

# APPLICATION OF SPECIAL LEAVE & FLEXIBLE WORKING HOURS SCHEME

## GUIDANCE FOR MANAGERS

### 1. APPLICATION OF THE POLICY

- 1.1 The Leave for Family Care Purposes Policy sets out a range of Special Leave provisions for those employees required to provide support for a family member and/or dependant. To assist managers to apply the policy and ensure consistency the following document sets out additional detail on the circumstances under which special leave should be applied and also confirms how such necessary absences should be managed in terms of flexi-time arrangements.
- 1.2 The leave for Family Care Purposes Policy lists the following reasons for absence under the heading of Special Leave:
- Leave for the planned healthcare of a young child
  - Special leave to care for an ill dependant
  - Special leave to care for a seriously ill dependant
  - Bereavement Leave
- 1.3 The Flexible Working Hours Scheme describes authorised absences during core-time under the heading of Special Leave as *'preventative medical/dental appointments and other such appointments where absence during core-time is considered to be unavoidable'*.

### 2. HOSPITAL AND OTHER MEDICAL APPOINTMENTS

- 2.1 Employees should make every effort to arrange hospital, doctor and other medical appointments out with their normal working day or out with core time.
- 2.2 Employees should be prepared to provide their line manager with evidence of medical appointments (e.g. appointment card or letter confirming appointment details). Where a full day absence or half day absence is required, the employee should be able to demonstrate that such a period of absence is reasonable in the circumstances.

#### **Reasonable time off to attend Hospital and Other Medical Appointments**

- 2.3 While employees are expected to arrange medical appointments in their own time, it is recognised that it is not always possible in the case of hospital appointments. Where employees are unable to make an appointment in their own time and have provided their line manager with evidence of the appointment the employee should be granted reasonable time off to attend the appointment inclusive of the time required to travel between appointment location and workplace.
- 2.4 For employees on flexi-time and working a standard working week, a full day absence to attend unavoidable appointments would be credited as 7.2 hours and a half day absence as 3.6 hours. Where an employee's normal working day is more or less than 7.2 hours then the individual would be credited with their normal working hours (as defined on the flexi-system) for a full day absence and 50% of this time for a half day absence.

- 2.5 The Flexible Working Hours Scheme states that for absences of less than half a day, where the absence starts after the employee has completed a period of work and finishes before the end of the half day period, the actual hours of absence will be recorded (and credited). However in cases of special leave, where the employee has not completed a period of work prior to the start of their absence, the Scheme does provide scope for the Depute Chief Executive to decide whether the time credited is to be granted with reference to the start or finish time of normal office hours or those of core time. In any event the lunch period will be regarded as 1200 – 1400 hours.
- 2.6 In the interest of promoting consistency for absences of less than half a day and where the employee has not completed a period of work before the absence, the norm will be for employees to be credited only with the hours they are absent during core time unless the Depute Chief Executive's discretion above applies.

### **Examples**

1. Hospital Appointment at 11 am – Employee starts work at 8.30am, leaves for appointment at 10.30am and returns at 12.30pm. Employee is credited with time actually worked (2hrs) and absence during core hours (1.5hrs). Total flexi credit for am period = 3.5 hours.
2. Hospital Appointment at 11am – Employee does not report for work prior to the appointment due to the distance to the appointment location and necessary travel time. Employee clocks in at 12.30pm. Employee is credited with core time only. Total flexi credit for am period = 2 hours.
3. Hospital Appointment at 3pm – Employee leaves for appointment at 2.30pm and does not return. In addition to time actually worked, employee is credited for absence during core hours between 2.30pm and 4pm.
4. Hospital Appointment at 3pm – Employee leaves for appointment at 2.30pm and returns to work at 4.15pm. In addition to the time actually worked, employee is credited for all hours absent between 2.30pm and 4.15pm.

### **Employees not on flexi-time**

- 2.7 Employees not on flexi-time should be given necessary time off to attend unavoidable appointments during the working day and the full period should be given as paid leave.
- 2.8 Where a shift workers unavoidable appointment would result in absence during an allocated shift, it would be reasonable that their manager re-allocates them an alternative shift to avoid absence during working time and interruption to essential services.

### **Series of Appointments**

- 2.9 In circumstances where an employee was required to attend a series of medical appointments it would be reasonable to agree a 50/50 split with the employee. For example, if an employee was required to attend a series of 6 appointments, 3 of these would be granted as special leave and managed as detailed in paragraphs 2.3 – 2.8 and the other 3 would require to be taken as annual leave/flexi/TOIL/unpaid leave. A series of appointments is defined as a planned block of more than 3 appointments.

### **Management Referrals**

- 2.10 Where appointments for physiotherapy or counselling are the result of management referral to the councils occupational health provider the employee should be given time off to attend all such appointments. Employees on flexi-time should be credited with all reasonable time required to attend and travel to and from the appointment, not limited to core time only.

