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Managing Health & Attendance Policy

Last updated: 28th November 2019

Policy owner: HR Director, Employee Relations

Summary

The BBC works best when our employees feel supported at work. Employees have a responsibility to manage their own health and wellbeing. However, it is also incumbent on managers to support the health and wellbeing of their teams and ensure acceptable levels of attendance.

Audience: This policy forms part of the contract of employment that applies to BBC employees in the UK, Channel Islands and Isle of Man on Bands A-Fp, and is an agreed statement between the BBC and recognised joint unions which may only be varied by joint negotiation at the National Joint Council.

5 Key Points of this policy

1. Managers and employees should engage constructively when addressing issues of health and attendance;
2. Managers and employees should utilise supportive wellbeing resources provided by the BBC;
3. Providing employees have complied with their obligations, the BBC will pay 18 weeks full pay and 9 weeks half pay in a rolling 12 month period during periods of health related absence.
4. Managers should instigate the process for managing attendance levels set out in this policy if any of the trigger points below are reached:
 - a. 3 instances of absence in a 12 week rolling period
 - b. 5 instances of absence in a 12 month rolling period
 - c. 28 consecutive days of absence
5. When discussing attendance with an employee, the manager should consider whether attendance levels are impacted by an underlying disability.

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1. Definition

This policy sets out how the BBC will support employees to maintain their health and wellbeing, and to achieve acceptable levels of attendance at work. It also sets out the process for managing short-term intermittent health related absences, or long-term health related absence.

2. Principles

- Managers have a responsibility to support and manage the health and wellbeing of their teams and the achievement of acceptable levels of attendance. Health related issues and absence should be managed sensitively;
- Employees are responsible for managing their own health and wellbeing, and are encouraged to proactively access supportive wellbeing related resources provided by the BBC and to engage constructively with attempts from management to support and manage their wellbeing and attendance;
- The BBC provides a range of supportive wellbeing resources;
- The BBC's Occupational Health (OH) Service is one of the supportive resources provided in the Wellbeing Strategy. Managers may refer employees to the OH service for advice and/or examination at any time during their employment. Employees may also request that their manager refers them to occupational health if they have a concern about their work and their health;
- If an employee considers they are affected by a disability or any medical condition which affects their ability to undertake their work they should inform their manager;
- If employees fail to follow the requirements set out in this policy or the manager has justifiable reasons to doubt the integrity of the evidence provided, the **BBC Disciplinary Policy** may be applied.
- The application of this policy will be in accordance with the *Data Protection Act* and the **BBC's Data Protection Handbook**.

3. Health Related Absence

Disability

The BBC recognises that health related absence may result from a disability.

Particular consideration will be given to whether any absence is disability related at each stage of the procedure for managing health and attendance as set out in this policy, including whether any reasonable adjustments could be made to the requirements of the role or other aspects of working at the BBC which would provide support and/or assist in achieving acceptable levels of attendance. The manager should provide appropriate support if trigger points are reached. Where a trigger point is reached, the manager should seek independent advice from Occupational Health including whether

any reasonable adjustments could be made to the procedures set out in this policy for managing attendance. The BBC recognises that sickness absence may be disability-related. Where an employee is disabled or becomes disabled during their employment the BBC Guide to Supporting, Retaining and Recruiting Disabled Staff will be used.

Pregnancy

Particular consideration will be given to whether any absence is pregnancy related at each stage of the procedure for managing health and attendance set out in this policy. The manager should provide appropriate support if trigger points are reached. Where a trigger point is reached owing to pre-birth pregnancy related absence, support should be managed informally.

4. Reporting Procedure

On their first working day of sickness absence, employees must notify their manager, or other designated person, at least 30 minutes before they are due to commence work or as soon as is reasonably practical. The employee should confirm the reason or nature of their health related absence and the expected length of absence.

They should also provide their manager with their current contact details. Employees must continue to keep their manager informed of their progress and likely return to work date.

During periods of health related absence, employees may be contacted by their manager or HR, in order to discuss their wellbeing.

Managers may contact employees during periods of health related absence for any urgent work-related query if there is no other practical alternative. Contact should be of a reasonable level taking into consideration that the employee is absent owing to their health.

Employees may self-certify, verbally or in writing, periods of health related absences which are seven or fewer consecutive calendar days in duration. For periods of health related absence that are eight or more consecutive calendar days in duration, employees must provide a signed Statement of Fitness for Work (Fit Note).

The manager must ensure the absence and reason/category is recorded in the divisional recording system.

Absence that has not been notified in accordance with the above reporting procedure will be treated as unauthorised absence.

5. Statutory Sick Pay

Statutory Sick Pay (SSP) is a minimum weekly payment which employers must pay for 28 weeks to qualifying employees. Employees who are excluded from receiving SSP or who have exhausted their SSP entitlement may be entitled to claim sickness benefits from the state.

6. BBC Health Related Absence Pay

Providing employees have complied with their obligations in this policy, the BBC will pay 18 weeks full pay and 9 weeks half pay for each rolling 12 months during periods of health related absence in a rolling 12 month period. This means that at the point of requiring sick pay, you must look back over the past 12 months to see how much paid entitlement there is available.

Where BBC Sick Pay is exhausted during a period of continuous absence, the rolling entitlement will restart following a return to work.

BBC Health Related Absence Pay is basic annual pay at the point health related absence commences and any continuing allowances which would normally be paid during authorised absence; it does not include any additional payments e.g. night payments. BBC Health Absence Pay is inclusive of any Statutory Sick Pay.

If an employee is reaching the limits of their BBC Health Absence Pay or SSP the manager should advise them in writing giving at least 1 month notice.

7. Health Related Absence and Annual Leave

Employees who are absent owing to their health during a period of annual leave may have the leave credited if they provide a Statement of Fitness for Work (Fit Note) or similar medical certificate from a local doctor (if the employee is away from home) confirming the dates of ill-health. Self-certification will not be accepted as evidence in these circumstances.

Employees who are unable to take their leave in the year in which it accrued due to long-term health related absence may carry forward a maximum of 20 days' (equivalent to 140 hours) annual leave into the following leave year. The carry-over of leave should be approved in advance by their manager and must be taken within 18 months of the end of the leave year in which it accrued or it will lapse.

8. Time Off for Medical Appointments

Employees should endeavour to arrange appointments outside their working hours wherever possible; however, where this is not possible, a flexible and reasonable approach from both the manager and the employee should be taken to facilitate the attendance at medical appointments/treatments. Requests for paid time off should be accommodated without the need for annual leave to be taken or locks to be used. Time off for regular treatments or medical appointments should be discussed with the line manager and should be managed sensitively and sympathetically in a way that prioritises the wellbeing of the employee.

9. Infectious Diseases

Employees who have been in close contact (e.g. with a member of their immediate family) with an infectious or contagious disease, such as tuberculosis, chicken pox, measles, meningitis or other serious condition that could be passed on to work colleagues, should notify their manager and seek advice from their doctor or the BBC's

Occupational Health Service on the need to stay away from work. This is especially important if one of their colleagues is pregnant. If they are required not to attend work as a precautionary measure they will be granted paid leave.

