Adnoddau Ddynol
Human Resources

Sickness Policy

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Contents

1. Introduction 3
2. Statement of Policy 3
3. Expectations of the University 3
   3.1 The University expects employees: 3
   3.2 The University Expects Line Managers to 4
4. Fit Notes & Returning to Work 4
5. Phased Return 5
6. Sick Pay – Sickness Benefit Scheme 7
7. Pregnancy Related Sickness 7
   7.1 Antenatal Appointments 7
   7.2 Sickness Absence 7
   7.3 Pregnancy related sickness 4 weeks before due date 8
   7.4 Absence due to pregnancy related loss 8
8. Medical Appointments 8
   8.1 Standard Medical Appointments 8
   8.2 Cancer Screening, Minor Surgery and Disability Related Appointments 8
   8.3 Occupational Health Appointments and Healthcare Specialist Instigated Medical Appointments 9
   8.4 Elective treatment 9
   8.5 Fertility Treatment and IVF 9
   8.6 Gender Confirmation Treatment 10
9. Mental Health 10
10. On-going Medical Conditions 10
   10.1 Adjustments – Passport 11
   10.2 Menopause 11
   10.3 Menstrual Health 11
11. Sickness whilst on Annual Leave 11
12. Redeployment on the Grounds of Ill Health 12
13. Employee Assistance Programme 12
14. Occupational Health 12
15. Dying to Work Charter 13
16. Short Term Sickness 13
   16.1 Triggers 14
   16.2 Process 14
17. Long Term Sickness 15
18. Welsh Language 17

1. Introduction

This sickness absence policy is designed to support colleagues in returning to work after a period of sickness, and to ensure that the correct support is in place to enable effective working. It provides an outline of the University's expectations of both employees and line managers, guidance of best practice, and a clear process should further action be necessary.

The policy outlines management of both short-term and long-term sickness absences. The University recognises that not all absences fit into defined expectations and so recognises there may be times when absence management requires some flexibility to meet the needs of the individuals. Where this is the case, HR and/or Occupational Health will be consulted.

2. Statement of Policy

The University is committed to providing appropriate support to its employees.

The aim of this policy is to:

Provide employees and line managers with a consistent approach to recording and managing absences.

To create a supportive environment for employees to ensure they feel able and open to discuss any issues that may affect their ability to work.

Minimise sickness absence levels and facilitate employees returning to the workplace.

Ensure the University acts in a fair, reasonable, and consistent manner when dealing with sickness absence issues.

Ensure that no person is discriminated against due to any protected characteristics under the Equality Act 2010.

3. Expectations of the University

3.1 The University expects employees:

- To report sickness absence to their nominated point of contact by phone or message, as previously agreed with their line manager, as early as possible, or within an hour of their expected start time. Where an employee is unable to report an absence themselves due to the severity of the condition or situation a family member or friend can report on their behalf. As soon as reasonably possible, we would expect employees and line managers to have a direct conversation.
- Maintain contact with their line manager for the duration of their sickness – having regular welfare discussions, especially for absences over 3 days.
- Provide a fit note for any absences that last longer than 7 calendar days.
- Agree to participate in a return-to-work discussion upon their return. Should an employee return in advance of a fit note expiring they must ensure that they have completed a return-to-work.
- Discuss in confidence any health concerns that they have at an early stage, and the impact it may have on their ability to undertake their role.

Any absence which covers more than half of a working day will be classed as a full day sick or one episode. Where an employee is too unwell, to undertake normal duties then they will be classed as sick. The university does not consider partial duties from home as an appropriate measure to manage sickness. If there is a concern for spreading communicable disease (e.g. flu) then there should be a discussion with your line manager to agree whether working from home is appropriate.
If an employee fails to contact the University to report their absence, it will be classed as unexplained. Line managers are expected to undertake reasonable steps to contact the employee should this occur as part of the University duty of care. Employees should note, that where an individual fails to notify the University of their sickness absence or are unreasonably late in informing their department, payment of Occupational Sick pay may be withheld, and disciplinary action may be initiated for absence without leave.

