

Title	ATTENDANCE SUPPORT PROGRAM (ASP)	Procedure No.	3010a
Department	ORGANIZATIONAL SUPPORT SERVICES - HUMAN RESOURCES		
Reference(s)	Attendance Support Policy	Effective Date	2010 May 11

1.0 TVDSB Attendance Support Program is built upon the following principles:

- 1.1 To provide assistance and support for the health and wellbeing of our employees who are absent from work.
- 1.2 To utilize best practices including the use of timely supports and return to work procedures.
- 1.3 To apply the application of this program in a manner consistent with the Ontario Human Rights Code and any other applicable legislation in place.
- 1.4 To encourage regular, punctual attendance at work through the proactive use of preventative measures.
- 1.5 To treat absences consistently and equitably across the organization.

2.0 Definitions of Absenteeism

- 2.1 **Culpable Absenteeism** refers to lateness or absences for which the employee should be held responsible because the employee acted wrongly in being absent (i.e. taking a sick day when not sick). Culpable absenteeism is handled through the normal process of progressive discipline.
- 2.2 **Non-culpable or Innocent Absenteeism** occurs when an employee, through no fault of their own, is absent from the workplace for medical or personal illness reasons.

Administered By	ORGANIZATIONAL SUPPORT SERVICES - HUMAN RESOURCES
Amendment Date(s)	2014 February 3 2014 March 25

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3.0 Key Elements

- 3.1 Individual and personal attention to an employee's attendance by the employee's supervisor.
- 3.2 Regular review of attendance reports.
- 3.3 Support for employees and management provided by Organizational Support Services - Human Resources.
- 3.4 The continuation and enhancement of the wellness approach to attendance which includes the employee and family assistance program (EFAP), the prompt resolution of health and safety issues, employee recognition, job accommodation and modified work programs as required.
- 3.5 Management training and employee information on the program's philosophy and rationale, as well as their respective roles.

A successful program involves the cooperation of the employee and the active participation of management, union/association/federation, and healthcare professionals as appropriate.

- 3.6 Sick leave absences must be treated properly, recognizing that affected employees may require assistance to return to regular duties. The focus of this program is to understand reasons for absenteeism and offer supports to employees with non-culpable (innocent) absenteeism.

4.0 Roles and Responsibilities

4.1 Employee

It is an expectation that an employee who is hired to perform a job will:

- a) Attend work as scheduled
- b) Report their absences
- c) Maintain regular contact with their supervisor
- d) Maintain their health and be encouraged to take precautions against illness
- e) Attend meetings regarding absences and be an active participant in improving their overall attendance

4.2 Principal/Manager/Supervisor

As an employee of the Board the expectations in 4.1 apply.

It is an expectation that the employer, through the supervisor, will:

- a) Review attendance reports provided by Organizational Support Services - Human Resources
- b) Monitor the attendance of all employees within their area of supervision
- c) Treat employees fairly and equitably in the monitoring of their attendance
- d) Communicate expectations for attendance at work
- e) Ensure consistent and timely application of the program
- f) Provide assistance and support to their employees
- g) Maintain regular contact with absent employees

4.3 **Unions/Associations/Federations**

It is requested that union/associations/federations will:

- a) Provide ongoing support and assistance to the employee
- b) Encourage the employee to cooperate with the employer in ensuring a timely and successful return to work

4.4 **Senior Management**

It is expected that Senior Management will:

- a) Promote and maintain a work environment which protects the overall health, safety and wellness of all employees
- b) Demonstrate a commitment to an attendance support program by ensuring that:
 - All supervisors act consistently in dealing with attendance issues at all levels of the organization
 - There is a fair and equitable application of the attendance support program
- c) Communicate expectations for attendance at work

5.0 **Absence Reporting**

Although employees are required to attend work as scheduled, there will be times when employees are unable to attend work.

In order to ensure a consistent and equitable approach throughout the Board, it is imperative that all absences are reported for all positions through normal reporting procedures for their job.

6.0 **Reports**

For twelve (12) month employees, a twelve (12) month report, using sick leave days only (being illness days and self-identified pandemic illness), will be produced at the end of August each year. For ten (10) month employees, a ten (10) month report, using sick leave days only (being illness days and self-identified pandemic illness), will be produced at the end of June each year. Only days for which an employee claimed sick leave under the collective agreement/terms and conditions document for each respective employee group will be counted.