### **Self Referrals**

- 2.11 When self referring for physiotherapy or counselling with the councils occupational health provider, employees should make appointments within their own time where possible. Where this is not possible, absences should be managed as per the arrangements outlined in paragraphs 2.3 – 2.8. Where a series of appointments is required the provisions outlined in paragraph 2.9 also apply.

### **Elective Treatments**

- 2.12 Appointments for treatments considered to be elective, for example cosmetic surgery, laser eye treatment would require to be taken during an employees own time using annual leave/flexi/TOIL. If an employee was unfit to attend work following elective treatment they would be considered to be on sick leave and should follow the normal sickness absence procedures.

### **Emergency Appointments**

- 2.13 GP and dental appointments should normally be made in the employee's own time. However, urgent/emergency medical or dental treatment should be treated in a similar way to hospital appointments as detailed in paragraphs 2.3 – 2.8 in order to avoid any unnecessary delay in employees receiving treatment.

### **Preventative Medical Examinations**

- 2.14 An employee is entitled to 'reasonable' time off without loss of pay to attend preventative medical examinations subject to providing evidence of attendance. This will include the day of the appointment and where necessary, up to 1 day prior to an examination and/or following an examination to prepare for and/or recover subject to provision of medical evidence that time off was required. Any additional time off out with these provisions will be regarded as sickness absence. Preventative medical examinations might include necessary vaccinations, screening appointments etc.

## **3. LEAVE FOR PLANNED HEALTHCARE OF A YOUNG CHILD**

- 3.1 The policy makes provision for up to five working days paid leave and five working days unpaid leave, in the first five years of a child's life, in order to accompany the child to: post-natal care clinic(s); and/or visit a medical practitioner for the purposes of preventative medicine (eg inoculations).
- 3.2 It would be reasonable to manage an employee's absence from work for these purposes in the same way as detailed in paragraphs 2.3 – 2.8. Time off for planned healthcare of a young child should not be pro-rated for part-time employees.

#### **4. SPECIAL LEAVE FOR CARE OF AN ILL DEPENDANT**

- 4.1 The policy makes provision for up to five working days paid Special Leave, and thereafter, up to ten working days unpaid Special Leave in any 12 month period to care for an ill dependant who is reliant upon the day-to-day care of an employee.
- 4.2 A dependant is defined as an adult or child who is dependant upon the day-to-day care of an employee at the time of an application for Special Leave. Therefore in addition to a young child or elderly adult who is dependant on the employee on a daily basis, the provisions for special leave would also apply to adults who become dependant on the care of the employee due to ill-health (eg husband, wife, partner).

##### **When an Ill Dependant attends Hospital**

- 4.3 Where an ill dependant requires to attend hospital there are a number of factors to be considered when determining the application of the special leave policy:
- i) whether the dependant is an adult or a child
  - ii) the age of the child
  - iii) the seriousness of the operation
  - iv) the availability of other carers to take some of the responsibility
  - v) whether the care of the dependant is transferred to the hospital
- 4.4 Where an ill dependant is an adult and admitted to hospital it would be viewed that the care of the ill dependant had transferred to the hospital and therefore special leave under the above provisions would not be granted.
- 4.5 Where an ill dependant is an adult and is receiving treatment that prevents them from travelling to and from hospital appointments alone, the employee will be given reasonable time off to assist them in travelling to and from hospital.
- 4.6 Where the ill dependant is an adult and is released from hospital but continues to require day-to-day care then it would be appropriate to apply the provisions of the policy.
- 4.7 Where the ill dependant is a child and is admitted to hospital then the age of the child would be considered in the application of the policy. It is reasonable to conclude that a child who is age 16 or under (18 in the case of a disabled child) and being accompanied by an employee (parent) is dependant on the care of that employee in such circumstances. Similarly if a child requires to attend a hospital appointment or a series of hospital appointments they would be considered dependant on the care of an employee (parent).
- 4.8 The special leave provisions should not be applied however, when normal childcare arrangements are disrupted, for example due to the ill health of the main carer. In such circumstances the employee should take any necessary leave as annual leave/flexi/TOIL as appropriate.

#### **5. REASONABLE TIME OFF FOR PART-TIME EMPLOYEES**

- 5.1 Paid special Leave should be applied on a pro-rata basis for employees who work other than a standard 5 day week. Therefore the normal 5 days paid special leave within a rolling 12 month period will be pro-rated according to the individual employees working pattern eg an employee who works 5 half days per week will be

entitled to 5 half days paid leave and an employee who works 3 full days per week will be entitled to 3 full days paid leave.

- 5.2 Unpaid special leave, 10 days in the case of illness of a dependant and up to 12 months in the case of serious illness of a dependant should not be pro-rated.

## **6. TEACHERS AND OTHER TERM TIME EMPLOYEES**

- 6.1 It is noted that teaching staff and other term time employees would not have the same flexibility as other staff to use annual leave for necessary absences as detailed above. Necessary absences for such employees should be managed locally.

Human Resources  
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