3.2 The University Expects Line Managers to

- Be discreet, ensuring confidentiality to employees regarding any discussion relating to sickness absence or any health conditions generally.
- Treat employees with sincerity and sensitivity when discussing health issues.
- Record all sickness absence on ABW.
- Upload any Fit Notes to ABW upon receipt or send a copy of any Fit Notes received to HR upon receipt.
- Where an employee is off for three days or more maintain an agreed schedule of regular contact with employees while they are absent through sickness, undertaking welfare discussions to support in an employee's return to work.
- Organise and undertake a return-to-work discussion with employees upon the day they return, or the closest day possible.
- Liaise with HR in a timely manner where they feel that additional support may be needed, or adjustments are required.
- Undertake a duty of care to employees should they be absent without notice, making every reasonable effort to contact employees before treating an absence as unexplained.
- Ensure that your team have and are aware of a designated individual who they should contact when you are absent from work.

4. Fit Notes & Returning to Work

Any period of sickness that lasts for 8 calendar days or more requires a Fit Note from your Registered Healthcare Professional.
You will need to send a copy of your Fit Note to your line manager as soon as you receive it, to prevent any possible delays in payment of sick pay.
Should you feel well enough, on the expiry of your Fit Note you should return to work on your next working day. If you don't feel well enough, you should consult your healthcare professional for a new Fit Note and update your line manager as soon as reasonably possible.

The University will consider any recommendations provided within the Fit Note to support you as best we can. We may not always be able to support these

recommendations, but will always endeavour to do so, and provide feedback where we are not able to meet the recommendations. You and your line managers should not wait for an Occupational Health appointment to implement recommendations made in Fit Notes. Where possible, you should provide line managers with a copy of your Fit Note as soon as possible to ensure that there is sufficient time to implement any recommendations and agree return to work arrangements.

Line managers - A return-to-work interview should be conducted upon an employee's return and where adjustments have been made, an Adjustment Passport created (see 9.1). Line managers and employees should hold regular catch up's during the period of adjustment to ensure suitability, effective and that the employee is adjusting back to a working environment.

5. Rehabilitation and Phased Return to Work

The University is committed to supporting staff wellbeing and facilitating a safe and effective return to work following sickness absence. In addition to meeting its statutory obligations, the University will adopt a supportive and flexible approach to rehabilitation wherever reasonably practicable.

Under the fit note system, a medical practitioner may advise that an employee is either not fit for work or may be fit for work. A "may be fit for work" statement indicates that a return may be possible with appropriate workplace adjustments, such as amended duties, altered hours, or a phased return. Employees must discuss any such recommendations with their manager prior to returning. Where the recommended adjustments cannot reasonably be accommodated, the fit note will be treated as "not fit for work." A further certificate will not be required in these circumstances. In some cases, and at the University's discretion the University may request advice from OH on the phased return.

Phased Return
A phased return to work is intended to support rehabilitation by gradually increasing working hours and duties over an agreed period, normally not exceeding four weeks.

The GP note will recommend the duration and outline any restrictions or adjustments. The manager and employee will agree a structured plan, including working hours, duties, and weekly objectives. Progress will be reviewed weekly/or as agreed. Occupational Health can support with recommendations on the duration and outline of any restrictions. Any significant amendments to the plan must be agreed between the employee, manager, and where applicable Occupational Health. Where the employee is unable to resume full duties within the agreed timeframe, the manager will come to a view on whether the phased return will continue to be supported and seek advice from Human Resources, further advice may also be sought from Occupational Health. Consideration will be given to the reason for the absence.

Outcomes may include a short extension to the phased return, a temporary adjustment to working hours, temporary redeployment, or a return to sick leave supported by the appropriate medical certification. Where a sustainable return to work cannot be achieved despite these measures, the matter may be considered under the University's formal Sickness Absence and Capability Procedure, including consideration of a permanent adjustment to contractual hours where appropriate and redeployment.

The University may agree the phased return without a referral to OH.

