

Guidelines for managing incapacity due to ill health

(Definitions for terms that are italicised in the text are provided at the end of the document.)

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HEMIS classification	
Aim	To set out the guidelines that are currently applicable to assist with managing incapacity due to ill health
Type of document	Guideline
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Institutional functionary (curator) responsible for this policy	Chief Director: Human Resources
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Approved by	
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1. Purpose

The purpose of this document is to provide key stakeholders with guidelines for managing incapacity due to ill health, and to ensure that such management complies with the procedures prescribed by Stellenbosch University's appointed provider of income security benefits.

Effective management of incapacitated employees requires a multidisciplinary approach involving various stakeholders. It is essential that disability applications be timed and managed effectively to ensure a positive outcome. The University's appointed insurer has the final mandate to approve any disability application.

If the process is not managed timeously, it could place affected employees in financial difficulty, with no more sick leave available (see <u>benefits document for sick leave entitlement</u>) and potentially having to take unpaid leave at a time when they cannot afford to do so. The rule of thumb is always to initiate an ill-health process as soon as any of the red flags in 2.2 below are raised. This will help ensure that the application is dealt with both within the available sick leave period and the prescribed periods set by the insurer to allow for effective reintegration.

The prolonged accommodation of ill-health employees can cause the insurer to reject a potential disability application. (In 2022, accommodation was capped at three months from last date of active work.) All potential disability cases must be submitted to the insurer within three months of the disablement. Accommodation should only be considered if the ill health is of a very short duration, or where the University can accommodate the employee in a new role for an indefinite period.

2. Process and responsibilities of key stakeholders

2.1 Key stakeholders

The process may be initiated by any of the following stakeholders:

- Line manager
- Human Resources practitioner (HRP)
- Campus Health Service (CHS)
- Employee

2.2 Indicators of possible ill health

The presence of any of the following indicators should raise red flags:

- Continuous sick leave taken for 14 days or longer
- An increase in regular sick leave taken
- An unexplained decrease in productivity that could be the result of a chronic medical condition

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- A continuous decline in performance
- The need for workplace accommodation for more than a month

Discussions between line management, the employee and Human Resources (HRP/Employee Wellness) should be arranged as soon as possible.

2.3 Process

- 2.3.1 A red flag is noted by the line manager, HRP, employee or CHS.
- 2.3.2 The possibility of disabling ill health is communicated to the wellness officer by any of the stakeholders.
- 2.3.3 The wellness officer assesses the merits. If needed, the wellness officer refers the case to the Employee Wellness Programme (EWP) or Occupational Health (OH) (or both) and alerts the incapacity officer.
- 2.3.4 If needed, either the wellness officer or OH arranges an occupational therapy assessment (functional capacity evaluation or workplace reintegration).
- 2.3.5 The need for workplace accommodation is communicated to the line manager via either EWP or OH.
- 2.3.6 If the possibility of a disability exists, the incapacity officer distributes the necessary forms and submits the completed forms to the insurer.
- 2.3.7 The outcome of the application (approved or rejected) is communicated to the HRP and OH via the incapacity officer.
- 2.4 Responsibilities of the various stakeholders

2.4.1 Line managers

- Ensuring that employees' sick leave is captured timeously, with medical certificates where applicable
- Informing the HRP when a staff member has taken sick leave for more than 14 days consecutively
- Managing work performance, including referral to EWP for first-line counselling
- Identifying employees presenting with any of the red flags mentioned in 2.2 above
- Facilitating workplace adjustments where required and possible. The recommended workplace adjustments will be communicated by OH or the wellness officer.
- Assisting in completing required documentation to manage ill health

2.4.2 Human Resources practitioners

- Regularly preparing absence reports for line managers
- Consulting with other practitioners on alternative work placement, where needed

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- Timeously reporting potential applications to EWP. This should be done at the first sign of the red flags of potential extended sick leave or prolonged workplace accommodation.
- Assisting in completing required documentation to manage ill health
- Where the insurer rejects an application, facilitating potential redeployment or termination of service due to incapacity, in consultation with the Employee Relations Office

