

Postgraduate Researcher (PGR) Medical Leave Procedure

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1. Introduction and Purpose

- 1.1 The purpose of this procedure is to provide guidance on when and how PGRs should report a short-term medical absence and when longer-term medical issues necessitate a formal change of circumstance e.g. Interruption to Programme, Extension to Programme or Change to Mode of Attendance.

2. Scope and definitions

- 2.1 This procedure applies to full-time and part-time PGRs and relevant University of Manchester staff.
- 2.2 This procedure should be read alongside the [Postgraduate Researcher \(PGR\) Change of Circumstance Policy](#) and the related procedure(s):
- [PGR Interruption to Programme Procedure](#)
 - [PGR Extension to Programme Procedure](#)
 - [PGR Change to Mode of Attendance Procedure](#)
- 2.3 Examples of medical leave supported under this procedure:
- Sick leave (including both physical and mental health)
 - Pregnancy-related illness
 - Antenatal appointments
 - Fertility treatment – a PGR experiencing fertility issues and has been medically advised that they require leave, including (but not limited to) undergoing fertility treatment
 - Disability-related illness (including chronic illness)
 - Disability-related appointments (including for chronic illness) e.g. diagnosis, therapy or treatment
 - Gender reassignment – a PGR undertaking gender reassignment and has been medically advised that they require leave.

3. Reporting Short-Term Sickness

- 3.1 If PGRs are unable to continue their research for up to seven calendar days, they should contact their Supervisor(s) and the [Faculty Doctoral Academy](#) on the first day of absence and complete a Self-

Certification of Absence Form within two working days of the end of the period of absence (note that weekends and public holidays are included when calculating the absence period).

- 3.2 The University does not normally require medical/supporting documentation for periods of absence of up to seven calendar days.
- 3.3 If PGRs have a disclosed disability, they have registered this with the Disability Advisory and Support Service (DASS) and their support plan highlights attendance difficulties, they do not need to submit a student self-certification form if their short-term absence relates to their declared disability.
- 3.4 If PGRs have multiple or recurring periods of absence of up to seven calendar days, the Faculty Doctoral Academy may wish to advise PGRs to consider an interruption to their research.
- 3.5 For absence greater than seven days, PGRs are required to have a medical certificate, available via their General Practitioner (GP), covering any further periods of sickness in the same absence period. PGRs must complete the reverse side of the certificate before submission to the relevant [Faculty Doctoral Academy](#).
- 3.6 If the period of medical absence exceeds 4 weeks the PGR will be required to submit a formal change request on medical grounds (see sections 5 – 7).

4. Returning from Short-Term Sickness

- 4.1 For absences greater than 7 days but less than 4 weeks, the PGR will not normally be permitted to return to their studies before the date specified by the GP on the medical certificate.
- 4.2 Occupational Health and/or the Disability Advisory and Support Service (DASS) should be consulted if additional support needs are required for PGRs returning from short-term sick leave.

5. Interruptions to Programme for Medical Reasons

- 5.1 PGRs may need to apply for an interruption to their programme as soon as it is clear that they will be unable to continue their research for longer than four weeks on medical grounds, including (but not limited to) exacerbation or change in the impact of a disability or long-term health condition. PGRs should not expect to interrupt for a short period of acute illness.
- 5.2 The need for a PGR to interrupt their programme for health reasons may sometimes be known in advance, e.g. for a planned operation and recovery. On other occasions, it may become clear after a few weeks that a PGR is experiencing more than short-term health issues and will need to interrupt.
- 5.3 Requests for an interruption to programme on medical grounds would normally be supported by medical evidence from an appropriate medical professional, demonstrating that the PGR is not expected to be able to study for an extended period.
- 5.4 Stipend payments will usually cease during periods of approved interruption. However, some PGRs may be entitled to payments during a period of interruption for Medical Leave.

