NATIONAL SERVICES SCOTLAND

EXTENSION TO SICK PAY GUIDE & FORM



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**Document Control Sheet**

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| **WHAT IS AN EXTENSION TO SICK PAY?**  Extensions to Sick Pay can be requested when an employee’s sick pay entitlement is reduced to either half pay or nil pay. The request will be considered by an independent panel who will make a decision whether to approve the request in line with Section 14 of the Agenda of Change Handbook.  C:\Users\traceh01\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\NF23GRJU\MC900442164[1].png |
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| 1. **INTRODUCTION**   This document is to provide guidance and support to NSS employees and Managers on the process for requesting an extension of sick pay including how an employee can apply for this.  This guidance should be read in conjunction with Section 14 and Annex Z of the Agenda for Change Terms and Conditions of Service Handbook.  Extensions to sick pay may be granted by the employer in accordance with: -   1. Paragraph 14.9 – “sick pay for those who have exhausted sick pay entitlements should be reinstated at half pay, after 12 months continuous sickness absence, in the following circumstances: -  * Staff with more than 5 years reckonable service: - sick pay entitlement is exhausted before a final review meeting for long term absence has taken place; * Staff with less than 5 years reckonable service: - sick pay will be reinstated if sick pay entitlement is exhausted and a final review does not take place within 12 months of the start of their sickness absence.”  1. Paragraph 14.12 – “Employers will also have the discretion to extend the period of sick pay on full or half pay beyond the scale set out in 14.2: -  * Where there is the expectation of return to work in the short term and an extension would materially support a return and / or assist recovery, particular consideration should be given to those staff without full sick pay entitlements; * In any other circumstance that the employer deems reasonable.” |
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| 1. **NSS EXTENSION TO SICK PAY** 2. **Who is eligible to make a request for NSS Extension to Sick Pay?**   NSS Extension to Sick Pay can be claimed by NHS employees covered by the Agenda for Change Terms and Conditions of Service Handbook.  The request to extend sick pay can be made directly by the employee or on their behalf by their Line Manager or a trade union / professional organisation representative.   1. **When is an extension to sick pay payable?**   Each request for an Extension of Sick Pay will be considered by the Return to Work Support Panel on an individual basis. The decision will be made taking account of the supporting information submitted along with the request and in line with the parameters set out in Section 14 of the Agenda for Change Handbook. |
| The panel can only approve a request where it is evidenced that NSS Policies and Procedures have not been applied correctly or where it is felt that the extension will aid the recovery of the employee and therefore facilitate a return to work.   1. **When is an extension to sick pay request unlikely to be approved?**   A request for extension to sick pay will not be approved where it is not clear that the extension of pay is being made to facilitate a return to work or if there has been no failures in applying the sickness absence policy.  An extension to sick pay request will not be approved if the request is being made due to a failure to update a system. For example, if an employee’s sick pay has changed without notification due to SSTS not being updated by the Line Manager, this will not be approved as this is not within the remit of the Return to Work Panel. |
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| 1. **NSS EXTENSION TO SICK PAY PROCESS** 2. **Who within NSS makes the decision to approve a request to extend sick pay?**   NSS is responsible for ensuring a robust process is in place for considering requests to extend sick pay. In NSS each Extension Sick Pay request is considered by the Return to Work Support Panel.  This independent panel comprises of the Director of Finance, who is the chair of the group, Head of Healthy Working Lives, a Senior Specialist Advisor from Organisational Effectiveness Team, an NSS Manager and a Trade Union / Professional Organisation Representative. They have prearranged meetings on a monthly basis to deal with new requests as well as monitor the progress of approved requests.   1. **How does an NSS employee make a claim for an extension of sick pay?**   An NSS employee can make a claim for NSS Extension of Sick Pay by completing the form attached at Appendix B of this guide and submitting this, along with any other relevant documentation, to their Line Manager.  Please note that the request to extend sick pay can be made directly by the employee or on behalf of the employee by either their Line Manager or a trade union / professional organisation representative.  The SBU Director will be asked to sign the form to acknowledge that if the application is approved, there will be a financial impact. The form should then be passed to the HR Service Centre for processing. On submission the case will be submitted to the next Return to Work Support Panel for consideration of whether the request can be approved in line with the Agenda for Change handbook.  Following the panel meeting, the decision will be communicated to the HR Service Centre who will ensure that the employee, Line Manager and SBU Director are informed of the outcome. If the application is approved, the HR Service Centre will also liaise with Finance to ensure the appropriate systems are updated and the extension is paid to the employee.   1. **Can an employee appeal the decision?**   Yes. If an employee wishes to challenge the decision of the Return to Work Support Panel they should do so under the terms of NSS Dealing with Employee Grievances Policy.  All grievances should be addressed to NSS Director of HR and Workforce Development. |
| 1. **What information will an employee need to submit with an extension to sick pay request?**   It is important that the request include as much information as possible to allow the panel to make an informed decision. This may include: -.   * All relevant medical information including advice from Occupational Health Service; * A statement of support from the Line Manager confirming the reason for the request, the steps that have been put in place to manage the absence to date, the timeframe for the extension being requested and details of any return to work plans and timescales. * The employee’s sick leave record covering the previous 2 year period.   Other additional supporting evidence may also be submitted if it is felt that this will help NSS make an informed decision.   1. **Is there any qualifying period for NSS Extension of Sick Pay?**   No. A request for submitting an extension of sick pay is not dependent of on the employee’s length of service however this does affect the employees entitlement to both full and half sick pay. Further details on these can be found within section 14 of the Agenda for Change handbook. |

