



Oifig an Stiúirthóra Náisiúnta, Acmhainní Daonna

Feidhmeannacht na Seirbhísí Sláinte

Ospidéal Dr. Steevens'

Baile Átha Cliath 8

Office of the National Director of Human Resources

Health Service Executive

Dr. Steevens' Hospital

Dublin 8

Tel: 01 635 2319 Email: nationalhr@hse.ie

To:

- Chief Executive Officer**
- Each National Director**
- Each Assistant National Director HR**
- Each Assistant Chief Finance Officer**
- Each Hospital Group CEO**
- Each Hospital Group Director of HR**
- Each Chief Officer CHOs**
- Each Head of HR CHOs**
- Head of HR, PCRS**
- Each CEO Section 38 Agencies**
- Each HR Manager Section 38 Agencies**
- Each Employee Relations Manager**
- Each Group Director of Nursing & Midwifery**
- Each Group Director of Midwifery**
- Each Clinical Director**
- Director National Ambulance Service**

From: Anne Marie Hoey, National Director of Human Resources

Date: 25th January 2021

Re: HR Circular 005/2021 Guidance and FAQs for Public Service Employers during COVID-19 in relation to working arrangements and temporary assignments across the Public Service dated 19 January 2021

Dear Colleagues

I wish to advise that the Department of Public Expenditure and Reform (DPER) has issued its revised **Guidance and FAQs for Public Service Employers during COVID-19 In relation to working arrangements and temporary assignments across the Public Service dated 19**

January 2021. This guidance document consolidates and supersedes previous guidance and FAQs issued by DPER relating to Civil and Public Service working arrangements and temporary assignments during COVID-19. The FAQs have been prepared to assist employees and management to understand the process, rules and expectations associated with work arrangements during the COVID-19 recovery period across the public service. A copy of these FAQs is attached at Appendix A and is also available [here](#).

The updated FAQs are:

- UPDATED 4.2 Is special leave with pay available for caring responsibilities?
- UPDATED 4.5 What leave arrangements apply to civil and public servants on return from non-essential travel overseas?

The DPER FAQs should be read in conjunction with this Circular. Please note that the updated FAQs for the health sector are covered in the following sections of this Circular:

[Section 9](#) Employees with caring responsibilities

[Section 12](#) Leave arrangements for employees on return from travel overseas

1. Attendance in the work premises during COVID-19

[See also HR Memo re COVID-19 – Attendance in the Work Premises/WFH during Level 5 \(dated 19 January 2021\)](#)

1.1 The *Resilience and Recovery 2020-2021: Plan for Living with COVID-19* was published by the Government on 15 September 2020 [view here](#). Within the plan there is a Framework for Restrictive Measures with five levels. It should be noted that the employer will determine the essential roles which require physical attendance by staff at the workplace throughout the levels, taking into account the differing requirements at each level of the Framework for Restrictive Measures. Regard should be had to any changes to work premises attendance that may be required at each level of the Framework and workplace attendance plans should be communicated to employees.

1.2 The Resilience and Recovery Plan identifies many public services as being essential during this time. Employers need to enable employees to be as productive as possible at all times, both in the work premises and in a blended and distributed workplace. Employers need to continue to be innovative in terms of new ways of working including maximising and fully exploring distributed and hybrid work models, where applicable. Employees have a role to play by cooperating with employers and in being proactive in identifying how they can increase value and how their roles can be performed effectively in the new and changing environment. During COVID-19, in order to ensure maximum efficiency, employees may be assigned work outside their usual core duties/given a new role.

1.3 The Framework provides for home working to continue where possible. Home working will continue as and when deemed appropriate by the employer, having regard to the changes that may be required at each level of the Framework. Home working must be balanced with the requirement to continue to provide the most effective and efficient healthcare services to the public, in line with the provisions of the Framework. Any continuation of working from home (WFH) arrangements will be kept under review. The *HSE Policy on Public Health Service Employees Working from Home during COVID-19* is available [here](#).

