Dealing with long-term absence

- 1. Absences lasting over two weeks are considered long-term. This is on the basis that by the time the employee has been referred to Occupational Health and an appointment has taken place a period of four weeks is likely to have elapsed. A referral would ordinarily be the expectation, however it is recognised that managers need to have discretion not to refer at this point in circumstances where it is clear that a return to work is imminent and where it is similarly clear that no adjustments are required in the workplace.
- 2. The manager should arrange a Trigger Point Interview with the employee. The Trigger Point Interview may take place at a neutral Calderdale venue, the workplace or home visit where essential after consultation with your HR Advisor, whichever is appropriate. The interview should update progress, identify areas for support and determine whether any other action should be taken. A trade union or other representative may accompany the employee.
- 3. The purpose of gaining Occupational Health advice will be to provide an indication of the likely duration of the employee's absence and whether any steps can be taken to help the employee make a successful return to work.
- 4. Following receipt of the Occupational Health report management must arrange to meet with the employee to discuss the content of the report and one or more of the following actions may be considered:
 - reasonable adjustments such as changes to the workload, work practices, work hours or work pattern may be identified and implemented, either as part of phasing the employee back to work or on a more permanent basis;
 - other support mechanisms may be identified and implemented;
 - temporary or permanent redeployment to other duties with no salary/grade protection;
 - part-time working:
 - investigations may take place into whether the employee may be eligible for ill health retirement pension benefits; and
 - review periods should be set.

The agreed meeting outcomes should be recorded and confirmed in writing.

- 5. No referral should be made to Access to Work, nor shall specialist equipment be purchased or put into use without prior recommendation by Occupational Health.
- 6. Where the employee's work has caused or contributed to the employee's illness, the issues must be fully explored by the manager and steps should be taken to ensure that they are addressed preferably before the employee

- returns to work. In cases of alleged work related stress, the Council's policy on managing stress should be followed. (stress policy)
- 7. Progress will be kept under review with regular meetings with the employee. As part of this process, decisions may need to be made about the employee's continuing employment, which could lead to the decision to dismiss the employee due to his/her incapability to undertake their job because of ill health. Any decision to dismiss without a Certificate of Incapacity or where redeployment is considered to be unrealistic will be considered by the Head of Service at a Case Review Hearing. The employee will be informed at appropriate points where this is a possibility. Employees are reminded that the Case Review Hearing is an important, formal meeting which ultimately has the power to terminate their employment and employees are advised to attend well prepared. A Trade Union Representative or other representative of their choice may accompany the employee. The representative may not act in a legal capacity.