Employees must follow the usual procedures for sickness absence if they are suffering from an infectious or contagious disease. If advised to refrain from work employees cannot return without clearance from their doctor or the BBC's Occupational Health Service.

10. Health Related Absence due to an Off Duty Accident

If an employee has a period of health related absence as a result of an accident or injury caused by a third party, in respect of which damages may be payable, employees must immediately notify their manager and keep them informed of that fact and of any claim compromise, settlement or judgement made or awarded in connection with it and all relevant particulars the BBC may reasonably require.

The employee will be eligible for BBC Health Absence Pay. The employee must make reasonable endeavours to recover damages from the third-party for lost earnings over any period during which the employee has, or will, receive BBC Health Absence pay. The employee must repay to the BBC any damages recovered for lost earnings over and above statutory sick pay and less any reasonable costs they incur in doing so. The employee must keep their manager informed of the commencement, progress and outcome of any attempts to recover damages.

If the health absence pay is repaid to the BBC in full, the period of health related absence will not be included in calculating whether an employee has reached their BBC Health Absence Pay limit. If, however, no refund is made or the refund is made in part, the BBC at its discretion will decide to what extent the period of health related absence will be taken into account.

11. Managing Wellbeing and Attendance

As set out in the principles above, managers should proactively support and manage the wellbeing of their team. Staff should engage constructively with their manager and utilise the wellbeing resources provided by the BBC set out in the Wellbeing Strategy. This includes occupational health referrals (see appendix 1 for more details on occupational health referrals)

12. Return to Work Conversation

Where a staff member has taken any period of health related absence, the manager should consider undertaking and recording a return to work conversation. The conversation is supportive and intended to understand the reason for absence and what support may be provided to facilitate a return to work and reduce the prospect of further absence.

A referral to the BBC's Occupational Health Service at this stage may be considered in order to receive independent medical advice on what additional support or measures can be considered to support wellness and attendance. The manager may also sign post the staff member to available resources that may be helpful in the Wellbeing Strategy.

13. Phased Return to Work

Where a staff member has been, or is, absent from work for health related reasons the manager should consider whether a phased return to work is needed or would facilitate an early and sustained return to work. Specific advice on return to work and merits of a phased approach can be received via a referral to the BBC's Occupational Health Service.

Phased returns may comprise:

- Working a shorter number hours than the staff members ordinary contractual hours – usually where the health related absence causes or has resulted in residual fatigue;
- Working full contractual hours but with workload relief;
- Working remotely from home or with altered start/finish times.

Phased returns to work will be paid at the employee's usual full rate of pay for up to 4 weeks. , Phased returns must be informed and recommended by a Occupational Health referral or GP Fit Note.

14. Management of Health Related Absence Procedure

Managers and staff should utilise resources in the Wellbeing Strategy to proactively manage their wellbeing and achievement of acceptable levels of attendance on a day-to-day basis. If a staff member has levels of absence in line with any of the intervention triggers below, it should serve as a prompt to the manager and staff member that a more structured approach may be more effective.

- A period of long term health related absence of 4 weeks (28 calendar days) or more;
- 3 or more instances of short term health related absence in a 12 week rolling period;
- 5 or more short term health related absences in a 12 month rolling period;

The three stage process outlined below should, therefore, be followed. Please refer to Section 3 re: Disability or Pregnancy.

Informal 1-1 Review

The manager will arrange a review with the employee to discuss their health and related absence. The informal review will be held in good time following the absence.

In the case of short term intermittent absence, the manager should consider whether occupational health advice is required at this stage to help understand any underlying health conditions and how a sustained return to work or improved level of attendance may be achieved. In cases of long term absence a referral to occupational health must take place as a matter of course. The manager and staff member should also consider whether it would be beneficial to access any of the BBC wellbeing provisions outlined in the Wellbeing strategy.

The discussion should be supportive and is intended to fully understand the reason(s) for absence; the staff member's immediate health needs; prognosis for return to work and/or improved levels of attendance; and what support may be provided to facilitate a return to work and/or reduce the

prospect of further absence. The manager should also consider the employee's full service and attendance record in judging whether further action is required or not.

The manager will confirm in writing to the employee the discussions and any agreed actions to facilitate improvements in the health and attendance levels of the employee.

In cases of short term intermittent absence, the manager will confirm the acceptable level of future attendance and any review period (which may be up to 9 months) before a formal review meeting takes place. The review period and acceptable level of future attendance should be informed by medical advice, and the attendance levels set out in the trigger points above (pro rata). During the review period, the manager should update the employee on their progress against the expected and acceptable levels of attendance.

In cases of long term absence, the manager will confirm any review period and date for a follow up review or Formal Review Meeting if one is needed. Ordinarily a formal review meeting should take place not more than 6 weeks after the informal review if absence continues.

In cases of both short and long term absence, the manager may consider it appropriate to undertake more than one informal review meeting before progressing to a stage 2 review meeting.

Formal Review Meeting

Should there be insufficient improvement in attendance during the review period, the manager will arrange a Formal Review meeting with the employee to explore the reasons for continued or repeated absence.

Staff members are entitled to be accompanied to any formal review meeting by an accredited trade union representative or colleague (other than a practising lawyer) if they wish.

As with the informal review, the primary focus should be on facilitating improved health and wellbeing, a return to work and/or improved levels of attendance. The formal review meeting should also be a review of any actions agreed in the informal meeting, attendance levels since the informal review and/or prognosis for return to work.

In the case of long term absence due to ill health or injury that is likely to permanently and substantially impair earning capacity consideration should be given to potential eligibility for ill health retirement. This will be subject to the eligibility terms of the relevant pension arrangement that the employee may be a member of. For employees who are active members of the BBC Pension Scheme, an independent medical assessment of eligibility should be commissioned via occupational health. For other BBC pension arrangements, the employee should be directed to their pension provider.

The potential outcomes of a formal review meeting are:

- In cases of both short term intermittent and long term absence, the manager may adjourn and/or extend a formal review period before reconvening for a further formal review meeting. This may be appropriate in particular if actions agreed at the informal review stage remain outstanding; and/or there has been a change of circumstances which could impact on the employee's attendance levels; and/or updated advice is required from the occupational health service; and/or there is a positive prognosis for a return to work.
- In cases of short term intermittent absence, the manager may consider an insufficient improvement in attendance levels has been achieved during the review period. The manager may then consider it appropriate to have a further review period or convene a formal hearing with the employee as set out below.

In cases of long term sickness absence where the prognosis for return is considered poor or unclear by the BBC Occupational Health Service and/or an independent medical assessment indicates the employee meets the criteria for ill health retirement under the relevant pension scheme, the manager may inform the staff member that a formal hearing will be convened as set out below.

