

Reference Number: UHB 279
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INJURY ALLOWANCE CLAIM PROCEDURE

Introduction and Aim

This procedure applies to Cardiff and Vale University Health Board (UHB) employees who are claiming that they have sustained an injury or have contracted a disease or other health condition that they believe is ***wholly or mainly attributable to their NHS employment and is not due to or aggravated by their own negligence or misconduct.***

To ensure managers follow good practice in managing any absence and supporting the employee in their recovery, this guidance should be used in conjunction with the All Wales Managing Attendance at Work Policy.

Section 4.9 of the All Wales Managing Attendance at Work Policy states:

When one or more of the absences are related to:

- An industrial injury, incident or accident at work (including psychological harm), which has been reported to the manager as close to the time it occurred as practicable and where an incident report has been completed.
- A serious condition acquired at work and which has been notified to the manager.
- Infectious diseases which are considered by Infection Control or Occupational Health to be associated with an outbreak in the working environment.

These periods of absence should normally be discounted when considering further action under the procedure for the management of frequent short term sickness absence.'

This procedure document outlines the process for UHB employees to follow when submitting an industrial injury claim and includes the following:

- Claims that can be approved by appropriate Senior Manager;
- Claims that need to be considered by the Industrial Injury Review Panel (psychiatric injury, e.g. work related stress/depression/anxiety);
- Appeal process for claims that have not been supported by the manager or review panel.

Please note:

Confirmation of a successful Industrial Injury claim does not represent a legal admission of liability for the injury/illness.

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Objectives

- To provide a framework for the application of industrial injury payment to be granted to employees who have been confirmed as having sustained an injury which has been caused wholly or mainly due to their NHS employment.

Scope

This procedure applies to staff who are employed by Cardiff and Vale University Health Board (UHB) who are covered by the NHS Terms and Conditions of service handbook, or where there is a reference in their employment contract, such as salaried doctors, dentists and very senior managers. This procedure should be used by employees who are claiming that they have sustained an injury or have contracted a disease or other health condition that they believe is ***wholly or mainly attributable to their NHS employment and is not due to or aggravated by their own negligence or misconduct.***

Equality and Health Impact Assessment

A separate Equality & Health Impact Assessment has not been completed because this guidance supports the implementation of the Employee Health and Wellbeing Policy.

Documents to read alongside this Procedure

All Wales Managing Attendance at Work Policy

Accountable Executive or Clinical Board Director

Executive Director of People and Culture

Author(s)

People Services Manager, BAOT/Unison Representative

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

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| Summary of reviews/amendments | | | |
|--------------------------------------|-----------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Version Number | Date Review Approved | Date Published | Summary of Amendments |
| 1 | 25.11.15 | 21.11.16 | <i>New Guidance</i> |
| 2 | 18.07.18 | 01.08.18 | Document renamed as a Procedure; Decision process expanded and detailed Appeal process included |
| 3 | 24.10.18 | 02.11.18 | <p>Procedure reviewed, the changes are:</p> <ul style="list-style-type: none"> • Reference to the new All Wales Managing Attendance at Work Policy; • Claims can be considered initially by an appropriate senior manager (with the exception of psychiatric injury) • Claims relating to psychiatric injury, e.g. work related stress/depression/anxiety are automatically considered by the Industrial Injury Review Panel; • Decision will be confirmed in writing within 28 days (previously 7 days) • Decision will be shared with the line manager as well as the individual. |
| 4 | 14.12.22 | 19.12.22 | <ul style="list-style-type: none"> • Sickness absence related to employment matter disputes and claims of bullying has been moved |

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| | | | <p>from “cannot be considered” to “unlikely to be awarded”</p> <ul style="list-style-type: none"> • Sentence added to clarify that only information provided will be considered for injury allowance • Details added of those in attendance at the injury allowance panel • HR changed to people services team • D&V changed to infectious diseases • Reference to D&W policy, Whistle Blowing & Grievance replaced with People Services process • Appendix 4 – examples of appropriate senior manager removed • Injury allowance claims for Covid-related sickness absence added in |
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1. Injury Allowance

Injury Allowance is a top up payment and tops up sick pay or reduced earnings when on a phased return to work, to 85% of pay. If awarded, this can normally be paid for a maximum of 12 months during sickness absence, any unused Injury Allowance can also be used to extend phased return to work plans as an alternative to using annual leave (see the All Wales Managing Attendance at Work Policy). Injury allowance is only payable when there is a reduction in pay below 85%.

