits

- 7.1 Should a member of staff die whilst still employed by ELHAP, then advice should be sought by their line manager/supervisor as to any benefits their next of kin may receive.
- 7.2 Any such benefits may depend upon whether the employee was a member of the company pension scheme, Stakeholder pension scheme and the current liabilities for ELHAP under its Liability Insurance.
- 7.3 Disclosure of information will be subject to the Data Protection Act and with permission of the next of kin.

W7

Instructions for facilitating the return of an employee to Work

1. General conditions

- 1.1 In all cases, a risk assessment should be undertaken by the line manager/supervisor when facilitating the return to work of a member of staff following either long-term sickness or an injury.
- 1.2 line managers/supervisors, in liaison with the Human Resources Team, should consider any courses of appropriate action that may speed up the return to work of an employee who has been absent for a long period.
- 1.3 Staff are also responsible for following all medical advice to ensure that they recover from their medical condition (be it an illness or injury) as soon as possible not only in the interests of their own good health but to also facilitate their return to work at the earliest opportunity.
- 1.4 However, both line managers/supervisors and staff need to bear in mind that other medical problems can arise should an employee attempt to return to work either too soon or to their full duties before they are medically fit to do so. Therefore, where an employee has been absent from work due to sickness for a long period of time (more than 21 days), written confirmation from either the individuals GP or the ELHAP Occupational Health Department should be received confirming that they are fit to resume duties (either on a full contractual basis or on a graduated return basis – see paragraphs 2 and 3. below).

2. Facilitating a gradual return to work

- 2.1 Depending upon the recommendations given in the medical advice, line managers/supervisors may need to consider that the employee's return to work may be facilitated by easing their way back. For example, by working less than their normal contracted hours or by restricting or modifying their duties for a period of time.
- 2.2 If reduced hours are considered to be appropriate, the line manager/supervisor may arrange for an individual to return to work for up to two weeks - working at least half of the previously contracted hours. During such an agreed period, the employee will be regarded as having finished 'sick leave' and will receive basic pay for the whole of their contracted hours.
- 2.3 The line manager/supervisor will conduct regular reviews with the employee with an aim to facilitating a return to full duties by an agreed date.

3. Where an employee is signed fit to return to work on light duties by their doctor and no report is available from Occupational Health
 - 3.1 There are occasions when an employee's doctor signs them fit to return to work but for *light duties* with little further explanation. Such brief and incomplete information can cause the line manager/supervisor difficulty in making appropriate arrangements. Therefore, it may be advisable for the employee to be put on medical suspension, with full pay, until an appointment with occupational health can be made.
 - 3.2 Similarly, where it is not practicable or appropriate to arrange light duties, then either a temporary redeployment should be considered to a post that accommodates such a request, or the employee should once again, be put on medical suspension awaiting the outcome of a medical report from Occupational Health.

HR10 W8

Entitlement to Occupational Sick Pay

1. In accordance with current regulations, Statutory Sickness Pay (SSP) will be maintained during absence due to illness or injury. However, staff will also receive payment of basic salary according to the scale shown in F8, inclusive of SSP:
2. Failure to follow the notification procedures (as detailed in W1 and W2) may result in non-payment and delay of sick pay.
3. Staff also need to note that Statutory Sick Pay has a waiting period and is not paid for the first 3 days of sickness absence. However, staff will receive basic pay in accordance with the ELHAP Occupational Sick pay Scheme, which forms part of their terms and conditions of employment.
4. Occupational Sick Pay will be paid at the current rate but staff need to be made aware that this may be reviewed in the future and therefore their entitlement may change, subject to the process applied to a variation of terms and conditions of employment. Although all new staff employed following a change would automatically be subject to the changed Occupational Sick pay arrangements.

W9

Instructions for attending appointments during work time

1. General conditions

- 1.1 Wherever possible, staff are expected to make appointments such as medical, dental, opticians and those associated with domestic issues such as solicitor's appointments, outside of their scheduled work time.
- 1.2 Although for office based staff and those staff who work in schemes on a 9.00-5.00 basis, this can be difficult to arrange and therefore, staff should discuss the arrangements with their Line Manager to ensure their attendance at such appointments but at a time that is least disruptive to the delivery of the service.
- 1.3 Some appointments are acceptable to take within work time such as ante-natal appointments and these should be dealt with according to the Maternity Policy and Procedure.
- 1.4 Similarly, eye-tests for staff who use a computer for work on a regular basis, should also be allowed to attend these during work time.
- 1.5 Some medical and hospital appointments (particularly where the employee has been waiting to see a Specialist or Consultant) may also be taken in work time although this will be at the discretion of their manager and proof of such an appointment will be required.
- 1.6 Other appointments such as dental, general medical check-ups and so on, should be taken in the employee's own time, and where this is not possible, then TOIL should be taken to cover the lost amount of work time.

2. Activities other than health associated appointments

- 2.1 There will be occasions when staff require time away from work to attend activities such as their child's nativity play or annual sports day.
- 2.2 Once again, if these activities are taking place on several occasions, then the employee should endeavour to attend the occasion that is less disruptive to the delivery of ELHAP services.
- 2.3 Generally, staff will be expected to take TOIL (Time Off in Lieu) to attend these activities or where appropriate, request the appropriate type of leave, particularly if the activity is a whole day event. Although there may be exceptional circumstances where ELHAP may provide paid time off and in this respect, staff and managers should consult with their Director of Operations/Head of Department and the Human Resources department.
- 2.4 Staff must make any such arrangements in discussion with their Line Manager who will need to take account of other members of staff who may also want to attend similar activities around the same time. Once again, Christmas Nativity plays is a good example of when several staff members with children may want to take some time off to ensure they attend their child's play.
- 2.5 Although managers should make every effort to accommodate such requests (in balance with meeting the business needs of the service) in the context of promoting ELHAP as a good employer that respects the importance of a healthy work-life balance.