Absences due to Care Day, WSIB, LTD, governmental publicly declared pandemic days, pregnancy/parental leaves or unpaid Personal Emergency Leave Days under s. 50 (1) 1 of the Employment Standards Act relating to the employee's illness, injury or medical emergency will be excluded.

Sick leave absences which are part of a continuous absence of more than 10 days in duration (or for shorter periods as permitted by the Disability Management Officer ("DMO")) will also be excluded, provided the employee has provided adequate medical evidence justifying the absence.

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Absences due to a chronic medical condition and/or “disability” as defined by the Human Rights Code are excluded if satisfactory medical evidence is provided by the employee confirming that the absence(s) are due to that disability or those disabilities, unless the employee is not receiving treatment, or is not cooperating with prescribed treatment.

All references herein to either “chronic medical condition” or to “disability” will include both.

The employer is committed to respecting the privacy of its employees’ personal health information in accordance with the applicable legislation. The chronic medical form, Appendix H, once completed, will be submitted to the employer’s Disability Management Office and will not be disclosed by Disability Management to anyone, including other TVDSB officials, without the express consent of the patient/employee or legal order. However, the medical information provided in response to questions 1, 2, 4 and 6 on the form may be disclosed by Disability Management to Organizational Support Services – Human Resources for purposes related to this ASP procedure. The medical information in items 3 and 5 on the form will be held in the strictest of confidence by Disability Management. In addition, Disability Management and Organizational Support Services – Human Resources are entitled to the information in response to the form at Appendix I.

If the DMO determines that an employee is suffering from a chronic medical condition, an acknowledgement in the form of Appendix J will be sent to the employee.

When an employee exceeds the Board threshold, after the review process set out below, the employee may receive a Review letter.

The Board threshold for all employee groups is 14 days. The number, 14, is not to be a model for attendance. It is a threshold number, which if exceeded, may result in entry or progression in the program. This across the board number will be subject to review by the Board every two (2) or three (3) years. Any changes to the threshold number will be communicated to employees and employee groups/unions in advance. In the event of an amendment of the threshold number, the Board will consider the total illness (sick leave) absences among other relevant considerations.

The report will list individual (employee) absences by school, location or department. This report will be available to the principal/manager/supervisor/superintendent for their school, location or department.

7.0 Process of Addressing Innocent Absenteeism

The process of addressing innocent absenteeism is supportive and non-disciplinary in nature. The intent is to understand the absences, discuss the impact the absences are having on the specific school, department or location, if appropriate, provide support and indicate support services available to the

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employee, and allow sufficient time for the employee to access supports and where reasonably possible, improve their attendance.

If the employee is in Phase 1, 2, or 3 of the program, and the employee's absences fall below the Board threshold for two (2) consecutive monitoring periods, the employee would come out of the program.

If an employee's absences fall below the Board threshold for one monitoring period but the employee is unable to sustain it and exceeds the threshold during the next monitoring period, the employee would remain in the same phase and would not go back to an earlier phase.

If an employee's absences continue to be above the Board threshold over the next monitoring period the employee will continue on to the next phase unless otherwise determined by the Board (such as recent disclosure of relevant medical evidence or a demonstrated chronic medical condition).

It is the role of the manager/principal/supervisor to work with the employee on concerns related to attendance. The following provides a process to address issues of innocent absenteeism.

8.0 The Process: Assistance for Improving Attendance

8.1 Review: Letter Reviewing the Employee's Attendance Record

The manager/principal/supervisor should review the employee's absenteeism record, if it exceeds the threshold, and determine if the absences are already understood and documented, such that a Review letter would not need to be issued by Organizational Support Services - Human Resources.

There are situations when, due to the nature of an employee's extenuating circumstances, participation in the program may not be required, provided satisfactory medical evidence has been received by Disability Management. If an employee, who exceeds the threshold, believes they have extenuating circumstances the employee is requested to promptly communicate with Disability Management.

It is important to emphasize that the Board does not challenge the employee's right to use the sick leave provision for an absence due to illness or injury.

Following the review, the manager/principal/supervisor will notify Organizational Support Services - Human Resources with the names of employees whose absenteeism record still exceeds the Board threshold after taking into consideration any known relevant (non-medical) information regarding a particular employee absence.

