

AUAS Incapacity Protocol / Procedure during the first and second year of incapacity

Active role required from both staff member and supervisor

If a staff member is absent due to incapacity for work, then the staff member and his/her supervisor must actively work towards the staff member's quick and sustainable rehabilitation. They will jointly manage the rehabilitation process and take all necessary action in a timely manner. The occupational physician or other experts from the occupational health and safety service or UWV will provide advisory and other services.

Case management in the event of incapacity

The supervisors are responsible for the management and execution of the rehabilitation support. During this process, he/she can call upon support from an HR adviser or an internal rehabilitation support officer in line with the agreements specified within the organisational unit in question. Supervisors and HR will ensure that the staff members are properly informed about working methods surrounding rehabilitation support.

AUAS Incapacity Protocol

The AUAS Incapacity Protocol contains the steps that must be taken during the first and second year of incapacity. These steps are based on the Collective Labour Agreement for Universities of Applied Sciences, the Eligibility for Permanent Incapacity Benefit (Restrictions) Act (*Wet verbetering Poortwachter*), the Procedural Regulations for the First and Second Year of Incapacity (*Regeling Procesgang eerste en tweede ziektejaar*), the UWV's Incapacity Benefit Procedure and the AUAS Incapacity Policy (and internal agreements relating thereto).

Incapacity and privacy

To protect the privacy of staff members, it is vital that privacy legislation is complied with during the rehabilitation support process. This legislation stipulates what information supervisors are permitted to request and record. It is important to know that conversations between supervisors and staff must not address the incapacity itself, the nature of the symptoms, the treatment or the functional restrictions involved: these are matters that the staff member in question will discuss with the occupational physician or other medical specialists. Issues that the supervisors and staff will discuss include measures necessary to promote rehabilitation and concrete duties that the staff member in question is capable of performing.

UWV forms¹

Whenever the Incapacity Protocol refers to official [UWV forms](#) (such as the Action Plan, First Year Evaluation and Final Action Plan Evaluation forms), a link to www.uwv.nl will be provided via which the staff member or supervisor can download these forms. The forms are only available in Dutch and must be completed in Dutch by the supervisor and the staff member, signed and filed in the rehabilitation file.

When	Who	What
<p><u>Day 1 of incapacity</u> incapacity notification and contact <i>day 1 continued on the following page</i></p>	<p>SM</p>	<p>The staff member must notify <u>the supervisor</u> of their incapacity before 09:30 and register his/her incapacity in the DSPM or via the DSPM app. In the event of the supervisor's absence, the staff member must notify the supervisor's deputy in line with the agreements made within the department/team in question.</p> <p>If the staff member is too incapacitated to register his/her incapacity in the DSPM, then he/she can ask the supervisor (or supervisor's deputy) to do this.</p>

¹ UWV stands for *Uitvoeringsinstituut Werknemersverzekeringen* (the Employee Insurance Agency)

	SV	<p>The supervisor will <u>contact</u> the staff member as soon as possible to discuss the outlook regarding their return to work and ask about any tasks that must be delegated or appointments that must be cancelled. The supervisor will also ask the staff member how he/she can be contacted (residential/recuperation address, telephone number, e-mail address). (Also see AUAS Incapacity Policy Appendix B: Questions for supervisors in the event of incapacity notifications)</p> <p>The supervisor will also ask whether any 'safety-net' situations apply and if so, which one (see 'Week 1' section below); whether the incapacity stems from a work-related accident; or whether it was caused by a traffic accident involving a potentially liable third party (possibility of recourse).</p>
Ill and/or workplace conflict	LG and BA	<p>If the supervisor suspects that the staff member's absence relates to a workplace conflict, the supervisor is advised to call up the staff member promptly for a consultation with the occupational physician.</p> <p>The <u>occupational physician</u> will <u>assess</u> whether or not the staff member's incapacity is due to illness or medical impairments. In accordance with the STECR Working Guide for Workplace Conflicts, the occupational physician will hear both sides before formulating advice.</p>
Incapacitated during holiday leave	SM and SV	<p>If a staff member becomes incapacitated whilst on holiday and if this means that in his/her opinion, (s)he is <u>no longer capable of enjoying the holiday</u>, then they must notify their supervisor of the incapacity as described in the section on the first day of incapacity.</p> <p>At the end of the holiday, the staff member will make an <u>appointment</u> to attend the consultation hours of the <u>occupational physician</u> (even if they have recovered), who will assess the staff member's degree of incapacity during the holiday. The staff member can be asked to bring a document from a doctor, hospital or chemist visited during the holiday. Based on the occupational physician's consultation report, the supervisor will determine how many hours of holiday leave will be designated as incapacity leave. Subsequently, the staff member can cancel the holiday leave registered in the DSPM and register a new application for the adjusted total of holiday entitlement.</p> <p>If the staff member has <u>recovered</u> (in the occupational physician's opinion) by the end of the holiday, then the staff member will notify his/her supervisor of this and register their recovery in the DSPM. If the staff member has not recovered following his/her return from holiday, then execution of the Incapacity Protocol will be continued.</p>
Week 1 Notification of incapacity to the UWV in the event of 'safety-net' situations	SV and PSA	<p>The supervisor will ask the Personnel and Salary Administration (PSA) to submit <u>an incapacity report to the UWV</u> for the purposes of incapacity benefits in the event that the staff member is covered by one of the 'safety-net' provisions specified in the Sickness Benefits Act (<i>Ziektewet</i>). These safety-net provisions concern the following situations, see www.uwv.nl – employers – sickness benefit</p> <ul style="list-style-type: none"> • Incapacity for work due to pregnancy or childbirth (notify UWV within 6 weeks of the first day of incapacity, but no later than 4 days following commencement of the flexibilisation period (6 to 4 weeks prior to the due date of birth)) • Incapacity due to organ donation (notify UWV within 6 weeks of the first day of incapacity) • Incapacity with a no-risk policy (notify UWV within 6 weeks of the first day of incapacity) • Incapacity involving a compensation scheme (notify UWV within 4 days of the date on which the staff member has been incapacitated for 13 weeks). (This applies under certain conditions to previously unemployed workers born before 8 July 1954.) <p>The UWV will contact the staff member and evaluate the safety-net application submitted by the employer.</p>