2. Eligibility

Injury Allowance is payable to eligible employees who have sustained injuries, diseases or other health conditions that are **wholly or mainly attributable** to their NHS employment.

2.1 What does ‘wholly or mainly attributable to their NHS employment’ mean?

“Wholly” means **“totally”** and “mainly” means **“for the most part”**. “Attributable” is defined as a “contributory causal connection, it need not be the sole, dominant, direct or proximate cause and effect”, However, the injury, disease or other health condition **must** have been sustained or contracted in the **discharge of the employee’s duties of employment** or an injury that is not sustained on duty **but is connected with or arising from the employee's employment**.

2.2 Situations where Injury Allowance may be considered

Some examples:

- A physical or psychiatric injury sustained or disease contracted due to a specific incident or series of incidents
- An injury sustained or disease contracted that does not manifest itself for several years, for example, asbestosis or Hepatitis C following a needle stick injury
- An injury sustained while travelling on official duty, for example, road traffic accident (RTA), while travelling as part of your job role.
- An injury inflicted off duty, the cause of which can be attributed to NHS employment (for example, being assaulted on the way home from work by ex-patient)

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- An injury, disease or other health condition contracted due to a series of incidents relating to NHS employment (for example, exposure to noxious substances causing injury, condition or disease over a period of time).

2.3 Are there any circumstances where Injury Allowance does not apply and therefore cannot be considered?

Injury Allowance cannot be considered in the following circumstances:

- The employment contract has ended
- Where an employee is injured while on a normal journey to and from work, and which is not part of their duties
- Where an employee sustains an injury or disease which is aggravated by their own negligence, failure to follow procedures or guidelines, or misconduct

2.4 When is Injury Allowance unlikely to be awarded?

Injury Allowance is unlikely to be awarded for the below, although we understand there may be other factors that may be taken into consideration when making a decision which would result in injury allowance being awarded.

- where the injury or disease is attributable to some other cause, for example the natural progression of a pre-existing condition, normal wear and tear or a non- work related injury, condition or disease
- Where an employee is on sickness absence as a result of disputes relating to employment matters such as Initial Assessments, Formal investigations or disciplinary action. Or a result of a failed application for promotion, secondment or transfer.
- If an employee is sick on leave as a result of raising a claim of being bullied and has made a complaint that is being investigated, Injury Allowance would not be automatically withheld, but will depend on the facts of the case itself.

Further guidance can be sought from [NHS Employers Injury Allowance – Guide for Employers](#).

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3. Injury Allowance Claims

3.1 Employee Responsibilities

In order for the claim to be considered as fully and fairly as possible the employee should do the following:

- All incidents should be recorded as soon as possible using an electronic incident reporting form (DATIX web). Guidance on using DATIX web for staff, supervisors and managers can be found on the Health Board's Intranet site. It should also be reported to their line manager as soon as possible.
- Individuals who subsequently wish to submit an industrial injury claim should do so by completing Part A of the Industrial Injury Claim Form in full (Appendix 1) at the earliest opportunity. However, it is recognised that there will be times when the industrial injury may not be apparent straight away.
- Once part A is completed, the employee will need to meet with their manager to talk through the form and the manager can then complete Part B.
- Employees should provide **all** relevant information in line with normal absence management procedures. They must also provide **all** relevant information, including medical evidence, that is in their possession or that can be reasonably obtained, to enable the employer to determine the claim. This could include:
 - a statement giving details of the injury sustained or the disease contracted (that is, the condition) and how it is connected to their NHS employment (that is, what caused it)
 - a copy of the accident report (Datix) they or a colleague completed.
- Any incomplete applications will be returned pending further information which will delay the outcome therefore it is essential you ensure all relevant information is included. Please refer to the checklist in Appendix

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- Employees should continue to comply with their responsibilities under the All Wales Managing Attendance at Work Policy during any period of absence.
- Employees may also be asked to give permission for Occupational Health or GP records to be accessed or for a new Occupational Health referral to be made
- Employees will be required to complete any forms sent to them by the Payroll department to ensure any Injury Allowance payments for successful industrial injury claims can be processed in a timely manner.
- Employees who have exhausted full sick pay entitlement and remain on sickness absence, may also move to half sick pay until the outcome of the claim is known, after which Injury Allowance payments will be backdated retrospectively for successful claims.
- In cases where an episode of absence is linked to a previous **confirmed** industrial injury, a further application will need to be made including details of the previous of the previous industrial injury and any specific information about the most recent incident or trigger that led to the absence.

