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<th>Last Review Date</th>
<th>2\textsuperscript{nd} April 2015</th>
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<td>Remuneration Committee</td>
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<tr>
<td>Date of Approval</td>
<td>2\textsuperscript{nd} April 2013</td>
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<td>Date of Implementation</td>
<td>2\textsuperscript{nd} April 2013</td>
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<tr>
<td>Next Review Date</td>
<td>2\textsuperscript{nd} April 2017</td>
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<tr>
<td>Review Responsibility</td>
<td>Head of Human Resources</td>
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<td>Date of Review</td>
<td>Amendment Details</td>
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<tr>
<td>April 2015</td>
<td>• Amended to include Shared Parental Leave Provisions under the Children and Families Act 2014</td>
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<td>Appendix 7 – Notification of Variation or Cancellation of Intention to take SPL</td>
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SECTION A – POLICY

1. Policy Statement, Aims and Objectives

1.1. The aim of this policy is to provide all the information required to comply with the organisation’s maternity, adoption and parental leave regulations and to make employees and manager aware of what type of leave and pay an employee may be entitled to.

1.2. The development of this policy:

- Ensures all employees are aware of maternity, adoption and parental leave and pay entitlements
- Ensures all employees understand the procedure for accessing maternity, adoption or parental leave
- Support managers with a procedure to follow
- Satisfies legislative requirements

2. Legislation and Guidance

2.1. The following legislation and guidance has been taken into consideration in the development of this procedural document.

- Sex Discrimination Act 1975
- Employment Rights Act 1996
- Data Protection Act 1998
- Maternity and Parental Leave Regulations 1999
- Paternity and Adoption Leave Regulations 2002
- Additional Paternity Leave Regulations 2010
- NHS Terms and Conditions of Service Handbook

3. Scope

3.1 This policy applies to those members of staff that are directly employed by NHS Doncaster CCG and for whom NHS Doncaster CCG has legal responsibility. For those staff covered by a letter of authority / honorary contract or work experience this policy is also applicable whilst undertaking duties on behalf of NHS Doncaster CCG or working on NHS Doncaster CCG premises and forms part of their arrangements with NHS Doncaster CCG. As part of good employment practice, agency workers are also required to abide by NHS Doncaster CCG policies and procedures, as appropriate, to ensure
their health, safety and welfare whilst undertaking work for NHS Doncaster CCG.

4. Accountabilities and Responsibilities

4.1 Overall accountability for ensuring that there are systems and processes to effectively manage breaches of discipline lies with the Chief Officer. Responsibility is delegated to the following:

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>Chief of Corporate Services</td>
<td>Has delegated responsibility for:</td>
</tr>
<tr>
<td></td>
<td>• Maintaining an overview of the corporate ratification and governance process associated with the policy.</td>
</tr>
<tr>
<td>Head of Human Resources</td>
<td>Has delegated responsibility for:</td>
</tr>
<tr>
<td></td>
<td>• Leading the development, implementation and review of the policy.</td>
</tr>
<tr>
<td></td>
<td>• Supporting managers and employees with queries relating to the policy and procedure.</td>
</tr>
<tr>
<td></td>
<td>• Ensuring the policy and procedure is reviewed and updated as required.</td>
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<tr>
<td>Appointing Officers</td>
<td>Have delegated responsibility for:</td>
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<td></td>
<td>• Ensuring they understand and adhere to their obligations in relation to this policy.</td>
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<td></td>
<td>• Provision of advice and information.</td>
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<td></td>
<td>• Undertaking a risk assessment for pregnant employees.</td>
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<td></td>
<td>• Discussing breast feeding facilities and arrangements where required prior to the employee returning to work</td>
</tr>
<tr>
<td>All Staff</td>
<td>Have delegated responsibility for:</td>
</tr>
<tr>
<td></td>
<td>• Ensuring they understand their responsibilities in relation to this policy.</td>
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</table>
5. Dissemination, Training and Review

5.1. Dissemination

5.1.1. The effective implementation of this procedural document will support openness and transparency. NHS Doncaster CCG will:

- Ensure all staff and stakeholders have access to a copy of this procedural document via the organisation’s website.
- Develop a culture where employees can discuss concerns they may have regarding maternity, adoption or parental leave and pay.

5.1.2. This procedural document is located in the Employment Policy Manual. A set of hard copy Procedural Document Manuals are held by the Governance Team for business continuity purposes and all procedural documents are available via the organisation’s website. Staff are notified by email of new or updated procedural documents.

5.2. Training

5.2.1. All staff will be offered relevant training commensurate with their duties and responsibilities. Staff requiring support should speak to their line manager in the first instance. Support may also be obtained through their HR Department.