<p><u>Week 1-2</u> Maintain contact and schedule an appointment</p>	SV	<p>The supervisor will <u>contact</u> the staff member to show their concern, ask how the staff member is doing and to discuss the prospects concerning the staff member resuming some or all of his/her duties (see Appendix B – AUAS Incapacity Policy: Supervisor questions for absence due to illness).</p> <p>The supervisor will make an appointment for an incapacity meeting in the third week by no later than the <u>end of the second week of incapacity</u>.</p>
<p><u>Week 3</u> Week 3 incapacity meeting</p>	SM and SV	<p>The supervisor and staff member will discuss the <u>prospects of the staff member returning to work</u>. If there is no chance of the staff member recovering soon, then the supervisor and staff member will prepare advice questions for the appointment with the occupational physician. The supervisor will request HR to start a rehabilitation file, in which these agreements and other absenteeism and rehabilitation-related documents will be recorded.</p> <p>They record the agreements in the rehabilitation file (<u>the rehabilitation file is created at this point</u>). In the digital personnel file in the DSPM, a separate tab page is available for this file (tab page 'Incapacity, accidents and working conditions'). This rehabilitation file must contain <u>no</u> medical data!</p>
	HR	<p>At the supervisor's request, HR will start the rehabilitation file under the tab page 'Illness, accidents and OHS' in the staff member's personnel file in DSPM.</p>
<p><u>Week 3</u> Self-declaration for the occupational health and safety service</p>	OP	<p>At the end of the second week of incapacity, the occupational physician will send a <u>Self-declaration form</u> to the staff member, which the staff member must complete and return within two days. The self-declaration form will contain a number of questions concerning the employee's incapacity. Based on the answers given by the staff member, the occupational physician will determine whether a <u>request to attend the consultation hours</u> must be issued. Naturally, the supervisor and/or staff member can also request an appointment for the consultation hours on their own initiative.</p>
<p><u>Week 3-4</u> Invitation to consultation hours</p>	OP	<p>The employee will receive a postal invitation to attend the occupational physician's consultation hours. The staff member is <u>obliged</u> to comply with this request. 24 hours prior to the appointment, the staff member will receive a reminder via text message (provided the occupational health and safety service has his/her mobile phone number).</p>
<p><u>Week 4</u> Suspension or continuation of parental leave</p>	MW and LG	<p>The guiding principle in the event of illness during parental leave is that parental leave will continue. The supervisor and the staff member may seek advice from the occupational physician on whether taking parental leave will hamper rehabilitation.</p> <p>If it is apparent that sickness absence will last longer than four weeks, the staff member can submit a request to his or her supervisor seeking approval for not taking the period of parental leave at all or not continuing it due to illness (partial continuation is not possible).</p> <p>The supervisor will approve the request within four weeks, unless there is a compelling business or service reason for refusing it. Upon approval, the right to parental leave will be suspended with retroactive effect until the date on which the request was submitted. The salary deduction will be discontinued with effect from that date. The supervisor or HR will request the PSA via servicedesk-ac@hva.nl to discontinue parental leave.</p> <p>As soon as the staff member is fully fit for work, the staff member will apply for the remaining period of parental leave in DSPM. After obtaining approval from the supervisor, parental leave will be resumed.</p>
	PSA	<p>The PSA will discontinue the salary deduction due to parental leave following a request to that effect from the supervisor or HR. The PSA will send a confirmation to the staff member and HR. The PSA will resume the salary deduction after the staff member has applied for parental leave in DSPM and the supervisor has approved it.</p>
<p><u>Week 6</u> Problem analysis</p>		<p>The occupational physician will formulate the <u>problem analysis no later than week 6</u>, which must specify the staff member's functional restrictions and possibilities and:</p>