Pay and Recording

During the first four weeks of a phased return, pay will normally be at full salary, inclusive of any Statutory Sick Pay entitlement. Any agreed extension beyond four weeks will normally be paid on a pro rata basis, unless otherwise agreed. Employees undertaking a phased return will be recorded as sick for Statutory Sick Pay purposes but not for occupational sick pay.

Managers must notify Human Resources when a phased return is agreed so that the arrangement can be recorded on the HR system. The manager should forward:

- The GP note stating the recommendation for the phased return
- A copy of the letter from the line manager to the employee setting out what has been agreed and how long for.

HR should also be informed of any changes to the agreed phased return to ensure attendance and payroll records remain accurate.

Review and Support

Managers will meet with employees on a weekly basis during the phased return period to review progress, discuss any ongoing support requirements and make adjustments to the phased return plan where appropriate.

The line manager must notify Human Resources when a phased return is agreed so that the arrangement can be accurately recorded on the HR system. HR should also be informed of any subsequent amendments to the phased return, including changes to the agreed duration, working pattern or duties.

Where an employee is unable to successfully complete a phased return or continues to experience attendance or capability concerns, managers should seek advice from Human Resources and follow the University's Sickness Absence Management Procedure and, where appropriate, the Capability Procedure. Further Occupational Health advice may also be sought where this would assist in determining appropriate support.

The Chief People Officer will approve any amendments to the above Policy statement.

6. Sick Pay – Sickness Benefit Scheme

Full details of the University's Sickness Benefit Scheme can be found here and should be reviewed in full when referring to sick pay. The Sickness Benefit Scheme provides full details of entitlement and statutory sick pay.
Where eligible, entitlement for Occupational Sick Pay is linked to continuous service as follows:

Months Service with the University	Full Pay (inclusive of statutory, where eligible)	Half Pay (plus statutory where eligible)
Up to 3 months	2 weeks	2 weeks
3 – 11 months	2 months	2 months
12 – 35 months	3 months	3 months
36 – 59 months (5 years)	5 months	5 months
60 months (five years) or longer	6 months	6 months

Employees will continue to accrue annual leave while on sick leave. Where pay is reduced, annual leave can be used in conjunction with sick pay to protect income.

7. Pregnancy Related Sickness

You should refer to the Maternity policy for information relating to Maternity Leave. The policy can be found here.

7.1 Antenatal Appointments

Maternity leave and time off for antenatal care is a protected right and will not be recorded or monitored as sickness absence.

Where possible appointments should be scheduled near to the start or end of a working day, though we recognise this may not always be possible.

Partners of expectant parents – who would be entitled to Paternity Leave are able to take time off for antenatal appointments to support expectant mothers. The University recognises that antenatal appointments may be stressful and so supports reasonable time off for these appointments over and above those permitted by law.

7.2 Sickness Absence

Absences during pregnancy which are not pregnancy related will be monitored and managed as any other absence.
All absences relating to pregnancy will be recorded as pregnancy related conditions and will not contribute to sickness absence.

7.3 Pregnancy related sickness 4 weeks before due date

If you are unable to work due to pregnancy-related sickness (as diagnosed by a medical practitioner) in the four weeks before your baby is due, your maternity leave will automatically start the day after your first day off.

If you are suspended from work for health and safety reasons, and your baby is due in less than four weeks, your maternity leave will start automatically.

7.4 Absence due to pregnancy related loss

In the difficult event of a miscarriage or stillbirth following your 24th week of pregnancy, you are entitled to maternity leave. Both you and your partner will be entitled to 2 weeks of parental bereavement in addition to your full maternity or paternity leave, this can be taken at the end of your agreed maternity leave dates. Please refer to the parental policy.

From the date of your first scan which confirms that you are pregnant, but before 24 weeks, if you experience pregnancy loss you will be entitled to request up to one week's recovery leave immediately following your loss, to allow time for physical and some mental recovery. This leave will not be classed as sickness absence.
We encourage all staff undergoing pregnancy loss to use the Employee Assistance Programme, Section 12, should they need it.