1.4 To continue to facilitate physical/social distancing and public health requirements in the work premises, employers may consider the continuation of temporary alternative arrangements or new temporary arrangements, e.g. flexible shifts, staggered hours, longer opening hours, blended working patterns, weekend working etc. where feasible.

1.5 Employers must ensure that all work premises have implemented robust pre-return to workplace procedures, where not already in place, and that all procedures comply with the **Work Safely Protocol** [view here](#). These procedures should be clearly communicated to employees. The Protocol, which is a revision of the previous Return to Work Safely Protocol, was published on 20 November and incorporates current public health advice. It outlines the measures needed to reduce the spread of COVID-19 and to facilitate the re-opening of workplaces following temporary closures. The Protocol notes that employees should be organised into pods or groups where possible. For further information on these and other health measures, employers should read the Protocol in detail. Employers should ensure that they have properly implemented the advice in the Protocol and ensure that it is tailored, where necessary, to meet the unique set of circumstances pertaining to each workplace location. The HSE's approach to the implementation of this revised Protocol can be found [here](#).

1.6 Employers should ensure that the new Protocol is reviewed in respect of all employees i.e. employees required to return to the work premises and those employees who have continued to work on site. There may be additional issues to consider to ensure compliance with the Protocol for those employees who are already working on site.

1.7 All employees have a critical role in ensuring that the procedures of the Protocol are followed to suppress COVID-19 in their workplace. It is incumbent on all employees who are required to attend the workplace to fully comply with their organisation's COVID-19 response plan. Cooperation between employees, the lead worker representative(s) and the employer are fundamental to ensuring that the measures are adhered to.

1.8 HSE HR Memo dated 22 July 2020 sets out the principles for the nomination and appointment of Lead Worker Representative(s) which were agreed with the Health Service Trade Union Group.

1.9 The Work Safely Protocol COVID-19 Pre-Return to Work Form is one of the measures designed to assist with the safe return to the workplace. Any employees who were not present in the workplace prior to the introduction of the Return to Work Safely Protocol on 9 May 2020 are required to complete the organisation's Return to Work Form before returning to the work premises. Please note that the pre-return to work questions have been updated in the new Protocol.

1.10 Whilst the Return to Work Form is only to be completed once and the form itself does not need to be resubmitted, employers may request employees to reconsider the questions in the pre-return to work form, for example, following an extended period of absence from the workplace due to annual leave or where the employee may only access the work premises infrequently. **Employees should have regard to any changes in their circumstances in relation to the questions and notify their manager/HR immediately.**

1.11 It should be noted that the content of the pre-return to work form is special category data under the General Data Protection Regulations (GDPR). Accordingly, sufficient safeguards must be put in place to ensure that the process for collection, processing and storing of the information is proportionate and secure¹. The form should be destroyed upon the employee's return to the work premises. Employers may wish to keep a log of employees who have completed the form for audit purposes. Any such log must not contain special category personal data.

1.12 The revised HSE Pre Return to Work Form and other guidance documents on the occupational safety and health implications of the Work Safely Protocol are available at this link:

<https://healthservice.hse.ie/staff/coronavirus/safety-in-the-workplace/managing-employees-return-to-work-safely1.html>

1.13 It is important to emphasise that any employee who is feeling unwell should not attend the workplace. This applies to any transmissible illness during this Covid-19 emergency period. The health and wellbeing of employees is of utmost importance. If an employee becomes unwell in the work premises, arrangements should be in place in line with the requirements in the Protocol.

1.14 In line with the HSE Contact Tracing Process, if an employee is diagnosed with COVID-19, contact tracers will directly contact all relevant persons who have been in contact

¹ <https://dataprotection.ie/en/news-media/blogs/data-protection-and-covid-19>

with the confirmed case, or the person will be notified through the COVID Tracker App. The instructions of the HSE should be followed and employee confidentiality is essential at all times.