Formal Hearing

If there is insufficient improvement after the formal review, the manager will convene a formal hearing to consider the ongoing sustainability of any long term absence or persistent short term intermittent sickness absence. The employee will be informed in advance of the reasons for the hearing and that an outcome of the hearing may be termination of their employment. The employee will be provided with any documents and evidence the manager will consider during the hearing process.

Employees should take all reasonable steps to attend the meeting. The employee has the right to be accompanied at the meeting by an accredited trade union representative or a BBC colleague (other than a practising lawyer).

The employee will be permitted sufficient notice of the meeting to have time to contact and brief an accredited representative or BBC colleague, as well as obtain relevant medical records which may be beneficial to the hearing.

The manager may arrange a note taker to take summary notes of the meeting. A copy of the summary notes will be sent to the employee and their representative (if appropriate) for comment. Provided comments are received within a reasonable timeframe, as defined by the hearing manager, they will be held with the original notes from the meeting.

The manager should consider matters such as the following during the meeting (this is not exhaustive):

- The medical advice including the employee's prognosis and any recommendations, and whether further advice is required;
- the effect the medical condition and/or the employee's absences are having on the employee's performance in their current role;
- the effect the employee's absences are having on the business; and

- the reasonable adjustments that could be made to enable a return to work.

Before any decision is taken by the hearing manager consideration should be given to whether any reasonable adjustment should be made to the outcome of this stage of the process for example whether the process itself should be reasonably extended by the addition of a further formal review meeting, where the absence in question is in relation to disability.

The possible outcomes of the formal hearing are:

- making further reasonable adjustments to the working conditions of the employee's current job;
- implementing a further rehabilitation plan;
- searching for suitable alternative employment within the BBC;
- the hearing manager may decide to adjourn the hearing and reconvene at a later date if further lines of enquiry are required before a decision can be reached;

Where an employee has previously been notified that their employment may be at risk if the absence continues, the manager may also consider:

- terminating employment on the grounds of ill health retirement subject to contractual notice; or

terminating the employment on the grounds of the employee's incapacity to perform the role and/or continuing absence/attendance levels subject to contractual notice.

An employee's employment will usually only be terminated on the grounds of medical incapacity and/or the employee's continuing absence and/or attendance levels if reasonable adjustments cannot be made to the working environment or if suitable alternative employment cannot be found within a reasonable period. The hearing manager must seek advice from Manager Advice before terminating employment on these grounds.

Where termination occurs, an incapacity pension may apply on the basis that an individual cannot carry out their normal occupation and this is likely to permanently and substantially impair their earning capacity.

Where such pension payments do not apply, the manager may, in conjunction with the HR Business Partner, consider whether it is appropriate to make an ex gratia payment to the employee on the grounds of ill-health.

The manager will advise the employee of their decision in writing after the meeting. The employee has the right to appeal the decision. All appeals will be conducted in accordance with the **BBC Appeals Policy**.

Associated Policies and Documents:

- BBC Wellbeing Strategy
- BBC Guide to Supporting, Retaining and Recruiting Disabled Staff
- BBC's Data Protection Handbook
- Guide to Occupational Health Referrals
- BBC Appeals Policy

15. Appendix 1 Medical Examinations and Occupational Health Referrals

As set out in the principles above, medical examinations and referrals to the BBC's Occupational Health service are proactive measures to support staff wellbeing and high levels of attendance.

The reasons for a referral to the Occupational Health Service include, but are not limited to seeking independent medical advice on the following;

- to support general wellbeing and acceptable levels of attendance
- fitness to attend and carry out work
- ability to carry out their duties effectively and, in the case of disabilities, advice on what reasonable adjustments the manager may consider providing
- the long term prognosis for return to and sustained attendance in work
- health and safety risks
- roles that have special medical or health surveillance requirements
- they have been offered a role overseas
- Night working under the *Working Time Regulations 1998*

If an employee chooses not to attend an examination or consultation the BBC will make decisions and manage attendance as set out in this policy on the information which is available which may ultimately have consequences for the staff members continued employment.

The manager must explain to the individual the reason for the referral and the arrangements for the examination(s).

Employees will be offered the opportunity to view the BBC Occupational Health Service report prepared on them, prior to it being sent to the manager.

If necessary, the employee will be asked to give consent for the BBC's Occupational Health Service to consult with their own doctor and the employee should respond to such a request without unreasonable delay. Any medical report sent by their doctor will be provided in accordance with the *Access to Medical Reports* legislation.

The full procedure for making a referral to the Occupational Health Service is set out on [Gateway](#).

O achos y sefyllfa bresennol gyda'r Coronafeirws, rydym yn gwneud eithriadau dros dro i nifer o bolisiau Adnoddau Dynol er mwyn ein galluogi i'ch cefnogi a'ch sicrhau ein bod yn parhau i gyflawni ein hallbwn allweddol. Ewch i'r dudalen eithriadau dros dro i gael mwy o wybodaeth.

Polisi Rheoli Iechyd a Phresenoldeb

Diweddarwyd diwethaf: 28 Tachwedd 2019

Perchennog polisi: Cyfarwyddwr AD, Cysylltiadau Gweithwyr

Crynodeb

Mae'r BBC yn gweithio orau pan fydd ein gweithwyr yn teimlo eu bod yn cael cefnogaeth yn y gwaith. Mae gan weithwyr gyfrifoldeb i reoli eu hiechyd a'u lles eu hunain. Fodd bynnag, mae'n ddyletswydd ar reolwyr hefyd i gefnogi iechyd a lles eu timau a sicrhau lefelau derbyniol o bresenoldeb.

Cynulleidfa: Mae'r polisi hwn yn rhan o'r contract cyflogaeth sy'n berthnasol i weithwyr y BBC yn y DU, Ynysoedd y Sianel ac Ynys Manaw ar Fandiau A-Fp, ac mae'n ddatganiad y cytunwyd arno rhwng y BBC a chyd-undebau cydnabyddedig y gellir ei amrywio drwy gyd-drafod yn y Cyd-gyngor Cenedlaethol yn unig.

5 Pwynt Allweddol y polisi hwn

1. Dylai rheolwyr a gweithwyr ymgysylltu'n adeiladol wrth fynd i'r afael â materion iechyd a phresenoldeb;
2. Dylai rheolwyr a gweithwyr ddefnyddio adnoddau lles cefnogol a ddarperir gan y BBC;
3. Ar yr amod bod gweithwyr wedi cydymffurfio â'u rhwymedigaethau, bydd y BBC yn talu 18 wythnos o dâl llawn a 9 wythnos o hanner tâl mewn cyfnod treigl o 12 mis yn ystod cyfnodau o absenoldeb sy'n gysylltiedig ag iechyd.
4. Dylai rheolwyr gychwyn y broses ar gyfer rheoli lefelau presenoldeb a nodir yn y polisi hwn os cyrhaeddir unrhyw un o'r pwyntiau sbarduno isod:
 - a. 3 achos o absenoldeb mewn cyfnod treigl o 12 wythnos
 - b. 5 achos o absenoldeb mewn cyfnod treigl o 12 mis
 - c. 28 diwrnod yn olynol o absenoldeb
5. Wrth drafod presenoldeb gyda gweithiwr, dylai'r rheolwr ystyried a yw anabledd gwaelodol yn effeithio ar lefelau presenoldeb.

