PURPOSE
This policy ensures that sick leave benefits are appropriately used and applied consistently and equitably across the College.

SCOPE
This policy applies to all full-time Faculty, Support and Administrative employees. All parties are expected to act in good faith, cooperate and work collaboratively in the application of this policy.

DEFINITIONS

<table>
<thead>
<tr>
<th>Word/Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit Year</td>
<td>Administrative Staff→ July 1 to June 30</td>
</tr>
<tr>
<td></td>
<td>Academic Staff→ September 1 to August 31</td>
</tr>
<tr>
<td></td>
<td>Support Staff→ September 1 to August 31</td>
</tr>
<tr>
<td>Disability</td>
<td>A medical impairment/restriction due to a non-occupational illness/injury which prevents the employee from performing the essential duties of his/her own occupation.</td>
</tr>
<tr>
<td>Employee and Family Assistance Program (EFAP)</td>
<td>An employee health service program designed to assist in the identification and resolution of a broad range of employee personal concerns. These programs deal with situations such as mental health, substance abuse, marital problems, family troubles, financial or legal concerns, stress and domestic violence, as well as health education and disease prevention.</td>
</tr>
<tr>
<td>Functional Abilities Evaluation (FAE)</td>
<td>An objective evaluation, completed by a health care professional, of an employee’s ability to complete the activities that simulate the physical demands at work, such as lifting, carrying, pushing, pulling, bending, squatting, standing, sitting, reaching, grasping, etc. If required, this evaluation will be arranged and paid for by the College, or insurance provider, to determine the severity, abilities, restrictions and limitations of the individual as it is related to the essential duties of the job.</td>
</tr>
<tr>
<td>Word/Term</td>
<td>Definition</td>
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<td>-----------------------------------------------</td>
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<tr>
<td>Independent Medical Evaluation (IME)</td>
<td>An objective, third party assessment of an employee’s current medical status. If required, this evaluation will be arranged and paid for by the College, or insurance provider, to determine the cause, severity, abilities, restrictions and limitations of the individual as it relates to the essential duties of the job.</td>
</tr>
<tr>
<td>Long-Term Disability (LTD)</td>
<td>A benefit that provides partial income replacement after 130 days if/when approved by the Insurer for those employees who have been unable to perform any of the regular duties of their job and continue to be totally disabled at the time of application for LTD benefits.</td>
</tr>
<tr>
<td>Medical Documentation</td>
<td>Medical documentation is used to assess and adjudicate claims for sick leave/short-term disability benefits and to develop appropriate return to work plans. A doctor’s note does not automatically constitute approval for sick leave/short-term disability benefits.</td>
</tr>
<tr>
<td>Non-Occupational Injury/Illness</td>
<td>A personal injury or an illness that occurs outside of the workplace, and is unrelated to the course of employment.</td>
</tr>
<tr>
<td>Occupational Injury/Illness</td>
<td>An injury or illness that occurs as a result of the work duties or the environment, and occurs while in the course of employment.</td>
</tr>
<tr>
<td>Return to Work (RTW)</td>
<td>A return to the employee’s substantive position following a medical absence/period of sick leave.</td>
</tr>
<tr>
<td>Sick Leave/Short-term Disability (SL/STD)</td>
<td>Time-off work (either a full or partial day) when the employee is unable to perform the duties of his/her job due to medical reasons. This is a self-insured benefit that is paid for by the College and is available to employees as defined in the Collective Agreement or Terms and Conditions of Employment. Sick Leave &amp; Short-Term Disability are interchangeable terms for the purpose of this policy.</td>
</tr>
<tr>
<td>Third Party Provider</td>
<td>A third party insurance provider that has experience reviewing disability claims that has been contracted by the college to provide advice on complex and long-term claims.</td>
</tr>
</tbody>
</table>
1. Algonquin College is committed to maintaining an inclusive workplace, and providing support for employees as required under the applicable policies and procedures, benefit plans, collective agreements, relevant legislation such as: The Ontario Human Rights Code, the Workplace Safety and Insurance Act, the Occupational Health & Safety Act and the Accessibility for Ontarian’s with Disabilities Act.

Algonquin College manages sick leave in a manner that reflects the College’s values of caring, learning, integrity and respect. The College is committed to ensuring each situation is assessed on its own merit, in a pro-active, fair and consistent manner.

Early intervention, full participation and collaboration of the workplace parties are essential to ensure the success of the overall Policy.

2. An employee may use sick days for the following purposes:

   a. An illness or injury that is of sufficient severity to prevent an employee from attending work;
   b. Attendance at medical appointments (test, etc...) including out of town appointments which may require travel time
   c. Academic staff may also use up to five (5) sick days per benefit year to care for members of their immediate family when they are ill (“immediate family” is defined in the Academic Collective Agreement as the “employee’s spouse or common-law spouse, resident with the employee; dependent children including children of legal or common-law spouse; and parents, including step-parents or foster parents”)

3. Sick days are not available during:

   a. Scheduled leaves (professional development, maternity, parental, leaves of absence, etc.)
   b. Scheduled vacation, except when illness/injury results in hospitalization OR subject to the manager’s approval (for support and administrative staff only) AND appropriate medical documentation is provided

4. In the case of frequent or recurrent/patterned absences, the College will support the employee in identifying and helping them remove barriers that prevent them from attending work on a regular basis. This may include providing medical documentation to ensure their continued eligibility for sick leave and/or to develop accommodations to help them return to work in a safe and timely manner.