5.3. Review

5.3.1. As part of its development, this procedural document and its impact on staff, patients and the public has been reviewed in line with NHS Doncaster CCG’s Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act.

5.3.2. The procedural document will be reviewed every three years, and in accordance with the following on an as and when required basis:

- Legislatives changes
- Good practice guidelines
- Case Law
- Significant incidents reported
- New vulnerabilities identified
- Changes to organisational infrastructure
- Changes in practice
5.3.3. Procedural document management will be performance monitored to ensure that procedural documents are in-date and relevant to the core business of the CCG. The results will be published in the regular Governance Reports.
SECTION B – PROCEDURE

1. Maternity Leave

1.1. Eligibility

1.1.1 All pregnant employees, regardless of length of service, are entitled to take up to 26 weeks ordinary maternity leave and up to a further 26 weeks additional maternity leave and to resume work afterwards. The employee is therefore entitled to a total period of 52 weeks maternity leave.

1.1.2 Employees who take maternity leave have the right to return to work at any time during either the ordinary or additional maternity leave (except for the first two weeks from the day of childbirth), subject to the notification procedures set out in the following paragraphs.

1.1.3 Employees who have at least 26 weeks continuous service at the end of their qualifying week and are still employed during that week will qualify for statutory maternity pay.

1.1.4 Employees who have completed 12 months continuous service at the beginning of the 11th week before the expected week of confinement (EWC) will be entitled to receive the enhanced element of maternity pay, over and above statutory maternity pay, if they are intending to return to work to the same or other NHS employer for at least three months.

1.1.5 Employees who do not meet the qualifying criteria above will be entitled to unpaid maternity leave and may be entitled to claim Maternity Allowance. Employees should contact the Department of Work and Pensions to obtain form SMP1.

1.1.6 In cases of both unpaid and paid maternity leave the employee must continue to be employed until the beginning of the 14th week before the EWC and comply with the application procedure outlined in the following paragraphs.

1.2. Maternity Schemes

1.2.1 The choice of maternity schemes is detailed in the table below. The choice will be dependent upon:

- Length of continuous NHS service
- The intention, or not, of the employee to return to work

<table>
<thead>
<tr>
<th>Period of employment at 14th week prior to EWC</th>
<th>Scheme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 26 weeks</td>
<td>A</td>
</tr>
<tr>
<td>26 weeks and over</td>
<td>B/C/D</td>
</tr>
</tbody>
</table>
1.2.2. All of the above schemes incorporate the statutory rights to 52 weeks protection of all terms and conditions of employment with the exception of pay. Details of Schemes A, B, C, and D are contained in Appendix 1.

1.3. Procedure for Applying for Maternity Leave

1.3.1. In order to receive maternity provisions the employee is required to:

- Notify the manager of their intention to take the appropriate scheme by completing the application form (Appendix 2). The employee must submit their application by the 15th week before the EWC unless this is not reasonably practicable.

- Submit the Certificate of Confinement (form MATB1) to their manager at least 28 days before the intended maternity leave date. Form MATB1 is issued to the employee by a GP/Midwife any time after the 20th week of pregnancy.

- Sign Section 2 of the application form if they intend to return to work which confirms their declaration of intent to return to work for a minimum of 3 months.

1.4. General Principles

1.4.1. Maternity leave usually begins 11 weeks before the EWC, however the employee may work beyond this point up to the EWC. If the employee is absent due to pregnancy related illness after the 4th week before the EWC, maternity leave/pay will automatically commence.

1.4.2. The HR team will keep a record of the dates related to the pregnancy and will confirm in writing the following:

- The entitlement to paid or unpaid maternity leave.
- The expected return to work date based on 52 weeks leave entitlement, unless an earlier date has been confirmed.
- The requirement to give 28 days' notice of the employee’s intention to return to work.

1.4.3. The payroll provider will confirm in writing the following:

- The entitlement to maternity pay and the elements of paid/unpaid/statutory elements.
- The maternity leave commencement date
- The average weekly wage (if applicable)
- Whether the employee has indicated that they are/are not returning to work after the birth of the baby.
1.4.4. Before going on maternity leave the manager and the employee should discuss and agree any voluntary arrangements for keeping in touch during the employees maternity leave including:

- Any voluntary arrangements that the employee may find helpful to keep the employee in touch with developments at work and, nearer the time, to facilitate the return to work.
- Keeping the employer in touch with any developments that may affect the intended date of return.

1.5. **Keeping in Touch Days (KIT Days)**

1.5.1. Employees can work during their maternity leave on a KIT day without bringing their maternity leave to end or losing their entitlement to statutory maternity pay. The employee may work a maximum of 10 KIT days during the maternity leave but not within the first 2 weeks after the birth of the baby.

