Schools Model

Managing Attendance

Guidance

2020

(*update added April 2025)*

This page is intentionally left blank

TABLE OF CONTENTS

Guidance	Page Number
Introduction	4
Guidance 1: Occupational Sick Pay Entitlements	5
Guidance 2: Notification of Sickness Absence and Return to Work	6
Guidance 3: Conducting Return to Work Meetings	7
Guidance 4: Return to Work Meetings FAQ's	8-9
Guidance 5: Statement of Fitness 'Fit to Work' Notes	10-11
Guidance 6: Statement of Fitness Notes FAQ's	12-13
Guidance 7: Meetings to discuss absences from work	14
Guidance 8: FAQ's following absence from work	15-16
Guidance 9: Additional Consideration: when an absence is long term	17
Guidance 10: Additional Consideration FAQ's	18
Guidance 11: Occupational Health	19-21
Guidance 12: Return to Work Options	22-23
Guidance 13: Sickness Absence and Disability	24-25
Guidance 14: Reasonable Adjustments	25
Guidance 15: Pregnancy Related Illness	26
Guidance 16: Absences other than Sickness	26
Guidance 17: Ill Health Suspension	27
Guidance 18: Accidents and Violent Incidents at Work FAQ's	28
Guidance 19: Employee Assistance Programme	29
Guidance 20: Access to Work	30
Guidance 21: Mental Health	31
Guidance 22: Stress Management	32
Guidance 23: Ill Health Retirement (IHR)	33-36

Introduction

The Schools Model Managing Attendance Policy and Procedure outlines the aims and principles of managing attendance. This document provides more detailed guidance on the steps and considerations which should be taken in fulfilling those aims and principles. The guidance will be supported by a series of template documents which support the key stages of the process.

For any queries or advice regarding managing attendance please contact the Leeds City Council HR Schools Team or your HR Provider who can provide further support.

Guidance 1: Occupational Sick Pay Entitlements

Employees are entitled to receive sick pay in accordance with the Managing Attendance Policy and Procedure and in keeping with current national, local agreements, except as may be set out elsewhere.

Support Staff

Basic entitlement is as follows for employees employed on National Joint Council for Local Government Services Agreement on Pay and Conditions of Service Local Government Conditions (which includes Chief Officers and Soulbury Conditions)

a) During 1st year of service	1 months' full pay (and after completing 4 months' service) 2 months' half pay.
b) During 2nd year of service	2 months' full pay and 2 months' half pay.
c) During 3rd year of service	4 months' full pay and 4 months' half pay.
d) During 4th and 5th year of service	5 months' full pay and 5 months' half pay.
e) After 5 years service	6 months' full pay and 6 months' half pay.

The period during which sickness is calculated for payment purposes and the rate at which it is paid is based on the periods of absence in the 12 months preceding the first day of the current absence.

Teachers

As referenced in the Burgundy Book, for the purposes of sick pay, 'service' includes all aggregated teaching service with one or more local education authorities.

For the purpose of calculating a teacher's entitlement during a year under paragraph 2 of the Burgundy Book, a year is deemed to begin on 1st April and end on 31st March of the following year. In line with section 4 of the Burgundy Book, employees employed on Teachers Pay and Conditions the entitlement is as follows:

During the first year of service	full pay for 25 working days and, after completing four calendar months' service, half pay for 50 working days.
During the second year of service	full pay for 50 working days and then half pay for 50 working days.
During the third year	full pay for 75 working days and half pay for 75

of service	working days.
During fourth and Subsequent years	full pay for 100 working days and half pay for 100 working days.

Guidance 2: Notification of Sickness Absence and Return to Work

Employees must:

- Report absence direct to the headteacher or nominated person, on the first day of any absence in line with schools' absence notification protocol
- Provide the following details;

  - Nature of illness
  - Date expected to return if known
  - Contact details
  - Is the absence linked to work?

- Notify the absence daily or as agreed with headteacher / nominated person if unable to provide an expected date of return

- If the absence is for more than 7 calendar days, provide a statement of fitness note to school

- Employees must ensure there are no gaps between dates of absences, and as per the policy, a continuation of statement of fitness must be received within five working days of the expiry of the previous note to ensure pay is not affected – if this is not provided your employer has the right to request to stop payment of salary payments

- Meet with headteacher / nominated person to discuss a return to work plan

Headteacher / nominated person must:

- On receipt of call from the employee, ask for details of absence and complete payroll form 0014 and send to the Business Support Centre

- If an employee fails to comply with notification requirements without satisfactory reason you must write to them advising pay will be stopped unless they follow notification requirements

- If an employee notifies you of a date of return, agree level of contact and discuss a return to work plan

- When the employee returns, conduct a return to work meeting and complete payroll form 0014 and send to payroll with statement of fitness note

- If a return date is unknown, agree level of contact and discuss whether any further interventions are required

- If the employee has hit a trigger, or requires further action, do so in line with the policy

Guidance 3: Conducting Return to Work Meetings

The return-to-work discussion should be a brief 5 - 10 minute chat. It should take place with all employees returning from sickness and should be conducted in a private area. The purpose of such a discussion is to show employees that they are missed, to encourage a culture of good attendance and highlight any potential problems or difficulties. The discussion should take place as soon after return to work as is possible, ideally on their first day back. It is important that this is carried out for all employees to ensure consistency.

The discussion should follow a consistent format considering the following areas;

- reason for the absence and confirm how they are feeling now and whether they are fit to be back at work;
- has the absence had any effect on the individuals ability to perform 100% of their duties and / or if there is any aspect of their duties which may contribute to a recurrence of the reason for the absence;
- is the illness likely to recur?/ Is there any underlying problem?
- does the employee require any time off from work in the future for any medical treatment/ hospital appointments etc;
- was the absence linked to any issues at work or home which might be affecting the employee's health?
- Is there anything the school can do to support the them in order to sustain an acceptable level of attendance at work;
- what has happened at work whilst they have been away;
- discuss any patterns or trends if appropriate;
- explain that it is also the employee's responsibility to improve their attendance;
- if they did not follow the notification procedure, discuss this and the implications with the employee;
- their value and importance to the team and how they have been missed;
- briefly outline the managing attendance procedure and explain the next stage of the procedure if the employee is close to or has exceeded the trigger levels for stage 1.

ACTIONS FOLLOWING THE MEETING

- Arrange a stage 1 meeting as outlined in the Managing Attendance Policy if the employee has reached any of the trigger points.
- Identify and arrange for any support that may be needed e.g. counselling, workplace risk assessment or occupational health.
- Completion of Sickness Notification form (0014).
- Ensure a copy of the meeting notes is retained.

Guidance 4: Return To Work Meetings Frequently Asked Questions

What if the person refuses to attend a return to work meeting?

