



White Paper: Long Illness, Short Absence



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LONG ILLNESS, SHORT ABSENCE

Managing the middle ground

A thorny issue for most HR professionals is that of effectively managing absence levels within their organisation. Case law has shown us that different approaches can be applied to different types of absences. For example, where absences are short-term, frequent and unrelated to each other the most common approach we see is one of fixed trigger points, followed by a series of cautions that may ultimately lead to dismissal.

In contrast, a long-term absence for an on-going, underlying medical problem is usually dealt with much more flexibly, on a case by case basis. No staged cautions or warnings are usually involved but ultimately a dismissal may take place if it is established that an employee will not be able to return to work in the foreseeable future.

But what to do with the middle ground?

I'm referring to those employees who take frequent, short-term, absences from work but the absences are NOT unrelated, they are all connected to an on-going, underlying medical condition.

It is rare to see an Absence Policy that addresses this issue adequately and you should be congratulated if you have included it.

If it is established that frequent absences are being caused by an underlying condition, the approach for managing this effectively needs to lean far more towards the long-term absence approach rather than the rigid structure of triggers and warnings involved in the short-term approach.



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One should focus on the duration of the medical condition rather than the duration of the absence – is the medical condition one that is short-term or long-term? A long-term medical condition requires a flexible, supportive and sympathetic approach, regardless of whether it is causing short-term or long-term absence.

An on-going medical condition that causes sporadic, short-term absences is potentially more disruptive to a business than a long-term absence, where arrangements can be put in place to cover urgent work or duties.

For every employee experiencing a health problem that causes frequent absences, there are a number of other employees who are impacted. As HR professionals we have an equal duty of care to those who are picking up extra workload and over time may become stressed or disillusioned by the situation. With this in mind, it is essential that the 'middle ground' absence situation is tackled effectively and at an early stage.

Whilst an unrelated short-term absence process of triggers and cautions will not be appropriate, that is not to say there is nothing you can do.

Your process will largely be governed by the quality of the medical information you gather. It is essential to ask the right questions that relate to the central issue – the likelihood of your employee reaching a point where they are able to provide regular and reliable service. If it is established that this point will not be reached in the foreseeable future (2-3 months), irrespective of any reasonable adjustments you might be able to make, it may be time to part company.

Using a flexible approach such as this rather than being constrained by a rigid schedule of triggers and cautions will feel fairer for both you and the employee. Also, an ill health dismissal may not be 'goodbye' forever. There is nothing to stop a company from re-hiring the employee at a later date when their health has sufficiently improved.

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