and advice	OP	<ul style="list-style-type: none"> the reason for absence (without stating medical information); how these restrictions may hinder the execution of the staff member's duties, together with a prognosis; the possibilities for working, with a recommendation on the procedure for resuming work; What interventions are recommended in order to promote rehabilitation. <p>The occupational physician will send the problem analysis and the advice to the staff member and the supervisor. HR will add the problem analysis to the rehabilitation file.</p> <p><i>NB: The problem analysis is always formulated, even if it appears that the staff member will soon recover. This prevents delays in the problem analysis in the event the period of incapacity is longer than expected.</i></p> <p><i>NB: If the problem analysis establishes that the staff member is fully and permanently incapacitated for work with no chance of recovery, then an expedited application for benefits under the IVA² can be made with a reduced waiting period (see also the information for week 68).</i></p>
<p>Week 6</p> <p>Final date for the creation of the rehabilitation file</p>	SV	<p>The supervisor will request HR by week 6 at the latest to start the <u>rehabilitation file</u>. It would be preferable to start the file in the third week of absence when the absenteeism interview is held. The staff member's personnel file containing a separate tab page 'Illness, accidents and OHS' will be available in DSPM. Only HR and the PSA may add documents to that section of the file. This file will contain all data, documents and correspondence relating to the course of the incapacity and the activities implemented in order to facilitate resumption of work. This file must contain <u>no medical data</u> (no data about the illness, injury, treatment etc. or the nature thereof). This type of data is covered by medical confidentiality and belongs in the occupational physician's medical file.</p> <p>It is the <u>supervisor's responsibility</u> to ensure that the file is complete and up to date and to send HR the documents promptly.</p> <p>This rehabilitation file will later serve as proof to the UWV that both employer and employee have made sufficient efforts to enable the staff member to return to work. <i>NB: The rehabilitation file is also required in the event the staff member applies for benefits under the WIA³ (see week 91 and 93). It is therefore vital that this file is kept in order and up to date.</i></p>
<p>Week 6</p> <p>Termination of commuting expenses allowance</p>	SV	<p>The supervisor will inform the employee that his/her commuting expenses allowance will be terminated after six weeks of <i>full</i> incapacity for work, in accordance with the AUAS commuting expenses reimbursement regulations.</p>
	PSA	<p>The PSA will terminate the allowance once the staff member has been fully incapacitated for work for six weeks. The PSA will send confirmation of the termination to the staff member and HR.</p>
	SM	<p>The staff member must request the allowance again in the DSPM <i>him/herself</i> upon his/her full or partial return to work (including for occupational therapy) based on the number of days he/she is required to commute to work. Once the staff member has done so, the PSA will resume payout of the commuting expenses allowance.</p>
<p>Week 8</p> <p>Formulation of the Action Plan</p>	SV and SM	<p>The supervisor and staff member will formulate an <u>Action Plan</u> (see www.uwv.nl) within eight weeks of the incapacity notification (or no more than two weeks subsequent to the problem analysis) based on the problem analysis and the advice issued by the occupational physician. This plan will describe the actions that both parties will take in order to ensure a <u>speedy recovery</u>. If returning to work is not yet possible (e.g. due to admittance to hospital) then this will be noted in the Action Plan together with the reason therefor. Once it becomes possible for the staff member to return to work, the</p>

² IVA = *Inkomensvoorziening Volledig Arbeidsongeschikten* (Fully Disabled Persons Income Scheme).

³ WIA = *Wet werk en inkomen naar arbeidsvermogen* (Work and Income (Capacity for Work) Act)

The AUAS Incapacity Protocol is an appendix (F) to the AUAS Incapacity Policy adopted on 8 January 2019 (see beleid.mijnhva.nl).

Technical amendment to the AUAS Incapacity Protocol dated 12 June 2020.