Before any Review Letter is sent out, Organizational Support Services - Human Resources and the DMO will separately review the employee's record of sick leave absences and will also exclude absences due to an accepted chronic medical condition. At this stage, Human Resources will also exclude all sick leave

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absences which are part of a continuous absence of more than 10 days in duration (or such shorter period as may be permitted by the DMO), unless the employee has not supplied medical evidence justifying the absence.

If after this review process, the employee's rate of sick leave absences still exceeds the threshold (see 6.0 above), Organizational Support Services - Human Resources will issue a Review letter (sample Appendix A) to the employee, and copy their supervisor and their union, which will include the following:

- a) A brochure highlighting the Attendance Support Program
- b) A comparison of the employee absence record to the Board threshold
- c) A brochure highlighting the Employee and Family Assistance Program, (EFAP)
- d) Assistance available to the employee
- e) A Chronic Medical Condition form
- f) Ongoing monitoring of the employee's attendance

In some cases, the Board may not obtain evidence that some or all of an employee's sick leave absences were due to an accepted chronic medical condition until after the Review letter is sent out. In such a case, the accepted chronic medical condition will be taken into consideration and the matter reviewed based on the new information.

For twelve (12) month employees the monitoring period will be twelve (12) months. For ten (10) month employees the monitoring period will be ten (10) months.

The monitoring periods will begin September 01 of each school year. If there are improvements that result in absences at or below the threshold, it should be acknowledged in writing (sample Appendix D). If non-excluded absences are still above the threshold then the employee will enter Phase 1.

Note: If the employee requires accommodation due to an identified illness or disability, the employee, the supervisor or Organizational Support Services - Human Resources needs to involve the Disability Management Officer.

8.2 Phase 1: Letter Reviewing the Employee's Attendance Record

Following the next monitoring period and review, the manager/principal/supervisor will notify Organizational Support Services - Human Resources – ASP Coordinator with the names of employees whose absenteeism record exceeds the Board threshold. Organizational Support Services - Human Resources and the Disability Management Officer will conduct a pre-phase 1 review, excluding absences where warranted under this procedure.

If after this review, the employee's absences still exceeds the threshold during the monitoring period, and the employee received a Review letter in the last monitoring period, Organizational Support Services – Human Resources will issue a Phase 1 Letter (sample Appendix B) to the employee, (copying their supervisor and union, if any) which will include the following:

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- a) The employee is in Phase 1
- b) A brochure highlighting the Attendance Support Program
- c) A brochure highlighting the EFAP
- d) The employee's absences under this program remain above the threshold for the last monitoring period
- e) Concern about their absence level
- f) Assistance available to the employee
- g) Medical form identifying chronic medical condition (Appendix H) is enclosed and available on website
- h) If barriers at work are preventing the employee from attending work regularly the employee should discuss their concern with their supervisor, unless it involves medical information which should then be discussed with the Disability Management Officer (DMO)
- i) Expectations focusing on the importance of being at work
- j) The employee's attendance will be reviewed over the next monitoring period

The Board will review employee's attendance over the next monitoring period to determine improvements or concerns. If there are improvements that result in absences at or below the threshold, it should be acknowledged in writing (sample Appendix D). If non-excluded absences are still above the threshold, then the employee will enter Phase 2.

Note: If the employee requires accommodation due to an identified illness or disability, the employee, supervisor or Organizational Support Services - Human Resources needs to involve the Disability Management Officer.

8.3 Phase 2: ASP Coordinator, or Designate, Meets with the Employee

Following the next monitoring period and review, the manager/principal/supervisor will notify Organizational Support Services -Human Resources – ASP Coordinator with the names of employees whose absenteeism record exceeds the Board threshold. Organizational Support Services – Human Resources and the Disability Management Officer will conduct a pre-Phase 2 review, excluding sick leaves where warranted under this procedure.

If after this review, the employee still exceeds the threshold during the monitoring period, and received a Phase 1 letter in the last monitoring period the ASP Coordinator, or Organizational Support Services - Human Resources designate, will meet with the employee. The meeting will also include the employee's supervisor and union representative.

ASP meetings are not intended to be disciplinary, but rather an opportunity to increase communication between the employee and the employer.

The employee is asked for a satisfactory explanation for their absences and actions the employee is taking to improve their attendance, but will not be asked to disclose at this meeting confidential medical information. That information should be provided directly to the DMO where warranted.