1.5.2. The manager and employee must agree upon the days/dates to be worked.

1.5.3. There is no obligation for NHS Doncaster CCG to offer such work or for the employee to accept it. A KIT day must be worked by mutual agreement.

1.5.4. The manager and the employee will agree whether any payment for work carried out on a KIT day should be received and this must be agreed in advance. Any payment will be offset against any statutory maternity pay the employee is entitled to.

1.5.5. The manager and the employee should agree the type of work that the employee will undertake on a KIT day and this should reflect the employee’s duties and responsibilities. Attendance on training courses and attendance at team meetings may be included.

1.5.6. The total duration of maternity leave will remain at 52 weeks regardless of whether the employee works a KIT day or days.

1.5.7. NHS Doncaster CCG is entitled to have reasonable contact with the employee during the period of maternity leave and this is separate to KIT days.

1.6. **Return to Work**

1.6.1. If the employee chooses Scheme A they are required to give written notice of their return to work no later than 28 days before the intended return date.

1.6.2. If the employee chooses Scheme B it will be assumed that the employee intends to take the additional maternity leave unless otherwise notified. The 28 days notice period will apply. Failure to provide this confirmation may result in disciplinary action.
1.6.3. An employee who intends to return to work at the end of the full maternity leave period will not be required to give any further notification of the return date although if the employee wishes to bring the return date forward, the 28 days notice period will apply.

1.6.4. The employee will have the right to return to their job on no less favourable terms and conditions. If this is not practicable the employee will have the right to return to a job of the same pay band and to work of a similar responsibilities and status. Should the employee wish to return to work on reduced hours or to an alternative working pattern they should enter into discussions with their manager at the earliest opportunity and no later than 28 days before the return to work. The procedure set out in the Flexible Working Policy should be followed where requests are received.

1.6.5. If the employee does not comply with the requirement to return to work for a 3 month period following their return to work within 15 months from the beginning of their maternity leave, they will be liable to refund to the organisation the whole of any maternity payments made, less any SMP entitlement. Employment with another NHS employer will be accepted provided documentary evidence of this alternative employment is provided.

1.7. Risk Assessment

1.7.1. For health and safety reasons the employee should notify their manager of the pregnancy in order that the working environment can be assessed to ensure that it does not pose a risk to the employees own health or that of the unborn baby. It is recommended that employees make this notification as soon as possible however accepts the right of the employee to keep the pregnancy confidential during the early stages of pregnancy. This equally applies to the employee throughout pregnancy or whilst breast feeding.

1.7.2. Where reasonably practicable alternative work will be provided if it is identified that the employee is incapable of carrying out all, or part of their duties, or where the unborn baby may be at risk. Where this is not possible, the employee will be excluded from work on medical grounds, on full pay.

1.7.3. This provision also applies if the employee has recently given birth and/or is breast feeding.

1.7.4. Appendix 3 provides an outline Risk Assessment template.

1.8. Annual Leave

1.8.1. All employees on maternity leave, whether paid or unpaid, will accrue an entitlement to annual leave. Employees may wish to take their leave entitlement at the beginning or end of the maternity leave period. Where it is not possible to take the annual leave entitlement consideration must be given to carry forward of annual leave or to pay in lieu.
1.9. **Payment and Pension Arrangements**

1.9.1. Maternity payments will be paid in monthly intervals but the amount paid each month may vary as it is calculated on the basis of how many Sundays fall in each particular month.

1.9.2. If the employee is not eligible to receive SMP they will be notified by the payroll provider that they may be eligible for up to 39 weeks Maternity Allowance from their Social Security Office.

1.9.3. If an employee pays contributions to the NHS Pension Scheme and does not intend to return to work, they may, if they wish, continue to pay contributions during the statutory 39 weeks maternity leave period.

1.9.4. If the employee is a member of the NHS Pension Scheme and intends to return to work after maternity leave, they will be required to continue their contributions in order to cover the maternity leave period. These deductions can be either made during the leave or upon return to work. Advice should be sought from the payroll provider prior to maternity leave commencing.

1.9.5. If the employee is paying contributions towards study/learning and development the repayments will continue whilst the employee is receiving maternity pay. If the employee is on unpaid maternity leave the repayments will cease until the employee returns to work. If the employee does not return to work they will be required to repay the amount outstanding and in order to do this they will be sent an invoice.

1.10. **Illness During Pregnancy/after the Maternity Leave Period**

1.10.1. If an employee is ill during pregnancy before they begin their maternity leave sickness benefits will be received in accordance with the Sickness Absence Policy.