1.15 Employees are encouraged to download the COVID Tracker App to their mobile device as this will assist with the contact tracing process. It should be noted that in incidents where a full Public Health Risk Assessment is undertaken, information from the COVID-19 tracker application is included as part of this assessment. Individuals should follow any actions which are advised by the Medical Officer of Health/Health Protection Medical Team. For information on management of a case or cases (an outbreak) in the workplace, please refer to Appendix 9 in the Protocol and the HPSC *Outbreak Management Guidance* [view here](#).

1.16 The latest release of the [COVID Tracker App](#) has a new feature which has been developed specifically for Health Care Workers. The new feature allows employees to pause contact tracing for a period of time and sends a reminder to switch it back on. Health care workers who are wearing appropriate PPE when providing care to patients can use the pause feature to stop them receiving a close contact alert relating to contacts that happen while wearing PPE.

1.17 The Protocol notes that temperature testing should be implemented in line with public health advice. At present there is no general public health requirement to undertake temperature testing/screening in the workplace, apart from in certain workplaces including healthcare settings. If undertaken, the results of temperature testing are considered special category data under GDPR.

1.18 Employees who are feeling unwell or have symptoms of COVID-19 should not attend the workplace. For those attending the work premises, observing physical/social distancing, appropriate hand hygiene and cough and sneeze etiquette are the most important measures individuals can take to protect themselves and others from COVID-19 in the workplace. Face coverings should not be used in lieu of following physical/social distancing or proper hand and cough etiquette, but they may be used in addition to these protective measures, especially where maintaining physical/social distancing is difficult.

1.19 Health service employees who work in clinical settings are required to wear medical face masks for work purposes and will be advised of this requirement where applicable. Office locations are not currently listed as locations where face coverings must be worn. However, health service employees for whom face coverings are not a mandatory requirement in their substantive role are expected to wear face coverings in places or situations where it may be difficult to achieve or maintain 2m physical/social distancing in line with the Government's advice [here](#). This includes but is not limited to the following:

- When entering and exiting buildings
 - Public access areas of buildings, including receptions/foyers
 - When moving throughout buildings to toilets, photocopiers, on stairwells etc.
 - Canteens and kitchen areas (prior to and after eating) or when using facilities such as boilers, toasters etc.
 - Travelling in a vehicle with someone you don't live with
- HSE guidance on staff travel during COVID-19 is available at this link:
<https://healthservice.hse.ie/staff/coronavirus/safety-in-the-workplace/staff-travel-during-covid-19.html>

2. Employees who are identified as being at very high risk (extremely vulnerable) and are advised to cocoon

2.1 The HSE has identified a category of persons who are at very high risk and the details of this group are available [here](#). Employees who are in this category can provide their manager with a letter from their treating specialist confirming their very high risk (extremely vulnerable) status².

2.2 Employees deemed to be very high risk should be facilitated to work from home to the maximum extent possible. Where an employee is very high risk, is cocooning, and working from home in their current role is not feasible, then they may be assigned work outside their usual core duties/given a new role. Managers are required to maintain regular contact with employees who are in this category.

2.3 If employees in the very high risk category are not able to work from home, an Occupational Health medical assessment and individual risk assessment should be undertaken to determine whether the employee can safely return to the workplace. Please refer to the HSE's Occupational Health guidance document: *Guidance on Fitness for Work of Healthcare Workers in the higher risk categories including Pregnant Healthcare Workers*.

The latest Occupational Health guidance documents for COVID-19 are available from the HSE's website [here](#).

3. Employees who are at high risk for serious illness from COVID-19

3.1 Employers should continue to facilitate employees in the high risk category, as defined in the HSE website, where possible in terms of flexible working arrangements.

<https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html>

² HSE Occupational Health COVID-19 Guidelines: *Pregnant Healthcare Workers, Very High Risk (Vulnerable) Healthcare Workers and High Risk (Other Pre-Existing Disease) Healthcare Workers Version 6.1*

This may include working remotely where the manager determines that such arrangements are appropriate to the service needs. Employers are working to implement measures to ensure the safety of the workplace for all employees, as provided for in the Return to Work Safely Protocol.