Employees are required to attend return to work meetings as they are form part of the Schools Managing Attendance Policy and Procedure. However if someone is reluctant, attempt to discover why, explain the purpose of the meeting and that it is in their best interests. If they still refuse, complete the Sickness Notification Form (0014) but note that they did not attend and if possible get them to sign acknowledgement of this on the form. Explain to the employee this may be a disciplinary matter as they have refused a reasonable management instruction and you will seek further advice from HR or your HR provider about whether the issue should be referred to the Disciplinary Procedure.

Do I have to meet with an employee after every period of sickness absence?

Yes. It is advised to meet with employees on the first day back after any period of absence. This includes sickness absences for part days.

Do part day sickness absences count towards trigger points?

If someone has a lot of part day sickness absences it could be decided to acknowledge this as one of the formal triggers into the formal monitoring procedure. This would fit under the 'unusual patterns of absence' triggers. However we would always advise to discuss these absences with the employee to determine if there are any underlying health issues.

How much do I ask about their illness?

If an employee wants you to help them or take particular action then they will need to give you the necessary information about their illness to enable you to do this. However, this can be a difficult so you should concentrate on asking about how their condition affects their ability to attend work/do their job and how you can support them in this rather than discussing the specifics of an individual's condition. Quite often where there are underlying problems these will be drawn out through a number of meetings.

What if the person refuses to discuss their health with me?

If the person prefers not to discuss their medical condition with you because of the personal or private nature of their illness they may be referred to a more appropriate person. There does however need to be a justifiable reason for refusing to speak to you. Most commonly this will apply if someone wants to speak to a person of the same gender.

What if the person tells me things I am not equipped to deal with, for example they appear to have an alcohol problem or self harm?

This is an understandable concern and if you require help or advice you should contact your HR provider. Where the concern relates to alcohol you should refer to the Schools Model Drug and Alcohol policy. If an employee tells you about activities which are illegal, in breach of contract or affect the health or safety of others you need to make sure they are aware that you will not be able to maintain confidentiality. You may also need to advise them that you can only help them in some circumstances if they agree to share certain confidential information with others.

Further details on employee assistance support groups and numbers are located in our separate Supporting Managing Attendance toolkit.

What if I think the person is not fit for work?

If you feel they are not fit for work and may be putting themselves or colleagues at risk speak to your HR provider. You may have to consider medical suspension pending advice from the Leeds City Council HR Schools Team, or your HR Provider and Occupational Health. If there are adjustments that can be made to the employee's role which will allow a return to work this should be given serious consideration.

What if the return to work meeting leads me to suspect abuse of the sickness scheme?

This may be a disciplinary matter and therefore conclude the discussion and speak to HR or your HR provider about whether the issue should be referred to the Disciplinary Procedure.

Do I have to meet with someone if they are already going through the formal monitoring stages?

Yes. Return to work meetings must take place alongside all other stages of the procedure. They are integral to the monitoring process and have been shown to be one of the most effective tools in managing attendance.

Guidance 5: Statement of Fitness 'Fit to Work' Notes

Under the Schools Model Managing Attendance Policy and Procedure the types of considerations that commonly form part of the fit note should already be taking place when taking into account an employee returning to work following a period of sickness absence. The difference is that these discussions can now take place sooner to enable an earlier return to work.

The doctor has two options on the fit note form:

a) 'not fit for work' means the medical opinion is that the employee should refrain from work (just like the old sick note).

b) the new fit note will allow doctors to indicate if a person can do certain work under a new option that the employee 'may be fit for work taking account of the following advice'.

The aim of the fit note is to provide employers with greater flexibility in managing sickness absence. The doctor can suggest changes in the workplace that could enable an earlier return to work. These include:

- **Phased return:** this may be suggested if the doctor feels the employee will benefit from a gradual increase in their duties and/or hours. For example, an employee with a back or shoulder problem whose job involves lifting, could gradually increase their hours or intensity helping them return to work earlier and gradually rebuilding their capacity for physical work.

- **Altered Hours:** A doctor may recommend this if they feel the employee will benefit from a change to the hours they normally work, in order for them to return to work. This does not necessarily mean fewer hours. For example, allowing more flexible hours to support someone who is still receiving treatment to return to work and attend treatment sessions or allowing a later start or earlier finish for an employee experiencing fatigue related to their illness.

- **Amended duties:** A doctor may recommend this if they feel the employee could return to work if some temporary amendments could be made to their normal duties For example removing contact with the public initially for an individual returning after an absence with anxiety or depression or swapping some duties of the post with other team members temporarily to enable the individual to return to work earlier

- **Workplace adaptations**: A doctor may suggest this if they felt an earlier return to work could be facilitated by adapting the workplace. For example, arranging for a temporary ground floor work location for an employee with reduced mobility post surgery.

If you receive a fit to work note you need to have a discussion with your employee as soon as possible. Ideally this would be prior to the employee returning to the workplace in order that you can consider any adjustments suggested by the doctor to facilitate the return. Alternatively, you could look at the options as part of the return to work interview.

If an employee is returning to work earlier than expected and/or temporary adjustments are being made, then it may be advisable that a risk assessment is undertaken. This

assessment will identify any potential risks so not to place the employee or others in any danger.

If it is not possible to provide the support for an employee to return to work, after consideration of all possibilities, the statement will need to be treated as if the doctor had advised as ‘not fit to work’.

SAP form (Form 0014) should be completed as normal and sent with the fit note to Payroll as per normal process.

***Important note:** The fit note is advisory only. Any adjustments to the employee’s substantive post to enable an earlier return to work are usually temporary measures and it is important to try and clarify timelines.

For example, a teacher whose fit note suggests a return to work on condition that no Teaching duties are undertaken for a month. It is recommended that the headteacher or nominated person to try and facilitate an earlier return to work based on the medical advice on the fit note and consider alternative duties. Where this is not possible, the employee would be deemed as being unfit for work. The reasons why the adjustments cannot be made should be made clear to the employee. The employee is not required to return to their doctor to confirm this. Advice from Occupational Health and HR can be sought at any time if required.

Guidance 6: Statement of Fitness Notes Frequently Asked Questions

What should you do if you do not understand the advice on the fit note?

Firstly, you should discuss the advice with the employee. They may be able to provide more information on the context of the advice. If still unsure you can seek advice from HR or your HR provider.

Is the doctor's advice about temporary adaptations in a 'may be fit for work' statement binding?

The doctor's advice is intended to give employers and employees greater flexibility and better information to manage sickness absence. You have an obligation to consider temporary adaptations or reasonable adjustments where appropriate. Employers ultimately have the discretion to choose whether and how to act on the doctor's advice and recommendations in these circumstances.

If the doctor advises that an employee is 'not fit for work', does this mean that the employee has to stay off work?

Sometimes the employee will be able to return to work when the doctor has advised that they are not fit for work. This may be because the employee has recovered faster than the doctor expected, or the doctor did not know of aspects of the work or the support that the employer can provide.