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Following the meeting, Organizational Support Services - Human Resources will issue a letter (sample Appendix E Phase 2 letter) to the employee (copying it to the employee's supervisor and union, if any). The Phase 2 letter will include the following:

- a) The employee is proceeding to Phase 2
- b) The employee's attendance has not improved at work over the last monitoring period
- c) Assistance available to employee
- d) If barriers at work are preventing the employee from attending work regularly the employee can discuss their concern with their supervisor, unless it relates to medical information which should be provided to the DMO
- e) Expectations focusing on the importance of being at work
- f) The employee's attendance may be reviewed regularly during the next monitoring period, and will be reviewed at the end of the monitoring period
- g) An opportunity for a health review through Disability Management (sample Appendix G)
- h) Advise the employee that if their absences remain above the threshold, the employer may be required to take further action
- i) Complete the interview check list (sample Appendix C)

The Board will review employee's attendance over the next monitoring period to determine improvements or concerns. If there are improvements, (absences fall at or below the threshold), it should be acknowledged in writing (sample Appendix D). If there is little or no improvement (i.e. non-excluded absences are above the threshold), then the employee will enter Phase 3.

Note: If the employee requires accommodation due to an identified illness or disability, the employee, supervisor or Organizational Support Services - Human Resources needs to involve the Disability Management Officer.

8.4 **Phase 3: ASP Coordinator, or Designate, Meets with the Employee**

Following the monitoring period and review, the manager/principal/supervisor will notify Organizational Support Services - Human Resources – ASP Coordinator with the names of employees whose absenteeism record exceeds the Board threshold. Organizational Support Services, Human Resources and the Disability Management Officer will conduct a pre-Phase 3 review, excluding absences where warranted under this procedure.

If after this review, the employee still exceeds the threshold during the monitoring period, and received a Phase 2 letter in the last monitoring period, the ASP Coordinator, or an HR representative, will meet with the employee. The meeting will also include the employee's supervisor and union representative.

ASP meetings are not intended to be disciplinary, but rather an opportunity to increase communication between the employee and the employer.

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The employee will be asked for a satisfactory explanation for their absences and the actions the employee is taking to improve their attendance, but will not be asked to disclose at this meeting confidential medical information. That information should be provided to the DMO where warranted.

At the Phase 3 meeting, the employee's record of sick leave absences in recent monitoring periods will be reviewed. The employee will be advised that if the absences in the last monitoring period were due to a chronic medical condition or disability, the employee should be communicating with the Disability Management Officer so that the required documentation is on file.

At the Phase 3 meeting, the ASP Coordinator or HR Representative will impress upon the employee the seriousness of the Board's concerns regarding the employee's attendance. The ASP Coordinator or HR Representative will ask the employee what assistance, if any, the Board could be in improving the employee's attendance and advise the employee of the importance of attending work on a regular basis.

At the conclusion of the Phase 3 meeting and depending upon the employee's circumstances, Organizational Support Services - Human Resources may advise that management will review the matter and determine what further action (including possibly non-disciplinary termination) may be taken.

Complete the interview check list (sample Appendix C).

At or following the meeting, the ASP Coordinator or Human Resources designate may provide a Phase 3 letter to the employee (copying it to the employee's supervisor and union, if any).

If a Phase 3 letter is provided to the employee, it will include the following:

- a) The employee is proceeding to Phase 3, which is the final phase of the ASP
- b) The employee's attendance has not improved sufficiently over the last monitoring period
- c) A Chronic Medical Condition form
- d) Expectations focusing on the necessity of regularly attending at work
- e) A request that the employee provide documentation to the DMO and Human Resources regarding the employee's capacity to attend work regularly in the future, with the Board reimbursing the employee the cost of obtaining said report (see Appendix I).
- f) Management is to meet with the employee every four to six months.
- g) Any future absences reported as illness while the employee is in Phase 3 may require a medical certificate.

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- h) The Board may require a report from the employee's doctor as to the likelihood of regular attendance in the future. The Board may recommend to the employee that they meet with their doctor to properly assess their health situation.
- i) If absences (included under this procedure) fall below the Board threshold for two (2) consecutive monitoring periods following the Phase 3 meeting the employee would come out of the program.
- j) If the employee's absences (included under this procedure) fall below the Board threshold for one monitoring period following the Phase 3 meeting but the employee is unable to sustain it and exceeds the threshold during the next monitoring period, the employee would remain in Phase 3 and would not go back to an earlier phase.
- k) If, however, expectations from Phase 3 are not met or if absences are still above the threshold during the monitoring period following the Phase 3 meeting, then the Board will have to determine its next steps (which may include non-disciplinary termination) based on the circumstances of each case, and subject to any applicable statute and collective agreement.