1.10.2. If the illness is associated with pregnancy and occurs before the fourth week prior to the EWC sickness benefits will be received in the usual manner. If the sickness absence continues beyond the fourth week prior to the EWC maternity leave/pay will commence. The employee will thereafter be treated in accordance with the maternity regulations.

1.11. **Supplementary Information**

1.11.1. **Ante-Natal and Post Natal Care**

- Paid time off will be granted for the employee to receive ante-natal care, provided that an appointment has been made and the employee has requested time off work from their line manager in advance. Ante-natal care may include relaxation and parent craft classes, provided the attendance
has been recommended by a doctor/midwife. Every attempt should be made to attend these outside of work where possible.

- Reasonable paid time off to attend ante-natal classes will also be given for an expectant father or partner. There is a legal entitlement for an expectant father or partner to attend up to two classes for a maximum of 6.5 hours for each antenatal appointment. Time off to attend must be made in advance and will be subject to line manager approval.

- Employees who have recently given birth should be granted paid time off work for post natal care.

1.11.2. Premature Birth

- Where an employee’s baby is born alive prematurely the employee will be entitled to the same amount of maternity leave and pay as if the baby had been born at full term.

- If the baby is born more than 11 weeks before it was expected, the maternity leave start date will be brought forward to the beginning of the actual week of confinement. If an employee has worked during that week they will be paid for the work done and their maternity leave will begin from the first date of absence in the week of confinement.

- If the baby is born prematurely and is in hospital, the employee may divide their maternity leave entitlement by a minimum of 2 weeks leave immediately after confinement, returning to work and then taking the remainder of the entitlement after their baby is discharged from the hospital.

1.11.3. Still Birth and Miscarriages

- If the employee has a still birth after the 24th week of pregnancy, they will be entitled to maternity leave and pay as if the baby was born alive.

- Where an employee has a miscarriage before the 25th week of pregnancy, normal sickness absence provisions will apply.

1.11.4. Fixed Term Contracts

- If the employee is on a fixed term or training contract which will expire prior to the 11th week before the EWC and they have less than 12 months service, they is not obligation to pay any maternity pay, although the employee may be entitled to SMP.

- If the employee holds a contract which expires after the 11th week before the EWC, and the employee has the relevant service, the contract should be extended to enable the employee to receive maternity benefits. Advice should be sought from the Human Resources Team.
1.11.5. Incremental Date

- Maternity leave, whether paid or unpaid, will count as service for annual increments and for the purposes of any service qualification period for additional annual leave.

1.11.6. Deductions from Salary

- Where an unpaid period of maternity leave is involved, deductions from salary for trade unions and other items such as childcare vouchers or health insurance schemes will cease. The employee should contact the recipient of the deductions directly regarding payments during unpaid leave.

1.12. Arrangements for Breastfeeding

1.12.1. Employees will be given reasonable time off to breastfeed or express milk if required. A private area should be made available to the employee to enable the employee to take full advantage of this provision.

1.12.2. Facilities should be provided as follows:

- The use of a room that is warm, clean and private with a lockable door.
- Somewhere to wash hands and equipment.
- Somewhere clean to leave a steriliser.
- Use of a fridge to store labelled bottles of expressed milk in before taking them home.
- A low comfortable chair.

1.12.3. Ideally breast feeding employees should be allowed breaks to express milk at the time of day that they would normally feed the baby at home, or have the baby brought to her by a partner or carer.

1.13. The employee must inform their manager in writing that she is breast feeding or order that suitable arrangements can be made in advance of the employee returning to work.

2. Adoption Leave

2.1. Eligibility

2.1.1. To qualify for adoption leave the employee must be newly matched with the child for adoption by an approved adoption agency and have at least 26 weeks continuous service prior to the week in which the employee is notified of being matched with a child for adoption.

2.1.2. The employee will be required to provide a matching certificate from the adoption agency as evidence of their entitlement to adoption leave.
2.1.3. The employee must give notice of the date they wish to take adoption leave within 7 days of the date of which they are notified of having been matched with a child.

2.1.4. If both parent who wish to adopt are employees of the CCG they may split the entitlement to adoption leave, but jointly this must not exceed the total leave allowance.

2.1.5. If there is an established relationship with the child, such as fostering prior to the adoption, or where a step parent is adopting a partners child, local agreements will be made on the amount of leave and pay in addition to time off for official meetings.

2.1.6. If the placement is delayed but adoption leave has already commenced the employee should contact their line manager as normally the employee would not be able to recommence their adoption leave at a later date. It is therefore strongly advised that the employee identifies that the placement will commence prior to starting their adoption leave.