Can I request a statement advising that the employee has become 'fit for work'?

No. The statement does not include an option for doctor to advise patients that they have become fit for work. It is a myth that an employee needs to be 'signed back' to work by a doctor, and that employees need to be fully fit to return to work. Where an employee decides to return to work but you have significant concerns about their readiness to do so, you should make a referral to the Occupational Health Service for a detailed assessment and advice and/or seek general advice from HR.

What if temporary adaptations cannot be implemented or immediately implemented?

If the doctor has given a 'may be fit for work' statement, but the temporary adaptations to facilitate a return to work cannot be implemented, or immediately implemented, then the statement has the same function as if the doctor had advised 'not fit for work' and the employee will revert to sick leave. The employee does not need to go back to their doctor for a statement signing them 'not fit for work'.

What should headteachers/the nominated person do if the employee declines the offer of support to return to work?

If the headteacher/nominated person believes that, on the basis of the statement and their knowledge of the job, that they can support the employee's to return to work but the employee disagrees, they must first discuss the issues with the employee to establish precisely why they believe they cannot return to work. There may be aspects of their condition or the workplace that has not been considered, or they may simply be anxious about the consequences of returning to work. If no agreement can be reached on the

employee's fitness for work, the headteacher/nominated person should refer to the Occupational Health Service for a more detailed assessment and advice. It is recommended that advice is sought from the HR Schools Team before taking any action.

How will the headteacher/nominated person know that returning to work won't make the employee worse?

In the past too much emphasis was put on the sick note and not enough emphasis on what the employee felt they were capable of doing to remain in work. The headteacher/nominated person needs to informally assess the employee's fitness for work based on the evidence from the doctor, what the employee says they feel capable of doing, knowledge of the work and workplace, and temporary workplace adaptations that might be implemented.

For more information on fitness to work **https://www.gov.uk/government/collections/fit-note**

Guidance 7: Meetings to discuss absences from work

Any meeting relating to sickness absence should be held in an environment which supports an honest, open and non-threatening discussion and respect privacy. The employee is entitled to have a Trade Union Representative or colleague present at any formal meeting.

The purpose of the meeting is to:-

i) Explain the problem regarding sickness absence i.e. that their level or pattern of absence is unacceptable and the reasons why it is unacceptable;

ii) Provide the monitoring information, which supports the identification of the problem;

iii) Ask them to respond to this and explain the situation from their perspective;

iv) Establish whether there is any support which management can provide to resolve the problem;

v) establish a course of action to remedy the problem.

The employee must be reminded at which stage of the procedure they have reached and the possible outcomes of the meeting as described in the Schools Managing Attendance Policy and Procedure.

Whilst the meeting is formal, it should not be dealt with in an excessively formal manner which could be construed as threatening or intimidating. There is no reason why the meeting should be particularly lengthy. The employee should be advised of the purpose of the meeting and its possible outcomes. But emphasis should be placed upon the paramount reason for the meeting, which is to establish a solution to sickness absence problem and improve attendance levels.

At the conclusion of the meeting the nominated person should clearly indicate the course of action which is proposed including any need for review meetings. The outcome of the meeting will be confirmed in writing and the employee will be advised when a review will take place.

Guidance 8: FAQ's following absences from work

What do I ask at the Stage 1 meeting?

Similar questions to those asked at return to work meetings. However, you must ensure that the employee is fully aware that they are at Stage 1 of the formal procedure and the implications for their future employment if their attendance does not improve.

Sickness is a very sensitive issue – how far should I probe with questions?

You need to get sufficient information on which to base your decision as to what further advice and/or action to take while avoiding applying unreasonable pressure. Plan the interview in advance and anticipate possible responses to your questions. It will also be helpful to think through your reactions to the answers you might get and how you will deal with them.

How long should the review period be?

The review period should be long enough for an improvement in attendance to be achieved and maintained. 12 working weeks is the normal review period but a shorter or longer period may be appropriate. If the employee's attendance does not improve during the review period you must meet with them to discuss the reasons. You do not need to wait until the end of the review period to move the employee into the next stage of the procedure if further absences occur and they are clearly not meeting the targeted improvement. A review period should be no longer than a maximum of 6 months.

Can I give a second review period in Stage 1 or Stage 2?

Only in exceptional circumstances where you can justify the reasons why. These must be fully documented.

Is it necessary to have a stage 1 review meeting and a separate stage 2 meeting?

Although the policy sets out 2 separate meetings, the stage 1 review and stage 2 meeting can be combined with employee's agreement. The main reason for arranging separate meetings is to allow the employee to arrange trade union representation as quite often at stage 1 the employee will not bring representation but will want representation at stage 2.

What if an employee hits the formal triggers and has a disability?

It should be distinguished whether or not the absences relate specifically to the disability, if that is not the case then the employee should be put into formal procedures. If the absences relate to the disability you may wish to consider amending the trigger points to take account of this however this is not automatic. Advice should be sought from HR and Occupational Health on the appropriateness of this in managing the employee's attendance.

What can I do during the review period to help the employee improve their attendance?

There are many options, support policies and procedures to help you. Occupational Health will provide medical advice and your HR provider will have suggestions. Be open minded and aware that sometimes the simplest initiatives are the most effective. Remember, also ask and make the employee aware that they are responsible to improve their own health and attendance. Do not take on responsibility for sorting out all the employee's problems as you may not have the expertise or authority. You should also be mindful of any work related issues that come to light which you should investigate and attempt to resolve.

Can I meet with the employee if they haven't been off work?

Yes, it might be a good idea to see the employee and offer praise and encouragement if their attendance is improving, although this does not have to be a formal meeting.

How do I decide to move the employee to Stage 2?

If during the Stage 1 review period there has been no satisfactory improvement in the employee's attendance or if improvements have not be maintained they should be moved to Stage 2.

What is the difference between Stage 1 and Stage 2?

Moving to stage 2 makes it clear to the employee that their attendance at work remains unacceptable and, unless an improvement is made, one of the outcomes of the next stage of the procedure may result in them losing their job. It is important at the stage 2 meeting to specifically explain to the employee their employment could be at risk. During the review period within stage 2 you should continue to work closely with the employee in order to improve and maintain their attendance. The format of the meeting will remain similar to that of stage 1 meeting. At stage 2 Occupational Health advice should always be sought and HR should be involved if they haven't been involved previously.

What options do I have in Stage 1 and 2 of the procedure?

Options include, but are not limited to;

- referral via HR to counselling
- conducting a work place risk assessment;
- consideration of other procedures e.g. flexible working policy;
- access to work where the employee has a disability and requires adjustments;
- referral to Occupational Health;
- Health & Safety advice.