		Action Plan will be updated and/or adjusted and included in the rehabilitation file.
Week 9-42 Evaluating Action Plan	SV	<p>The supervisor and staff member will <u>evaluate the Action Plan at least once every six weeks</u> and examine whether the plan is still fit for purpose or whether new agreements must be made. The occupational physician can provide advice in this regard. Ensure that agreements and discussions on action to be taken are documented and visibly demonstrable to the UWV at a later stage. To do this, you can use the <u>Evaluation/First Year Evaluation</u> form (see www.uwv.nl and search for 'evaluatie plan van aanpak' (action plan evaluation)). Once the form has been completed and signed, it is included in the rehabilitation file. Agreements can also be confirmed with the staff member via e-mail provided this e-mail is also included in the rehabilitation file. Always ensure that the documents contain <u>no medical data</u>.</p> <p>The supervisor and the staff member will regularly update the occupational physician on how rehabilitation is proceeding. Any changes to the staff member's health will be reported to the occupational physician immediately.</p>
Week 13 Termination of salary deduction for participation in the SOP scheme	SV	<p>The supervisor will inform the staff member that in the event he/she is a participant in the SOP scheme, the deduction of their contribution from their salary will be temporarily <u>suspended</u> once the staff member has been <u>fully incapacitated for work for 13 weeks</u>. The end date of the SOP period will be maintained; participation in the SOP scheme will not be suspended.</p> <p>In the event of <u>partial incapacity for work</u>, the staff member and supervisor will make agreements regarding whether or not to continue participation in the SOP scheme. The supervisor or HR will subsequently inform the PSA of the date on which the salary deduction must be terminated/reactivated via servicedesk-ac@hva.nl.</p>
	PSA	<p>The PSA will terminate the deduction of the SOP contribution once the staff member has been fully incapacitated for work for 13 weeks. The PSA will send confirmation of the termination to the staff member and HR.</p> <p>Once the staff member's capacity for work is fully restored, the deduction of the SOP contribution from the staff member's salary will be resumed unless the supervisor or HR has already ordered its resumption due to partial capacity for work.</p>
Week 26 End of accumulation of non-statutory holiday entitlement and Long-term Employability hours	SM	<p>The staff member will register every adjustment to the number of hours of resumption of work (always based on the occupational physician's advice and after liaising with the supervisor) via the DSPM to ensure accurate records and <u>calculation of the non-statutory leave entitlement and Long-term Employability hours (LE hours)</u>.</p> <p><u>Explanatory notes:</u></p> <ul style="list-style-type: none"> <u>Holiday leave:</u> The accrual of non-statutory holiday leave is terminated after 26 weeks. In the event of partial capacity for work, this entitlement will be accrued based on the number of hours that the staff member is working at that time. The staff member will continue to accrue statutory holiday entitlement. <u>Long-term employability:</u> In the event of long-term incapacity for work, the accrual of LE hours is terminated after 26 weeks of incapacity. In the event of partial capacity for work, LE hours will be accrued based on the number of hours that the staff member is currently working.
	PSA	<p>Once the staff member has been incapacitated for work for 26 weeks, the accrual of non-statutory holiday entitlement and LE hours will be corrected by the PSA on a monthly basis. The PSA will send confirmation of the termination to the staff member.</p>
Week 39 Work capacity of less than 45%	SV	<p>If the staff member's capacity for work is less than 45%, then the <u>30% salary reduction is applicable</u> as of the second year of incapacity (for more information, see below in the section 'Prior to week 50: 30% reduction of salary in the second year of incapacity').</p> <p>If the staff member falls ill as a result of pregnancy or childbirth, the salary reduction will not apply during the period of pregnancy-related illness.</p> <p>Based on the information provided by the PSA, the supervisor will inform the staff member of the salary reduction in the second year of incapacity (before week 50 at the</p>