8. Medical Appointments

8.1 Standard Medical Appointments

Where possible standard medical appointments with your local doctor, dentists or opticians should be booked to minimise disruption to your working day. You should provide as much notice as possible of appointments to line managers and may be asked to provide evidence of appointments upon request. These appointments should be taken in your own time (annual leave/lunch break or flexibly in agreement with your line manager).

8.2 Cancer Screening, Minor Surgery and Disability Related Appointments

Time off for cancer screening (e.g., cervical, mammogram, prostate) and disability related treatment (e.g., rehabilitation, assessment, and treatment) will be with pay when requested within your normal working day. You may be asked to provide evidence of appointments upon request. Such absences should not be recorded and monitored as sickness absence but should be recorded under the relevant category within Pobl Aber People.

8.3 Occupational Health Appointments and Healthcare Specialist Instigated Medical Appointments

Time off will be given to employees to attend Occupational Health appointments arranged by the University's HR Department and where an appointment has been referred to a secondary healthcare professional, by your primary care provider or for continued ongoing monitoring. These appointments will be with pay when requested within your normal working day. Employees may be asked to provide evidence of appointments upon request. This type of appointments should not be recorded or monitored as sickness absence but should be logged under the relevant category on Pobl Aber People.

8.4 Elective treatment

Where treatment is elective and not required by the NHS or your healthcare provider, time should be taken as annual leave or flexitime. There may be some circumstances where this can be varied when covered by medical support or evidence. Managers and employees should seek advice from the Human Resources Department where this is the case.

8.5 Fertility Treatment and IVF

The University recognises that any fertility issues are difficult for all genders and may impact employees both physically and mentally.

Treatments for infertility should be treated as standard medical appointments, and line managers should be flexible in allowing time for appointments, as per standard medical appointments (7.1). Where ongoing treatment is determined necessary by your medical provider, the University would consider these appointments as healthcare specialist instigated (as per Section 7.3) and paid time off will be provided.

Where you are undergoing IVF, any sickness as a result of ongoing IVF treatment should be recorded as sickness absence, until such a time that you have completed the last part of the IVF process (Embryo transfer) and may be pregnant. At this point any sickness that is a result of pregnancy will not be recorded as sickness absence and will be recorded as pregnancy related sickness.

You are not obliged to inform the University that they are pregnant until 15 weeks prior to their due date, but without this knowledge the University cannot instigate any pregnancy related policy and, it may be useful to discuss this with your line manager.
We encourage all staff undergoing fertility treatments in any form to use the Employee Assistance Programme, Section 12, should they need it.

8.6 Gender Confirmation Treatment

Where you are undergoing gender confirmation medical appointments, such as hormone treatment, line managers should allow for flexible time off for appointments and treatment, as per standard medical appointments (7.1).
Where you are undergoing surgery for reassignment, the University will record this time as sickness absence and should be supported by a Fit Note for the required period of absence.
We encourage staff undergoing gender reassignment to use the Employee Assistance Programme, Section 12, should they need it.

9. Mental Health

Should an employee require time off due to a mental health issue, it is important that line managers take the matter seriously and be supportive to that individual. Absence due to mental health issues will be treated in the same way as other absences, see Long-Term (16) and Short-Term Sickness (15). Mental Health issues can be considered as a disability, where it has a long-term (whereby it last for or is likely to last for 12 months or more), effect employee's normal day to day activity, this is not just limited to work based activities. This will ordinarily have been diagnosed by a medical practitioner.

All mental health issues are personal to an individual and therefore one course of action may not be suitable for all staff members.

It is particularly important that line managers remain in touch with employees while they are absent from work due to mental illness and depending on the severity or need, discuss any adjustments that may be needed to facilitate a return to work. If you have any concerns about the best way to maintain contact with staff who have stress-related or other mental health conditions while they are absent from work, you can contact the HR Business Partners for advice. We encourage line managers to keep regular and relatively frequent contact with their staff.