Remember throughout the procedure there are recognised processes to go through and places to get help. However sometimes the smallest things can support someone to improve their attendance so be creative, your own solution or the employee's may be as effective. Early intervention is crucial, the earlier support is offered, the quicker employees can return to work with the right help, advice and guidance in place.

Guidance 9: Additional consideration: When an absence is ‘long term’

Once an employee has been absent for 4 weeks or more, this is classed as a long term absence. As part of the policy, the employee should be invited to attend a welfare meeting to discuss how they are doing. The employee can be invited into the school for this meeting or if they prefer, a home visit can be made. If the employee is uncomfortable with this option you could agree an alternative venue such as a local school, Leeds City Council or Trade Union offices.

Long term meetings and home visits must be undertaken in a supportive context and should not be regarded in any way as threatening or 'policing' the situation. Information regarding changes in work practice, developments in school or news bulletins should be given to keep the employee up to date and involved with the work situation. The value is in encouraging employees to think positively about a future return to work and any special arrangements that might need to be made, and that school is there to offer the right level of support where appropriate.

The headteacher/nominated person should contact the absent employee either in writing or by telephone, (where the contact is by phone any arrangements should be confirmed in writing) to propose a convenient date and time for a meeting or home visit and giving them the opportunity to have, if they wish, a colleague, trade union or other representative present.

It maybe appropriate that either the line manager of the employee or a HR Adviser accompanies the nominated person on the visit. The nominated person should address the following issues:

- purpose of the visit (overview of absence, general welfare discussion)
- any medical evidence/background
- any adjustments that can be made to facilitate an early return to work
- making arrangements for medical or workplace assessment, if appropriate e.g. Occupational Health or Health and Safety
- booking diary appointments for subsequent visits

The discussions of the meeting should be followed up in writing to the employee.

Guidance 10: Additional Consideration FAQ's

When do I involve Occupational Health?

A referral should be made to Occupational Health after four weeks continuous absence unless the prognosis and expected date of return are very clear then an Occupational Health referral is probably not necessary. However, there are circumstances when earlier referral has been shown to be beneficial in facilitating an early return to work. Therefore seek advice from HR as soon as you are aware that an employee's absence is likely to be longer term.

What if the illness results in a disability or long term symptoms?

If the employee is unable to return to their normal job or hours, you must examine the possibility of making reasonable adjustments to enable them to return. This could include redeployment to an alternative job where one is available, but only if this would resolve the absence problem. It is recommended to seek further advice from HR or Occupational Health if this is the case.

When a disabled person is off sick and it is related to their impairment, do I separate this out and not count it as sickness absence?

No, but you do need to consider whether or not you need to make reasonable adjustments for the person. A reasonable adjustment might mean changing the job content to exclude things which may be badly affecting the person's impairment and causing sickness absences; or it might mean providing equipment which enables the person to carry out their job better. It might also mean that you accept a higher level of sickness absence for a disabled person based on the nature of their impairment and known facts.

Where can I get help and support?

You will always be able to discuss issues with HR and you should contact them first. There are also many organisations that can advise you on practical issues. We have a separate toolkit which contains a number of contacts which you can use to signpost employees to.

What do I do if someone is diagnosed as being seriously or terminally ill?

Regrettably there will be situations which are very difficult and sensitive, in these situations you must talk to HR as there will be issues relating to pension benefits that you will need answers to. You and other employees may also need support to cope with this situation. Other relevant toolkits and guidance are available depending on the nature of the illness. Please speak to your HR provider for further information.

Guidance 11: Occupational Health

The Occupational Health service aims to provide headteachers and line managers with guidance on employee health issues regarding absences where there is concern about an underlying health problem or health related disability which is affecting work.

The Occupational Health Service is not intended to be a substitute for an individual's doctor and they are unable to deal with requests for treatment or other forms of medical intervention which would usually be supplied by their doctor.

What do Occupational Health do?

Occupational Health provide specialist, clear, actionable advice on issues which impact or have the potential to impact on the employees' health and wellbeing;

- general health promotion and education to raise awareness within the workforce of the control they have over achieving their own optimum health and wellbeing and the support available to assist them in doing this e.g. smoking cessation, diet and exercise advice, improving their mechanisms for coping with increased stress;
- working with health and safety professionals to identify potential hazards within the work environments and providing support and advice to minimise the potential harm from the hazard e.g. problems associated with posture and musculo-skeletal disorders;
- where hazards cannot be completely eliminated, providing advice and carrying out any regular surveillance required to ensure the hazard is not causing harm to employee's health;
- general advice to employers and employees regarding health issues encountered at work e.g. exposure to potential infectious diseases;
- pre-employment assessments to help identify health needs and reasonable adjustments;
- problems may be more prevalent and working with members of the organisation to reduce the impact of these health issues through hazard identification and risk management;
- immunisation programmes such as hepatitis B;
- advice required with regard to specific age, gender or disability related conditions;
- reactive services to address ill health issues amongst the workforce;
- general assessment and advice to management regarding the employee's ill health. This will include, where possible, advice on the likely length of the absence and the impact the employees health issues are likely to have on their ability to perform in their substantive post in the short and long term;
- Rehabilitation advice to support employees back to work;
- Advice on reasonable adjustments for the employee in the workplace as appropriate;
- Support required with regard to employees with terminal illnesses.

An early, pro-active use of the Occupational Health Service is encouraged.

It is important that employees are encouraged to attend appointments with the Occupational Health Service to ensure that a good understanding of the issues is obtained from which an assessment is made. This results in line managers receiving relevant information about their ability to undertake their duties and what adjustments may be necessary so that they can be supported and be at their best. If an employee declines to attend an Occupational Health assessment, the headteacher/nominated person may need to take decisions without Occupational Health input. Where an employee misses two appointments no further appointments will be booked.

Who should be referred to the Occupational Health Service?
You should consider referring an employee to Occupational Health for an assessment where;

- the employee has had several episodes of absences, and, following RTW discussions, you have concerns that the absences are related to an underlying health condition;
- the employee has an absence citing stress, work related back or upper limb disorders;
- there is a long term or continuous absence (more than four weeks and there is no prospective return date);
- there may be a health aspect contributing to issues with work performance;
- there is a concern that there may be a work related health problem or that an existing health problem is being exacerbated by the employee's work;
- the employee is due to return to work following a period of sickness absence and you as the headteacher/nominated person, are seeking advice on adjustment and phased hours;
- the employee has a long term health problem which is affecting aspects of work and you need advice regarding any workplace modification / safe systems of work.

It is important that you pro-actively manage the health of employees and prevent absence, wherever possible, by identifying support mechanisms for individuals.

Making a referral

Advice should be sought from HR prior to making an Occupational Health referral. To make a referral you should contact your provider to request a referral form. Before making a referral you must meet with the employee to discuss the referral and reasons for referral. The headteacher should discuss the contents of the form with the employee for the employee to approve before making the referral. The comments within the form should be an accurate record of the discussion held. All comments should be considered by the headteacher and if reasonable, amended within the form.