2.1.7. The application form contained in Appendix 4 should be completed.

2.2. Period of Leave

2.2.1. Employees who are adopting a child are entitled to 26 weeks ordinary adoption leave (OAL) and a further 26 weeks additional adoption leave (AAL), running from the end of the ordinary adoption leave. The period of leave should be taken in one block. The employee may commence their leave 14 days before the expected date of placement or any time up to and including the date of placement.

2.2.2. Employees are entitled to return to work after their period of both OAL and AAL. The provisions of paragraph 1.6.4. If an employee wishes to return to work before the end of the AAL they should give 28 days’ notice in writing.

2.3. Payment During Adoption Leave

2.3.1. Employees who qualify for adoption leave are entitled to receive 39 weeks statutory adoption pay (SAP) or 90% of their average weekly earnings if this are less. To qualify for SAP the employee must also have average weekly earnings at or above the lower earnings limit for national insurance.

2.3.2. Employees with 12 months continuous NHS service ending with the week in which they are notified of being matched with a child by the adoption agency will be entitled to occupational adoption pay (OAP). OAP consists of the following:

- 8 weeks at full pay (less SAP)
- 18 weeks at half pay (less SAP)
- 13 weeks SAP.
2.4. Keeping in Touch (KIT) Days

2.4.1. Employees will be entitled to KIT days in accordance with paragraph 1.5.

3. Maternity Support (Paternity) Leave

3.1. Employees may be entitled to 2 weeks of ordinary maternity support (paternity) leave which can be taken around the time of the birth or the placement of the child for adoption.

3.1.1. The application form for maternity support (paternity) leave is contained in Appendix 4. Where reasonably practicable employees should give 28 days’ notice of their intention to take maternity support (paternity) leave.

3.2. Eligibility

3.2.1. Eligibility for the two weeks of occupational maternity support (paternity) pay will be 12 months' continuous service with one or more NHS employer at the beginning of the week in which the baby is due.

3.2.2. Employees who are not eligible for the two weeks of occupational maternity support (paternity) pay may still be entitled to statutory paternity pay subject to meeting the qualifying conditions. Details of the qualifying conditions can be found on the (http://www.direct.gov.uk/en/employment/index.htm)

3.2.3. To qualify for additional maternity support (paternity) leave the employee and their partner must first meet certain qualification criteria. Details of the qualifying conditions and the notification requirements can be found on the (http://www.direct.gov.uk/en/employment/index.htm)

3.3. Payment During Maternity Support (Paternity) Leave

3.3.1. There will be an entitlement to two weeks’ occupational ordinary maternity support (paternity) pay. Full pay will be calculated on the basis of the average weekly earnings rules used for calculating occupational maternity pay entitlements. The employee will receive full pay less any statutory paternity pay receivable. Only one period of occupational maternity support (paternity) pay is ordinarily available when there is a multiple birth.

3.3.2. To qualify for statutory pay in the additional maternity support (paternity) leave period, the employee and their partner must first meet certain qualifying conditions. Details of the criteria and the notification requirements can be found on the (http://www.direct.gov.uk/en/employment/index.htm)

3.4. Keeping in Touch (KIT) Days

3.4.1. Employees will be entitled to KIT days in accordance with paragraph 1.5.
3.5. Return to Work

3.5.1. Employees who have taken additional maternity support (paternity) leave will have the right to return to the same job under their original contract and on no less favourable terms and conditions.

4. Parental Leave

4.1. Eligibility

4.1.1. Up to 18 weeks unpaid parental leave is available to employees with at least 12 months continuous NHS service who meet one of the eligibility criteria as follows:

- The employee is the parent of a child under five years of age
- The employee has adopted a child under the age of 18 (the right to parental leave lasts for a period of 5 years from the date of adoption or until the child’s 18th birthday, whichever is the sooner)
- The employee has acquired formal parental responsibility for a child under five years of age

4.1.2. An employee who is the parent or adoptive parent of a child who has been awarded disability living allowance or personal independence payment is entitled to up to 18 weeks unpaid parental leave which can be taken up to the child’s 18th birthday.

4.2. Conditions for Parental Leave

4.2.1. The minimum parental leave block is one week and leave must be taken on weekly blocks.

4.2.2. The employee must give at least 21 days notice of their intention to take parental leave and must state the start and finish dates of the leave. The period of notice may be waived in exceptional circumstances.

4.3.3. Parental leave may be postponed by the organisation (other than where parental leave has been requested immediately after childbirth or placement for adoption) where it is considered that the leave would cause undue business disruption. Parental leave can only be postponed for a maximum period of 6 months from the original request. Where parental leave is postponed this must be confirmed in writing to the employee within 7 days after the employee’s notice was given to the organisation.

