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Policy Title:	Sickness Absence Policy
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Recommending Committee:	Quality and Safety Committee
Approving Committee:	First Person Project Board of Directors
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Progressing Together

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Sickness and Absence Policy

1. Purpose and Scope

This policy ensures that sickness absence is managed fairly and consistently, in line with ACAS best practices and procedures. It applies to all employees and aims to support staff wellbeing while maintaining operational effectiveness.

2. Responsibilities

Employees: Must follow reporting procedures, maintain communication, and provide medical certification as required.

Line Managers: Responsible for recording absences, conducting return-to-work discussions, monitoring absence patterns, and implementing reasonable adjustments.

Human Resources: Ensures policy compliance, provides training and support, and facilitates occupational health referrals.

Occupational Health & Wellbeing Services (OHWS): Provides medical advice and wellbeing support to employees and managers.

3. Reporting Sickness and Absence

Employees must notify their line manager before their scheduled work start time by phone (not text or email) and provide a reason for absence and expected return date. If sickness occurs during a shift, then the same procedure must be followed.

For absences over 7 calendar days, a medical fit note from a GP is required.

Employees must keep in touch daily with their manager and notify them of any changes in their condition or expected return date. If a medical note is received, then daily contact is not always necessary.

4. Certification Requirements

Self-certification is required for absences up to 7 days.

GP fit notes must be provided for absences exceeding 7 days, with ongoing certification as necessary.

Failure to provide certification may result in the absence being recorded as unauthorised and unpaid.

5. Return to Work Procedure

Employees must notify their manager before returning to work.

A return-to-work discussion must be conducted within 2 days of the employee's return.

Occupational health referrals and adjustments may be discussed if required.

Phased returns and reasonable adjustments will be implemented in accordance with the Equality Act 2010.

6. Absence Monitoring and Review Process

Absence will be monitored using the following trigger points:

- Short-term absence: 3 occasions of absence OR 10 days of absence within a rolling 12-month period.
- Long-term absence: Absence exceeding 4 consecutive weeks.
- Patterns of absence that indicate a cause for concern (e.g., frequent Monday/Friday absences).

When an employee hits a trigger point, the following stages apply:

- **Stage 1** - Wellbeing Review Meeting: Discussion of health concerns, support options, and an improvement plan. Absence is monitored for 12 months.
- **Stage 2** - Further Review: If another absence occurs within 12 months, an in-depth review meeting is held. A further 12-month monitoring period is set.
- **Stage 3** - Final Review Hearing: If issues persist, a final meeting may be held, considering redeployment, ill-health retirement, or termination due to capability.

7. Managing Long-Term Sickness Absence

Regular contact (at least every week) will be maintained with the employee.

Referral to Occupational Health will be made to assess fitness for work and potential workplace adjustments.

Where an employee cannot return to work, options such as redeployment, ill-health retirement, or medical capability dismissal will be considered.

8. Long-Term Illnesses and Chronic Conditions

Employees diagnosed with long-term illnesses or chronic conditions (e.g., cancer, diabetes, multiple sclerosis, mental health conditions) will be supported through tailored absence management plans. Medical evidence will be required.

Reasonable adjustments can be made in consultation with Occupational Health, including changes to duties, flexible working arrangements, and disability leave where applicable.

Phased returns will be encouraged for employees recovering from significant illness or treatment.

Managers should consider access to work assessments and ongoing workplace adjustments to support long-term conditions.

Employees with a terminal illness will be supported in line with the TUC Dying to Work Charter, ensuring financial stability and dignity at work for as long as they choose to remain employed.

Regular wellbeing reviews will ensure that employees with long-term conditions receive continuous support and that adjustments remain appropriate.

9. Disability and Reasonable Adjustments

Employees with disabilities or long-term conditions will receive additional support under the Equality Act 2010.

Medical evidence from a GP, specialist, or Occupational Health assessment will be required to confirm the nature of the condition and to determine appropriate workplace adjustments.

Reasonable adjustments may include amended duties, flexible working, assistive equipment, or disability leave.

Impact of Long-Term Conditions on Absence Triggers: If an employee with a long-term condition continues to be absent, these absences will still count towards absence triggers. However, each case will be reviewed individually, considering medical evidence, reasonable adjustments, and alternative working arrangements before any formal action is taken.

Employees may be referred for Occupational Health assessment to explore further support options, including redeployment or capability assessment if regular attendance at work cannot be maintained despite reasonable adjustments.

10. Reasonable Adjustments and When They Are Not Feasible

Under the Equality Act 2010, employers have a legal duty to make reasonable adjustments for employees with disabilities or long-term health conditions.

Reasonable adjustments may include amended duties, flexible working, assistive equipment, additional rest breaks, or a change in work location.

If a requested adjustment is deemed not reasonable due to cost, operational impact, or practicality, the employer must provide a clear justification and explore alternative solutions with the employee and Occupational Health.

If no reasonable adjustments can be made to enable an employee to continue in their current role, options such as redeployment, ill-health retirement, or alternative working arrangements will be considered in consultation with HR and Occupational Health.

Employees have the right to request a review of the decision if they believe reasonable adjustments were unfairly denied.

11. Disciplinary Considerations

Failure to follow absence reporting procedures may lead to disciplinary action.

Persistent short-term absences without medical justification will be managed through the absence policy and disciplinary procedures.

12. Employee Wellbeing and Support

Confidential counselling services are available to all staff. Occupational health referrals, may be arranged depending on circumstances.

Employees are encouraged to seek early support for stress, mental health issues, or work-related concerns.

13. Review and Amendments

This policy will be reviewed biennially to ensure alignment with ACAS recommendations and employment law.



14. Declaration

This policy reflects the commitment of First Person Project CIC to fair and effective management of sickness and absence issues. It is endorsed by the senior management team.