Whilst it is good practice to meet prior to making a referral, in certain circumstances it may not always be possible when the employee is absent from work. In this case you should make contact with the employee using the agreed method of communication, enclosing the referral form for the employee to approve within 2 working days. All comments should be considered and if reasonable, captured within the form. If no response is received the referral will be made on their behalf and sent to Occupational Health.

TIP: In order to obtain all relevant information for inclusion in the referral, when meeting with the employee **you may want to ask:**

- Have they been to see their doctor to discuss their health issue? If so, what were they advised?
- Have they been prescribed any medication? If so, is it short or long term?
- Are they receiving, or do they need, any other support, e.g. Counselling?
- Have they been referred to, or have they been seen by, a specialist? If so, what have they advised or when will they get an appointment?
- If absent, have they discussed their return to work with their doctor and have they given any indication of when they will be fit to return to work or what they might be able to do if they were to return earlier?
- Are their health issues likely to be ongoing?
- Have they had similar health issues in the past? If so when?

What happens after?

An employee will be offered either a telephone appointment or a face to face appointment at the Occupational Health offices. At the start of the consultation consent arrangements will be discussed before the assessment takes place. An employee can at this point decline the assessment however will be made aware that the employer will make decisions about their employment without specific health related advice. Once the discussion has taken place, the OH adviser will draft a report. The employee at this point will be informed of four options available. These will be to either;

1) agree to the final report being sent to the employer
2) agree to the report being sent to the employer, requesting a copy at the same time,
3) wishing to see a copy of the report before agreeing to the report being sent to the employer within a set period of time or
4) withdrawing consent altogether.

The employee will then be offered a meeting within school to discuss the contents of the report in person.

Guidance 12: Return to Work Options Following Long Term Absence

There are various options that can be put in place to support employees to return to work following a sustained period of absence this include but are not limited to:

Reduction in hours

Where an employee has been absent from work on a long term basis you may consider facilitating a return to work on a part-time basis where this would facilitate an earlier return to work than would have otherwise been the case. It is not appropriate in every case and is at the discretion of the school.

- Reduction in hours (i.e. to reduce to 2 days) can be done on a long term temporary basis (up to 12 months).
- Days to be worked can be arranged to support the employee's needs e.g. they could work Wed and Fri rather than Mon and Tues to split the week up.
- Pay is reduced to reflect hours being worked if the reduction is required long term.

Phased return

It may be appropriate to seek guidance from Occupational Health as to whether or not a phased return would be beneficial. A phased return in most cases should only be agreed where the employee's doctor has indicated that it is appropriate.

Common timetables for phased returns include:-

Week 1 - 1 days work	Week 1 - 5 Mornings
Week 2 - 2 days work	Week 2 - 3 Mornings 2 until Lunch
Week 3 - 3 days work	Week 3 – 5 until Lunch
Week 4 - 4 days work	Week 4 – 5 until afternoon break

The days/times would need to be agreed with the school taking into account timetabling arrangements.

- Phased returns are usually accommodated over a 4 week period unless there are exceptional circumstances.
- Schools should follow Occupational Health advice where reasonably possible.

Employees will receive normal pay during the four weeks of a phased return to work although the hours they work are reduced. As there is a cost to the school it is expected that the employee will gradually increase their hours each week. Only, in exceptional circumstances would it be agreed to extend a phased return beyond four weeks.

During a period of phased return, time not worked should be regarded as authorised absence rather than sickness absence. The employee is not required to be covered by a statement of fitness note.

Positive or Therapeutic rehabilitation

Positive rehabilitation is a means of facilitating a return to work for employees who have been absent from work long term. The purpose is to facilitate a return to work by easing the employee back into the working environment and allow them to get used to being at work without the requirement to undertake their normal duties and responsibilities.

Under this intervention;

- the employee can attend for a maximum of 16 hours each week;
- the employee remains on sick pay/benefits during the period and must submit a medical certificate to cover the period of the therapeutic rehabilitation;
- the employee cannot undertake teaching duties i.e. be responsible for a class;
- the employee can use time to catch up with what's been happening in school, read minutes, bulletins, documents, catch up with paperwork etc.

Examples of duties that can be carried out include;

- read/listen to readers;
- sorting working space;
- sorting files;
- getting up to date with things missed during absence.

It is advisable that the employee seeks advice from their doctor before entering into positive rehabilitation and provide this to the school. Positive rehabilitation does not constitute a return to work and the employee is treated as being signed off from work .

Positive rehabilitation would normally be for approximately two weeks and is at the discretion of the school i.e. the school must agree it can be accommodated. The hours the employee works are flexibly arranged between School and employee. The headteacher/nominated person is encouraged to give serious consideration to requests for positive rehabilitation as it allows the school to determine whether or not the employee is fit to return to work before they are signed as fit.

If appropriate, an employee can complete both a therapeutic and phased return. For instance, they could complete a therapeutic return whilst covered by a medical certificate and then a phased return for 4 weeks.

Guidance 13: Sickness Absence And Disability

Disabled employees should not be treated less favourably than other employees. Should an employee consider that he/she is affected by a disability or any medical condition which affects their ability to undertake a return to work or ability to undertake their job role fully the headteacher or nominated person should be informed.

Managers should be alert to the possibility that an employee may be suffering from a disability, particularly if an employee has frequent periods of sick leave or has a period of long term sick leave.

Managers should undertake further investigations with an employee who says they are disabled or who you can reasonably be aware is disabled from the evidence available to you (whether or not the employee has raised this themselves).

The Equality Act 2010 definition of disability

The definition focuses more on the individual person rather than disabling barriers. The Act defines disability as:

"A physical or mental impairment which has a substantial and long term effect on a person's ability to carry out normal day to day activities"

This includes people with mobility, visual or hearing impairment and people with learning difficulties. People with, for example, heart disease, disfigurement, speech impairment, diabetes, epilepsy, a mental illness or progressive conditions such as cancer, multiple sclerosis, HIV, are also included. It should be noted that people with HIV, cancer and Multiple Sclerosis will be deemed to be covered by the Act effectively from the point of diagnosis, rather than the point when the condition has some adverse effect on their ability to carry out normal day-to-day activities.

A mental illness does not have to be 'clinically well recognised' before it can count as an impairment for the purposes of the Act. People with a mental illness will, however, still need to show that their impairment has a long term and substantial adverse effect on their ability to carry out normal day-to-day activities.

Some people might not meet this definition, but still consider themselves to be disabled because of the barriers or disadvantage they face. So you should not restrict yourself to thinking of disabled people only in terms of the legislation.

If you are, or the person is, in doubt you should take advice from the HR Schools Team. Ultimately the decision would be a legal one if a case goes to a employment tribunal.