3.2 Employees in the high risk category who are required to attend the work premises, in accordance with [HSE advice](#), and current level of restrictions, should take extra care to practise social distancing where possible and wash their hands regularly and properly. Appropriate measures may need to be considered for employees in the high risk category in the work premises where maintaining social distancing is difficult.

Please refer to the HSE's Occupational Health *Guidance on Fitness for Work of Healthcare Workers in the higher risk categories including Pregnant Healthcare Workers* [here](#).

4. COVID-19 Special Leave with Pay Arrangements

See Quick Guide for Public Service Employers (Appendix D) [at this link](#).

4.1 The COVID-19 special leave with pay (SLWP) arrangements apply to public servants only. Employers/managers will need to determine which workers fall into the category of public health service employees. The arrangements relating to the application of SLWP for COVID-19 are temporary and will be kept under regular review.

4.2 SLWP for COVID-19 will only apply when an employee is advised to self-isolate **and** is displaying symptoms of COVID-19, or had a positive test. Appropriate medical/HSE confirmation of the need to self-isolate and/or a diagnosis of COVID-19 will be required for the duration of the absence. The HSE website sets out the latest criteria for self-isolation [view here](#).

4.3 Following a recent review of the existing SLWP arrangements, new provisions for SLWP came into effect **from 1 January 2021** in relation to employees who have contracted COVID-19/have a positive test. These new provisions apply to any new or current cases with effect from 1 January 2021.

4.4 Under the revised arrangements, SLWP will continue to apply to employees who have been advised to self-isolate **and** are displaying symptoms of COVID-19 **or** who have a diagnosis of COVID-19. From 1 January 2021, in instances where an employee has a medical diagnosis/confirmed case of COVID-19, SLWP may continue for **up to 28 days**³ if necessary

³ This refers to 28 calendar days. Separate unrelated instances of absence due to HSE/medical advice to self-isolate due to COVID-19 are not cumulative for the purpose of determining whether the 28-day limit has been reached e.g. if an employee was medically advised to self-isolate in 2020 and was absent on SLWP for COVID-

and where it is supported by a positive test for COVID-19 and ongoing medical certification. If an employee is still unwell after 28 days they will move to ordinary sick leave arrangements.

4.5 SLWP may be extended beyond 28 days for certified COVID-19 related illness in circumstances where a manager determines that all four criteria below are met:

- (i) An employee had been in the work premises at any time during the 14 days prior to commencing the self-isolation period of a positive case of COVID-19. The work premises includes any location, outside the home, an employer requires an employee to attend as part of their work role, e.g. in community settings, home visits. The attendance at the work premises/on site must have been known to and/or approved by the manager in advance.
- (ii) The employee provides their employer with medical evidence of a positive COVID-19 test⁴ including the date of this test.
- (iii) In accordance with the employer's standard management referral process, the Occupational Health Physician (OHP) confirms that the employee is medically unfit to resume work. How this will work in practice in Section 38 organisations will be based on the normal arrangements that apply for medical referrals to determine an employee's fitness to resume work during sickness absence.
- (iv) The OHP confirms that the employee's absence relates primarily to ongoing COVID-19 illness, and that they are accessing medical care.

Please refer to [HR Circular 073/2020](#) for further details on the application of SLWP for COVID-19.

4.6 The general principles applying to the management of sick leave, as outlined in the HSE's *Managing Attendance Policy and Procedure* and *HSE Rehabilitation of Employees Back to Work after Illness or Injury Policy*, will continue to apply. This includes the requirement

19 for a total of 14 days, this has no bearing on their SLWP entitlement if they are absent in January 2021 on foot of medical/HSE advice to self-isolate. Each instance of self-isolation based on HSE/medical advice is treated separately and the first day of absence in January 2021 would be treated as day 1 of the absence for the purpose of applying SLWP for COVID-19. Whilst there is no maximum limit on the number of instances for which SLWP may be granted, appropriate medical/HSE confirmation of the need to self-isolate and/or a diagnosis of COVID-19 will be required in order to be eligible for payment.