5. Roles & Responsibilities:

   Promoting a healthy workplace is a shared responsibility among Employees, Managers, Supervisors, Human Resources Area, and Union Locals.
a. Managers/Academic Chairs
   i. Manage employee attendance including consulting with the employee and/or Human Resources regarding frequent or recurrent absenteeism.
   ii. Monitor/Manage departmental attendance reports to ensure accurate and timely management of absences due to illness/injury.
   iii. Ensure policies and procedures are consistently applied.
   iv. Inform Human Resources when an absence may be or has been longer than 5 consecutive days or when a return to work involves modified duties and/or hours.
   v. Work with the employee and Human Resources as part of the Return to Work Committee to facilitate the safe and timely return to work of the recovering employee.
   vi. Maintain appropriate on-going communication with the absent employee.
   vii. Respect the employee’s right not to share medical information with his/her manager.
   viii. Inform co-workers of return to work plans or assistance required, if necessary (not the specific nature of the illness/injury) prior to the employee’s return to work.
   ix. Monitor a recovering employee’s return to work performance and consult with Human Resources if changes are required.

b. Employees
   i. Inform your manager of any injury or illness immediately and provide as much notice as possible of the need to be away from work due to medical reasons (e.g. scheduled surgery/procedure).
   ii. Provide documentation as required by the College in order to maintain eligibility for benefits.
   iii. Communicate regularly with your supervisor or manager and/or Human Resources throughout the period of recovery/disability and notify the college if there is any change in circumstances.
   iv. Inform your treating healthcare professional that the College has a Modified Return to Work Policy and has the ability to accommodate based on functional abilities, restrictions and limitations.
   v. Actively participate in rehabilitative treatment, making every effort to schedule appointments outside of working hours.
   vi. An employee requiring time off to attend medical appointments must inform his/her manager, as far in advance as possible, to allow for coverage and the rescheduling of work assignments. Whenever possible an employee should arrange for medical appointment outside of normal working hours, particularly for frequent and/or recurring appointments. Where this is not possible, and when mutually agreed upon by the employee and their manager, an employee...
may make up any hours missed from work for medical appointments, or sick leave will be deducted from the employee’s sick leave bank for time lost.

vii. Report concerns to your manager and/or Human Resources, so that issues can be addressed promptly.

c. **Human Resources (Pension & Benefits Officer, Disability Management Coordinator)**
   i. Provide advice, guidance and education to employees and managers relating to return to work, attendance management, compensation and benefits related to sick leave, sick leave provisions in the collective agreements, benefits plans and compliance with appropriate legislation.
   ii. Act as the central point of contact to communicate and coordinate the absence and return to work process.
   iii. Responsible for the development and administration of the formalized Sick Leave (Short Term Disability) policy.
   iv. Where applicable, ensure the employee is aware of the short-term and long-term disability benefits, and provide appropriate forms, if required.
   v. Work closely with the workplace parties and 3rd party insurance/service providers to ensure a fair and consistent approach is used when facilitating the return to work process.

d. **Unions**
   i. Assist employees in understanding procedures and the responsibilities of all parties regarding sick leave and return to work process.
   ii. Work collaboratively with other workplace parties to facilitate return to work initiatives.

e. **Co-Workers**
   i. Co-operate with the return to work/accommodation needs of the returning employee where applicable.

6. The sick leave process is most effective when all workplace parties are actively involved. The process includes:

   a. **Early Intervention & Communication**
      i. Early intervention helps the employee maintain a positive connection to the workplace, alleviates many of the concerns experienced by injured or ill employees, helps avoid long-term absences from the workplace and allows the employee to:
         1. Maintain income (within available benefit provisions)
         2. Retain productive employment and job security
         3. Maintain self-esteem, family stability and social ties
         4. Maintain job skills

   b. **Assessment**
i. Once medical documentation has been received indicating that the employee is medically able to return to work, Human Resources will inform the workplace parties and return to work planning will proceed.

ii. If functional restrictions and limitations are presented, Policy HR 15: Return To Work with Modified Work will be followed.

iii. When clarification of the medical documentation presented is required, the College may request additional information.

iv. Employees are expected to comply and fully cooperate with the College when seeking clarification of the information presented.

c. **Evaluation of Options**

i. Each case will be evaluated on its own merit.

ii. The workplace parties will discuss available options to determine the course of action going forward (i.e. operational needs, amount of sick leave available, essential duties of the job, limitations/restrictions, etc.).