Please note – Only the information you provide will be used to make a decision. Please ensure you include everything you feel should be considered.

What happens next:

Once Part B has been completed by the individual's manager, the application form and all relevant paperwork will be passed to the appropriate senior manager for a decision. If the industrial injury related to **psychiatric injury**, e.g. work related stress/depression/anxiety it will be passed to the People Services team to be reviewed by the industrial Injury panel. Part C will be completed and passed to the individual to inform them of the outcome.

3.2 Line Manager Responsibilities

Line Managers will need to follow normal absence management procedures during any period of absence.

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Once the employee has completed Part A and provided their supporting documentation to their line manager, the line manager should immediately complete Part B of the application form as soon as possible. The line manager must also include any appropriate and supportive corroborative evidence to assist the decision-making process. It is recommended that the line manager meets with the employee at this stage and shares with them a copy of part B. It is recommended that this meeting is conducted within 7 calendar days.

The line manager must also include any appropriate and supportive corroborative evidence to assist the decision making process. The following evidence should be considered (where relevant) for:

- DATIX
- Health and Safety Executive form
- RIDDOR
- DWP Benefit Claim
- Statements from any witnesses
- Any relevant information following a GP/ A&E visit or other medical reports
- Documents from Occupational Health
- Paperwork from a previous approved industrial claim if linked
- Any other paperwork that may be deemed appropriate

Please note – Only the information provided will be used to make a decision.

Once the line manager has completed Part B of the application form and indicated whether they support the claim or not, they should:

- Take a copy of the application form and all relevant documentation to share with the employee concerned and keep a copy in the individual's personal file;
- Forward the form and all relevant documentation to the appropriate Senior Manager for consideration.

If the claim relates to psychiatric injury, e.g. work related stress/depression/anxiety the forms and all relevant documentation need to be forwarded to the people services Team, via CAVHR_ActionPoint@wales.nhs.uk for submission to the next Industrial Injury Review Panel

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4 Decision Process

Claims relating to physical injury or accidents.

On receipt of the completed Injury Allowance Claim form and supporting information, the appropriate Senior Manager will review the claim and determine the outcome.

It is important applications are completed in full to enable the Senior Manager to consider the claim. Any incomplete applications will be returned pending further information which will delay the outcome or indeed result in the claim being rejected because of insufficient evidence. Employees are therefore encouraged to seek advice from their line manager, Human Resources and/or trade union representative when completing claim forms.

The appropriate Senior Manager will *make their decision based on whether the absence is **wholly or mainly attributable to the employee's NHS Employment** which is defined as “more likely than not”*.

After considering the claim the Senior Manager will confirm the outcome of the claim to the individual, in writing using Part C of the claim form (appendix 2), This will normally be within 28 calendar days of receipt of the application, however if further clarification/information is required this timescale will be extended accordingly. Parts C & D of the form will be completed by the Senior Manager. The reasons for the approval or rejection of the claim will be provided.

Claims relating to Psychiatric Injury, e.g. work related stress/depression/anxiety

Once the claim is received in full with all the supporting information, the People Services team will pass the application to the industrial injury review panel. The panel is made up of a number of people including a member from the People services team, Occupational Health, Union representative and a Management representative. If the application does not meet the criteria in section 2.2 the people services team will notify the individual.

The Review Panel will *make their decision based on a majority view, whether the absence is **wholly or mainly attributable to the employee's NHS Employment** which is defined as “more likely than not”*.