⁴ It is recognised that at the start of the pandemic, universal COVID testing was not available. Thus, on a case-by-case basis, medical evidence that the clinical presentation indicated a high probability of COVID-19 may suffice.

for managers and employees to maintain regular contact during the period of special leave with pay. Both policies are available [HERE](#). Section 38 organisations should refer to their relevant HR policies and procedures.

4.7 Employees who were tested because they had symptoms of coronavirus and receive a **negative test result** should continue to self-isolate until they have not had any symptoms for 48 hours. They can return to normal activities once 48 hours without symptoms.

Note: this FAQ only applies to employees who were symptomatic. Employees who are close contacts of a confirmed case of COVID-19 must continue to restrict their movements for 14 days even after negative test results.

Employees who are asymptomatic and well enough to work from home prior to and/or during the 48-hour self-isolation period should be facilitated to work from home.

If an employee is unfit to work due to a non-COVID-19 illness, the normal sick leave scheme will apply.

4.8 SLWP while absent from work due to COVID-19 is based on basic salary and fixed allowances only. In the case of employees who come within the scope of [HSE HR Circular 064/2020 Special Leave with Pay for COVID-19 Premium Payments](#), the amount payable includes unsocial hours premium payments. Please note that “unsocial hours premium earnings” is an umbrella term that refers to a variety of premium payments/allowances based on an employee’s rostered hours of work which vary depending on the roster worked in a specific period. It includes, but is not limited to, night duty (T1/4), time and one-sixth (T1/6), Saturday allowance, Sunday premium etc. The calculation excludes overtime payments with the exception of regular and rostered overtime payments. For the purposes of calculating this element of SLWP, the employee’s unsocial hours premium payments and, if applicable, regular and rostered overtime payments will be averaged over the preceding 6-week period. Please refer to the specific conditions set out in HSE Circular 64/2020.

4.9 The total payment is made by the employer. Public servants who can avail of SLWP for COVID-19 are excluded from claiming the special DEASP COVID-19 illness benefit payment. Any instances of public health service employees found to be in receipt of both special leave with pay and the COVID-19 illness benefit will be subject to disciplinary action and the appropriate amount shall be recouped from his/her salary.

4.10 When granting SLWP, health service employees are expected to comply at once with any directions which may be given by his/her employer and to take all practicable steps to resume duty as soon as possible. Otherwise, unless adequate reason is shown for non-compliance, the question of withholding pay will arise.

4.11 In the event of non-compliance with the provisions of SLWP (including the requirement to provide bona fide confirmation of self-isolation/diagnosis of COVID-19) the disciplinary procedure may be invoked.

4.12 Employees are **not** entitled to days in lieu of any public/bank holidays that occur whilst in receipt of SLWP.

4.13. Note that at any stage if an employee states that they feel well enough to work, but have tested positive for COVID-19 or are self-isolating because they were symptomatic, the employer may facilitate working from home instead of special leave with pay, if this is feasible and agreeable to both parties.

5 Recording of medical/HSE advice to self-isolate

5.1 The DPER FAQs state that appropriate medical/HSE confirmation of the need to self-isolate and/or a diagnosis of COVID-19 will be required. In the event that written confirmation is not available, the recording of medical or HSE advice to self-isolate will take the form of a self-declaration. This does not mean that employees can voluntarily choose to self-isolate. Medical/HSE advice will be required, however the reporting of same may take the form of a self-declaration in certain circumstances, where it is accompanied by text message confirmation, for example. In such cases the employee will be required to complete the *Self-Declaration Form for Special Leave with Pay* and submit to his/her manager for approval. In instances where the employee has undertaken a COVID-19 test, they may be required to provide the results to their employer, for example for occupational health purposes and to determine eligibility for SLWP for COVID-19.

5.2 Please refer to the following documents which are available [at this link](#):

- Procedure for public health service employees and managers for absences due to COVID-19 Appendix B
- COVID-19 Self-Declaration Form for Public Health Service Employees for Special Leave with Pay⁵ Appendix C

5.3 Please refer to ***HR Memo re COVID-19 Revised Incident Reporting Requirements*** (dated 13 January 2021) for information on reporting certain cases of COVID-19 to the Health and Safety Authority (HSA).