The Board will comply with all applicable legislation and collective agreement(s) in administering this procedure.

Summary of Timeline

- Review: Employee receives a letter and attendance is reviewed for one (1) monitoring period.
- Phase 1: ASP Coordinator sends letter to the employee. Attendance is reviewed for one (1) monitoring period.
- Phase 2: ASP Coordinator meets with the employee along with the Manager/Principal and employee/union representative. After the meeting, employee receives a letter and attendance is reviewed for one (1) monitoring period.
- Phase 3: Manager/Principal meets with employee along with an HR representative and employee/union representative. After the meeting, employee receives a letter and attendance is reviewed for one (1) monitoring period.

Reports

For twelve (12) month employees, a twelve (12) month report using only illness days and pandemic illness (self identification for influenza like illness) will be produced at the end of August each year.

For ten (10) month employees, a ten (10) month report using only illness days and pandemic illness (self identification for influenza like illness) will be produced at the end of June each year. However, meetings under this policy for 10 month employees will be deferred until September.

Monitoring Periods

For twelve (12) month employees, the monitoring period is 12 months.

For ten (10) month employees, the monitoring period is 10 months.

Review of Attendance Letter
(To be sent on appropriate letterhead)
(sample)

(Date)
(Employee Name)
(Position)
(Address/Location)

Dear: (Employee Name):

This letter is to advise you that your attendance is above the Board threshold.

Your record indicates that the number of absences (included under the procedure) from (date) to (date) is as follows:

Indicate total number of days, and Board threshold

Please be assured that this letter is not disciplinary in nature. A brochure highlighting the Attendance Support Program is included with this letter. A detailed description of the Attendance Support Program (ASP) Policy and Procedure is available on the Board's website for your review.

Thames Valley District School Board understands that from time to time employees may experience health concerns. To assist employees the Board provides various programs and services such as the Employee and Family Assistance Program (a brochure is included with this letter), Disability Management, and Health and Safety support. We encourage you to take advantage of these programs and services to improve your health and where reasonably possible improve your attendance.

Certain types of absences are not counted under the Board's ASP. For instance, if you believe you have extenuating circumstances regarding your attendance, such as some or all of the sick leave absences included above were due to a disability or a chronic medical condition, please contact Disability Management. (To assist with this process, the Chronic Medical Condition form is enclosed. It is also available for download on the employee portal under Human Resources/Disability Management/Policies and Procedures and/or through electronic forms in the employee portal.) In this case, please have your health care provider complete it and send it to Disability Management for review.

If your attendance record does not fall below the Board threshold over the next monitoring period you will enter Phase 1 of the ASP, as described in the ASP Procedure.

If your (manager/principal/supervisor) can be of assistance to you in pursuing the programs and services as mentioned, or in any other way, please do not hesitate to contact them.

If you require further information about the services offered by our Disability Management office please contact their office at 20268.

Sincerely,

Associate Director, Organizational Support Services
cc. Employee File
 Manager/Supervisor/Principal
 Union/Association/Federation

Phase 1 Letter

(To be sent on appropriate letterhead)
(sample)

(Date)
(Employee Name)
(Position)
(Address/Location)

Dear: (Employee Name):

This letter is to confirm that the Board is concerned about your regular attendance record. You are entering Phase 1 of the program effective (mth/day/yr). Your record indicates that the number of days absent from (date) to (date) is as follows:

Indicate total number of days, and Board threshold

The Board's attendance expectation is that wherever reasonably possible, you attend work regularly which assists in providing quality of services and program. A brochure highlighting the Attendance Support Program is included with this letter. A detailed description of the Attendance Support Program (ASP) Policy and Procedure is available on the Board's website for your review. If your attendance record does not fall below the Board threshold over the next monitoring period you will enter Phase 2 of the ASP, as described in the ASP Procedure.

Thames Valley District School Board understands that from time to time employees may experience health concerns. To assist employees the Board provides various programs and services such as the Employee and Family Assistance Program (a brochure is included with this letter), Disability Management, and Health and Safety support. We encourage you to take advantage of these programs and services to improve your health and where reasonably possible improve your attendance.