If you have a question or query that you feel hasn’t been answered in this document then please contact the HR Service Centre on 0131 275 7700 or [NSS.HRServices@nhs.net](mailto:NSS.HRServices@nhs.net).

**APPENDIX A**

**EXTENSION TO SICK PAY REQUEST**

**NSS PROCESS**

The person considering submitting a request for an extension of sick pay (e.g. employee, Line Manager or trade union / professional organisation representative) should read the NSS Extension to Sick Pay guide. If a request is to be submitted then this person will need to complete the details within section 1 of the form.

The Line Manager is required to complete Section 2 of the form as well as prepare a supporting statement confirming the reason for the request, the steps that have been put in place to manage the absence, the timeframe for the extension being requested and details of any return to work plans and timescales. This should then be passed to the SBU Director (or authorised deputy) for their signature.

The case will continue to be monitored by the panel until either the extension has expired and no further action is required, the employee returns to work or the contract of employment has been terminated.

**NO**

The employee, Line Manager and SBU Director will receive confirmation that the extension request has not been approved including the reasons for this decision.

If the employee is unhappy with this decision then they will have the right to appeal the outcome in line with the NSS Dealing with Employee Grievances Policy. Any grievance should be addressed to the Director of HR and Workforce Development.

**YES**

The employee, Line Manager and SBU Director will receive confirmation that the request has been approved.

Finance will also be informed and will ensure that the details of the extension are updated on the appropriate systems. The employee should ensure that they keep in touch with their Line Manger and provide updates where appropriate.

Was the request for an extension of sick pay approved?

The Return to Work Support panel will assess all the information submitted and make a decision on whether the request can be approved. The outcome from the panel will be confirmed to the HR Service Centre using section 5 of the form. The HR Service Centre will ensure all parties are informed of the outcome (including Finance where appropriate).

The application will then be submitted to the next meeting of the Return to Work Support panel. Meetings are pre-arranged on a monthly basis.

The form and all supporting documentation should then be passed to the HR Service Centre who will log the case on the HR system and complete section 4 of the form.

The SBU Director is not being asked to approve this application but is required to sign the form (section 3) to acknowledge that, if the application is approved by the Return to Work Support panel, there will be a financial impact on the SBU budget.

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|  |  | **NHS NATIONALSERVICESmonoAPPENDIX B** |

### APPLICATION FOR NSS EXTENSION TO SICK PAY REQUEST FORM

This form should be completed by NSS employee’s when making a request to extend sick pay.

The request may be made directly by the employee or on their behalf by either the Line Manager or trade union / professional organisation representative.

