



Health and
Social Care

Guidance for Line Managers: COVID-19 / Long COVID Absence Support Process

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1.0 Introduction

The current priority is to support Line Managers ('LM') and employees who have been absent with ongoing COVID-19 symptoms.

As part of the emergency response to the current COVID-19 pandemic, HSC employers in conjunction with Department of Health (DoH) introduced temporary workforce guidance as part of its strategy to support the response to COVID-19. This guidance is in the form of FAQs published on the Public Health Agency website - [here](#).

To support infection control measures, DoH introduced a temporary enhanced provision of 'COVID-19 Sick Pay' to financially support staff, as a short term measure, who require time off work when they are ill with COVID-19. At the time the workforce guidance was introduced it was not anticipated that COVID-19 would lead to long term sickness absence, referred to as Long COVID.

To help clarify the wording and intent of the DoH guidance, the Regional HSC Absence Leads have produced the following guidance to support employers with the management of long term COVID-19 sickness absences.

To note: at the time of writing this guidance, the current COVID-19 Sick Pay arrangements remain unchanged in that employees who remain absent due to COVID-19 continue to be recorded as "Public Service Duties Paid" and this will not count towards absence triggers. This arrangement will remain under review by the Department of Health.

2.0 COVID-19 Definitions

Research suggests that most people can expect to recover from COVID-19 within 2 weeks or so, however it is becoming increasingly clear that this is not the case for everyone infected with coronavirus with one in ten people reporting symptoms for three weeks or more, and others suffering for months.

We are aware that within the HSC there is a number of staff who continue to suffer long term illness due to COVID-19 resulting in long term absence from work or several periods of intermittent absences from work.

Individuals experiencing Long COVID are likely to suffer from a range of symptoms. For many, Long COVID presents as a relapse of symptoms whilst others struggle with a single symptom. At this early stage, the long term impacts of COVID-19 are not fully understood; particularly for cases of severe COVID-19 illness. Further research is required to better understand the impacts and treatment options.

The Society of Occupational Medicine provides Clinical definitions for the initial illness and long COVID at different times:

- **Acute COVID-19:** signs and symptoms of COVID-19 for up to 4 weeks
- **Ongoing Symptomatic COVID-19:** signs and symptoms of COVID-19 from 4 to 12 weeks
- **Post COVID-19 Syndrome:** signs and symptoms that develop during or after an infection consistent with COVID-19, which continue for more than 12 weeks and are not explained by an alternative diagnosis.

Those suffering from Acute COVID-19 will have this confirmed by a test, those suffering from ongoing symptomatic COVID-19 or Post COVID-19 syndrome will need to have this confirmed by a Doctor and/or Occupational Health (OH) and it should be recognised that some staff with long COVID may never have had a positive COVID test .

In recognition of the challenges that Long COVID presents, the aim of this guidance is to support the effective management of sickness attributable to Long COVID and facilitate the [return of individuals](#) back to the workplace, where possible.

3.0 Key Principles

The following principles have been developed to support employers in managing Long COVID sickness absences. Where individuals wish to have the support of their Trade Unions representative, this will need to be facilitated.

- **Risk Assessments:** Ensure individual [risk assessments](#) are undertaken and regularly reviewed.
- **Occupational Health:** Securing occupational health advice is central to the management of individual cases and should be sought as early as is reasonably practical. OH advice will guide conversations between the individual and the employing organisation and help to manage expectations in relation to what is and is not possible.
- **Phased Return to Work:** Should be utilised to support individuals to work towards fulfilling all their duties and responsibilities. A flexible approach will be required, specifically to extending a [phased return](#) period for longer than a standard policy allows. This can include the exploration of modified shifts, reduced and flexible hours, etc.
- **Reduced or Amended Duties:** Explore how the individual's existing duties could be reduced or amended (temporarily or permanently) to facilitate a return to work. Conversations to explore how duties may need to be adapted to allow individuals to work from home for a specified period may also be required.