The trigger points and formal interventions will apply to all employees including disabled employees. Any action taken under The Schools Model Managing Attendance Policy and procedures in relation to disabled employees should take account of the following;

- reasonable adjustments that could be made to the requirements of a job or other aspects of working arrangements that will provide support at work to improve attendance and/or assist a return to work;

- workplace risk assessments to identify any potential risk and support to help the employee improve their attendance;

- where a disabled employee's absence record is reviewed following reaching a trigger point, it should be clarified whether the time off was specifically attributable to the employees disability. This information should be taken into account when deciding whether to instigate a Stage 1 Meeting or Long Term Absence Meeting in line with the Reasonable Adjustments Guidance;

- if any clarification is required to determine whether the absence is specifically related to disability, medical evidence may be required from either the employee's doctor or from Occupational Health. It is recommended that Schools should seek advice from HR Schools Team or their HR provider.

Guidance 14: Reasonable Adjustments

Some disabled people or people who suffer from certain medical conditions may have sickness absence that is directly related to their impairment. The introduction of reasonable adjustments in many cases has meant the difference between them being able to come to work or having to take sick leave. Where practicable, working from home, as a reasonable adjustment, is a good example of this.

You may decide that it is reasonable to accept a higher level of sickness from a disabled employee by agreeing to a reasonable adjustment that adjusts the trigger levels to take account of the particular reasons for sickness absence. This means that if the person is absent because of disability related sickness, they will not be constantly in the sickness absence procedure. But if the person has periods of sickness that are not due to their impairment, they will hit the usual trigger points.

If you agree this option with a disabled employee, you will need to determine the reason for the absence at the return to work interview and liaise with your HR Adviser to make sure that correct information is obtained and recorded.

Reasonable adjustments

When considering the adjustment you must take into account practical issues such as cost, the workplace, the impact on other employees, and the impact on the service.

Common adjustments include (but are not limited to);

- alterations to premises;
- allocation of duties to another person;
- altering working hours;
- transfer to another location;
- modifying procedures for assessment or testing;
- acquiring or modifying equipment;
- providing a reader or sign language interpreter;
- redeployment/training.
- Time off for rehabilitation, assessment or treatment

Guidance 15: Pregnancy Related Illness

Where an illness is attributable to pregnancy, sickness absence should not be counted towards the trigger levels of the management of sickness absence. Any absence related to the pregnancy should be managed in accordance with the sickness policy to facilitate a return to work as soon as possible with any necessary support or adjustment to duties as described above.

As required, under the Management of Health and Safety at Work Regulations 1999, written risk assessments should be undertaken regularly throughout the pregnancy to help reduce the likelihood of absences. It may also be appropriate in some circumstances to seek advice from Occupational Health service, or the Health, Safety and Wellbeing team. All pregnant employees should have a Wellbeing Action Support Plan (WASP) in place which can be undertaken by the school.

Where a pregnant employee suffers from non-pregnancy related sickness absence, these absences will count towards the management of sickness absence as usual.

Please note that if an employee is on sick leave due to pregnancy related illness on or after the fourth week before the expected week of confinement, their ordinary maternity leave will commence the day after their first completed day of sickness absence.

An employee must not be treated unfavourably because she is pregnant, suffering from a pregnancy related illness or because she is on maternity leave or seeking to exercise her right to maternity leave.

Pregnancy loss leave (New) (April 2025)

Trigger warning - this guidance covers topics and issues that some readers may find difficult or upsetting.

Pregnancy loss Pregnancy loss can be a very difficult and traumatic experience for everyone affected. Everyone experiences loss differently and therefore will have different needs. Some people may feel they can continue to work as normal, while others may require more support.

Miscarriage

Employees who have suffered a miscarriage are entitled to miscarriage leave (up to 5 days) which is processed as special leave. Sick leave after a miscarriage, ectopic or molar pregnancy (loss of a pregnancy before 24 weeks gestation) is protected as ‘pregnancy-related’ leave and will be recorded separately.

Employees will not suffer a detriment for absence related to their pregnancy and employees will not move through the stages of the attendance procedure for pregnancy related absence. This protection lasts for two weeks after the pregnancy ends and this absence will not be counted towards any review or trigger points as part of the attendance procedure. If you are a partner of someone who has suffered a miscarriage, you are entitled to miscarriage leave (up to 5 days) which is processed as special leave.

Guidance 16: Absences other than Sickness

Paid time off due to sickness absence is only available to employees when they are unfit to attend work due to illness. Where an employee requires time off or flexible working arrangements due to other reasons such as emergency domestic leave/relative/spouse or child's illness or bereavement, please refer to the HR Schools Team Model Leave of Absence and Annual Leave Policy for further information.

Guidance 17: Ill Health Suspension

Where you are unsure of an employee's fitness to work you should encourage them to seek advice from their doctor pending an Occupational Health appointment. If the doctor refuses to sign the employee as unfit to work it may be necessary to temporarily remove them from work.

For example it may be necessary to temporarily remove an employee from work if;

- in the opinion of Occupational Health the employee is unfit for work, but is declaring themselves fit or being declared fit by their own doctor;
- if the individual employees are at work but are deemed to be a risk to themselves or to others because of their health, they may be given approved leave of absence pending an opinion from Occupational Health;
- if necessary aids or adaptations are not operating or in place.

Occupational Health opinion may be sought prior to taking the action described above, but in all cases advice should be sought as soon as is practicable after suspension. Ill health suspension is a management decision, but due regard should be given to the information provided by the Occupational Health practitioner. If their opinion is not clear, or does not appear to correlate to the known facts, then you may refer back to Occupational Health for clarification or, in exceptional circumstances, seek a second opinion.

Any suspension is not consider as a punishment and will be on an employee's normal pay. It is important if it is appropriate to suspend an employee on the grounds of ill health that the reasons for the suspension are discussed and agreed with your HR provider.

Guidance 18: Accidents and Violent Incidents At Work

If an employee suffers an accident or injury at work an incident form (CF50 / CF50a) should be completed, normally by the injured person. School's need to ensure that arrangements are in place to comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). Guidance on this can be found in the Schools Health, Safety and Wellbeing Team guidance PG 103 Accident and Violent Incident Reporting and Investigation.

Frequently Asked Questions

Does it make a difference if the employee is absent with an injury sustained at work?

Yes, they may qualify for a separate, but comparable, period of sick pay entitlement.

How will I know if it really has been sustained at work?

An incident report form (CF50 / CF50a) should be completed reporting the injury and investigating the validity of the incident. A copy of which should be sent to the Schools Health, Safety and Wellbeing Team if you are a Community or Voluntary Controlled School.

What if someone claims it is an industrial injury when I meet with them?

There are timescales associated with injuries at work. Unless they have filled in an incident report form (CF50 / CF50a) they will have to provide proof that the injury was sustained at work.

Is it just injuries that should be reported?