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1. Diffiniad

Mae'r polisi hwn yn nodi sut y bydd y BBC yn cefnogi gweithwyr i gynnal eu hiechyd a'u lles ac i sicrhau lefelau presenoldeb derbyniol yn y gwaith. Mae hefyd yn nodi'r broses ar gyfer rheoli absenoldebau ysbeidiol tymor byr sy'n gysylltiedig ag ieched, neu absenoldeb hirdymor sy'n gysylltiedig ag ieched.

2. Egwyddorion

- *Mae gan reolwyr gyfrifoldeb i gefnogi a rheoli ieched a lles eu timau a chyflawni lefelau derbyniol o bresenoldeb. Dylid rheoli materion ac absenoldebau sy'n gysylltiedig ag ieched yn sensitif;*
- *Mae gweithwyr yn gyfrifol am reoli eu hieched a'u lles eu hunain, ac fe'u hanogir i fynd ati i ddefnyddio adnoddau cefnogol sy'n gysylltiedig â lles a ddarperir gan y BBC ac i ymgysylltu'n adeiladol ag ymdrechion y rheolwyr i gefnogi a rheoli eu lles a'u presenoldeb;*
- *Mae'r BBC yn darparu ystod o adnoddau lles cefnogol;*
- *Mae Gwasanaeth Iechyd Galwedigaethol (IG) y BBC yn un o'r adnoddau cefnogol a ddarperir yn y Strategaeth Lles. Gall rheolwyr atgyfeirio gweithwyr i'r gwasanaeth IG i gael cyngor a/neu archwiliad ar unrhyw adeg yn ystod eu cyflogaeth. Gall gweithwyr hefyd ofyn i'w rheolwr eu cyfeirio at ieched galwedigaethol os oes ganddynt bryder am eu gwaith a'u hieched;*
- *Os yw gweithiwr o'r farn bod anabledd neu unrhyw gyflwr meddygol yn effeithio arnynt, sy'n effeithio ar eu gallu i wneud eu gwaith, dylent hysbysu eu rheolwr;*
- *Os yw gweithwyr yn methu â dilyn y gofynion a nodir yn y polisi hwn neu os oes gan y rheolwr resymau y gellir eu cyfiawnhau i amau cywirdeb y dystiolaeth a ddarperir, gellir defnyddio **Polisi Disgyblu'r BBC**.*
- *Defnyddir y polisi hwn yn unol â'r Ddeddf Diogelu Data a **Llawlyfr Diogelu Data'r BBC**.*

3. Absenoldeb yn gysylltiedig ag ieched

Anabledd

Mae'r BBC yn cydnabod y gallai absenoldeb sy'n gysylltiedig ag ieched ddeillio o anabledd.

Rhoddir ystyriaeth arbennig i weld a yw unrhyw absenoldeb yn gysylltiedig ag anabledd ar bob cam o'r weithdrefn ar gyfer rheoli ieched a phresenoldeb fel y nodir yn y polisi hwn, gan gynnwys a ellid gwneud unrhyw addasiadau rhesymol i ofynion y rôl neu agweddau eraill ar weithio yn y BBC, a fyddai'n darparu cefnogaeth a/neu'n cynorthwyo i sicrhau lefelau presenoldeb derbyniol. Dylai'r rheolwr ddarparu cefnogaeth briodol os cyrhaeddir pwyntiau sbarduno. Pan gyrhaeddir pwynt sbarduno, dylai'r rheolwr ofyn am gyngor annibynnol gan Iechyd Galwedigaethol, gan gynnwys a ellid gwneud unrhyw addasiadau rhesymol i'r gweithdrefnau a nodir yn y polisi hwn ar gyfer rheoli presenoldeb. Mae'r BBC yn

cydnabod y gallai absenoldeb salwch fod yn gysylltiedig ag anabledd. Pan fydd gweithiwr yn anabl neu'n dod yn anabl yn ystod ei gyflogaeth, defnyddir Canllaw'r BBC i Gefnogi, Cadw a Recriwtio Staff Anabl.

Beichiogrwydd

Rhoddir ystyriaeth arbennig i weld a yw unrhyw absenoldeb yn gysylltiedig â beichiogrwydd ar bob cam o'r weithdrefn ar gyfer rheoli iechyd a phresenoldeb fel y nodir yn y polisi hwn. Dylai'r rheolwr ddarparu cefnogaeth briodol os cyrhaeddir pwyntiau sbarduno. Pan gyrhaeddir pwynt sbarduno oherwydd absenoldeb yn ymwneud â beichiogrwydd cyn genedigaeth, dylid rheoli cefnogaeth yn anffurfiol.

4. Gweithdrefn adrodd

Ar eu diwrnod gwaith cyntaf o absenoldeb salwch, rhaid i weithwyr hysbysu eu rheolwr, neu unigolyn dynodedig arall, o leiaf 30 munud cyn bod disgwyl iddynt ddechrau gweithio neu cyn gynted ag sy'n rhesymol ymarferol. Dylai'r gweithiwr gadarnhau'r rheswm neu natur ei absenoldeb sy'n gysylltiedig ag iechyd a hyd disgwylid yr absenoldeb.

Dylent hefyd roi eu manylion cyswllt cyfredol i'w rheolwr. Rhaid i weithwyr barhau i hysbysu eu rheolwr am eu cynnydd a'u dyddiad dychwelyd i'r gwaith tebygol.

Yn ystod cyfnodau o absenoldeb sy'n gysylltiedig ag iechyd, gall eu rheolwr neu AD gysylltu â gweithwyr, er mwyn trafod eu lles.

Gall rheolwyr gysylltu â gweithwyr yn ystod cyfnodau o absenoldeb sy'n gysylltiedig ag iechyd ar gyfer unrhyw ymholiad brys sy'n gysylltiedig â gwaith os nad oes unrhyw ddewis ymarferol arall. Dylai'r cyswllt fod ar lefel resymol gan gadw mewn cof bod y gweithiwr yn absennol oherwydd ei iechyd.

Gall gweithwyr hunan-ardystio, ar lafar neu'n ysgrifenedig, gyfnodau o absenoldebau sy'n gysylltiedig ag iechyd sy'n saith niwrnod calendr yn olynol, neu lai. Ar gyfer cyfnodau o absenoldeb cysylltiedig ag iechyd sy'n wyth diwrnod calendr yn olynol neu fwy, rhaid i weithwyr ddarparu Datganiad Ffit i Weithio wedi'i lofnodi (Nodyn Ffitrwydd).

