

## Personnel Committee – 19 April 2021

### Sickness Absence Policy

#### 1. Purpose of the report

- 1.1 To gain Personnel Committee approval for the revised Sickness Absence Policy (appendix 1) endorsed by CMT at their meeting of 01 April 2021.

#### 2. Recommendations

- 2.1 Personnel Committee is recommended to approve the revised Sickness Absence Policy (appendix 1) endorsed by CMT (01 April 2021).

#### 3. Background Information

##### *Aim*

- 3.1 This report provides a summary of the rationale for reviewing the Sickness Absence Policy and outlines the main changes of the revised policy.
- 3.2 To revise the current Sickness Absence Policy in line with changes set out in section 3.5 below, alongside reflecting the options included within the HR STP 2021/22+, approved as part of the budget process by full council 25 February 2021, which were:
  - 'Redesign of the Occupational Health contract', and;
  - 'Cessation of the Physio contract'.
- 3.3 To also update the Sickness Absence Policy to reflect increased importance of the Employee Assistance Programme (EAP) and access to Mental Health First Aiders; as well as reflecting changes/benefits brought about via the Council's new integrated HR/Payroll and Finance system, One Source; and, finally to refine points of clarification raised through consultation.

##### *Know*

- 3.4 The current Sickness Absence Policy was approved in September 2019. This latest review addresses the following:
  - changes required to address the HR STP proposals to reduce the use of the Occupational Health contract where viable (i.e. non-essential/beneficial) and the cessation of the physiotherapy service;
  - update and refine any points of clarification since its implementation in September 2019;
  - reference the subsequent introduction One Source.
- 3.5 The main changes to the policy are outlined below;
  - Access to Mental Health First Aiders (MHFA) is now referenced in the policy (appendix 1, section 1.5);

- Clarification that the Bradford Factor Score (BFS) is calculated across a rolling 12 month period at the point an absence is closed (appendix 1, section 3.3);
- Clarification that Sickness Absence Review (SAR) meetings include welfare visits and case reviews (appendix 1, section 3.5);
- Confirmation that where necessary SAR meetings can be held virtually (appendix 1, section 3.6);
- Clarification regarding employees being able to take annual leave during long term sickness (appendix 1, section 3.16);
- Managers accountabilities further clarified in relation to One Source tasks, GDPR and ensuring employees are made aware of other alternative policies where these might be more appropriate (appendix 1, section 4.1);
- The removal of any reference to physiotherapy services and in particular the removal of the suggestion to make an early referral to physio when an absence is related to a musculo- skeletal condition;
- Managers are encouraged to make early referrals to Occupational Health where such referrals are required or would be beneficial to expedite a return to work, however this is not an automatic requirement and managers do not need to refer at every stage in the sickness absence process, unless there is a supportive/beneficial reason to do so (appendix 1, section 5.1.3, 5.5.5, 6.1 and 8.1);
- Specific and standalone referencing of the Employee Assistance Programme (EAP) as a reminder of the support available through other channels (appendix 1, section 5.1.5);
- Clarification of the self-certification process through One Source (appendix 1, section 5.2.1);
- Clarification of the Fit note process through One Source (appendix 1, section 5.2.2);
- Clarification of the Return to Work process, now a Document of Record (DOR) in One Source (appendix 1, section 5.3.3);
- Confirmation that phased return to work plans can be agreed between an employee and line manager without the need for an Occupational Health referral (appendix 1, section 5.6.1);

#### *Council Corporate Plan Priorities*

- 3.6 This policy review is directly aligned to the internal focus priority within the Corporate Plan, delivering services that are efficient and effective.

#### *Response*

- 3.7 Subject to approval, HR will prepare a workforce communication regarding the implementation of the revised policy and finalise the accompanying Sickness Absence Guidance document for simultaneous launch.

#### *Review*

- 3.8 Employment policies will usually be reviewed on a three yearly cycle, unless legislation or internal organisational need prompt a review earlier.

## **4. Financial Implications**

4.1 The budget approved by Council on 25 February 2021 included the following savings proposals:

- Redesign of Occupational Health contract £15,000;
- Consider ceasing of physio contract £24,000;

Both of these proposals are allocated over 2 financial years, 50% in 2021/22 and 50% 2022/23. The revised policy allows these proposals to be fully delivered in the timescales agreed.

There are no further financial implications arising from the other amendments to the policy.

## **5. Legal Considerations**

5.1 There are no legal issues arising from this report.

## **6. Risk Management**

6.1 There are no significant risks from the policy revision. A minor risk linked to the cessation of the Physiotherapy Service could be the potential negative impact on attendance levels, however the uptake of physio in terms of usage is relatively low and the impact of this could be further mitigated through promotion of self GP referrals and NHS physiotherapy services. Based on a 'normal' (non-pandemic) year, data shows that for the full year period between April 2019 – March 2020, only 11 initial physio appointments (out of a total of 87 initial appointments in that 12 month period) were held with employees who were off sick at the time.

6.2 The reduction in Occupational Health referrals is not viewed to have a negative impact on attendance levels as these will still be available and will be utilised where required to either support employees and/or to expedite a return to work.

6.3 An equality impact assessment is attached (appendix 2).

## **7. People**

7.1 The policy is applicable to all Council employees but excludes school employees where the Governing Body has delegated authority and for whom separate arrangements apply. This policy does not apply to casuals, agency workers, consultants or any self-employed individuals working for the Council.

7.2 There is no direct impact on our citizens as a result of this policy. The procedure is however, part of the employment framework that helps to ensure that residents of Walsall get the best possible services from council employees.

## **8. Consultation**

- 8.1 The policy has been consulted upon with senior managers and trade unions across the Council between 4 - 19 February 2021, this was further extended to 26 February 2021 for trade union colleagues and included a discussion at ERF on 16 February and a separate meeting with trade unions on 26 February 2021.
- 8.2 Feedback from managers' consultation resulted in some minor wording amendments to aid clarification and understanding. However no comments or issues were raised by managers in relation to the cessation of the Physiotherapy Service or the reduction of automatic / non-essential/beneficial Occupational Health referrals.
- 8.3 Trade union colleagues initially had reservations regarding the reduced use of Occupational Health, however these concerns were discussed and alleviated through clear explanation, agreement to revise the Sickness Absence Guidance in support of the policy changes and the introduction in the policy of the requirement for managers to document the rationale for referrals / non-referrals to Occupational Health.
- 8.4 Trade union colleagues continue to have concerns regarding the cessation of the Physiotherapy Service that they wished to be brought to the attention of Personnel Committee.

Unison have stated the following in their consultation response;

"In the time of national pandemic namely covid-19, when the impact of 'long covid' is emerging, and the importance of physiotherapy on this condition is beginning to be understood. Why would this service be removed? The implications are we will potentially have staff needing physio, waiting for NHS appointments when the NHS is already stretched to breaking point. Resulting in staff being off longer than needed as they cannot get physio appointments. Ending up with more people at final stages and in sickness hearings. This is an ill-timed removal of a successful service which actually helps keep people in work and gets them back to work sooner".

### **Author**

Nic Rickhuss  
HR Manager – Strategy & Planning  
Human Resources  
✉ [nicola.rickhuss@walsall.gov.uk](mailto:nicola.rickhuss@walsall.gov.uk)