FOUNDATIONS · RESOURCE 16

Leave and Time-Off Approaches for ND-Related Needs

TL;DR · QUICK SUMMARY

- Time off related to neurodivergence doesn't always fit neatly into standard sick leave or annual leave categories — assessment appointments, burnout recovery, or adjustment periods all need thoughtful handling. This guide covers practical approaches.

A Note Before You Read On

This resource offers general guidance and reflects common experience, not professional, legal, medical or financial advice. It is not a substitute for employment law, HR policy, occupational health guidance, or individual professional assessment. Every person's experience of neurodivergence is different, so please adapt anything here to your own situation. The Uniquely Wired Network does not accept liability for decisions, actions or outcomes arising from the use of this material. If you need advice specific to your circumstances, please consult a qualified professional (e.g. HR, legal, medical, or financial advisor).

Why This Matters

Rigid, one-size-fits-all leave categories can leave people choosing between "using a sick day" and "just pushing through" — neither of which serves anyone well.

Thoughtful time-off approaches reduce burnout risk and prevent small issues becoming long absences.

Getting this right also signals, practically rather than just in words, that your workplace takes ND-related needs seriously.

What This Might Look Like

- Someone needing a day to recover after a period of sustained masking or overwhelm, not linked to a specific illness.

- A team member needing several short appointments over months for an assessment process.
- Someone reluctant to book annual leave for a medical appointment, feeling it “isn’t a real holiday.”
- A colleague needing an adjustment period after returning from burnout-related leave.

What You Can Do

1. Clarify which category time off falls under.

- Confirm with HR whether assessment appointments count as medical leave rather than annual leave.
- Be clear and consistent about this so employees aren’t guessing or under-using support.

2. Allow flexibility for recovery-type time off.

- Recognise that burnout or overwhelm recovery may not look like a typical illness, but is still legitimate.
- Avoid requiring a specific diagnosis before treating recovery time as valid.

3. Plan for gradual return where relevant.

- A phased return after a significant absence often works better than an abrupt full return.
- Review workload and adjustments together before, not just after, someone returns.

Helpful Phrases You Can Borrow

Clarifying leave categories proactively:

> “Just so you know, appointments like this come under medical leave, not your annual leave allowance.”

Offering a phased return:

"Would you like to ease back in with a lighter first week rather than jumping straight back to full capacity?"

Quick Tips

- Assessment appointments should generally sit under medical leave, not annual leave — confirm with HR.
- Burnout recovery time is legitimate, even without a specific diagnosis attached.
- A phased return often works better than an abrupt full return after significant absence.
- Be consistent and proactive about which category time off falls under.
- Review workload and adjustments as part of any return, not as an afterthought.
- Formal leave policy always takes precedence over general guidance like this.

Want to Know More?

- See our companion guide: "Supporting Employee Through Assessment" for the appointment period itself.
- See "Reintegration" (Post-Diagnosis Support) for return-to-work planning.
- Speak with HR about your organisation's specific leave policy and statutory entitlements.

Before You Go

Time off handled thoughtfully prevents small struggles from becoming long absences.

Clarity and consistency here protect both the employee and the wider team.