Following the Review Panel, the People Services team will confirm the outcome of the claim to the individual and line manager, in writing using Part C of the claim form (appendix 2), this will normally be within 28 calendar days of receipt of the application, however if further clarification/information is required this timescale will be extended accordingly. Part C & D of the form will be completed

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by the Review Panel. The collective reasons for the Panel approval or rejection of the claim will be provided.

Responsibilities:

Senior Manager / Review panel:

- Complete part C and pass to the individual. Send a copy to the line manager for the employees personal file.
- Complete part D and send to Payroll if approved and payment is required.

Employee:

- Make Payroll aware each time a change in benefits applies, as this could affect the amount of Injury Allowance due.

Payroll:

Once aware of a successful injury allowance claim, Payroll will issue a letter to the individual requesting authorisation for the Benefits Agency to provide details of any payments being made to them. Once the Benefits Agency have confirmed the amount and which benefits are being received by individual, this will enable Injury Allowance to be paid to top up any reduced earnings to 85%.

Line Manager:

On receipt of the Injury Allowance Claim outcome from the panel, the manager will be required to confirm with Payroll the allowances or payments linked to working patterns or additional work commitments (e.g. Unsocial Hours payments) both owed to the employee and then on an ongoing basis for the length of the sickness absence period (where the reason for absence remains due to the industrial injury).

If a successful claim is received for an absence linked to a previous industrial injury, Payroll will be notified that the employee has a **recurring** industrial injury, providing details of the original injury (obtained from the claim form). The manager will again be required to provide Payroll with information regarding any payment owed.

5 Appeal

All employees have the right to appeal against the outcome of their industrial injury application. An employee who wishes to appeal (appellant) against the decision made by the review panel or senior manager must lodge their

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intention to appeal to Lianne Morse, Deputy Director of People and Culture within 14 calendar days of receiving written notification of the decision.

This notification of intention to appeal should indicate the grounds on which this appeal is based.

An Appeal Officer will be appointed and the administrative arrangements put in place within 14 calendar days by the People Services Team and wherever possible the appeal heard within 28 calendar days of the notification of appeal being received.

The appeal panel will consist of an Appeal Officer and a People Services Advisor and where appropriate a further panel member. In exceptional circumstances it may be necessary to extend this deadline with the agreement of both parties but every effort should be made to hear the appeal promptly. The Appeal process is outline in Appendix 4.

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Appendix 1

Industrial Injury Claim Form

PART A – TO BE COMPLETED BY EMPLOYEE

Please complete the application as fully as possible as **any incomplete applications may result in the Senior Manager or Review Panel rejecting your claim on the basis of ‘insufficient’ evidence**. If a question does not apply to your particular case, please record “Not Applicable” or “N/A” in the box.

| CONTACT DETAILS | |
|------------------------------------------------------|--|
| Name | |
| Job Title | |
| Payroll/ Employee Number | |
| Department/ Base | |
| Directorate | |
| Clinical Board | |
| Home Address | |
| Preferred email address | |
| Preferred Tel. Number | |
| Name, job title and contact details for line manager | |
| Name and contact details for union representative | |

| CLAIM DETAILS | |
|-------------------------------------------------------------------|--|
| Date of incident/s | |
| Incident number/s (if applicable) | |
| Date sickness absence commenced | |
| Date returned to work from absence (if applicable) | |
| Please provide details of the incident and an explanation for why | |

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| <p>you feel it is wholly or mainly due to your NHS Employment.</p> <p>Please include details of what happened, time & date</p> <p><i>Please continue on a separate sheet if required.</i></p> | |
| <p>Please include details of how the injury or disease affects your ability to work or carry out normal daily activities.</p> | |
| <p>Have these symptoms continued? If yes, for how long and has it been continuous or ad hoc?</p> | |
| <p>Is this absence related to a previous industrial injury?</p> <p>Yes - please include details for why you feel this episode of absence is linked to a previous confirmed industrial injury and provide details of the previous industrial injury.</p> <p>Was there a specific incident or trigger that led to this absence? If so, please give details such as time and date of onset as precisely as possible.</p> | <p>Yes / No</p> |
| <p>If this incident is related to any manual handling duties, please indicate what equipment you utilised (if any) or any reasons for not using the appropriate equipment. When did you last complete your Manual Handling training?</p> | |