6. Recording Special Leave with Pay for COVID-19

6.1 SLWP for COVID-19 is being used in place of normal sick pay for public servants and should be recorded separately as **“Covid-19 Paid Leave”**. This separate classification is important for the following reasons:

⁵ This Form is intended solely for those employees who meet the criteria for special leave with pay as set out in the DPER FAQs but do not have access to medical certification.

- (i) to ensure that periods of COVID-19 absences covered by SLWP do not impact on an employee's entitlements under the public service sick leave scheme, and
- (ii) to comply with DPER/Department of Health directions to provide an aggregate summary of data/costings for the public health sector. The HSE and each Section 38 employer is required to ensure that relevant data⁶ and all expenditure in relation to special leave with pay for COVID-19 can be tracked separately in order to ensure that all exceptional spending on COVID-19 within the health sector is capable of being identified and reported on at national level.

6.2 Please refer to ***HR Circular 01/2021 - National Collection of Weekly Absence for COVID-19***

<https://www.hse.ie/eng/staff/resources/hr-circulars/hr-circular-001-2021-national-collection-of-weekly-absence-for-covid-19.pdf>

6.3 Any non-COVID-19 illness will be recorded as ordinary sick leave and the usual rules governing the public service sick leave scheme will apply.

7. Employees who are required to restrict their movements

7.1 Special Leave with Pay for COVID-19 **does not** apply to employees who are restricting their movements or who are in the very high risk category and are cocooning (see section 2).

7.2 The HSE sets out the latest criteria for restricted movements including (i) following close contact with a confirmed case of coronavirus and (ii) living with someone who has symptoms of coronavirus:

<https://www2.hse.ie/conditions/coronavirus/managing-coronavirus-at-home/if-you-live-with-someone-who-has-coronavirus.html>

Managers should refer to the HSE Workplace Health & Wellbeing Unit's Guidelines:

- ***Interim Guidance for Coronavirus - Healthcare Worker Management By Occupational Health***
- ***Derogation for the Return to Work of Healthcare Workers (HCW) who are essential for critical services***
- ***Covid-19 Fitness for Work Advice Sheet***

The latest Occupational Health COVID-19 Guidance Documents are available [at this link](#).

⁶ <https://dataprotection.ie/en/news-media/blogs/data-protection-and-covid-19>

7.3 Special leave with pay for COVID-19 does not apply to employees who are required to restrict their movements as a precaution as they are not ill. The employer must therefore facilitate working from home. If remote working in an employee's current role is not feasible, then the assignment of work may be outside of their usual core duties. Employees must cooperate with all such flexibilities while they are restricting their movements. In all such cases, employees remain available for work whilst at home, where they have been advised to restrict their movements as a precautionary measure.

7.4 This FAQ does not apply to employees who are required to restrict their movements arising from travel abroad (see section 12).

8. Return to the work premises after a positive case of COVID-19

8.1 Please note that this FAQ relates to a return to work in the employer's work premises. These arrangements do not preclude employees from returning to work at home at an earlier stage if this is feasible, depending on the situation of each case.

8.2 The HSE advises that in cases of confirmed COVID-19 infection, an employee needs to be 10 days post onset of symptoms and also 5 days fever free (which may run concurrently) before returning to the workplace. Please note that the 10 days is

- (i) from the date of onset of symptoms, if the employee was **symptomatic**, and not the date of receiving a positive COVID-19 test result; and
- (ii) from the date of the swab being carried out, if the employee was **asymptomatic** during the course of self-isolation, and not the date of receiving the positive test result. If the employee becomes symptomatic during those 10 days, s/he must recommence the 10-day self-isolation from this date.

This 10-day period does not apply to close contacts of a confirmed case. Employees who are close contacts of a confirmed case will need to continue to restrict their movements for 14 days. This is because it can take up to 14 days for symptoms to appear.