This form must be supported by a statement from the Line Manager confirming the reason for the request, the steps that have been put in place to manage the absence to date, the timeframe for the extension being requested and details of any return to work plans and timescales.

To enable the Return to Work Support Panel to give full consideration to your request, please complete the following information: -

**SECTION 1 – TO BE COMPLETED BY THE PERSON SUBMITTING THE REQUEST**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of employee | |  | | | | |
| SBU | |  | | | | |
| Job Title | |  | | | | |
| Line Manager | |  | | | | |
| Trade Union / Prof Org Rep (if applicable) | |  | | | | |
| The checklist below details information which may help inform the panels consideration of this request and should be submitted to the panel along with this request: - | | | | | | |
| A Statement from Line Manager providing details of the absence | | | | |  |  |
|  | | | | |  | |
| Relevant Occupational Health Reports / Medical reports | | | | |  |  |
|  | | | | |  | |
| The employee’s sick leave record covering the previous 2 year period | | | | |  |  |
|  | | | | |  | |
|  | | | | | | |
| Signed |  | | Date |  | | |
|  | | | | | | |
| **SECTION 2 – LINE MANAGER TO COMPLETE** | | | | | | |
| HR Adviser assigned to the case | |  | | | | |
| Absence start date | |  | | | | |

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| --- | --- |
| Is the extension of full hay or half pay? |  |
| Please confirm length of extension being requested |  |

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|  | | | | | | | | | | | | |  | | | | | | | | |
| Date full pay due to end | | | | | | | | | | | | |  | | | | | | | | |
| Date half pay due to end | | | | | | | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | |
| Has a referral been made to NSS Occupational Health Service? | | | | | | | | | | | | | | | | | | | | | |
| YES |  |  | | NO | | |  | |  | | If yes please ensure the relevant reports have been provided | | | | | | | | | | |
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| **SECTION 3 – SBU DIRECTOR TO COMPLETE** | | | | | | | | | | | | | | | | | | | | | |
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| It is important that the SBU Director (or authorised deputy) sign this form to acknowledge their understanding of the additional financial costs on the SBU budget if the application is approved. | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| Name | | |  | | | | | | | | | | | | | | | | | | |
| Designation | | |  | | | | | | | | | | | | | | | | | | |
| Signed | | |  | | | | | | | | | | | | Date | | |  | | | |
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| **SECTION 4 – HR ADVISER TO COMPLETE** | | | | | | | | | | | | | | | | | | | | | |
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| Please tick here to confirm that the case has been logged on Gemini | | | | | | | | | | | | | | | | | | |  |  | |
|  | | | | | | | | | | | | | | | | | | | | | |
| Please confirm the case reference number | | | | | | | | | | | | | |  | | | | | | | |
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| **SECTION 5 – RETURN TO WORK SUPPORT PANEL TO COMPLETE** | | | | | | | | | | | | | | | | | | | | | |
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| Date case reviewed by Return to Work Support Panel | | | | | | | | | | | | | | | |  | | | | | |
| Based on the information submitted to the panel, has the request been approved? | | | | | | | | | | | | | | | | | | | | | |
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| YES |  |  | | | NO | | |  | |  | |  | | | | | | | | | |
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| The findings of the panel are: - | | | | | | | | | | | | | | | | | | | | | |
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| **SECTION 6 – HR ADVISER TO COMPLETE** | | | | | | | | | | | | | | | | | | | | | |
| Please confirm that employee has been advised of the outcome of the panel and that any further actions have been communicated as appropriate. | | | | | | | | | | | | | | | | | | | | | |
| Employee, Line Manager and SBU Director informed in writing | | | | | | | | | | | | | | | | |  | | Date | |  |
|  | | | | | | | | | | | | | | | | | | | | | |
| Finance informed of the allowance payments (if application is | | | | | | | | | | | | | | | | |  | | Date | |  |
| approved) | | | | | | | | | | | | | | | | |  | |  | |  |
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| Please detail any other actions: - | | | | | | | | | | | | | | | | | | | | | |
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| Date case closed | | | | | |  | | | | | | | | | | | | |  | |  |