No, some illnesses are defined as reportable e.g. TB, Salmonella, Typhoid. You would not be expected to know all of these. Your HR provider, Health and Safety Team or Occupational Health will be able to provide further advice.

So I don't have to do anything if it is an Industrial Injury?

You will need to investigate and control any risks presented by the work place, work methods or equipment used by the employee. Where necessary specialist advice is available from the Schools Health, Safety and Wellbeing Team.

How is this absence treated in terms of the trigger levels and procedure?

The Managing Attendance Procedure remains the same. It is extremely important that employees have access to the correct support in these circumstances and that any improvement requested reflects the cause of the absence. It would be unreasonable to set stringent improvement targets i.e. above the normal triggers for the proceeding 12 months where it can be established that the absence was due to an accident at work.

Guidance 19: Employee Assistance Programme

If you're experiencing issues either at home or at work, the council employee assistance service is on hand to provide you with expert guidance.

The team of trained wellbeing and counselling practitioners offer confidential, independent and unbiased information and guidance. They provide this in a range of ways – by telephone, in writing, online and through face-to-face appointments.

They're available at any time of the night or day, 365 days of the year.

If you're worried about any personal or work-related problems, you can contact Leeds City Council employee assistance service on **03303 800658** or go to the Vivup website for further information. Alternatively you can speak with your headteacher / nominated person about the referral process.

What can I get support with?

Help employee assistance offers support and information on:

- alcohol and drug misuse
- bereavement
- bullying and harassment
- career and job stress
- childcare and eldercare
- debt
- legal issues
- relationships
- retirement
- sexual orientation and gender identity issues
- sickness absence
- trauma
- work-life balance

Guidance 20: Access To Work

Access to Work can help if an employee's health or disability affects the way they do their job. It gives employees and employers advice and support with extra costs which may arise.

How to contact Access to Work

If the type of work the employee does is affected by a disability or health condition that is likely to last for 12 months or more, the regional Access to Work contact centre to may be able to help or alternatively, employees can contact the Disability Employment Adviser (DEA) at their local Jobcentre about Access to Work.

Getting help - the process

If an employee is likely to be eligible for Access to Work, they will need to contact Access to Work who will send them an application form to fill in and send back. On receipt an Access to Work adviser will contact them. The adviser will usually speak to the employee and their employer to reach a decision about the best support available. In most cases, this can be done over the telephone, but a visit can be arranged if necessary. Sometimes specialist advice may be needed, which the Access to Work adviser will help to arrange. For example, they may be able arrange for a specialist organisation to complete an assessment and recommend appropriate support. In this case, a confidential written report will be sent to the Access to Work adviser, who will use this information to help them decide on the right level of support.

Employer's responsibilities

Once the adviser has decided on the package of support they feel is appropriate, they will seek formal approval of their recommendations from Jobcentre Plus. The employee and employer will then receive a letter advising of the approved level of support and the grant available.

It is the responsibility of the employer to arrange the agreed support and buy the necessary equipment. The employer can then claim repayment of the approved costs from Access to Work.

For further information visit https://www.gov.uk/access-to-work

Access to Work helpline
Telephone: 0800 121 7479
Textphone: 0800 121 7579
NGT text relay (if you cannot hear or speak on the phone): 18001 then 0800 121 7479
Monday to Friday, 8am to 7.30pm

Email: **atwosu.glasgow@jobcentreplus.gsi.gov.uk**

Guidance 21: Mental Health

What is Mental Health?

'Mental health' properly describes a sense of well-being: the capacity to live in a resourceful and fulfilling manner, having the resilience to deal with the challenges and obstacles which life presents. Mental health 'problems' or 'difficulties' are terms that can be used to describe temporary reactions to a painful event, stress or external pressures, or systems of drug or alcohol use, lack of sleep or physical illness; this terminology may also be used to describe long-term psychiatric conditions which may have significant effects on an individual's functioning

Employers' responsibility around mental health

Employers have a responsibility to be aware of any potential symptoms of mental health problems or difficulties and to discuss any observed concerns when they arise. These concerns should be discussed sensitively with employees and a reasonable level of support should be offered.

Raising awareness and tackling stigma around mental health problems in the workplace can enable schools to make a positive impact on the lives of people who are experiencing, or have experienced, mental illness and help improve attendance levels. Further advice and training on mental health is available from the HR Schools Team and the Schools Health, Safety and Wellbeing Team.

What support can I offer if an employee reveals they are experiencing symptoms associated with a mental health illness?

- Discuss with the employee the symptoms they are experiencing, the cause and what support they feel they need at work.
- Offer the employee access to the Employee Assistance Programme and provide details of useful contact links
- Contact your HR provider and seek Occupational Health Advice as soon as possible.
- Make arrangements for a stress / mental health risk assessment to be done, this can be done at home or somewhere neutral.
- Consider reasonable adjustments such as a flexible approach to start/finish times, shift patterns and job share.
- Allowing paid or unpaid leave for medical appointments.
- Offering a phased return to work if the employee has been absent for 4 weeks or more.
- Provide a quiet space for breaks.

When an employee is in distress / crisis

There are many signs and symptoms associated with an acute stress reaction or deteriorating mental health. As a manager, you are more likely to be familiar with the 'behavioural signs', the changes that can be observed by others.

These signs can include reduced performance, increased sickness absence, lateness or being in work for excessive hours (not necessarily being productive).

Whilst there is no expectation that managers will explore the issue of suicide in the absence of clear evidence or stated intent, the following signs should not be ignored:

- Irritability (for example with you or colleagues), rapid changes of emotion or tearfulness
- Evidence of alcohol or illicit drug use at work
- The person expresses thoughts about ending their life or harming themselves/others
- Sudden changes in behaviour or mood, such as sadness or depression, uncharacteristic silence or withdrawal, or neglect of work, appearance or hygiene.
- Talking or writing about death or dying, or making worrying comments like "What's the point of living? Life is meaningless. No one would miss me if I was gone."
- Seeking lethal means, such as saving pills.
- Giving away possessions.
- Asking about details of their life insurance policy/pension, especially as it relates to cause of death.
- Showing interest in end-of-life affairs, such as making a will, discussing funeral preferences, etc.

If you have serious concerns around the wellbeing of an employee, you can make contact with their GP, Police, Hospital or Next of Kin.

If you require further advice or guidance on this matter, please contact you HR provider. Additional guidance documents are available ***(Guidance for managers dealing with distressed employees).***

Guidance 22: Stress management including work related stress

It is important if an employee experiences symptoms of stress that they seek support from their doctor and that schools provide appropriate support and intervention where required.

Heath and Safety Executive (HSE) guidance can help you prevent work related stress and comply with the law.

What are the Management Standards for work related stress?

The HSE website provides an overview of Management Standards which define the characteristics, or culture, of an organisation where the risks from work related stress are being effectively managed and controlled that help combat work related stress.