UPDATED 9. Employees with caring responsibilities

9.1 There is no special paid leave available for COVID-19 caring arrangements during this time. Please refer to ***HR Circular 02/2021 – Frontline Healthcare Employees with Childcare responsibilities during COVID-19*** [available here](#). This Circular sets out the range of options available in respect of essential healthcare employees with childcare responsibilities including, in exceptional circumstances where all other options have been exhausted, working from home and assignment of alternative duties that can be done remotely.

9.2 Any employee who wishes to avail of existing leave allowances during this time should submit their request to their manager in the normal manner. This includes annual leave, parental leave and other leave schemes to which the employee may be entitled. Managers should consider such requests in light of service requirements and the employee's particular circumstances.

10 Employees who live with very 'high risk' individuals

10.1 Employees who are required to attend the workplace and who live with very high-risk individuals should follow the HSE guidelines to protect themselves and to minimise risk of transmission. The implementation of the Work Safely Protocol is intended to minimise the risk of transmission in the workplace.

11. Availing of annual leave during COVID-19⁷

11.1 Managers should ensure to the maximum extent possible that employees continue to avail of their total annual leave entitlement within the current leave year, subject to essential service requirements. Managers should forward plan based on service needs and consult with their employees on the scheduling of annual leave throughout the current annual leave year. This is to ensure that employees are afforded an opportunity to avail of their annual leave entitlement for health and safety reasons, in line with the Organisation of Working Time Act 1997. It is also important to ensure that annual leave is taken to avoid the unnecessary accumulation/carryover of untaken leave, which may have an impact on service continuity at a later date. Managers are required to ensure that, at a minimum, employees avail of their statutory annual leave entitlement and the carryover of leave (where deemed appropriate) is subject to service needs and prior management approval.

Please refer also to HR Circular [HR Circular 03/2021](#) – *Frontline Healthcare Employees and Carryover of Annual Leave during COVID-19*.

UPDATED 12. Leave Arrangements for employees on return from travel overseas

12.1 Please refer to HSE HR Circular 72/2020 [at this link](#) for further details of arrangements for health service employees in relation to travel overseas including additional measures for HSE employees who return from travel overseas prior to attending the work premises

12.2 The general travel advice remains to avoid non-essential travel. The latest Government advice in relation to travelling to Ireland is available [here](#). Ireland has

⁷ This applies to all employees including those who are working from home on a temporary basis due to COVID-19.

implemented the EU ‘traffic lights’ approach to travel, which applies to countries in the EU / EEA (+ UK). Anyone coming into Ireland (apart from Northern Ireland and individuals arriving in Ireland from “green” regions) from orange, red and grey regions is required to restrict their movements for 14 days, unless they undergo a test and receive a negative result (click on this [link](#) for more details of when the test can be taken) or meet certain under criteria which can be found [here](#).

12.3 Responsibility to provide for the period of restricted movement arising from non-essential travel overseas is a matter for each individual employee. In order to protect public health, employees are required to advise their employer of any intention to travel overseas. Where there is an intention to undertake non-essential travel overseas to any country which requires a restricted movement period on return to Ireland, all employees must make provision by way of an annual leave or unpaid leave application (which may include parental leave where eligible) for that period of restricted movement. This arrangement is applicable to all public health service employees regardless of whether they can work from home. The employee’s leave application must be approved by the manager in advance and a record retained. *Employees should be aware that whatever restricted movement requirements are in place on their date of return to Ireland will apply to them.* Employees should be advised to log on to www.dfa.ie immediately prior to their return to Ireland to ensure they are fully apprised of the current Government advice and any necessary requirement to restrict their movements upon arrival in Ireland.

12.4 Specific arrangements are in place for employees undertaking essential travel overseas including submitting documentary evidence to their employer. Please refer to [HSE HR Circular 72/2020](#) for further details.

13 Management of employee relations processes during COVID-19

13.1 The operation of employee relations processes such as performance management, dignity at work, discipline and grievance should continue in accordance with CERS Memo 01/2021: *Operation of Grievance, Disciplinary and other HR processes – COVID-19*.