- 5.5 Full-time and part-time PGRs who receive an annual maintenance stipend funded by the University of Manchester and/or from UKRI are entitled to up to 28 weeks of paid Medical Leave at their normal stipend value from the first day of certified sickness within a 12 month rolling period (subject to the approval of the relevant School or Faculty).¹ Stipends for the period beyond the 28 weeks will be suspended.
- 5.6 PGRs who receive an externally funded stipend directly from an external organisation or an external award administered through the University of Manchester must follow the regulations of the funder. If the funder does not provide additional money to fund periods of Medical Leave, then the University is not liable to provide any payment.
- 5.7 Where a PGR receives split stipend funding from an external organisation and the University of Manchester stipend payments during any period of interruption for Medical Leave (up to 28 weeks) should be met jointly by both funders. In exceptional circumstances where the external funder is not able to cover stipend payments for Medical Leave the University of Manchester may fund the difference.
- 5.8 PGRs who receive an annual maintenance stipend via a project funded by a research grant should enquire with the project leader if stipend payments are provided during periods of Medical Leave. If the project does not provide additional money to fund periods of Medical Leave, the University is not liable to provide any payment.
- 5.9 The University will not make any payment to self-funded PGRs during periods of Medical Leave.
- 5.10 Funding during periods of Medical Leave will not be provided to PGRs during the submission pending period or a resubmission period.
- 5.10 Stipend payments are instigated at the point when the PGR first falls ill, not when the request for an interruption is made. Stipend payments are unlikely to be considered if absence due to illness is not reported at the time. Retrospective requests for stipend payments will not be considered.
- 5.12 PGRs should seek advice from their Supervisor(s) and [Faculty Doctoral Academy](#) and refer to the [PGR Interruptions to Programme Procedure](#) for full details.

6. Change to Mode of Attendance for Medical Reasons

- 6.1 If a research degree programme is offered on both a full-time and part-time basis (and the PGR has no visa limitations), PGRs are able to apply to change their mode of attendance from full-time to part-time (and vice versa).

¹ The normal stipend value is stipulated on the student's offer or award letter. PGRs who receive a contribution to their stipend from an external sponsor (e.g. as part of a CASE award funded by a private company), will not normally continue to receive the external sponsor contribution during periods of Medical Leave. The appropriate Faculty Doctoral Academy should consult the external sponsor to check if they are able to provide funding, but the external sponsor is not required to give financial support for Medical Leave absence. PGRs should contact their Faculty Doctoral Academy to check the arrangements for their individual award. PGRs in receipt of bursaries or awards covering tuition fees only are not eligible to receive any payment during periods of Medical Leave.

- 6.2 A change from full-time to part-time attendance is likely to be the best solution for a PGR if it becomes clear that they are unable to study at full-time pace on a long-term or permanent basis, due to disability or long-term health condition but are able to study on a part-time basis.
- 6.3 Applications to transfer from full-time to part-time study due to disability or long-term medical condition should normally be supported either by an updated DASS Support Plan or statement, or by medical evidence from an appropriate medical professional demonstrating that a PGR is unable to study at full-time pace. Further medical evidence is not normally required if the request is supported by DASS and evidence has previously been supplied to them. Consideration should also be given as to whether the PGR requires any other reasonable adjustments.
- 6.4 PGRs should seek advice from their Supervisor(s) and [Faculty Doctoral Academy](#) and refer to the [PGR Change to Mode of Attendance Procedure](#) for full details.

7. Extension to Programme for Medical Reasons

- 7.1 For medical absence longer than 4 weeks, including exacerbation or change in impact of a disability or long-term health condition, PGRs should normally apply for an interruption to the programme.
- 7.2 Where PGRs are unable to study at full-time pace due to disabilities or long-term medical conditions, this should normally be addressed, before they reach their submission deadline, by an application for transfer to part-time study.
- 7.3 However, there are some occasions where it might be appropriate to approve an extension to programme for medical / disability reasons:
- There may be occasions where a need for a PGR to study at less than full-time pace due to disabilities or long-term medical conditions becomes apparent in the late stages of their programme, or as they reach their submission deadline making a switch to part-time study unfeasible.
 - There may also be occasions where it is accepted that a PGR's study was disrupted for health reasons at an earlier stage in their programme, and that they were unable to study for over 4 weeks, but it is now too late to interrupt retrospectively. In such cases, PGRs may need an extension based on the time lost earlier in the programme.
 - A PGR may also have experienced multiple short-term absences (each less than 4 weeks) due to disability or medical-related reasons, which cumulatively have had a significant impact on their progress. In such cases, where the impact of this disruption becomes apparent later in the programme, an extension to programme may be considered appropriate.
- 7.4 Requests for an extension to programme made for health reasons should normally be supported by medical evidence from an appropriate medical professional. This may be evidence dating from the time of disruption of study earlier in the programme. If a PGR needs an extension due to a disability or long-term

health condition, and evidence of the condition has already been provided to the University, it will not always be necessary to provide new medical evidence.

7.5 Stipend payments (if applicable) are not guaranteed during an extension to programme unless approved by the funder.

7.6 PGRs should seek advice from their Supervisor(s) and [Faculty Doctoral Academy](#) and refer to the PGR [Extension to Programme Procedure](#) for full details.

Version amendment history		
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