We encourage staff to use the Employee Assistance Programme, Section 12, should they need it.

10. On-going Medical Conditions

Where an employee has a long-term or ongoing medical condition reasonable adjustments may be required to job roles, working environment or schedule. Where you have declared through Pobl Aber People, or to your line manager that they have a long term or ongoing condition line managers should create an Adjustment Passport with an employee. This may require an assessment by Occupational Health.

We acknowledge that some ongoing conditions can be protected within the Equalities Act 2010.

10.1 Adjustments – Passport

Should an Adjustment Passport be required, you and your line managers should meet to discuss your condition, to the extent that you feel comfortable to do so and discuss any reasonable adjustments that may be required to support you in the workplace.

The passport should be reviewed on an agreed basis to ensure that any reasonable adjustments made are suitable and are meeting your needs and University.

If an Adjustment Passport is in place and you move to a new role within the University, the passport should be passed to the new line manager with consent to allow for continued adjustments in the new role.

The passport will remain confidential to you and your line manager unless agreed otherwise, at which point it will only be shared with agreed personnel.

10.2 Menopause

Employees going through Menopause should refer to the Menopause Policy for guidance on how the University can support you best.
Line managers should allow for flexible time off for any medical appointments relating to treatment or support, such as hormone treatment, as per standard medical appointments (7.1).
We encourage, staff members going through Menopause to have open confidential discussions with their line manager to discuss if any reasonable adjustments are necessary to continue successfully in your role.
Where local adjustments are not sufficient an Occupational Health referral may be necessary, for an independent medical opinion.

10.3 Menstrual Health

The University recognises that menstrual health may impact employees on a cyclical basis.
Where employees raise that they may require an adjustment due to their menstrual cycle (e.g. Migraines, Endometriosis, very heavy bleeding), line managers and employees should meet to implement an Adjustment Passport, see paragraph 9.1.
Where local adjustments are not sufficient an Occupational Health referral may be necessary.

11. Sickness whilst on Annual Leave

Unfortunately, sometimes you may become unwell whilst you are on annual leave. Where your sickness results in the need for a Fit Note any annual leave covered by the time period of the Fit Note will be returned to your annual leave balance. We are not able to return annual leave balances where you are sick whilst on holiday and no Fit Note is provided.

12. Redeployment on the Grounds of Ill Health

Employees can be considered for redeployment:

- An employee has a long term illness or condition which affects their ability to perform their normal role effectively, after reasonable adjustments have been considered and all other options have been considered and;.
- Where it is recommended by Occupational Health that an employee is redeployed due to capability as a result of ill health and where that change of role is likely to substantially improve the levels of sickness absence.
- Redeployment will not usually be considered In cases of repeated short term absences.
- An assessment by Occupational Health may be required in advance of taking up any new positions as a result of redeployment.

13. Employee Assistance Programme

There may be times when anyone feels like they may need some additional support or someone to talk to. The Employee Assistance Programme (EAP) is available to all staff and offer support, counselling and guidance on a wide range of issues that may affect any of us at different times of our lives.

The service is confidential and can provide support on practical or emotional issues, such as wellbeing, family matters, relationships, debt, workplace issues and more. Should you feel that while you are unwell, you need some additional help, we strongly recommend that staff members take advantage of the EAP.

14. Occupational Health

Should there be a need to refer you to Occupational Health (OH), you will be given an appointment to speak directly to an assigned OH clinician, based upon who is most appropriate for you to see. We would recommend that OH referrals are made by line managers in conjunction with the employee, where this is not possible, employees are able to refer themselves.
Referrals can be made by completing the Occupational Health form, which can be found in the Forms section of the Human Resources webpages, then submitting to ochstaff@aber.ac.uk. All referrals are made with HR support.
The meeting with Occupational Health will discuss an individual employee's health issues with them in a confidential setting and undertake an assessment of how this may impact an employee's ability to return to or undertake work.

Occupational Health will then create a report with recommendations to allow the University to best support an employee in the workplace and/or facilitate a return to work. The content of this report will be discussed with the employee in advance of being shared with the University.