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		latest).
	PSA	The PSA will inform HR of the <u>30% salary reduction</u> in the second year of incapacity onwards in the event the staff member's capacity for work is less than 45% as of week 39.
Week 42 Registration with UWV	PSA	The PSA will automatically <u>register the staff member's incapacity with the UWV</u> by no later than the first working day of week 42 of the staff member's incapacity. This obligation for the employer is stipulated in the Sickness Benefits Act (<i>Ziekwet</i>).
Week 44 Letter to UWV concerning rehabilitation obligations	SV	The PSA will receive confirmation of the registration of the incapacitated staff member from the UWV together with advice regarding what the employer could do in order to help the staff member return to work during the second year of incapacity. As with all other correspondence with the UWV, this letter will be added to the staff member's digital personnel file by the PSA. This file will be accessible to the staff member, supervisor and HR. In addition, the PSA will forward correspondence with the UWV to HR so that the HR adviser can discuss it with the supervisor.
Week 42-52 Occupational health and safety assessments and advice	SV and SM	The supervisor will request an occupational health and safety assessment and the staff member will cooperate with it. The HR adviser will possess up-to-date knowledge of where and with whom this kind of assessment can be arranged. <u>Explanatory notes:</u> Upon commencement of the second year of incapacity, the employer and staff member are obliged by law to reassess the progress of the rehabilitation process (First Year Evaluation – see next step). To facilitate this evaluation, it is highly advisable (although not mandatory) to carry out an occupational health and safety assessment to explore further rehabilitation opportunities in week 42-52 of the period of incapacity. This assessment will examine whether the staff member will be able to resume his/her regular duties (possibly with the aid of adjustments) or – if this is not possible – other duties within AUAS. If reassignment within AUAS proves impossible, then opportunities for the staff member to re-enter the workforce for another employer will be explored (secondary track). This can be used by the employer to demonstrate rehabilitation efforts during the first-year evaluation. If no occupational health and safety assessment is conducted, then this can affect the UWV's assessment in the event an application is made for benefits under the Work and Income (Capacity for Work) Act (<i>Wet werk en inkomen naar arbeidsvermogen</i>). For this reason, AUAS recommends that an assessment of this kind should always be commissioned for the purpose of the first-year evaluation. <i>NB: Occupational health and safety assessments can always be requested at an earlier or later stage provided there is good reason to do so.</i>
Week 46-52 First Year Evaluation	SV and SM	The supervisor and staff member will evaluate the Action Plan at the end of the first year of incapacity (no later than week 52). For this purpose, they will complete the <u>First Year Evaluation</u> form (see www.uwv.nl). This evaluation will cover the following topics: <ul style="list-style-type: none"> • Specification of rehabilitation activities and whether or not they were conducted as agreed. • Assessment and advice by an occupational health and safety expert regarding possible resumption of duties for the same employer (primary track) or a different employer (secondary track). • Assessment of the results of the rehabilitation process and whether or not it results in adjustment of the final objective of rehabilitation (e.g. based on the occupational health and safety expert's assessment and advice). • Determination of the desired rehabilitation results by the second year of incapacity. • Agreements regarding how to achieve these results by the second year of incapacity. The First Year Evaluation form will be included in the rehabilitation file.
Prior to week 50	SV	Prior to week 50 at the very latest, the supervisor will inform the staff member of the <u>30% salary reduction</u> as of the second year of incapacity as specified by Article 4 of the

30% salary reduction in the second year of incapacity and the 'financial picture'		<p>Illness and Invalidation Benefit Scheme for Employees in the Higher Professional Education Sector (ZAHBO)⁴). This article determines that during the first year of incapacity, salary payments for the incapacity hours will be continued at a rate of 100% and at a rate of 70% during the second year of incapacity.</p> <p><i>Note: The reduction will be terminated as soon as the staff member has performed duties deemed to constitute constructive work for at least 45% of their agreed working hours for a period of at least 13 weeks. The UWV definition of 'work' does not include occupational therapy.</i></p> <p>In addition, the supervisor will inform the employee of the possible financial consequences in the event that the staff member has still not fully recovered after the end of the second year of incapacity and may be eligible for benefits under the Work and Income (Capacity for Work) Act (<i>Wet werk en inkomen naar arbeidsvermogen</i>) (see section 'After week 88'). HR can provide advice in this regard.</p>
	PSA	<p>The PSA will apply the <u>30% salary reduction</u> to the staff member's salary in the event his/her capacity for work is less than 45% following the second year of incapacity and will send confirmation of the reduction to the staff member and HR, <i>unless</i> the supervisor or HR has indicated that the salary reduction must not be applied based on advice from the occupational physician. <i>NB: For this purpose, the occupational physician's advice must be sent to the PSA via servicedesk@ac-hva.nl.</i></p> <p>The reduction will be applied in accordance with the staff member's degree of incapacity for work. Every month, the PSA will examine the incapacity data and make any necessary adjustments to (or discontinue) the reduction.</p>
	SM	<p>Following their resumption of duties, the staff member shall register all changes to their number of hours (based on the occupational physician's advice) in the DSPM to enable calculation of the applicable reduction.</p>
<p><u>Week 52</u></p> <p>Termination of salary deduction for participation in the WS scheme</p>	SV	<p>The supervisor will inform the staff member that in the event he/she is a participant in the WS scheme, the deduction of their contribution from their salary will be temporarily <u>suspended</u> once the staff member has been (<u>partially</u>) <u>incapacitated for work for 52 weeks</u>. The end date of the WS period will be maintained; participation in the WS scheme will not be suspended.</p> <p>Deduction of the contribution from the staff member's salary will be resumed as soon as they return to full capacity for work.</p>
	PSA	<p>The PSA will terminate the deduction of the WS contribution once the staff member has been (<u>partially</u>) <u>incapacitated for work for 52 weeks</u>. The PSA will send confirmation of the termination to the staff member and HR.</p> <p>Once the staff member's capacity for work returns to 100%, the deduction of the contribution will be resumed.</p>
<p><u>Weeks 52-58</u></p> <p>Start of the secondary-track rehabilitation process</p>	SV	<p>The supervisor will start a secondary-track rehabilitation (examining the possibilities of rehabilitation with another employer) process within six weeks of the First Year Evaluation (= week 52 at the latest) in the event that there is no prospect of the staff member resuming duties within AUAS: this will maximise the likelihood of the staff member returning to the workforce.</p> <p>During this process, the supervisor can make use of external expertise in order to provide the staff member with the guidance they require. The HR adviser can provide advice on this issue.</p> <p>This secondary track need not be initiated in the event that concrete prospects of the staff member structurally resuming duties in the same organisation are established within three months of the first-year evaluation.</p>
<p><u>Weeks 52-87</u></p> <p>Rehabilitation during</p>	SV and	<p>The supervisor and staff member will work together to implement the <u>Action Plan and the agreements in the Evaluation/First Year Evaluation during the second year of</u></p>