Rhaid i'r rheolwr sicrhau bod yr absenoldeb a'r rheswm/categori yn cael eu cofnodi yn y system recordio adrannol.

Bydd absenoldeb na chafodd ei hysbysu yn unol â'r weithdrefn adrodd uchod yn cael ei drin fel absenoldeb anawdurdodedig.

5. Tâl salwch statudol

Mae Tâl Salwch Statudol (TSS) yn isafswm taliad wythnosol y mae'n rhaid i gyflogwyr ei dalu am 28 wythnos i weithwyr cymwys. Efallai y bydd gan weithwyr sydd wedi'u heithrio rhag derbyn TSS, neu sydd wedi disbyddu eu hawl i TSS, yr hawl i gael budd-daliadau salwch gan y wladwriaeth.

6. Tâl absenoldeb y BBC sy'n gysylltiedig ag iechyd

Ar yr amod bod gweithwyr wedi cydymffurfio â'u rhwymedigaethau yn y polisi hwn, bydd y BBC yn talu 18 wythnos o dâl llawn a 9 wythnos o hanner tâl am bob 12 mis treigl yn ystod cyfnodau o absenoldeb sy'n gysylltiedig ag iechyd, mewn cyfnod treigl o 12 mis. Mae hyn yn golygu, ar yr adeg y gofynnir am dâl salwch, y bydd yn rhaid i chi edrych yn ôl dros y 12 mis diwethaf i weld faint o hawl â thâl sydd ar gael.

Pan fydd Tâl Salwch y BBC wedi'i ddisbyddu yn ystod cyfnod o absenoldeb parhaus, bydd yr hawl dreigl yn ailgychwyn ar ôl dychwelyd i'r gwaith.

Mae Tâl Absenoldeb y BBC sy'n gysylltiedig ag iechyd yn dâl blynyddol sylfaenol ar yr adeg y mae absenoldeb cysylltiedig ag iechyd yn cychwyn ac unrhyw lwfansau parhaus a fyddai fel arfer yn cael eu talu yn ystod absenoldeb awdurdodedig; nid yw'n cynnwys unrhyw daliadau ychwanegol e.e. taliadau nos. Mae Tâl Absenoldeb Iechyd y BBC yn cynnwys unrhyw Dâl Salwch Statudol.

Os yw gweithiwr yn cyrraedd terfynau ei Dâl Absenoldeb Iechyd y BBC neu TSS, dylai'r rheolwr eu cynghori'n ysgrifenedig, gan roi o leiaf 1 mis o rybudd.

7. Absenoldeb yn gysylltiedig ag iechyd a gwyliau blynyddol

Efallai y credydir absenoldeb i weithwyr sy'n absennol oherwydd eu hiechyd yn ystod cyfnod o wyliau blynyddol, os ydynt yn darparu Datganiad Ffit i Weithio (Nodyn Ffitrwydd) neu dystysgrif feddygol debyg gan feddyg lleol (os yw'r gweithiwr oddi cartref) yn cadarnhau dyddiadau'r afiechyd. Ni dderbynnir hunan-ardystiad fel tystiolaeth o dan yr amgylchiadau hyn.

Gall gweithwyr na allant gymryd eu gwyliau yn y flwyddyn y cafodd ei gronni oherwydd absenoldeb hirdymor cysylltiedig ag iechyd, gario uchafswm o 20 diwrnod (sy'n cyfateb i 140 awr) o wyliau blynyddol drosodd i'r flwyddyn wyliau ganlynol. Dylai'r rheolwr gymeradwyo'r gwyliau sy'n cael ei gario drosodd ymlaen llaw, a rhaid ei gymryd cyn pen 18 mis o ddiwedd y flwyddyn wyliau y cafodd ei gronni neu bydd yn darford.

8. Amser i ffwrdd ar gyfer apwyntiadau meddygol

Dylai gweithwyr geisio trefnu apwyntiadau y tu allan i'w horiau gwaith lle bynnag y bo hynny'n bosibl; fodd bynnag, lle nad yw hyn yn bosibl, dylid cymryd dull hyblyg a rhesymol gan y rheolwr a'r gweithiwr i hwyluso presenoldeb mewn apwyntiadau/triniaethau meddygol. Dylid derbyn ceisiadau am amser i ffwrdd â thâl heb fod angen cymryd gwyliau blynyddol na defnyddio cloeon. Dylid trafod amser i ffwrdd ar gyfer triniaethau rheolaidd neu apwyntiadau meddygol gyda'r rheolwr llinell a dylid eu rheoli'n sensitif ac yn sympathetig mewn ffordd sy'n blaenoriaethu lles y gweithiwr.

9. Clefydau Heintus

Dylai gweithwyr sydd wedi bod mewn cysylltiad agos (e.e. ag aelod o'u teulu agos) â chlefyd heintus neu ymledol, fel twbercwlosis, brech yr ieir, y frech goch, llid yr ymennydd neu gyflwr difrifol arall y gellid ei drosglwyddo i gydweithwyr, hysbysu eu rheolwr a gofyn am gyngor gan eu meddyg neu Wasanaeth

lechyd Galwedigaethol y BBC ar yr angen i gadw draw o'r gwaith. Mae hyn yn arbennig o bwysig os yw un o'u cydweithwyr yn feichiog. Os yw'n ofynnol iddynt beidio â mynychu'r gwaith fel mesur rhagofalus, rhoddir absenoldeb â thâl iddynt.

Rhaid i weithwyr ddilyn y gweithdrefnau arferol ar gyfer absenoldeb salwch os ydynt yn dioddef o glefyd heintus neu ymledol. Os cânt eu cynghori i beidio â gweithio, ni all gweithwyr dychwelyd heb ganiatâd eu meddyg neu Wasanaeth Iechyd Galwedigaethol y BBC.

10. Absenoldeb yn gysylltiedig ag iechyd oherwydd damwain pan nad oeddent ar ddyletswydd

Os oes gan weithiwr gyfnod o absenoldeb yn gysylltiedig ag iechyd o ganlyniad i ddamwain neu anaf a achoswyd gan drydydd parti, y gallai iawndal fod yn daladwy mewn perthynas ag ef, rhaid i weithwyr hysbysu eu rheolwr ar unwaith a'u hysbysu am y ffaith honno ac am unrhyw hawliad cyfaddawd, setliad neu ddyfarniad a wnaed neu a ddyfarnwyd mewn cysylltiad ag ef, a'r holl fanylion perthnasol y gall y BBC ofyn amdanynt o fewn rheswm.

Bydd y gweithiwr yn gymwys i gael Tâl Absenoldeb Iechyd y BBC. Rhaid i'r gweithiwr wneud ymdrechion rhesymol i adfer iawndal gan y trydydd parti am enillion coll dros unrhyw gyfnod y mae'r gweithiwr wedi, neu am gael tâl Absenoldeb Iechyd y BBC. Rhaid i'r gweithiwr ad-dalu unrhyw iawndal a adenillwyd am enillion coll i'r BBC, yn ychwanegol at dâl salwch statudol a llai unrhyw gostau rhesymol y mae'n eu hwynebu wrth wneud hynny. Rhaid i'r gweithiwr roi gwybod i'w reolwr am gychwyn, cynnydd a chanlyniad unrhyw ymdrechion i adfer iawndal.