If there are barriers at work preventing you from attending work regularly you should discuss those concerns with your supervisor, unless it involves medical information which should then be discussed with the Disability Management Officer.

Certain types of absences are not counted under the Board's ASP. If you believe you have extenuating circumstances regarding your attendance such as some or all of the absences included above were due to a disability or a chronic medical condition please contact Disability Management. (To assist with this process, the Chronic Medical Condition form is enclosed. It is also available for downloading from the employee portal under Human Resources/Disability Management/Policies and Procedures and/or through electronic forms in the employee portal.) In this case, please have your health care provider complete it and send it to Disability Management for review.

Please be assured that this letter is not intended to be disciplinary in nature. If your (manager/principal/supervisor) can be of assistance to you in pursuing the programs and services as mentioned, or in any other way, please do not hesitate to contact them.

If you require further information about the services offered by our Disability Management office please contact the office at 20268.

Sincerely,

Associate Director, Organizational Support Services

cc: Employee File
Manager/Supervisor/Principal
Union/Association/Federation

Supervisor's Interview Checklist

(This form should be completed immediately following each interview)

Employee Name: _____ Employee #: _____ Phase: _____

Discussion Item	Comments
Explanation of Attendance Support Program given	
Review Absence procedures	
Review of Absence Record	
Expectations discussed	
EFAP information discussed	
Other resources discussed	
Referral to Disability Management Officer for medical follow-up	
Chronic Medical form discussed	
Follow up correspondence	
(for phases 2 & 3 only)	Provided to: Employee _____ Union/Association/Federation _____ D.M.O. _____ HRS _____

Additional Comments

Date for next review meeting: _____

Supervisor's Signature: _____

Date: _____

Improved Attendance
(To be sent on appropriate letterhead)
(sample)

Date

Dear (*Employee's name*)

In (month/year) I wrote to you regarding your attendance.

Since that last letter in (month) your attendance has improved to the point that it is now below the Board threshold. At this time I would like to acknowledge both the improvement in your attendance and the positive impact on the department/school/location.

We will review your attendance again in (month/year). Please let Disability Management know of any changed medical circumstances, or if we can offer further guidance or support to assist you.

Sincerely,

Associate Director, Organizational Support Services
cc. Employee File
 Manager/Supervisor/Principal
 Union/Association/Federation

Phase 2 Letter

(To be sent on appropriate letterhead)
(sample)

(Date)
(Employee Name)
(Group)
(Address/Location)

Dear: (Employee Name):

Further to our meeting with you on (month/day/year) this letter is to confirm that the Board remains concerned about your attendance record. You are entering Phase 2 of the program effective (mth/day/yr). Your absence record is as follows:

Total number of days (from phase 1) was ____ and your total number of days (from phase 2) was ____ . The Board threshold is ____ .

As such, your attendance has not improved sufficiently over the last monitoring period.

Please be assured that this letter is not intended to be disciplinary in nature. However, if your attendance record does not fall below the Board threshold, in the next monitoring period, the Board may take further action under the Board's Attendance Support Program (ASP), which is available on the Board's website for your review.

The Board's attendance expectation is that wherever reasonably possible, you attend work regularly which assists in providing quality of services and program. The Board needs to be able to rely on your regular attendance in order to provide a continuity of service and program.

Thames Valley District School Board understands that from time to time employees may experience health concerns. To assist employees the Board provides various programs and services such as the Employee and Family Assistance Program, Disability Management, and Health and Safety support. We encourage you to take advantage of these programs and services to improve your health and where reasonably possible improve your attendance.

If there are barriers at work preventing you from attending work regularly you should discuss those concerns with your supervisor, unless it involves medical information which should then be discussed with the Disability Management Officer.

As we have previously communicated to you, certain types of absences are not counted under the Board's ASP. If you believe there are extenuating circumstances regarding your attendance such as some or all of the sick leave absences included above were due to a disability or a chronic medical condition, please contact Disability Management. (To assist with this process, the Chronic Medical Condition form is enclosed. It is also available for downloading on the employee portal under Human Resources/Disability Management/Policies and Procedures and/or through electronic forms in the employee portal.) In this case, please have your health care provider complete it and send it to Disability Management for review.