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| Have these symptoms continued? If yes, for how long and has it been continuous or ad hoc? | |
| Are there any other factors that have contributed to the injury sustained or disease contracted? If so, provide details here | |
| Did you report this issue to your line manager? If so, please include their name and the date you reported it. | |
| What support were you offered? Was this support timely? Has it been on-going? | |
| If you did not report your concerns to your line manager, can you offer a reason for not doing so? | |
| Are you currently pursuing your claim via a People Services process? e.g. Respect & Resolution If yes, please provide details | Yes / No |
| Have you accessed any of the support mechanisms available to staff, such as the policies referenced above, and/or Occupational Health? Have you accessed any of the self-help advice available on the UHB Intranet? If yes, Did you accept this support? What advice was provided? | Yes / No |

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| <p>Did you feel that the support was adequate? What did you feel could have been done differently?</p> <p>If not, is there a reason why?</p> | |
| <p>Did you discuss your situation with any other member of staff, including trade unions?</p> <p>If not, is there a reason why?</p> | |
| <p>Please include any other information which you feel is relevant evidence to support your application</p> | |
| Name | |
| Signature | |
| Date | |

Checklist of Documents to Attach to Part A of Claim Form

Please note some information may be available from your line manager. Please number each document (if available) and submit with the claim form

| Number | Description | Tick |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| | <i>A statement giving details of the injury sustained or the disease contracted that is, the condition) and how it is connected to your NHS employment (that is, what caused it) – required</i> | |
| | <i>Copy of the accident report e.g. DATIX form, Health and Safety Executive form, RIDDOR</i> | |
| | <i>Witness statements</i> | |
| | <i>DWP benefit statements</i> | |
| | <i>Documents from Occupational Health</i> | |

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| | <i>Relevant medical advice e.g. GP Fit Note/ Hospital appointment letters/ other medical reports etc</i> | |
| | <i>Paperwork from a previous approved industrial allowance claim</i> | |
| | <i>Any other paperwork that may be deemed appropriate</i> | |

Please note- Only the information you provide will be used to make a decision. Please ensure you include everything you feel should be considered.

Please forward the form along with your supporting documentation to your line manager to complete Part B

PART B – TO BE COMPLETED BY LINE MANAGER/RELEVANT MANAGER

Please complete the application as fully as possible as **any incomplete applications may result in the Senior Manager or Review Panel rejecting your claim on the basis of ‘insufficient’ evidence’** If a question does not apply to your particular case, please record “Not Applicable” or “N/A” in the box.

| CONTACT DETAILS FOR LINE MANAGER | |
|-----------------------------------------|--|
| Name | |
| Job Title | |
| Department / Base | |
| Directorate | |
| Clinical Board | |
| Email Address | |
| Telephone number | |

| CLAIM DETAILS (from line manager’s records) | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| Date of incident/s | |
| Date sickness absence commenced | |
| Date returned to work from absence (if applicable) | |
| Is the employee advising this absence is related to a previous industrial injury? If yes, please include details of the previous episode of absence including start date and end date of | Yes / No |

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| <p>the original absence and your view on whether the new episode is likely to be related or not supported by relevant information/ evidence e.g. OH report. Then skip to name and signature.</p> <p>If no, please include details of the new injury sustained or disease contracted and your view on whether it is wholly or mainly due to their NHS Employment. Please support your view with relevant information/ evidence e.g. OH report</p> | |
| <p>Do you support this claim, do you think Industrial allowance should be awarded?</p> <p>Please provide details of your reason</p> | |
| <p>Please include details of how the injury or disease affects the employee's ability to work and/or carry out normal daily activities</p> | |
| <p>Was there a specific incident or trigger? If so, please give details such as time and date of onset as precisely as possible.</p> | |
| <p>Are you aware of any other factors that have contributed to the injury sustained or disease contracted? If so please provide details here (without breaching confidentiality)</p> | |
| <p>Did the employee report the issue to you previously? If so, please include when and details of what was reported</p> | |

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| What support did you offer? Was this support timely? Has it been on-going? | |
| Was the support accepted to your knowledge? Provide details where applicable | |
| Please provide any other relevant information, <i>Please continue on a separate sheet if required.</i> | |
| Name | |
| Signature | |
| Date | |