⁴ Illness and Invalidation Benefit Scheme for Employees in the Higher Professional Education Sector (ZAHBO).

the second year of incapacity	SM	<u>incapacity</u> and the supervisor will keep the rehabilitation file up to date. The supervisor and staff member will regularly keep the occupational physician up to date regarding the course of the rehabilitation process. If there are any developments concerning the staff member's health, then these will be reported to the occupational physician immediately.
<u>Week 68</u> Deadline for IVA registration ⁵ with reduced waiting period	SM	The staff member must submit any applications for the Fully Disabled Persons Income Scheme (IVA) with reduced waiting period to the UWV by no later than week 68 . If it appears that the staff member will be fully and permanently incapacitated for work with no chance of recovery, then the staff member must make an appointment with the occupational physician to request an assessment of this status. If the occupational physician confirms that this is the case, then the staff member can apply for benefits under the IVA with a reduced waiting period based on the physician's recommendation. See www.uwv.nl .
<u>Week 88</u> Letter for WIA application	SM	The staff member will receive a letter from the UWV regarding application for the Work and Income (Capacity for Work) Act (<i>Wet werk en inkomen naar arbeidsvermogen</i> or <i>WIA</i>). In this letter, the UWV will inform the staff member of what he/she must do in order to submit an application.
<u>Week 91</u> Formulation of current assessment and medical file	OP	The occupational physician will formulate the Current Assessment of the Problem Analysis and forward a copy (<u>not including any medical data!</u>) to the supervisor and the staff member. The supervisor requires this current assessment for the purposes of the rehabilitation report (see below in the section on week 91) and the staff member requires it for the purposes of their application for benefits under the Work and Income (Capacity for Work) Act (WIA). The occupational physician will also send the full medical file to the staff member for the purposes of his/her WIA application.
<u>Week 91</u> Final evaluation of Action Plan	SV and SM	The supervisor and staff member will work together on the Final Evaluation Action Plan for the purposes of the staff member's WIA application. The form can be found at www.uwv.nl .
<u>Week 91</u> Consequences for WIA application	SV	The supervisor will inform the staff member in advance regarding the steps that he/she must take to enable the UWV to assess their WIA application as well as the consequences of this assessment for the staff member's employment contract with AUAS. The HR adviser can provide advice on this issue.

⁵ IVA = *Inkomensvoorziening Volledig Arbeidsongeschikten* (Fully Disabled Persons Income Scheme). The AUAS Incapacity Protocol is an appendix (F) to the AUAS Incapacity Policy adopted on 8 January 2019 (see beleid.mijnhva.nl).
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<p style="text-align: center;"><u>Week 91</u> Provision of rehabilitation report to staff member</p>	SV	<p>The supervisor will provide the staff member with copies of the rehabilitation report (for the staff member's own records) by week 91 at the latest. This report will testify to the activities conducted and efforts made by both the supervisor and the staff member in order to facilitate the staff member's rehabilitation.</p> <p>The rehabilitation report will contain the following documents, at the very least:</p> <ul style="list-style-type: none"> • Problem analysis (and any adjustments made) • Action Plan • Evaluations and the First Year Evaluation • Current assessment by the occupational physician • Assessment and advice by the occupational health and safety expert • Final evaluation of the Action Plan <p>Other evidence of rehabilitation efforts can also be sent, such as agreements made during incapacity meetings between the supervisor and the staff member (possibly in the form of e-mails).</p>
<p style="text-align: center;"><u>Week 93</u> Submission of WIA application and rehabilitation report to UWV</p>	SM	<p>The staff member must submit any application for benefits under the WIA (Work and Income (Capacity for Work) Act) to the UWV by week 93 at the latest. The form will be completed online by the staff member via www.uwv.nl – WIA application. In addition, the staff member must send the medical file that he/she received from the occupational physician to the UWV in a sealed envelope.</p> <p>The staff member will inform the supervisor of the date of his/her WIA application.</p>
	SV	<p>By week 93 at the latest, the supervisor will digitally send the rehabilitation report and all related documents to the UWV via the employer portal (see www.uwv.nl/RIVuploaden). HR must log in to this portal and can provide support.</p>
<p style="text-align: center;"><u>Week 93-98</u> Assessment of rehabilitation efforts (Incapacity Benefit Assessment)</p> <p><i>weeks 93-98 continued on the following page</i></p>	UWV	<p>The UWV will assess the rehabilitation report based on two factors:</p> <ul style="list-style-type: none"> • <u>Is the rehabilitation report complete?</u> If any documents are missing, then additional documents will be requested from the staff member. The UWV will continue the assessment once these documents have been provided. • <u>Have AUAS and the staff member made sufficient rehabilitation efforts?</u> (Incapacity Benefit Assessment) <p>There are three possible outcomes:</p> <p>1) AUAS and the staff member have made sufficient efforts to facilitate rehabilitation: UWV will evaluate the WIA application.</p> <p>2) AUAS has made insufficient efforts to facilitate rehabilitation: If the UWV determines that AUAS has made insufficient effort to comply with its obligations concerning rehabilitation and that the results of the rehabilitation process are unsatisfactory, then the UWV will impose a sanction on AUAS. The sanction will constitute continuation of salary payments to the staff member by AUAS for a period extending into the third year of incapacity, with a maximum sanction period of one year. During this period, 80% of the staff member's salary will be paid in contrast to the 70% stipulated under the Illness and Invalidity Benefit Scheme for Employees in the Higher Professional Education Sector (ZAHBO). During the period of extended salary obligations, AUAS will be expected to rectify the shortcomings identified by the UWV. Once this has been done, AUAS can submit a sanction-reduction request to the UWV. If the sanction-reduction request is granted, then AUAS's salary obligations will be discontinued six weeks after the UWV receives the sanction-reduction request. UWV will evaluate the WIA application.</p>