If your (manager/principal/supervisor) can be of assistance to you in pursuing the programs and services as mentioned, or in any other way, please do not hesitate to contact them. If you require further information about the services offered by Disability Management please contact their office at 20268.

Sincerely,

Associate Director, Organizational Support Services
cc. Employee File
 Manager/Supervisor/Principal
 Union/Association/Federation

Phase 3 Letter

(To be sent on appropriate letterhead)
(sample)

(Date)
(Employee Name)
(Position)
(Address/Location)

Further to your meeting on (month/day/year) this letter is to confirm that the Board remains concerned about your attendance record. At the meeting, it was brought to your attention the number of days absent and you were advised that this is a significant concern for the Board.

You are entering Phase 3, the final phase, of the Attendance Support Program effective (mth/day/yr). Your absence record is as follows:

- *History of previous letters with absence record*

Your attendance has not improved sufficiently over the last monitoring period. The Board expects that you attend work on a regular basis. While it is recognized that your absences may be health related, the Board remains concerned about the impact of such absenteeism on its operations. Your responsibilities require that the Board be able to rely on your regular attendance wherever reasonably possible, which assists in providing continuity of service and program. [Please be advised that any future absences reported as illness will require a medical certificate.]

As we have previously communicated to you, certain types of absences are not counted under the Board's ASP. If you believe there are extenuating circumstances regarding your attendance such as some or all of the sick leave absences included above were due to a disability or a chronic medical condition, please contact Disability Management. (To assist with this process, the Chronic Medical Condition form is enclosed. It is also available for download from the employee portal under Human Resources/Disability Management/Policies and Procedures and/or through electronic forms in the employee portal.) In this case, please have your health care provider complete it and send it to Disability Management for review.

Please be assured that neither the meeting discussion nor this letter is disciplinary in nature. However, the Board must inform you that failure to meet your attendance goals established, as a condition of continued employment, may lead to non-disciplinary termination.

The Board will be monitoring your attendance closely.

You should expect that management will be meeting with you in the coming months regarding your attendance.

The Board is now requiring a report from your doctor as to the likelihood of your regular attendance at work in the future. The Board also recommends that you meet with your doctor to properly assess your health situation. There is a letter enclosed to deliver to your doctor.

Given that the Disability Management Officer retains confidentiality (this confidentiality is described more fully in the Attendance Management Procedure), but does not make management decisions regarding termination, it is necessary that Organizational Support Services - Human Resources receive the information that is relevant to whether employment will be maintained. Accordingly, there is an authorization provision with the letter so that your doctor is aware that you are consenting to the release of this information to the Disability Management Officer and to Organizational Support

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Services - Human Resources at Thames Valley District School Board. The Board will reimburse you for any costs associated with obtaining medical documentation when it is requested by the Board. Please return the medical practitioner's report within (14) days from the date of this letter.

Once we have received the report from your doctor, we will evaluate whether further information is required or whether your employment with the Board can continue.

If you remain an employee of the Board, and your sick leave absences fall below the Board threshold for two (2) consecutive monitoring periods following the Phase 3 meeting, you will be removed from the ASP.

However, if your sick leave absences fall below the Board threshold for one monitoring period following the Phase 3 meeting but you are unable to sustain it and you exceed the threshold during the next monitoring period, you will remain in Phase 3 and will not go back to an earlier phase.

If, however, expectations from Phase 3 are not met or if absences are still above the threshold during the monitoring period following the Phase 3 meeting, then the Board will have to determine its next steps (which again may include non-disciplinary termination) based on circumstances of each case, and subject to any applicable statute and collective agreement.

Sincerely,

Associate Director, Organizational Support Services

cc. Employee File
Manager, Supervisor, Principal
Union/Association/Federation

Enclosure-Letter of referral to employee's doctor with employee's authorization and the Chronic Medical Condition form

Referral to Disability Management Officer

Employee Name:		Employee Number:	
Job Title:	Department:	Union:	
Work location:	Telephone: (B) (H)		
Present Status:	At Work	Off work	Date Last Worked:
How was the employee made aware of the referral:			Date:
Actions taken by the supervisor, to date, to manage the concern:			
History of absences for past 2 years (if relevant)			
Board Threshold _____			

Supervisor: (print name) _____ **Phone#:** _____

Supervisor's Signature: _____

Please fax to Disability Management Officer at 519-452-2606



CHRONIC MEDICAL CONDITION / DISABILITY FORM

Appendix H

Patient Name: _____

Date: _____

DOB: _____

Dear Dr. _____

Your patient has brought this form to you for completion. The Thames Valley District School Board (TVDSB) is committed to assisting our employees to attain optimum health and wellbeing.