The objective is to continue facilitating a fair and timely process whilst protecting the health and safety of the various parties involved.

14. Employees on Probation

14.1 A flexible and pragmatic approach to the management of staff on probation for both new entrants and promotions should be adopted. The assessment of a probationer’s performance should continue and can take place remotely where necessary. Managers should ensure that they have set clearly defined objectives and duties that continue to be evaluated on an ongoing basis, in line with the usual probationary process. Managers

should continue to provide support to enable the employee to perform to the required standards and demonstrate their suitability in the position to which they were appointed.

14.2 A probationary period which has been paused should be resumed when the probationer returns to duties that allow for probation to be assessed adequately. If a probation process has been paused, the manager should formally and clearly communicate to the employee a timeframe for resumption and a written record should be kept on the employee's file.

15. Flexi-time arrangements

15.1 The normal operation of flexi-time or equivalent attendance management systems, including any flexi-time accruals and deficits, continues to remain temporarily suspended for those employees who are working under different arrangements. This includes those who are working from home and working different shift patterns etc., which are required in order to support social distancing and public health requirements.

15.2 Flexi-time arrangements will be re-introduced with effect from 24 August 2020 and/or commencement of the organisation's next viable flexi period. This arrangement applies only in circumstances where employees are attending the employer's work premises and are working their normal, pre-COVID work attendance patterns.

15.3 For those employees where flexi-time remains temporarily suspended, this arrangement does not preclude employers from using clocking-in and out arrangements for monitoring purposes. Any balances accrued by employees before the suspension of flexible working hours arrangements can continue to remain and be held over until the COVID-19 working arrangements are no longer in place.

16. Employees on unpaid leave

16.1 The COVID-19 pandemic unemployment payment is designed as a short-term response to those who are fully unemployed as a result of the pandemic. In the public health service, there exists a range of leave arrangements, underpinned by job security, which employees may avail of during this period e.g. parental leave etc. These leave arrangements, along with the flexible and innovative work attendance regimes and scope for temporary reassignment within the health service, mean that the pandemic unemployment payment is not available in such circumstances.

17 Remote working and claiming tax relief

17.1 Public service employees are not entitled to a daily allowance in respect of working from home during COVID-19. It is open to employees to make claims directly from Revenue

in respect of actual costs incurred in working from home at the end of the relevant tax year, in accordance with the relevant tax laws. Any claim in this regard is solely a matter for the individual concerned. Further details for individuals on how to claim expenses on tax returns are available from Revenue at www.revenue.ie Please refer to National HR Memo dated 19 May *Tax Relief for Expenses incurred working from home during the COVID-19 pandemic*.

Please ensure that this Circular and updated FAQ document are brought to the attention of managers within your area of responsibility and that updated information is disseminated to all employees (including those who are absent from work on any type of leave).

Queries

Queries from individual employees or managers should be referred to local HR/Employee Relations Departments. Please note that the National HR Helpdesk is also available to take queries from employees Tel: 1850 444 925 Email: ask.hr@hse.ie.

Queries on the occupational safety and health implications of the Work Safely Protocol may be referred to the HSE National Health and Safety Function (NHSF). Log your request at:

<http://www.hse.ie/safetyandwellbeing> or go to:

<http://pndchssdweb02.healthirl.net/Health.WebAccess/ss>

Alternatively contact the National Health & Safety Helpdesk Tel: 1850 420 420

Queries on the HSE Workplace Health & Wellbeing Unit's Covid-19 Occupational Health Guidance Documents may be referred to hr.wellbeing@hse.ie or the HCW helpline Tel: 1850 420 420

Queries from HR/Employee Relations Departments on other aspects of this Circular and related documents may be referred to Anna Killilea, Corporate Employee Relations, HR Directorate, 63-64 Adelaide Road, Dublin 2 Tel: 01 6626966 Email: anna.killilea@hse.ie

Yours sincerely



Anne Marie Hoey
National Director of Human Resources



Need information and advice on COVID-19 Go to www.hse.ie/coronavirus