Checklist of Documents to Attach to Part B of Claim Form

Please only submit new documentation not already provided in Part A. Please number the documents as follows:

| Number | Description | Tick |
|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| | <i>Internal investigation report including details of the injury sustained or the disease contracted by the employee and how it is connected to their NHS Employment (that is, what caused it)</i> | |
| | <i>Accident report e.g. DATIX form</i> | |
| | <i>Occupational Health Department advice/copies of GP certificates/other medical advice/reports received (please ensure that the employee has provided consent for these to be shared)</i> | |
| | <i>Job description, including details of the location of work, duties of employment and training records, etc.</i> | |

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| | | |
|--|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | <i>A full statement of events from the employee explaining what injury/disease they are claiming for and the circumstances leading to the claim</i> | |
| | <i>Documents that may be helpful by way of corroboration: (see section 3 of guidance notes and list here) e.g. witness statements</i> | |
| | <i>Any other documentation you feel is relevant.</i> | |

Please take a copy of the application form and supporting information and share with employee before forwarding to Senior Manager or Review Panel if the claim is related to work related stress/depression/anxiety.

Please note – Only the information you provide will be used to make a decision. Please ensure you include everything you feel should be considered.

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If the claim is unsuccessful please refer to the Appeal process outlined in Appendix 2.

Appendix 3

| PART D - NOTIFICATION TO PAYROLL – TO BE COMPLETED BY SENIOR MANAGER OR INDUSTRIAL ALLOWANCE REVIEW PANEL | |
|------------------------------------------------------------------------------------------------------------------|----------------|
| Employee Name | |
| Payroll/ Employee Number | |
| Industrial Injury claim successful | Yes No |
| Claim is linked to a previous industrial injury (if applicable) | Yes / No / N/A |
| Date sickness absence commenced | |
| Date returned to work from absence (if applicable) | |
| Name: | |
| Signature: | |
| Date: | |

Please continue on a separate sheet if required.

For successful claims:

- The Senior Manager or Review Panel will notify the Shared Services Payroll Department
- The line manager will notify payroll of any monies owed (e.g. USH)
- Payroll will send the employee forms to complete to determine eligibility for Injury Allowance should the employee move to half sick pay during their sickness absence (where the reason for absence remains due to the confirmed industrial injury)

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Appendix 4

Industrial Injury Appeal Process

Should an employee be dissatisfied with the decision that their Industrial Injury Claim cannot be considered or be dissatisfied with the decision made by the Senior Manager or Review Panel, they have a right of appeal. The employee must submit their intention to appeal within 14 calendar days of receipt of the written Industrial Injury Claim decision. The grounds for the appeal should be clearly set out.

The Appeal Hearing will be arranged, which will be heard by an appropriate senior manager, not previously involved in the case and nominated by the Deputy Director of People and Culture. The Senior Manager may wish to be supported by a People Services advisor as appropriate. The employee should be advised of their right to be accompanied by a Trade Union representative or a workplace colleague.

The Appeal Hearing will normally be held within 28 calendar days of receipt of the letter of appeal, unless all parties have agreed an alternative timescale.

At least 7 calendar days before the Appeal Hearing the Appeal Officer must receive the nature of the appeal and all documentary evidence in support of it. The Senior Manager who made the decision or review panel representative will provide a summation of the decisions and accompanying rationale. Failure to comply may result in either the appeal being postponed or the appeal going ahead without this information.

The purpose of the appeal is to establish if the decision taken was reasonable in light of the grounds raised by the employee. The appeal is not a re-hearing of the original evidence.

The Appeal Hearing must restrict itself to looking at the grounds of appeal made by the employee and ensuring that these grounds are adequately examined in order to reach a proper judgement on whether the appeal should be upheld.

The appeal will take account of any substantial new information cited in the grounds for appeal.

The decision reached by any level of appeal hearing is considered final. No further appeal mechanism will operate within the UHB.

