



Teachers Managing Absence (F8) Toolkit TMA06

TMA (F8) 06 (a) – Management Discretion Request Form

Where a Head Teacher considers that a particular case requires discretion to be applied to vary from the prescribed procedures, they can formally request discretion from the Chief Officer / Nominated Senior Officer. Discretion can be considered at any formal stage but can normally only be applied once during the Teachers/Associated Professionals' journey through the formal managing absence (F8) process.

Before submitting this form the Head Teacher must discuss the request with Employment & Policy.

Head Teacher Details			
Name		Designation	
Service		Division	
Teacher / Associated Professional Details			
Name		Designation	
Dates of current/most recent absence		Reason for absence	
What Stage in the process is the Teacher /Associated Professional at?		Has discretion been applied before? If yes provide details	
Does the Teacher/ Associated Professional have an underlying health condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Does the underlying condition relate to the current/most recent absence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Summary of Absence Record in last 12 months (occasions, days lost, patterns)			
Section A – Grounds for Discretion This must be completed by the Head Teacher			Please tick applicable reason
1. Absent due to a chronic illness/disease e.g. cancer, stroke, heart condition			<input type="checkbox"/>
Provide further details			
2. Has to undergo a surgical procedure/requires hospitalisation which has a specified/expected date of recovery and future absence may be prevented.			<input type="checkbox"/>
Provide further details including date of surgery and anticipated return date			

3. Is likely to be covered by the disability provisions of the Equality Act 2010 and advised in an Occupation Health Report that an extension to the timeframes in the procedure would be deemed a reasonable adjustment in the circumstances of the absence.	<input type="checkbox"/>
Provide further details including proposed length of extension to the timeframes for moving to next stage	
4. Has been identified by Occupational Health as having an underlying medical condition which may affect their attendance intermittently over a set period of time – this will apply to short term absence.	<input type="checkbox"/>
Provide further details	
5. Teacher/Associated Professional demonstrates an effort to return to work/returned early/considered phased return (in conjunction with other exceptional circumstances)	<input type="checkbox"/>
Provide further details including agreed/actual return to work date and phased return plan	
6. Reasonable time off due to the bereavement of a Close Relationship (as defined in the F7 Leave of Absence Policy for Teachers and Associated Professionals) (in cases where special leave has been exhausted). The first 2 weeks of an absence of this nature will not count towards trigger (see short- and long-term absence toolkit)	<input type="checkbox"/>
Provide further details	
7. A significant improvement in a Teachers/Associated Professionals attendance levels over the last 2 years* (in conjunction with other circumstances i.e. previous absence was due to a chronic illness or Equality Act may apply).	<input type="checkbox"/>
Provide further details	
8. Other Reason	<input type="checkbox"/>
Provide further details	
Section B – Type of Discretion Requested	
This must be completed by the Head Teacher	
1. Apply discretion in full Teacher/Associated Professional will remain on the existing Stage of the process for the remainder of the 12-month monitoring period	(tick if appropriate) <input type="checkbox"/>
2. Apply discretion in part (tick appropriate discretion and provide any timescales/dates that the request is dependent on)	<input type="checkbox"/> Teacher/Associated Professional will continue on the existing Stage of the formal process for another 12 months, from the end date of the previous absence. <input type="checkbox"/> Teacher/Associated Professional will remain on existing stage of the formal process for the reason outlined above on the basis that they return to work within the agreed timescale. If the return-to-work date is not met then the formal process meeting should be re-convened.

		Agreed date of return (if applicable): Timescale for treatment/recovery (if applicable):	
Date Request Submitted:		Request agreed with Employment & Policy: Employment & Policy Advisers Name:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Section C – Decision of Chief Officer / Nominated Senior Officer			
Has the discretion request been approved? Yes (Fully) <input type="checkbox"/> Yes (in Part) <input type="checkbox"/> No <input type="checkbox"/> (If the request has been approved in part please provide reason e.g. increase/decrease timescale for return to work)			
Date Request Approved:		Name:	
Please return the completed form to the requesting Head Teacher named above			