- **Redeployment:** To support the retention of staff, redeployment on a temporary or permanent basis may need to be considered. This should be seen as an alternative to ill health retirement.
- **Rehabilitation:** Identify appropriate treatments and interventions to support staff to return to work at the earliest opportunity. In relation to Long COVID this includes the option to refer individuals to [rehabilitation](#) and [Long COVID Clinics](#) to support the management of their symptoms, both physical and psychological.
- **Representation:** Employees should be advised of their right to be accompanied by a trade union representative or workplace colleague.
- **Equality Considerations:** As defined by the Disability Discrimination (NI) Act 1995, an individual is considered to have a disability if they have a physical or mental impairment which has a substantial and long-term detrimental impact on their ability to carry out normal day to day activities, which has or is likely to last 12 months. Long COVID is still a new illness and it may take time to understand it fully. It can however affect a person's day to day activities; can last or come and go for several months; may be characterised by variability of and diurnal variation of symptoms and/or cause other impairments. Employers are encouraged to focus on the reasonable adjustments they can make rather than trying to determine if a staff members condition is a disability under the Disability Discrimination (NI) Act 1995.

As well as disability, employers should be careful to avoid other types of discrimination when considering Long COVID given that Long COVID has been found to more severely affect older people, ethnic minorities, women and those with pre-existing health conditions or disabilities.

- **Ill Health Retirement:** The benefits of the [HSC Pension Scheme](#) should be made available to individuals to ensure they have all the necessary information to make informed choices. Provisions within the Scheme can be used as a mechanism to support individuals who, despite best efforts of both parties, are not able to return to work in any capacity. Where conversations of this nature take place, the involvement of the individual's trade union representative, where requested, should be facilitated.

4.0 Support Process for Absent Staff

HSC Employers are encouraged to apply the principles for managing absence as set out in their sickness management policies/procedures when they are managing COVID-19 absences.

The advice of occupational health experts will help support conversations between individuals and line managers in assisting a safe and smooth return to the workplace. This should include consideration of any recommended [reasonable adjustments](#).

Each case will need to be managed in a supportive and sensitive manner in recognition that there is a no 'one size fits all' approach and in recognition that the individual will undoubtedly be feeling anxious, or may in fact be suffering from COVID anxiety, with regard to their altered abilities. A 'bespoke' or individually tailored approach should apply to the management of Long COVID absences. Open communications are key to working with staff to agree a route back to employment, where appropriate.

The below sets out the overall process for supporting COVID-19 / Long COVID absences at key stages going forward.

4.1 Step 1: Initial Support [within the first 10 to 29 days of absence]

A staff member unfit to return to work after the 10 day isolation period due to Acute COVID symptoms should remain recorded as 'Public Service duties Paid' on HRPTS and their ongoing absence highlighted to HR.

It is important that LM's support their staff at this early stage, some of our staff may be fearful or be overwhelmed by the impact of contracting COVID-19 / their COVID-19 recovery. It is imperative that LM's are compassionate, empathetic and focus on recovery at this point in time and stay in touch with their staff through meaningful, supportive communication.

An Occupational Health (OH) telephone advice line for managers and staff is available by calling 02895363875 to enable the provision of wellness support and or clinical intervention.

The staff members LM should contact the staff member from a wellbeing perspective to:

- ask the staff member how they are feeling and for an update on their condition.
- to enquire about the medical advice and support the staff member is receiving and to check if they require any specific supports
- to advise that a GP fit note is required to support the ongoing absence to obtain additional information about the absence including the specific reason for absence and fit note expiry date.

If the absence is likely to continue, the LM should ensure the staff member understands that they are required to continue following normal sickness absence reporting processes. In addition, the staff member will be asked to confirm if they have technology to access a conference call to attend a virtual attendance meeting (if the absence continues to this point) or would prefer a telephone call.

The LM should continue to have regular supportive discussions with the staff member to ensure that they are receiving help from their GP, are signposted to the appropriate resources and to discuss any adjustments that could be made to allow the staff member to return to the workplace.

Please refer to [Appendix 1](#) for further information on available resources.

4.2 Step 2: Follow Up / Wellbeing Check-In [between 4 – 8 weeks]

If the staff member remains unfit for work due to COVID, the LM will contact that staff member to conduct a wellbeing check-in call, with the staff member.

As part of the check-in call the following will be discussed:

- How the staff members recovery is progressing and any treatment or developments that may impact on the timescales for their return to work;
- Any medical advice or information that the staff member wishes to share (e.g. from an Occupational Health Service)
- Any workplace adjustments which would support their return to work
- Medical certification requirements for pay purposes
- Annual leave entitlement
- Update the staff member on any workplace developments
- Any other relevant points

In accordance with the Attendance Management Policy, a referral will be made to OH. This should be discussed with the staff member.