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Conduct of the Appeal

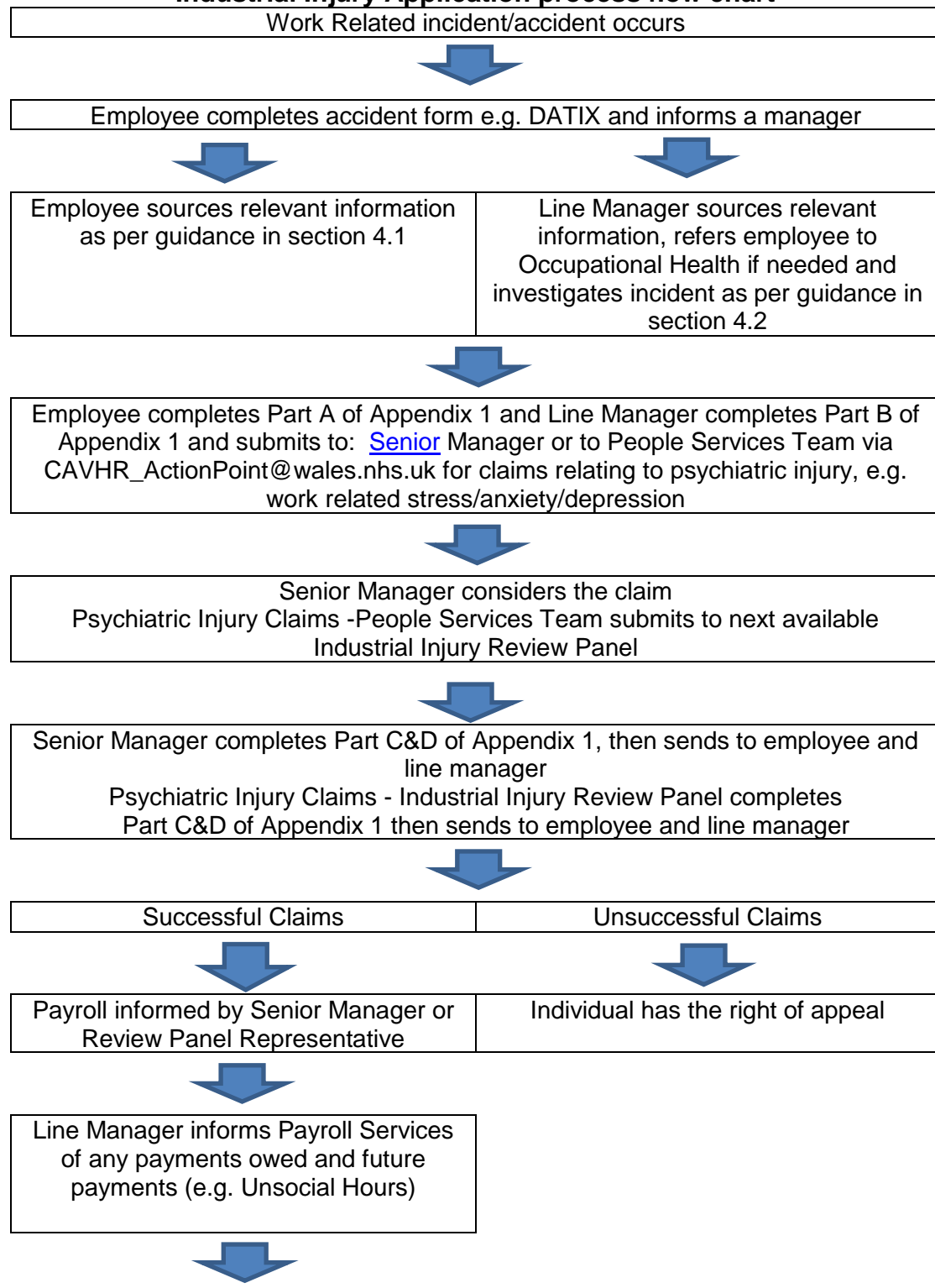
The Appeal Officer will act as Chair of the appeal hearing and will introduce those present and state the order of proceedings which is as follows:

- Both the Senior Manager or Review Panel representative and the employee and his/her representative will remain present throughout the proceedings until the Appeal Panel adjourn to deliberate in private.
- The appellant or his/her representative shall confirm their grounds of appeal and provide information supporting their case.
- The members of the Appeal Panel shall have the opportunity to ask questions of the appellant.
- The Senior Manager or Review Panel representative will present the justification for the decision.
- The appellant or representative shall have the opportunity to ask questions of the Senior Manager or Review Panel representative.
- The members of the appeals panel shall have the opportunity to ask questions of the Senior Manager or Review Panel representative.
- The Senior Manager or Review Panel representative will have the opportunity to sum up. New information must not be introduced at this stage.
- The appellant or representative will have opportunity to sum up. New information must not be introduced at this stage.
- The Appeal Panel may, at its discretion, adjourn the appeal hearing in order that further information may be sought and reviewed.
- The Appeal Panel shall deliberate in private only, recalling both parties to clarify any points of uncertainty on evidence already given. If a recall is necessary both parties shall return.
- When a decision is reached by the Appeal Officer they should inform the appellant and Senior Manager or Review Panel representative of the outcome immediately or within 7 calendar days.

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Appendix 5

Industrial Injury Application process flow chart



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Payroll sends the employee forms to complete and return. Payroll pays Injury Allowance where applicable

Appendix 6

INJURY ALLOWANCE CLAIMS FOR COVID-RELATED SICKNESS ABSENCE

Process

This document should be read in conjunction with the Injury Allowance Claims Procedure. It provides guidelines for individuals who wish to apply for Injury Allowance specifically related to any sickness absence for Covid 19, or Covid-related illness which they believe is wholly or mainly attributable to their NHS employment and not due to, or aggravated by their own negligence or misconduct.

As with Psychological illness or injury, Covid-related applications will be heard by a separate Injury Allowance Panel, which will include an Infection Control advisor.

Employee Responsibilities

In order that the Panel can fully and fairly assess employee claims, it is **essential** that **all relevant information** is provided by the employees **at the time of submission** of their application. You can seek advice regarding the process from the People Services department via Actionpoint (CAVHR_Actionpoint@wales.nhs.uk), or advice and additional support from your union representative. A checklist of possible information required is attached at Appendix 1. You should attach a copy of this completed checklist to part A of the industrial injury claim form, and give these to your manager to complete part B.

If you are unable to access any of the required information you should discuss this with your line manager, who may be able to provide it. If you cannot provide any of the listed information, you are required to tick the checklist as either not available, or not applicable. **Please do not leave any section on the checklist blank.**

Once your manager has completed Section B, they will provide you with any outstanding information that they may hold., i.e. copies of Fit Notes etc. Your manager should share their response with you and advise if they are supporting your claim at this stage. Please note, that failure of management to support an application does **not** mean it has been rejected. An impartial Panel will review your claim and make their decision.

Management Responsibilities

As with any other Claim for Injury Allowance, managers should complete Part B of the form and provide **all** relevant documentation to be attached to the forms and sent to the People Services Department via Action point (CAVHR_Actionpoint@wales.nhs.uk), once you have completed Part B and discussed the matter with your member of staff. (Please ensure your staff member has given permission for all personal information such as Occupational Health Reports to be shared). You should indicate on the form

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whether or not you support the claim and the reasons for this view. Your comments should be based on the evidence available. Information such as what was known and/or available at the time of the alleged incident, numbers of staff in the department absent due to Covid or Covid-related sickness at the time, what alternative arrangements were possible and in place, what Risk Assessments had been done and the operational impact of these etc will all be helpful. Please note that the decision will be made by an independent Panel, and your comments will form part of this consideration together with the comments and information from the claimant.

COVID-RELATED INJURY ALLOWANCE CLAIM CHECKLIST

| <u>Evidence</u> | <u>Date</u> | <u>Included (Y/N)</u> | <u>Available (Y/N)</u> | <u>Comments</u> |
|-------------------------------------------------------------------------|--------------------|----------------------------------|-----------------------------------|------------------------|
| Datix report | | | | |
| Risk Assessment and action plan | | | | |
| Fit Notes | | | | |
| LTS interview records | | | | |
| Occupational Health referral form | | | | |
| Occupational Health Report/s | | | | |
| Witness statement/s | | | | |
| UHB Covid advice document at the time | | | | |
| Status of Ward/ area at the time | | | | |
| DWP benefit statement | | | | |
| Notes of any discussions held regarding working conditions or practice. | | | | |