4.3.4. The CCG may make enquiries from previous employers regarding the amount of parental leave an employee has taken in the past and also to seek a declaration from the employee about how much parental leave has been taken.
4.3.5. The CCG may also request proof from an employee of their eligibility to take parental leave such as the child’s birth certificate or legal documents stating the employee has formal parental responsibility.

4.3.6. The application form for parental leave is contained in Appendix 4.

5. **Shared Parental Leave (SPL)**

The following paragraphs provide a general overview of SPL. More detailed information is available at: [www.gov.uk/sharedparentalleave](http://www.gov.uk/sharedparentalleave)

5.1. **Overview**

5.1.1. Shared Parental Leave enables eligible parents to choose how to share the care of their child during the first year of birth or adoption. All eligible employees have a statutory right to take SPL and also may have an entitlement to Statutory Shared Parental Pay.

An employee may be entitled to Shared Parental Leave (SPL) and Statutory Shared Parental Pay (ShPP) if:

- Their baby is due on or after 5 April 2015
- They adopt a child on or after 5 April 2015

All requests for continuous periods of leave from eligible employees will be accepted however any requests for discontinuous leave will be considered.

5.1.2. An employee, if eligible, can commence SPL if they or their partner ends maternity or adoption leave or pay (or Maternity Allowance) early. The remaining leave will be available as SPL. The remaining weeks of pay will be available as ShPP.

5.1.3. An employee can share the leave with their partner if they are also eligible for SPL, and can choose how much of the leave each partner will take.

**Example:**

A mother and her partner are both eligible for SPL. The mother ends her maternity leave after 12 weeks, leaving 40 weeks (of the total 52 week entitlement) available for SPL. She takes 30 weeks and her partner takes the other 10 weeks.

5.2. **Eligibility**

5.2.1. In some circumstance only one parent is entitled to Shared Parental Leave (SPL) and Statutory Shared Parental Pay (ShPP). For example a self-employed parent will not be entitled to SPL in their own right but they may still pass the employment and earnings test which will mean their partner, if they are an employee, may still qualify.
5.2.2. If both parents are employees and both meet the qualifying requirements then there will be a joint entitlement and the parents will have to determine how to divide the leave entitlement once the mother/partner has decided to curtail their maternity/adoption leave.

5.2.3. A mother/partner, subject to certain criteria, will be entitled to statutory pay/adopter pay/ maternity allowance for up to 39 weeks. If the mother/partner gives notice to reduce their entitlement before they will have received it for 39 weeks then the remaining weeks could become available as ShPP.

5.2.4. **Shared Parental Leave eligibility criteria**

To qualify for Shared Parental Leave (SPL) the employee or their partner must be eligible for maternity pay or leave or maternity allowance or adoption pay or leave.

The employee must also share care of the child with either:

- Their husband, wife, civil partner or partner (joint adopter)
- The child’s other parent
- Their partner (if they live with you and the child)

The following criteria will also apply:

- The employee or their partner must also have curtailed, or given notice, to reduce, their maternity/adoptive leave, or their pay, allowance (if not eligible for maternity/adoptive leave)

- The employee must have properly notified NHS Doncaster CCG of their entitlement and have provided the necessary declarations and evidence.

- The employee must have been employed continuously for at least 26 weeks by the end of the 15th week before the due date (or by the date they are matched with their adopted child)

- The employee must remain employed by the same employer whilst they take SPL

In turn, the other parent in the family must meet the employment and earnings test. This means the individual must have worked for at least 26 weeks in the 66 weeks leading up to the due date and have earned above the maternity allowance threshold of £30 week in 13 of the 66 weeks.

5.3. **Statutory Shared Parental Pay**

5.3.1. In order to qualify for statutory shared parental pay, the employee must:
• Meet the qualifying requirements for shared parental leave and have a partner who meets the employment and earnings test

• Have earned not less than the lower earnings limit (currently £111 per week) in the relevant period. This is usually the 8 weeks leading up to the qualifying week (as with shared parental leave, the qualifying week is the end of the 15th week before the week in which the baby is due to be born, or the week that the adopter is notified of being matched with a child).

5.3.2. If an eligible employee and their partner end maternity or adoption leave and pay (or Maternity Allowance) early, they can:

• Take the rest of the 52 weeks of leave (up to a maximum of 50 weeks) as Shared Parental Leave (SPL)

• Take the rest of the 39 weeks of pay or Maternity Allowance (up to a maximum of 37 weeks) as Statutory Shared Parental Pay (ShPP)

The mother must take a minimum of 2 weeks’ maternity leave following the birth.

5.3.3. ShPP is paid at same as Statutory Maternity Pay (SMP) with the exception that during the first 6 weeks SMP is paid at 90% of whatever earned and no upper limit is set.