Please link in with the Attendance Management Team in BSO Human Resources when processing an OH referral. General OH advice is also available by calling 02895 040401 to enable the provision of wellness support and or clinical intervention. For any COVID-19 related queries, the Occupational Health Covid-19 helpline number is 02896 157222.

4.3 Step 3: Referral to Occupational Health

After 4 weeks where no return to work date has been established, a management referral to OH should be undertaken.

Management referrals should include all relevant information regarding the staff members COVID related absence and details of the following:

- Confirmation of COVID infection and possible long COVID symptoms (even if provisional diagnosis) by GP/Hospital/specialist.
- As much factual background information as known regarding history, symptoms reported and advice/treatment received to date (if known).
- Any other relevant health matters which may be impacting on recovery/return to work.

- Details of any adjustments or support measures which have been considered prior to referral.

LMs should continue to follow the normal process for support on completing OH referrals.

4.4 Step 4: Occupational Health Appointment

On receipt of the referral, OH will triage the staff member and where appropriate, will arrange an appointment with the staff member to discuss the referral and their ongoing COVID absence. Following the appointment, OH will advise on the staff member's fitness to work status and where applicable, recommend any adjustments required. OH will also signpost the staff member to any appropriate resources.

Where appropriate, the staff member will be assessed in the Long COVID Clinic to identify an individualised, holistic recovery plan to enable them to return to work and/or remain in work.

OH will provide an updated report to the LM and HR Representative regarding the outcome of the assessment, the staff members fitness to work, any reasonable adjustments to be considered and a timescale for review (if applicable).

4.5 Step 5: Attendance Meeting and Support [12 weeks]

If the staff member remains unfit for work due to ongoing post COVID symptoms, the LM will arrange an attendance meeting to discuss the staff member's ongoing absence from work in accordance with the Attendance Management Policy.

If the staff member continues to be unfit for work then further guidance from OH should be sought.

4.6 Step 6: Ongoing Attendance Meetings

If the staff member continues to be unfit for work then further Attendance Meetings and Occupational Health appointments should be arranged to continue to support the employee with the ultimate aim of supporting a return to work, where possible.

4.7 Step 7: Ill Health Retirement / Termination

The benefits of the [HSC Pension Scheme](#) should be made available to staff members to ensure they have all the necessary information. Provisions within

the scheme can be used as a mechanism to support individuals who, despite best efforts of both parties, are not able to return to work in any capacity.

Termination of the contract of employment should only be considered if absence has become unsustainable, when all options to support a return to work have been explored and where there is evidence from OH that a return to work within the organisation cannot be accommodated due to ill health. Advice and guidance should be sought from HR and the process managed in accordance with the HSC employers Attendance Management procedures.

Ill health retirement may be applicable where an employee contributes to the HSC Pension Scheme. Ill health termination will apply to those who do not contribute to the HSC Pension Scheme, or are over the normal retirement age.

5.0 Timeline to Support COVID-19 / Long COVID



Working together



Excellence



Openness & Honesty



Compassion

6.0 Appendices

6.1 Appendix 1: COVID-19 / Long COVID Resources & Supporting Information

Recovering from long COVID can be a lengthy process and staff members will need to be supported to recover at their own pace ensuring that they do not relapse. In addition to the above support guidance, line managers can also support staff members with ongoing post COVID symptoms by:

- Educating yourself on the long-term effects of COVID-19 to better understand what your staff members are experiencing to help you to support them: [Long-term effects of coronavirus](#)
- Ensuring you regularly access and review the Regional Frequently Asked Questions for staff regarding employment related issues which includes sickness absence. The questions and answers are regularly reviewed and updated: [Questions and answers for HSC staff | HSC Public Health Agency \(hscni.net\)](#)
- Reviewing the HSC Regional Workforce Wellbeing Network materials to support you and your team members:
 - [Staff Recovery and Wellbeing – Transforming HSC for the future](#)
 - [HSC Workforce Wellbeing Network – Bridge to Recovery](#)
 - [COVID-19 Advice Line](#)
- Signposting the staff to the Employee Assistance Programme Inspire for counselling and support services: Freephone telephone support line - 0808 800 0002 and Support Hub: www.inspiresupporthub.org
- Sharing the below Recovery Resources and Information with the employee:
 - [NICE Guidance](#)
 - [Supporting your recovery after COVID-19](#)
 - [Digital Supports for Long COVID](#)