If as a result of the report an Adjustment Passport should be created to discuss and implement recommendations where appropriate/possible.

All OH reports are shared with HR to maintain on record, medical information is not provided as part of these reports and is held only by our OH provider in line with legislation for the retention of medical records. There may be a need to share an employees report with their line manager also to allow for working adjustments to be made, or if they have requested the referral.
If you feel you would like to refer yourself to some form of support, you should use the EAP programme which is a confidential service available to staff who need it. You can find more details on EAP here.

15. Dying to Work Charter

Aberystwyth University is signed up to the Dying to Work Charter, allowing individuals choice in how they want to proceed at work should they be diagnosed with a terminal illness.
The University recognises that terminal illness requires support and understanding and not additional and avoidable stress and worry. Terminally ill employees can be secure in the knowledge that the University will support them following their diagnosis and we recognise that, safe and reasonable work can help maintain dignity, offer a valuable distraction and can be therapeutic in itself. The University will provide employees with the security of work, peace of mind and the right to choose the best course of action for themselves and their families which helps them through this challenging period with dignity and without undue financial loss. Aberystwyth University supports the TUC's Dying to Work campaign so that all employees battling terminal illness have adequate employment protection and have their death in service benefits protected for the loved ones they leave behind.
If you are affected by terminal illness in anyway and feel you would like to refer yourself to some form of support, you should use the EAP programme which is a confidential service available to staff who need it. You can find more details on EAP here.
If you find yourself in this situation we recommend you speak to HR for support and advice.

16. Short Term Sickness

Short term sickness absences relates to any period of sickness where an employee is absent for less than four continuous weeks.

Triggers may not always result in the Short-Term sickness absences management programme being instigated, as this may not be appropriate, where this is the case, employees and line managers should create an Adjustment Passport as per section 9.1 Adjustments – Passport.

16.1 Triggers

Where an employee meets any of the below criteria, this will trigger the Short-Term Sickness absence management process detailed below.
3 periods of sickness absence in 6 months, of any duration.
4 periods of sickness absence in 12 months, of any duration.
Regular pattern of sickness absence (for example repeated Mondays).
Cause for concern.

16.2 Process

Where employees meet one or more of the above sickness absence triggers line managers should:

a) Undertake a conversation with employees to discuss the reasons for absence, create a support plan for attendance and discuss the impact of absence on their teams and department. This is an informal discussion, but a record will be made of the meeting, which will be shared with the employee and sent to HR to be held on your employee file. As part of the discussion, an Occupational Health referral may be requested by either party.
During the meeting, a review date will be set, any absences that occur within the review period could necessitate a move to Stage 1. Any additional triggers met could also necessitate a move to Stage 1.

b) Stage 1 Meeting – The first formal meeting will take place between the line manager and employee. Employees can be accompanied by a Trade Union representative or a workplace colleague, and HR can be present should it be requested.

   The meeting will discuss the reasons for the absence and may review or create a support plan for attendance. Should it be necessary, a referral can be made to Occupational Health. If a line manager or employee feels an Occupational Health referral is required, you do not need to wait for an absence trigger to put forward the referral.

   During the Stage 1 meeting, a review date will be set and any absences that occur within the review period following the meeting may necessitate a move to Stage 2. Any additional triggers met could also necessitate a move to Stage 2.
   A record will be held on file and used in a review period of 13 weeks. This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed and may be called upon for review should consistent short-term absences occur.

c) Stage 2 Meeting - The second formal meeting should review the discussion at Stage 1, discuss the reasons for further absence and create an updated support plan for attendance. If it would be beneficial, a referral can be made to Occupational Health.

This meeting will consist of the employee, line manager and an HR Representative. Employees can be accompanied by a Trade Union representative or a workplace colleague. During the Stage 2 meeting, a review date will be set and any absences that occur within the review period or within a 12-month period following the meeting could necessitate a move to Stage 3. Any additional triggers met could also necessitate a move to Stage 3.