5.3.4. If the mother or adopter curtails their entitlement to maternity/adoption pay or maternity allowance before they have used their full entitlement then shared parental pay can be claimed for any remaining weeks.

5.4. Starting Shared Parental Leave

5.4.1. An employee or their partner can only start (SPL) once the child has been born or adopted. The mother or adopter must have either:

• Ended any maternity or adoption leave by returning to work

• Given ‘binding notice’ (a decision that can’t normally be changed) to their employer of the date when they plan to end any maternity or adoption leave

• Ended maternity pay or Maternity Allowance (if they’re not entitled to maternity leave, e.g. they’re an agency worker or self-employed)

5.4.2. The mother or adopter must give notice to their employer (at least 8 weeks) to end maternity or adoption pay, or to the Job Centre Plus to end Maternity Allowance.

5.4.3. SPL may commence whilst a partner is still on maternity or adoption leave as
long as they have given binding notice to end it.

5.4.4. Where a mother or adopter takes 38 weeks or more of statutory maternity or adoption pay or maternity allowance, then no statutory shared parental pay can be created.

**Example:**
A mother and her partner are both eligible for SPL.

The mother goes on maternity leave 10 weeks before her baby is born. She decides that she'll take 16 weeks of maternity leave and gives notice to her employer.

Since the mother has given binding notice, her partner can start SPL as soon as the baby has been born (as long as they’ve given at least 8 weeks’ notice).

5.5. **Application Process**

5.5.1. The employee must complete the Notice of Entitlement and Intention to Take Shared Parental Leave form (appendix 5). This provides written notice of an employees' entitlement to SPL and ShPP and will include the following information:

- The name of their partner
- The start and end dates for maternity or adoption leave and pay
- The total amount of SPL and ShPP available and how much the employee and their partner intend to take
- Confirmation that the employee is sharing childcare responsibility with their partner

5.5.2. The employee must also submit the signed declaration from their partner stating:

- Their name, address and National Insurance number
- That they satisfy the qualifying requirements for SPL and ShPP
- That they agree to you taking SPL and ShPP

5.5.3. Upon receipt of these documents NHS Doncaster CCG has a period of 14 days to request a copy of the child’s birth certificate and the name and address of their partner’s employer should they wish to do so. The employee is obliged to provide this information within 14 days of the request.

5.5.4. Once a request for leave is made the employee and employer will have a 14 day discussion period to talk about the request. An employee considering/taking SPL is encouraged to contact their line manager to arrange a discussion as early as possible.
5.6. **Notice period**

5.6.1 Employees are required to provide at least 8 weeks’ notice of any SPL they wish to take.

If the child is born more than 8 weeks early, this notice period can be shorter. If parents do not choose SPL initially, they have the option to use it at a later date whilst they are still eligible. For example, six months into a maternity leave period, with notice, a mother may choose to reduce their maternity leave by two months, giving their partner the chance to take those two months as SPL (provided they give eight weeks’ notice to their employer and take the SPL within a year of the birth/adoption).

5.6.2 SPL can commence on any day of the week however it must be taken in complete weeks.

5.7. **Varying leave**

5.7.1 Qualifying parents may vary their allocation of leave between them at any stage. To vary this the employee should complete the notice of variation or cancellation of intention to take Shared Parental Leave form. Both parents must notify each employer in writing of the following:

- Details of their original division of leave
- Advising of the fact this is to be varied
- Advising how they now intend to take the available SPL

Both parents must sign the notice to confirm that they are in agreement with the variation.

5.8. **Cancelling the decision to end maternity or adoption leave**

5.8.1 The mother or adopter may be able to change their decision to end maternity or adoption leave early if both of the following apply:

- The planned end date hasn’t passed
- They haven’t already returned to work

5.8.2 In addition, one of the following must apply:

- The employees finds out during the 8-week notice period that neither they or their partner is eligible for SPL or ShPP
- The mother or adopter’s partner has died
- The mother tells her employer less than 6 weeks after the birth (and she gave notice before the birth)

5.9. **Shared Parental Leave in Touch (SPLIT) Days**

5.9.1 The employee and their partner can both work up to 20 days during SPL. These are called ‘shared parental leave in touch’ (or SPLIT) days and will be
These days are in addition to the 10 ‘keeping in touch’ (or KIT) days already available to those on maternity or adoption leave.

Keeping in touch days are optional and both the employee and the employer must agree to them.

5.10. **Blocks of leave**

5.10.1. Up to 3 separate blocks of Shared Parental Leave (SPL) may be booked rather than an employee accessing the leave all in one go, even if the leave is not being shared with a partner.