Os ad-delir y tâl absenoldeb iechyd i'r BBC yn llawn, ni fydd y cyfnod o absenoldeb sy'n gysylltiedig ag iechyd yn cael ei gynnwys wrth gyfrifo a yw gweithiwr wedi cyrraedd ei derfyn Tâl Absenoldeb Iechyd y BBC. Fodd bynnag, os na wneir ad-daliad neu y gwneir ad-daliad yn rhannol, bydd y BBC yn penderfynu i ba raddau y bydd y cyfnod o absenoldeb sy'n gysylltiedig ag iechyd yn cael ei ystyried, yn ôl ei ddisgresiwn.

11. Rheoli lles a phresenoldeb

Fel y nodir yn yr egwyddorion uchod, dylai rheolwyr fynd ati i gefnogi a rheoli lles eu tîm. Dylai staff ymgysylltu'n adeiladol â'u rheolwr a defnyddio'r adnoddau lles a ddarperir gan y BBC a nodir yn y Strategaeth Lles. Mae hyn yn cynnwys atgyfeiriadau iechyd galwedigaethol (gweler atodiad 1 am ragor o fanylion ynghylch atgyfeiriadau iechyd galwedigaethol)

12. Sgwrs dychwelyd i'r gwaith

Pan fydd aelod o staff wedi cymryd unrhyw gyfnod o absenoldeb yn gysylltiedig ag iechyd, dylai'r rheolwr ystyried cynnal a dychwelyd sgwrs dychwelyd i'r gwaith. Mae'r sgwrs yn gefnogol a'i bwriad yw deall y rheswm dros absenoldeb a pha gefnogaeth y gellir ei rhoi i'w helpu i dychwelyd i'r gwaith a lleihau'r gobaith o absenoldeb pellach.

Gellir ystyried atgyfeiriad i Wasanaeth Iechyd Galwedigaethol y BBC ar yr adeg hon er mwyn cael cyngor meddygol annibynnol ar ba gymorth neu fesurau ychwanegol y gellir eu hystyried i gefnogi lles a

phresenoldeb. Gall y rheolwr hefyd gyfeirio'r aelod o staff at yr adnoddau sydd ar gael a allai fod o gymorth yn y Strategaeth Lles.

13. Dychwelyd yn raddol i'r gwaith

Pan fo aelod o staff wedi bod, neu yn absennol o'r gwaith am resymau cysylltiedig ag iechyd, dylai'r rheolwr ystyried a oes angen dychwelyd i'r gwaith yn raddol neu a fyddai'n hwyluso dychwelyd i'r gwaith yn gynnar ac yn barhaus. Gellir cael cyngor penodol ar ddychwelyd i'r gwaith a rhinweddau dull graddol trwy atgyfeirio at Wasanaeth Iechyd Galwedigaethol y BBC.

Gall dychwelyd yn raddol gynnwys:

- Gweithio llai o oriau nag oriau cytundebol arferol aelodau staff - fel arfer lle mae'r absenoldeb cysylltiedig ag iechyd yn achosi neu wedi arwain at flinder;
- Gweithio oriau cytundebol llawn ond gyda llai o lwyth gwaith;
- Gweithio yn eu cartrefi neu gydag amseroedd cychwyn/gorffen wedi'u newid.

Telir am ddychwelyd yn raddol i'r gwaith ar gyfradd tâl llawn arferol y gweithiwr am hyd at 4 wythnos. Rhaid i ddychweliadau graddol i'r gwaith gael eu llywio a'u hargymell gan atgyfeiriad Iechyd Galwedigaethol neu Nodyn Ffitrwydd Meddyg Teulu.

14. Rheoli gweithdrefn absenoldeb yn gysylltiedig ag iechyd

Dylai rheolwyr a staff ddefnyddio adnoddau yn y Strategaeth Lles i fynd ati i reoli eu lles a chyflawni lefelau presenoldeb derbyniol o ddydd i ddydd. Os oes gan aelod o staff lefelau absenoldeb yn unol ag unrhyw un o'r sbardunau ymyrraeth isod, dylai fod yn ysgogiad i'r rheolwr a'r aelod staff y gallai dull mwy strwythuredig fod yn fwy effeithiol.

- Cyfnod o absenoldeb hirdymor sy'n gysylltiedig ag iechyd o 4 wythnos (28 diwrnod calendr) neu fwy;
- 3 achos neu fwy o absenoldeb tymor byr sy'n gysylltiedig ag iechyd mewn cyfnod treigl o 12 wythnos;
- 5 achos neu fwy o absenoldeb tymor byr sy'n gysylltiedig ag iechyd mewn cyfnod treigl o 12 mis;

Dylai'r broses tri cham a amlinellir isod gael ei chaniatau felly. Cyfeiriwch at Adran 3 ynghylch Anabledd neu Feichiogrwydd.

Adolygiad 1-1 Ffurfiol

Bydd y rheolwr yn trefnu adolygiad gyda'r gweithiwr i drafod ei iechyd a'i absenoldeb cysylltiedig. Bydd yr adolygiad anffurfiol yn cael ei gynnal mewn da bryd yn dilyn yr absenoldeb.

Yn achos absenoldeb ysbeidiol tymor byr, dylai'r rheolwr ystyried a oes angen cyngor iechyd galwedigaethol ar hyn o bryd i helpu i ddeall unrhyw gyflyrau iechyd gwaelodol a sut y gellir dychwelyd yn barhaus i'r gwaith neu wella lefel presenoldeb. Mewn achosion o absenoldeb tymor hir, rhaid atgyfeirio at iechyd galwedigaethol fel mater o drefn. Dylai'r rheolwr a'r aelod staff hefyd ystyried a fyddai'n fuddiol manteisio ar unrhyw un o ddarpariaethau lles y BBC a amlinellir yn y strategaeth Lles.

Dylai'r drafodaeth fod yn gefnogol a'i bwriad yw deall y rheswm (rhesymau) dros yr absenoldeb yn llawn; anghenion iechyd uniongyrchol yr aelod staff; prognosis ar gyfer dychwelyd i'r gwaith a/neu lefelau presenoldeb gwell; a pha gymorth y gellir ei roi i hwyluso dychwelyd i'r gwaith a/neu leihau'r posibilrwydd o absenoldeb pellach. Dylai'r rheolwr hefyd ystyried hanes gwasanaeth a phresenoldeb llawn y gweithiwr wrth farnu a oes angen cymryd camau pellach ai peidio.