A record will be held on file for a review period of 26 weeks. This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed and may be called upon for review should consistent short-term absences occur.

d) Stage 3 Meeting - The third formal meeting should review the discussion at Stage 1 and 2, discuss the reasons for absence and create an updated support plan for attendance.

   If there are no mitigating circumstances the outcome of this meeting may result in formal hearing, resulting in dismissal on the grounds of capability.

   This meeting will consist of the employee, line manager and an HR Representative. Employees can be accompanied by a Trade Union representative or a workplace colleague.

   A record will be held on their file for a review period of 26 weeks. This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed and may be called upon for review should consistent short-term absences occur, should you meet a trigger point within the review period you will repeat Stage 3 of short-term sickness management.

17. Long Term Sickness

Long term sickness absences relates to any period of sickness where an employee is absent for four continuous weeks or more.

The principle of long-term sickness management is that we are working together to facilitate a return to work. A minimum of three formal meetings will take place before any escalation, however more meetings can take place if a return-to-work date is foreseeable.

Where an employee is off for four weeks or more managers should:

a) Maintain continued contact with their employee – consideration should be taken when agreeing contact frequency.

b) Before the long-term sickness trigger of four-weeks of continuous absence concludes an informal wellness meeting should take place between a line

manager and employee. This meeting is an opportunity for both line manager and employee to discuss a return to work, any reasonable adjustments and if an Occupational Health meeting is required.

c) Stage 1 - If sickness continues for a period of six to eight weeks after your informal wellness meeting a first formal wellness meeting will take place. This will take place between the line manager and employee. Employees can be accompanied by a Trade Union representative or a workplace colleague, HR can be present should it be requested.
This meeting is an opportunity for both line manager and employee to discuss a return to work, any reasonable adjustments, review any measures discussed during your informal meeting and confirm if an Occupational Health meeting is required.

   A record of the meeting discussion will be held on file for 13 weeks.
This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed and record may be called upon for review should consistent absences occur.

d) Stage 2 - After the first formal meeting, should sickness continue for a period of six to eight weeks a second formal wellness meeting will take place. This meeting will consist of the employee, line manager and an HR Representative. Employees can be accompanied by a Trade Union representative or a workplace colleague.

   This meeting is an opportunity for both line manager and employee to discuss a return to work, any reasonable adjustments, review any measures discussed during your Stage 1 meeting and confirm if an Occupational Health meeting is required.

   A record of this meeting will be held on file for 26 weeks.

   This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed. The record may be called upon for review should consistent absences occur.

e) Stage 3 - While sickness continues, a third formal meeting should take place six to eight weeks following your second formal meeting. This meeting will consist of the employee, line manager and an HR Representative. Employees can be accompanied by a Trade Union representative or a workplace colleague.

   The meeting is an opportunity for both line manager and employee to discuss a return to work, any reasonable adjustments, review any measures discussed during your Stage 1 and Stage 2 meeting and confirm if an Occupational Health meeting is required.

   The result of this meeting, if no return-to-work date or plan is established, may be a formal hearing, resulting in termination or redeployment on the grounds of ill health.

A record will be held on their file for a review period of 26 weeks. This record will not be used for escalation outside the agreed review period but will not be removed after this date has elapsed. This may be called upon for review should consistent short-term absences occur, should you meet a trigger point within the review period you will repeat Stage 3 of long-term sickness management.

18. Welsh Language

In accordance with the Welsh Language Standardshttps://gov.wales/planning-inspectorate/welsh-language-standards that came into effect on 1 April 2018 employees have the right to use the Welsh language to
make a complaint
respond to a complaint or allegation and employees also have the right to use the Welsh language in meetings where they are the subject of: (c) complaints and allegations (or have made the complaint)
disciplinary proceedings
effective contribution scheme discussions
individual consultation meetings
A simultaneous translation service from Welsh to English will be provided at the meeting when the meeting cannot be conducted solely in Welsh.
The University has, in conjunction with its recognised trade unions, incorporated the above requirements into all relevant HR policy and procedural documents.