2.4.3 Employee Wellness Programme

- Serving as custodian of the case management process
- Initial discussions with line manager after obtaining a referral
- Being the first line of decision-making to refer case to OH or for further wellness interventions
- Sending potential disability application to incapacity officer based on preliminary OH assessment
- Potentially requesting OH to evaluate functional capacity
- Logging all cases on the prescribed database
- Assisting OH to perform scheduled follow-ups and continuous monitoring

2.4.4 Occupational Health

- Serving as second line of preliminary assessment of potential disability cases
- Liaising with treating health professional(s) to establish the extent and duration
 of the incapacity, prognosis of return to work, and probable maximum medical
 improvement
- Potentially requesting treating health professional(s) to evaluate functional capacity or assist with return-to-work reintegration
- Making fitness-for-work decisions

2.4.5 Incapacity officer

- Alerting the University-appointed insurer of a potential disability application
- Forwarding the applicable forms to the employee and relevant stakeholders to complete
- Assisting line managers in completing required documentation for an incapacity application
- Submitting the correct and fully completed documents to the insurer
- Serving as the University's official liaison with the insurer
- Communicating the outcome of the application to the employee and relevant stakeholders
- Liaising and following up with the insurer, where needed

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2.4.6 Employee

- Capturing sick leave and medical certificates on the Oracle system
- Discussing any possible redeployment or initiating the disability application process if any of the red flags affect work productivity
- Assisting the incapacity officer and insurer in completing and supplying the required forms and supporting medical documents for the disability application

3. Definitions

Below are definitions of some of the key terms and concepts used during the ill-health process:

- 3.1 Chronic ailments or diseases
 - Ailments or diseases that are diagnosed as long-term health issues, such as diabetes, asthma, major depressive disorder and rheumatoid arthritis
- 3.2 Disability in the context of employee benefits
 Stellenbosch University's current disability benefit is a monthly income replacement benefit of 75% of cost to company, applicable from when the insurer starts deeming the employee as disabled for work, but capped at cost to company minus income tax as calculated by the insurer. A three-month waiting period applies from the date of disability to the first payment. Employees classified as disabled for work by the insurer receive the benefit via the University's payroll.
- 3.3 Disability in the context of employment

A physical or mental impairment, whether long-term or short-term, that substantially limits an employee's ability to enter the University's employ or advance in the workplace at the University

3.4 Impairment

A significant deviation in, or physical or functional loss of, any body structure or function in an individual with a health condition, disorder or disease

- 3.5 Incapacity
 - An employee's failure or inability (or both) to perform to the standard set by the University
- 3.6 Incapacity due to ill health
 Where incapacity as defined at 3.5 is due to illness or injury
- 3.7 Sick leave

Employee absence due to illness or injury as permitted by the employer in accordance with the stipulations of the contract of employment

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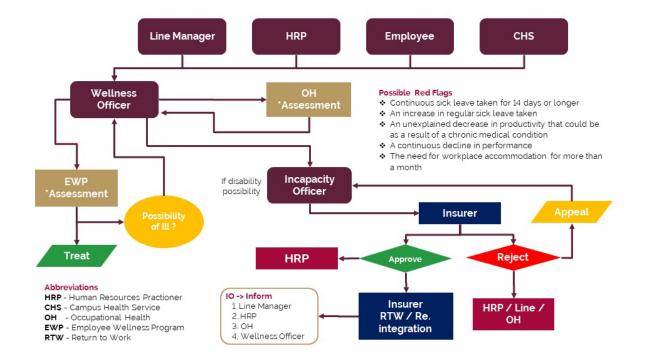
3.8 Workplace accommodation

An adjustment to a job or work environment that enables an individual with a disability or impairment to perform their duties. Accommodations may include specialised equipment, modifications to the work environment, or adjustments to work schedules or responsibilities.

4. Supporting documents and links

- 4.1 Annexure A: Flow diagram of the process
- 4.2 **Benefits Policy**
- 4.3 <u>Infographic of the insurer's process</u>

Annexure A - Disability Claim Flow Diagram



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