Bydd y rheolwr yn cadarnhau'r trafodaethau ac unrhyw gamau y cytunwyd arnynt i'r gweithiwr yn ysgrifenedig, i hwyluso gwelliannau yn lefelau iechyd a phresenoldeb y gweithiwr.

Mewn achosion o absenoldeb ysbeidiol tymor byr, bydd y rheolwr yn cadarnhau'r lefel dderbyniol o bresenoldeb yn y dyfodol ac unrhyw gyfnod adolygu (a all fod hyd at 9 mis) cyn cynnal cyfarfod adolygu ffurfiol. Dylai'r cyfnod adolygu a lefel dderbyniol o bresenoldeb yn y dyfodol gael eu llywio gan gyngor meddygol, a'r lefelau presenoldeb a nodir yn y pwyntiau sbarduno uchod (pro rata). Yn ystod y cyfnod adolygu, dylai'r rheolwr roi'r wybodaeth ddiweddaraf i'r gweithiwr am ei gynnydd yn erbyn y lefelau presenoldeb disgwyledig a derbyniol.

Mewn achosion o absenoldeb tymor hir, bydd y rheolwr yn cadarnhau unrhyw gyfnod a dyddiad adolygu ar gyfer adolygiad dilynol neu Gyfarfod Adolygu Ffurfiol os oes angen un. Fel rheol, dylid cynnal cyfarfod adolygu ffurfiol ddim mwy na 6 wythnos ar ôl yr adolygiad anffurfiol, os parheir i fod yn absennol.

Mewn achosion o absenoldeb tymor byr a thymor hir, gall y rheolwr ystyried ei bod yn briodol cynnal mwy nag un cyfarfod adolygu anffurfiol cyn symud ymlaen i gyfarfod adolygu cam 2.

Cyfarfod Adolygu Ffurfiol

Os na fydd gwelliant digonol yn y presenoldeb yn ystod y cyfnod adolygu, bydd y rheolwr yn trefnu cyfarfod Adolygu Ffurfiol gyda'r gweithiwr i archwilio'r rhesymau dros yr absenoldeb parhaus neu fynych.

Mae gan aelodau staff hawl i gael cynrychiolydd undeb llafur achrededig neu gydweithiwr (ac eithrio cyfreithiwr wrth ei waith) mewn unrhyw gyfarfod adolygu ffurfiol os dymunant.

Yn yr un modd â'r adolygiad anffurfiol, dylai'r prif ffocws fod ar hwyluso gwell iechyd a lles, dychwelyd i'r gwaith a/neu lefelau presenoldeb gwell. Dylai'r cyfarfod adolygu ffurfiol hefyd fod yn adolygiad o unrhyw gamau y cytunwyd arnynt yn y cyfarfod anffurfiol, lefelau presenoldeb ers yr adolygiad anffurfiol a/neu'r prognosis ar gyfer dychwelyd i'r gwaith.

Yn achos absenoldeb tymor hir oherwydd afiechyd neu anaf sy'n debygol o amharu'n barhaol ac yn sylweddol ar eu gallu i ennill, dylid ystyried cymhwysedd posibl ar gyfer ymddeol oherwydd afiechyd. Bydd hyn yn dibynnu ar delerau cymhwysedd y trefniant pensiwn perthnasol y gall y gweithiwr fod yn aelod ohono. Ar gyfer gweithwyr sy'n aelodau gweithredol o Gynllun Pensiwn y BBC, dylid comisiynu asesiad meddygol annibynnol o gymhwysedd trwy iechyd galwedigaethol. Ar gyfer trefniadau pensiwn eraill y BBC, dylid cyfeirio'r gweithiwr at ei ddarparwr pensiwn.

Canlyniadau posibl cyfarfod adolygu ffurfiol yw:

- Mewn achosion o absenoldeb ysbeidiol tymor byr a hirdymor, gall y rheolwr ohirio a/neu ymestyn cyfnod adolygu ffurfiol cyn ailymgynnull ar gyfer cyfarfod adolygu ffurfiol pellach. Gall hyn fod yn briodol yn arbennig os yw'r camau y cytunwyd arnynt yn y cam adolygu anffurfiol yn parhau i fod heb eu cyflawni; a/neu bu newid mewn amgylchiadau a allai effeithio ar lefelau presenoldeb y gweithiwr; a/neu mae angen cyngor wedi'i ddiweddarau gan y gwasanaeth iechyd galwedigaethol; a/neu mae prognosis positif ar gyfer dychwelyd i'r gwaith.
- Mewn achosion o absenoldeb ysbeidiol tymor byr, gall y rheolwr ystyried nad oes gwelliant annigonol wedi'i gyflawni yn ystod y cyfnod adolygu. Yna gall y rheolwr ystyried ei bod yn briodol cael cyfnod adolygu pellach neu gynnull gwrandawriad ffurfiol gyda'r gweithiwr fel y nodir isod.

Mewn achosion o absenoldeb salwch hirdymor lle mae'r prognosis ar gyfer dychwelyd yn cael ei ystyried yn wael neu'n aneglur gan Wasanaeth Iechyd Galwedigaethol y BBC, a/neu mae asesiad meddygol annibynnol yn nodi bod y gweithiwr yn bodloni'r meini prawf ar gyfer ymddeoliad afiechyd o dan y cynllun pensiwn perthnasol, gall y rheolwr hysbysu'r aelod staff y bydd gwrandawriad ffurfiol yn cael ei gynnull fel y nodir isod.

Gwrandawriad Ffurfiol

Os na fydd gwelliant digonol ar ôl yr adolygiad ffurfiol, bydd y rheolwr yn trefnu gwrandawriad ffurfiol i ystyried cynaliadwyedd parhaus unrhyw absenoldeb hirdymor neu absenoldeb salwch ysbeidiol tymor byr parhaus. Rhoddir gwybod i'r gweithiwr ymlaen llaw am y rhesymau dros y gwrandawriad ac y gallai canlyniad y gwrandawriad arwain at derfynu ei gyflogaeth. Bydd y gweithiwr yn cael unrhyw ddogfennau a thystiolaeth y bydd y rheolwr yn eu hystyried yn ystod proses y gwrandawriad.

Dylai gweithwyr gymryd pob cam rhesymol i fynychu'r cyfarfod. Mae gan y gweithiwr yr hawl i gael cynrychiolydd undeb llafur achrededig neu gydweithiwr yn y BBC (ac eithrio cyfreithiwr wrth ei waith) i ddod gydag ef i'r cyfarfod.

Caniateir i'r gweithiwr gael digon o rybudd o'r cyfarfod i gael amser i gysylltu a rhoi briff i gynrychiolydd achrededig neu gydweithiwr yn y BBC, yn ogystal â chael cofnodion meddygol perthnasol a allai fod o fudd i'r gwrandawriad.