		<p>3) The staff member has made insufficient efforts to facilitate rehabilitation:</p> <p>If the UWV determines that the staff member has made insufficient effort to comply with his/her rehabilitation obligations, then the UWV will first evaluate whether AUAS has made sufficient efforts to inform the staff member of his/her rehabilitation obligations and whether AUAS has imposed sanctions on the staff member for failure to comply therewith. If it is determined that AUAS made sufficient efforts, then the UWV can decide to refuse payment of WIA benefits to the staff member. If the UWV determines that AUAS has made insufficient efforts to point out the staff member's rehabilitation obligations, a sanction will be imposed on AUAS requiring AUAS to continue to pay the staff member's salary for an extended period (for more information, see under 2).</p>
<p><u>Week 94-100</u></p> <p>Examination by insurer's medical advisor</p>	UWV	<p>The UWV will invite the staff member to attend an <u>examination by the insurer's medical adviser</u> within 4-6 weeks of the submission date of the WIA application. The insurer's medical adviser will <u>assess</u> the <u>work-related options</u> open to the staff member and examine what the staff member is still able to do despite their afflictions. The insurer's medical adviser will also assess whether the afflictions are temporary or permanent in nature. The report of the medical examination will be sent to the staff member.</p>
<p><u>Week 94-100</u></p> <p>Consultation with occupational health and safety expert</p>	UWV	<p>The UWV will invite the staff member to a meeting with the occupational health and safety expert if the report issued by the insurer's medical adviser shows there are opportunities for the staff member to re-enter the workforce.</p> <p>The occupational health and safety expert will determine what work the staff member is capable of performing based on the staff member's training, experience, employment history, etc. The occupational health and safety expert will also investigate the opportunities and restrictions determined by the insurer's medical adviser.</p>
<p><u>Week 101</u></p> <p>Decision regarding WIA benefits</p> <p><i>week 101 continued on the following page</i></p>	UWV and SV	<p>The UWV will make a decision on awarding a WIA benefit within eight weeks of the WIA application, but by week 101 at the latest. The staff member and AUAS will receive notification from the UWV accordingly.</p> <p>The supervisor will discuss the UWV's decision and the consequences for the employment contract with the staff member and will record the agreements made in writing. The following decisions are possible:</p> <p>1) < 35% unfit for work:</p> <p><i>No benefit, amendment or no amendment to employment contract</i></p> <p>The staff member is not entitled to a WIA benefit. A dismissal prohibition applies under Article Q-6 of the Collective Labour Agreement for Universities of Applied Sciences (CAO HBO). The supervisor and the staff member will enter into discussions on the manner in which the employment contract will be amended by mutual consent to reflect the staff member's work capacity (position, number of working hours, salary). If the number of working hours under the employment contract is adjusted, and the staff member will work at least five hours less per week (or will reduce the number of contractual working hours by at least 50%), the staff member is entitled to an unemployment benefit plus an unemployment benefit over and above the statutory entitlement.</p> <p>If the employment contract is not amended, salary must continue to be paid based on the staff member's degree of fitness for work.</p> <p>If the staff member has taken out an incapacity for work insurance (IPAP) with Loyalis and meets the conditions, the staff member may claim a benefit under the IPAP insurance (see week 105).</p>