iii. If a case is deemed “complex” by Human Resources, it will be referred to the college’s 3rd party service provider for further assessment. Based on disability management best practices, the criteria for deeming a case “complex” includes, but is not limited to, the following:
   1. Multiple diagnoses (if known)
   2. Frequent/Recurring claims
   3. Extended and/or “indefinite” absences
   4. Multiple Barriers – medical, process, interpersonal
   5. Employee resistance to Return To Work protocol (unknown reasons)
   6. Permanent limitations indicated
   7. Multiple treatment providers (i.e. forms/notes completed from various providers)
   8. Difficulty acquiring appropriate medical information
   9. Multiple unsuccessful Return To Work attempts

d. **Planning/Coordination**

i. All workplace parties have a duty to cooperate with the sick leave process. The sick leave process is meant to be transparent and collaborative.

e. **Implementation**

i. The manager will inform Human Resources immediately if the employee does not return to work on the designated return to work date.

ii. The employee will inform the manager immediately to identify any concerns following a return from sick leave.

f. **Monitoring & Evaluation**

i. Managers must monitor progress and discuss concerns directly with the employee.

ii. Manager and employees can request assistance from Human Resources, if necessary.
7. **Confidentiality Statement**

The College is committed to protecting the confidentiality of employee health and personal information collected during the sick leave process. Records of personal health information are kept in locked, confidential cabinets, separate from employee human resources records (as per the Personal Health Information Protection Act, PIPEDA). Employee health information is gathered through a process of informed, written consent from the employee. No information is requested regarding medical diagnosis; however the process requires information regarding nature of illness/disability, prognosis, and any medical restrictions and limitations.

8. **Compliance**

   a. Employees must maintain communication with their immediate manager and the appropriate human resources representative where applicable, providing periodic updates on their return to work status.

   b. Workplace parties must actively participate and provide reasonable input into the development of a suitable return to work plan. Employees must respond and provide medical documentation when requested.

   c. In the event medical documentation is not provided, or deemed insufficient to the College, the College reserves the right to suspend or deny payment of sick leave benefits until such time the requested medical documentation is provided.

   d. Where an employee refuses to cooperate, provide medical documentation or return to work when medically cleared, payment of salary/benefits may be suspended, terminated and/or the employee may face discipline, up to and including termination.

**PROCEDURE**

<table>
<thead>
<tr>
<th>Action</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>1. Contact immediate manager (or designate) as far ahead of normal start time as possible, must leave a message indicating he/she will be absent due to illness/injury or family care (no specific medical information is necessary), the anticipated return to work date and their contact number.</td>
<td>Employee</td>
</tr>
<tr>
<td>2. If a return to work date is not known, contact must be made with the immediate manager (or designate) each day of the absence to indicate he/she will not be reporting to work.</td>
<td>Employee</td>
</tr>
<tr>
<td>3. Human Resources should be alerted when an employee is going to be away for more than 5 days.</td>
<td>Manager</td>
</tr>
<tr>
<td>4. Absences of up to four (4) working days do not typically require medical documentation to ensure salary and benefits are continued. The College reserves the right to request medical documentation.</td>
<td>Human Resources</td>
</tr>
<tr>
<td>5. Absences between 5 -10 days require a medical certificate to be submitted directly to Human Resources within 5 days of</td>
<td>Employee</td>
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</tbody>
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returning to work. The medical certificate should outline the reason(s) for absence and confirm the ability for a full time return to regular duties.

6. Absences beyond 10 days require completion of the Medical Information and Release Form (appendix 1) by a recognized health care provider. This form must be submitted to Human Resources within 2 weeks from the date of request by Human Resources.

SUPPORTING DOCUMENTATION
Appendix 1   Medical Information and Release Form

RELATED POLICIES
HR 15   Return to Work with Modified Workload
HS 05   Accident Reporting & Investigation

RELATED MATERIALS
Collective Agreements
Administrative Terms & Conditions of Employment
Applicable Benefits Booklets (which stipulate entitlements and payment for absences due to non-occupational illness or injury)
Ontario Human Rights Code
Worker Safety and Insurance Act
Occupational Health and Safety Act
Personal Health Information Protection Act (PHIPA)
Personal Information Protection & Electronic Documents Act (PIPEDA)
MEDICAL INFORMATION AND RELEASE FORM

TO OUR EMPLOYEE:
Please ask your attending physician to complete the bottom portion of this form.

Employee Name: ___________________________ Supervisor: ___________________________

I authorize the Health Professional involved with my treatment to provide my employer this form when completed, containing information about my medical limitations/restrictions affecting my ability to return to work or perform my assigned duties.

Employee Signature: ___________________________ Date: ___________________________

Please sign and date the authorization ↑

The attending Physician or Health Practitioner is to complete and return this form to the employee. A summary of the employee’s job duties is attached.

1. Prognosis:
   · Date of commencement of illness: ___________________________
   · Most recent examination date: ___________________________
   · Expected date of next examination: ___________________________
   · Prognosis for recovery: ___________________________

2. Prognosis for return to work:
   · regular duties: ___________________________
   · partial duties: ___________________________

Comments:

   ______________________________________
   ______________________________________
   ______________________________________

3. Current Restrictions related to partial duties:

   ______________________________________
   ______________________________________
   ______________________________________

   Physician or Health Practitioner’s Name (please print): ___________________________

   Address and Telephone Number: ___________________________

   Signature: ___________________________ Date: ___________________________