The Management Standards represent a set of conditions that, if present, reflect a high level of health well-being and organisational performance, promote active discussion and working in partnership with employees to help decide on practical improvements that can be made;

- Demands – this includes issues such as workload, work patterns and the work environment.
- Control – how much say the person has in the way they do their work.
- Support – this includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues.
- Relationships – this includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.
- Role – whether people understand their role within the organisation and whether the organisation ensures that they do not have conflicting roles.
- Change – how organisational change (large or small) is managed and communicated in the organisation.

Where an employee presents with symptoms of stress and anxiety it is recommended that you meet with the employee and undertake a workplace risk assessment (which addresses the six areas above) in order to support the employee to proactively manage their stress. Evidence shows that staying in work can be of great benefit to those affected by stress.

Detailed guidance can be found in the Schools Health, Safety and Wellbeing Team Guidance PG205 Stress.

HR and the Schools Health, Safety and Wellbeing Team can provide further advice on undertaking work place risk assessments as well as training on wellbeing and stress management.

Guidance 23: Ill Health Retirement (IHR)

Teachers' Pension Scheme (TPS)

Once ill health retirement has been identified as the appropriate option to pursue through the managing attendance policy the following process should be followed:

Step1: Completion of Forms

Print off Ill Health Medical Form and an ill health application form from teacher's pensions website (http://teacherspensions.co.uk). The employee is required to complete section A of the ill health retirement application form and return to HR. The employee will also be responsible for arranging for the ill health medical form to be completed by their doctor / consultant / specialist.

Step 2: Occupational Health Assessment

At this point the employee is required to contact the headteacher or nominated person to advise that the appropriate forms have been completed and to request an Occupational Health appointment. It is essential that the employee brings the completed ill health medical form to the Occupational Health appointment. Failure to do so will delay the Ill health retirement process until this information has been received.

When a condition is severe enough to warrant ill health retirement, whether this is psychiatric or physical, it is not unreasonable to expect that the applicant will have had the benefit of a specialist opinion. It will greatly help in the consideration of the application, if the medical information is provided by a specialist. If this is not possible, or the applicant has not been referred to a specialist, then the form should be completed by the applicant's doctor or Occupational Health physician. Copies of all specialist reports or hospital correspondence relating to the present illness must be included. All applications for ill health retirement will be considered on the basis of the medical information submitted with the application.

Step 3: Outcome of Assessment

The Occupational Health Physician will then complete the remainder of the form and return to HR to complete the relevant sections. HR will then send both the ill health application and ill health medical form in a sealed envelope to Leeds City Council Teachers Pensions section.

Teachers Pensions will inform the employee directly whether Ill Health Retirement has been granted. The decision lies solely with Teachers Pension.

Under the Teacher's Pension Scheme there are 2 tiers:

Total incapacity benefit (TIB) for those incapable of any gainful employment* . This includes half prospective service enhancement to normal pension age.

Partial incapacity benefit (PIB) for those permanently incapable** of teaching but capable of a range of other types of work. There would be no enhancement made however there would be no reduction on account of early payment of accrued pension benefits.

If the teacher left pensionable employment more than 12 months ago. In those cases, the teacher should send the documents directly to Teachers Pensions.

Appeal of Decision if not granted

The teacher will be notified in writing if an application is accepted or not. Where the application has been accepted, and the teacher is still actively teaching this should cease with immediate effect. Teachers Pension's must be provided with details of the teacher's pensionable service and salary from the date of your last annual return to the last day of pensionable service.

Where the application is rejected, teachers have the right to appeal and should follow the appeal process, details of which will be sent to the teacher with the rejection letter.

Re-employment – Where an employee has been accepted as unfit for teaching and subsequently returns to teaching for even 1 day after the award of ill health benefits this will result in the immediate cessation of pension payments. Schools must be in receipt of evidence that a person who has previously retired for reasons of ill health is medically fit to return to teaching.

West Yorkshire Pension Scheme (WYPS) For Support Employees

Once ill health retirement has been identified as the appropriate option to pursue through the managing attendance policy the following process should be followed:

The ill-health retirement process:

It is likely that your HR support or an Occupational Health (OH) report will first suggest the possibility of ill-health retirement. Following this, there are several stages to IHR being decided upon:

- HR support will offer guidance to headteachers before IHR is discussed with an employee. There should then be a discussion between the headteacher or nominated person and employee to ascertain if they would like to pursue this option

- If so, the headteacher or nominated person should complete an IHR referral form, and send this to Occupational Health with an RTM certificate. Please use the referral form specifically designed for IHR to avoid any unnecessary delays (these forms can be obtained via your HR support).

- OH will usually request a report from the employee's GP or specialist. Consent forms must be completed by your employee for this information to be released

- OH will then arrange for an assessment to be carried out by an **Independent Registered Medical Practitioner** (IRMP). They will do so only when they have received the GP or specialist report, so you may want to ask your employee to chase this up to avoid delay. In most cases the IRMP will make their decision based on the GP or specialist reports and will not need to see the employee

- The IRMP will complete a WYPF medical certificate, confirming whether in their opinion the employee meets the criteria for IHR, and if so, which tier

- If eligible, the school will then arrange a Stage 3 Ill Health Capability hearing in order for IHR to be considered by a panel of school Governors

- If not eligible for IHR, your employee will remain in the Managing Attendance procedure, which could result in referral to a Stage 3 Ill Health Capability hearing.

The Tiers of IHR are as follows:

IHR Tier 1

- there is no reasonable prospect of the employee obtaining gainful employment* before normal retirement age (65). The pensionable service achieved is enhanced up to age 65.

IHR Tier 2

- the employee will not be able to obtain gainful employment* within 3 years of leaving employment; it is likely that they will be able to obtain gainful employment before normal retirement age (65). The pensionable service achieved is enhanced by 25%

IHR Tier 3

- the employee will be able to obtain gainful employment* within 3 years of leaving employment. The service achieved is not enhanced and the pension will cease after 3 years or on commencement of other employment. The case will be reviewed after 18 months from date of leaving.

Where IHR is Declined

Employees may ask to appeal the decision if IHR has been declined, they can do this but only support one appeal claim. In such cases the normal pre-requisite is that more medical information will be needed for the decision to be different.

Appeals

An employee can appeal against the decision made by the IRMP if they do not meet the criteria for IHR or feel they should be awarded a different tier. The appeal is made directly to the West Yorkshire Pension Fund and can be made only after they have left their employment.

***Gainful Employment** - Paid employment for not less than 30 hours in each week for a period of not less than 12 months.

****Permanently Incapable** - Means that the employee will, more likely than not, be incapable until, at the earliest, his 65th birth

Please note: If your HR provider is not Leeds City Council HR, you must still ensure you notify the team of any potential dismissals on the grounds of ill health.

Please email HR.Schools@leeds.gov.uk