	<p>2) 35-80% or 80-100% unfit for work</p> <p><i>Partial benefit, amendment or not amendment to employment contract</i></p> <p>The staff member is entitled to a WGA benefit under the Return to Work (Partially Disabled Persons) Regulations because the staff member is partially (at least 35%), but not permanently unfit for work. The supervisor should subsequently assess whether there are any opportunities for the staff member to continue to work at AUAS: can the staff member perform his or her own work within the foreseeable future (26 weeks), whether or not in an adapted form, and if not, are there any other suitable activities? This assessment may often take place in consultation between the supervisor and the staff member, for instance, if the staff member has already partially returned to work. In some cases, advice will need to be sought from the occupational physician and/or an occupational consultant. If there are opportunities, the supervisor and the staff member will discuss the manner in which the employment contract will be amended by mutual consent to reflect the staff member's work capacity (position, number of working hours, salary).</p> <p>If the employment contract is not amended, salary must continue to be paid based on the staff member's degree of fitness for work.</p> <p>If the staff member has taken out an incapacity for work insurance (IPAP) with Loyalis and meets the conditions, the staff member may claim a benefit under the IPAP insurance. Furthermore, if the staff member's employment contract is amended, the staff member may potentially be entitled to an ABP Incapacity Pension (AAOP), see week 105.</p> <p>3) 80-100% permanently unfit for work:</p> <p><i>Full benefit, termination of employment contract</i></p> <p>The staff member is entitled to an IVA benefit under the Fully Disabled Persons Income Scheme on the grounds of being completely and permanently unfit for work. The supervisor and the staff member will enter into discussions on termination of the employment contract with the consent, or permission, of the UWV, given that the obligation to continue to pay salary and the protection from dismissal will end after 104 weeks of absence; and due to the staff member being completely and permanently unfit, there are no longer any opportunities for the staff member to continue to work at AUAS.</p> <p>If the staff member has taken out an incapacity for work insurance (IPAP) with Loyalis and meets the conditions, the staff member may claim a benefit under the IPAP insurance (see week 105).</p>
SV	<p>The supervisor will register the amendment/termination of the staff member's employment contract effective as of week 105 of incapacity in the DSPM. In addition, the supervisor will send the signed letter containing the staff member's consent to the PSA via servicedesk-ac@hva.nl.</p> <p>If the staff member is entitled to a transition payment, the supervisor will request the PSA to make a calculation of the amount and payment.</p>

<p><u>Week 105</u> First payment of incapacity benefits (if eligible)</p> <p>and</p> <p>amendment or no amendment to the employment contract, or termination of the employment contract</p>	<p>UWV and AUAS</p>	<p><u>Situation after 104 weeks of incapacity: four outcomes are possible:</u></p> <ul style="list-style-type: none"> • A sanction has been imposed on AUAS requiring AUAS to continue to pay the staff member's salary (80%) for an extended period (see weeks 93-98 rehabilitation assessment, point 2). • The staff member receives no incapacity benefits and his/her employment contract is adjusted. Salary will continue to be paid based on the adjusted number of working hours or in proportion to the staff member's degree of fitness for work. • The staff member receives partial-incapacity benefits under the WIA-WGA and his/her employment contract is adjusted. Salary will continue to be paid based on the adjusted number of working hours or in proportion to the staff member's degree of fitness for work. • The staff member receives full WIA/IVA benefits and his/her employment contract is terminated.
	<p>PSA</p>	<p>The PSA will attach an addendum to the staff member's employment contract based on the amendment registered in the DSPM or confirm the termination of the employment contract. If the staff member is entitled to a transition payment, the PSA will ensure that it is paid to the staff member.</p>
<p><u>Week 105</u> Incapacity pension (AAOP)</p>	<p>SM</p>	<p>If the staff member is declared 35% unfit for work and has been awarded a WGA benefit, <i>and</i> the staff member's employment contract has been amended, the staff member may be entitled to an ABP Incapacity Pension (AAOP). This 'pension' consists of a monthly benefit and a supplementary pension accrual. The UWV will notify the ABP that the staff member has been awarded a WIA benefit.</p> <p>The ABP will then send a letter to the staff member (within three months) containing information on applying for an invalidity pension. The staff member should subsequently personally submit an application to the ABP, see www.abp.nl – invalidity pension.</p>
<p><u>Week 105</u> IPAP insurance</p>	<p>SM</p>	<p>If the staff member holds an IPAP (supplementary invalidity pension scheme) insurance policy with Loyalis that provides payments in the event of permanent incapacity for work or invalidity, then he/she can claim on this policy. In such cases, the staff member must submit their claim to Loyalis him/herself.</p>