In September 2010, the TVDSB initiated an Attendance Support Program. The purpose of this Program is to support our valued employees and assist them in optimizing their health with a view to maximizing their ability to attend work on a regular basis.

The TVDSB is committed to respecting the privacy of its employees' personal health information. This form will be submitted to the TVDSB's Disability Management Office and will not be disclosed to anyone, including other TVDSB officials, without the express consent of the patient/employee or legal order. However, the medical information provided in response to questions 1, 2, 4 and 6 below may be disclosed by Disability Management to the TVDSB's Organizational Support Services – Human Resources. The medical information provided in items 3 and 5 below will be held only by Disability Management and will not be disclosed by it without the express consent of the patient/employee or legal order.

We would appreciate your medical opinion to the following questions:

- 1. Is your patient suffering from a chronic medical condition or disability? Yes No
- 2. If so, if known, how long has your patient suffered from this condition or disability?
- 3. If so, information regarding the nature of the condition or disability sufficient to enable confirmation of a chronic medical condition or disability since September 1, last year:

- 4. Is the condition(s) stable? Yes No
- 5. Current Treatment Plan:

- 6. Given the above information, in your professional opinion, has this condition reached maximum medical recovery? Yes No

We would welcome the opportunity to share with you the resources we have available, specifically within Disability Management. We welcome your participation and invite any inquiries you may have.

A reasonable and customary fee of up to \$ 20.00 will be reimbursed to you for completion of this form.

Disability Management: Debbie Kenny RN COHN (c) ext 20269, Marlene Demko RN COHN (c) ext 20357, Human Resources , Thames Valley District School Board, 1250 Dundas Street, P.O. Box 5888, London, Ontario N6A 5L1 Ph: 519-452-2000 Fax: 519-452-2606

Physician's Signature _____

Notice of Collection: Personal information on this form is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act, 1990, Section 32, Health Protection and Promotion Act RSO 1990, and the Personal Health Information Protection Act, 2004. For questions about this collection, contact the Board's Freedom of Information Coordinator, Thames Valley District School Board, 1250 Dundas Street, London , Ontario, N6A 5L1, at 519-452-2000, Ext. 20218.
The information gathered on this form is confidential medical information to be submitted directly to the Disability Management Office, Thames Valley District School Board.

(To be sent on appropriate letterhead)
(Sample)

Date:

To: Dr. _____

Re: Name
DOB
Position

Dear Dr. _____,

This correspondence is in relation to our employee, your patient and his/her medical status. The purpose of this letter is to determine the prognosis for the level of recovery or attendance improvement (if any) for the foreseeable future from the conditions which have led to the absences to date.

Please note, we are not requesting medical information at this time. We are seeking to determine if this employee will be capable of improvement in their attendance at work in the foreseeable future.

Note: The employee's illness absence record since _____ is attached.

Please provide us with a physician's letter regarding the information listed below. A reasonable and customary fee of up to \$150 will be reimbursed to you for your letter.

Sincerely,

I hereby authorize and request my physician(s) to release the following information to the Human Resources Department and Disability Management Officers at the Thames Valley District School Board in relation to my absences to date.

Information to be released:

- Restrictions (if any) to enable either an early and safe return to regular attendance at work or to enable improved attendance at work
- Prognosis for recovery, if any, and prognosis for regular attendance at work in the foreseeable future (Note: The TVDSB threshold for sick leave absences is 14 days per school year)

Signature of Employee

Date

Signature of Witness

Date

Acknowledgment of a Chronic Medical Condition

(To be sent on appropriate letterhead)
(sample)

Date

Dear:

Disability Management has reviewed medical evidence provided to them by your health care provider regarding your medical condition.

Your chronic medical condition is recognized and as a result, your absences due to this chronic medical condition will be excluded from the analysis of your attendance under the Attendance Support Program. Your medical file will be reviewed by Disability Management on an annual basis and you may be asked to provide ongoing medical evidence to support your condition.

Sincerely,

ASP Coordinator, Organizational Support Services - Human Resources
Thames Valley District School Board

cc: Principal
Bargaining Agent-provided confidentially