Gall y rheolwr drefnu cofnodydd i gymryd nodiadau cryno o'r cyfarfod. Anfonir copi o'r nodiadau cryno at y gweithiwr a'i gynrychiolydd (os yw'n briodol) i gael sylwadau. Ar yr amod y ceir sylwadau o fewn amserlen resymol, fel y'u diffinnir gan reolwr y gwrandawriad, cânt eu cadw gyda'r nodiadau gwreiddiol o'r cyfarfod.

Dylai'r rheolwr ystyried materion fel y canlynol yn ystod y cyfarfod (nid ydynt yn gynhwysfawr):

- Y cyngor meddygol gan gynnwys prognosis y gweithiwr ac unrhyw argymhellion, ac a oes angen cyngor pellach;
- yr effaith y mae'r cyflwr meddygol a/neu absenoldebau'r gweithiwr yn ei chael ar berfformiad y gweithiwr yn ei rôl bresennol;
- yr effaith y mae absenoldebau'r gweithiwr yn ei chael ar y busnes; a'r
- addasiadau rhesymol y gellid eu gwneud i alluogi eu bod yn dychwelyd i'r gwaith.

Cyn i reolwr y gwrandawriad wneud unrhyw benderfyniad, dylid ystyried a ddylid gwneud unrhyw addasiad rhesymol i ganlyniad y cam hwn o'r broses, er enghraifft, a ddylid ymestyn y broses ei hun yn rhesymol trwy ychwanegu cyfarfod adolygu ffurfiol pellach, lle mae'r absenoldeb dan sylw mewn perthynas ag anabledd.

Canlyniadau posibl y gwrandawriad ffurfiol yw:

- gwneud addasiadau rhesymol pellach i amodau gwaith swydd bresennol y gweithiwr;
- gweithredu cynllun adfer pellach;
- chwilio am gyflogaeth amgen addas o fewn y BBC;
- gall rheolwr y gwrandawriad benderfynu gohirio'r gwrandawriad ac ailymgynnull yn ddiweddarach os oes angen ymchwilio ymhellach cyn y gellir dod i benderfyniad;

Pan fo gweithiwr wedi'i hysbysu yn y gorffennol y gallai ei gyflogaeth fod mewn perygl os bydd yr absenoldeb yn parhau, gall y rheolwr hefyd ystyried:

- derfynu cyflogaeth ar sail ymddeoliad afiechyd yn amodol ar rybudd cytundebol; neu

terfynu'r gyflogaeth ar sail anallu'r gweithiwr i gyflawni'r swydd a/neu lefelau absenoldeb/presenoldeb parhaus yn amodol ar rybudd cytundebol.

Fel rheol, dim ond ar sail analluogrwydd meddygol a/neu lefelau absenoldeb parhaus a/neu bresenoldeb y gweithiwr y bydd cyflogaeth gweithiwr yn cael ei therfynu, os na ellir gwneud addasiadau rhesymol i'r amgylchedd gwaith neu os na ellir dod o hyd i gyflogaeth amgen addas o fewn cyfnod rhesymol. Rhaid i reolwr y gwrandawriad ofyn am gyngor gan Gyngor i Reolwyr cyn dod â chyflogaeth i ben ar y seiliau hyn.

Pan fydd swydd yn cael ei therfynu, gall pensiwn analluogrwydd fod yn berthnasol ar y sail na all unigolyn gyflawni ei alwedigaeth arferol ac mae hyn yn debygol o amharu'n barhaol ac yn sylweddol ar ei allu i ennill.

Pan nad yw taliadau pensiwn o'r fath yn berthnasol, gall y rheolwr, ar y cyd â'r Partner Busnes AD, ystyried a yw'n briodol gwneud taliad ex gratia i'r gweithiwr ar sail afiechyd.

Bydd y rheolwr yn hysbysu'r gweithiwr o'i benderfyniad yn ysgrifenedig ar ôl y cyfarfod. Mae gan y gweithiwr yr hawl i apelio yn erbyn y penderfyniad. Bydd pob apel yn cael ei chynnal yn unol â **Pholisi Apeliadau'r BBC**.

Polisiau a Dogfennau Cysylltiedig:

- Strategaeth Lles y BBC
- Canllaw'r BBC i Gefnogi, Cadw a Recriwtio Staff Anabl
- Llawlyfr Diogelu Data'r BBC
- Canllaw i Atgyfeiriadau Iechyd Galwedigaethol
- Polisi Apeliadau'r BBC

15. Atodiad 1 Archwiliadau meddygol ac atgyfeiriadau iechyd galwedigaethol

Fel y nodir yn yr egwyddorion uchod, mae archwiliadau meddygol ac atgyfeiriadau i wasanaeth lechyd Galwedigaethol y BBC yn fesurau rhagweithiol i gefnogi lles staff a lefelau uchel o bresenoldeb.

Mae'r rhesymau dros atgyfeiriad i'r Gwasanaeth Iechyd Galwedigaethol yn cynnwys, ond nid wedi'u cyfyngu, i geisio cyngor meddygol annibynnol ar y canlynol;

- cefnogi lles cyffredinol a lefelau presenoldeb derbyniol
- ffitrwydd i fynychu a gwneud gwaith
- y gallu i gyflawni eu dyletswyddau yn effeithiol, ac yn achos anabledau, i gael cyngor ar ba addasiadau rhesymol y gall y rheolwr ystyried eu rhoi
- y prognosis hirdymor ar gyfer dychwelyd i'r gwaith a phresenoldeb parhaus yn y gwaith
- risgiau iechyd a diogelwch
- rolau sydd â gofynion meddygol neu wylwadwriaeth iechyd arbennig
- cynigiwyd rôl iddynt dramor
- Gweithio yn y nos o dan *Reoliadau Amser Gwaith 1998*

Os bydd gweithiwr yn dewis peidio â mynychu archwiliad neu ymgynghoriad, bydd y BBC yn gwneud penderfyniadau ac yn rheoli presenoldeb fel y nodir yn y polisi hwn ar y wybodaeth sydd ar gael, a allai effeithio yn y pen draw ar gyflogaeth barhaus aelodau staff.

Rhaid i'r rheolwr esbonio'r rheswm dros yr atgyfeiriad a'r trefniadau ar gyfer yr archwiliad(au) i'r unigolyn.

Bydd gweithwyr yn cael cynnig cyfle i weld adroddiad Gwasanaeth Iechyd Galwedigaethol y BBC a baratowyd arnynt, cyn iddo gael ei anfon at y rheolwr.

Os oes angen, gofynnir i'r gweithiwr roi caniatâd i Wasanaeth Iechyd Galwedigaethol y BBC ymgynghori â'u meddyg eu hunain, a dylai'r gweithiwr ymateb i gais o'r fath heb oedi afresymol. Bydd unrhyw adroddiad meddygol a anfonir gan eu meddyg yn cael ei ddarparu yn unol â'r ddeddfwriaeth *Mynediad at Adroddiadau Meddygol*.

Mae'r weithdrefn lawn ar gyfer atgyfeirio i'r Gwasanaeth Iechyd Galwedigaethol wedi'i nodi ar [Gateway](#).