If an employees’ partner is eligible for SPL the employee can take leave at different times or at the same time as their partner. Therefore, each notice to book SPL can be for either a ‘continuous’ block or multiple ‘discontinuous’ blocks.

At least 8 weeks’ notice must be given before a block of leave may commence.

5.10.2. Each eligible employee can give their employer up to 3 separate notices. Each notice can be for a block of leave, or the notice may be for a pattern of "discontinuous" leave involving different periods of leave. If a parent asks for discontinuous blocks of leave in a notification the employer can refuse and require that the total weeks of leave in the notice to be taken in a single continuous block. However, where the employee's notification is for a continuous block of leave the employer is required to agree. It is therefore beneficial for the employee and employer to discuss and attempt to agree the way in which the different blocks of leave can be taken.

5.10.3. Notifying NHS Doncaster CCG of a continuous block means taking an unbroken period of leave. For example, this could be a notification for a period of six weeks’ leave. Eligible employees have a statutory right to take SPL in this way and an employer cannot refuse it.

5.10.4. **Splitting blocks**

Employees may split blocks of leave into shorter periods of at least a week with the agreement of their line manager. For example:

* A mother finishes her maternity leave at the end of October and takes the rest of her leave as SPL. She shares it with her partner, who’s also eligible. They each take the whole of November as their first blocks of SPL. The partner then returns to work.

* The mother also returns to work in December to cover the busy Christmas period. She gives her employer notice that she’ll go on leave again in February - this is her second block of SPL. Her employer agrees to a work
pattern of 2 weeks on, 2 weeks off during the block.

If a request for a discontinuous leave block is not agreed then the total amount of leave in the request must be taken as one continuous block unless the employee withdraws the notice and submits a new request.

5.11. Employment comes to an end

5.11.1. If an employee’s employment comes to an end whilst they are still entitled to some ShPP, any remaining weeks will usually remain payable unless the employee commences employment with another employer.

5.12. Annual leave

5.12.1. SPL is granted in addition to annual leave which will continue to accrue throughout SPL.

5.13. Terms and Conditions

5.13.1. During the period of SPL, the employee’s contract of employment remains in force and entitlement to receive all contractual benefits, except for salary, continues.

Pension contributions will continue to be made during paid SPL. During a period of unpaid SPL, if an employee is part of the NHS Pension Scheme, then these deductions can be either made during the leave or upon return to work.

5.14. Returning to work after Shared Parental Leave

5.14.1. On returning to work after SPL, the employee will have the right to return to the same job on no less favourable terms and conditions. If this is not reasonably practicable the employee will have the right to return to a job of the same pay band and to work of a similar responsibilities and status.

6. Right of Appeal

6.1. Where an employee is dissatisfied with the outcome of their application for leave under this policy the matter should be raised in the first instance with the Line Manager. Where the employee remains dissatisfied the employee should raise the issue through the Grievance Policy.
Appendix 1

MATERNITY SCHEMES

SCHEME A

For those intending to return to work:

- The employee will receive 52 weeks unpaid leave with protection of all terms and conditions of employment, except pay.
- The employee may be eligible to receive Statutory Maternity Pay (SMP) or Maternity Allowance payable by the state.

For those not intending to return to work:

- Employment will be for a period of 52 weeks during which the employee’s terms and conditions of employment, except pay, will be protected, e.g. annual leave.

SCHEME B

For those intending to return to work:

- 39 weeks enhanced maternity pay for employees with 12 months service as follows:
  - 8 weeks full pay (SMP at 8 weeks already inclusive)
  - 18 weeks half pay (plus any SMP or Maternity Allowance including any dependents allowances receivable, providing the total receivable does not exceed full pay)
  - 13 weeks SMP or 90% of normal weekly earnings (whichever are the lower)

- 39 weeks maternity pay for employees with 26 weeks continuous service but less than 12 months service as follows:
  - 6 weeks at 9/10ths of full pay (inclusive of SMP)
  - 33 weeks SMP or 90% of normal weekly earnings (whichever is the lower)

In addition to paid maternity leave the employee is also entitled to a further 13 weeks unpaid additional maternity leave.

SCHEME C

For those not intending to return to work:
• The employee will receive 6 weeks at 90% of full pay (inclusive of SMP) plus a further 33 weeks SMP or 90% of normal weekly earnings (whichever is the lower)

• Terms and conditions of service, except pay, will be protected over the 52 weeks period.

**SCHEME D**

For those undecided about their intention to return to work:

• The employee will receive 6 weeks at 90% of full pay (inclusive of SMP) plus 33 weeks SMP or 90% of normal weekly earnings (whichever is the lower)

• An additional 13 weeks unpaid additional maternity leave

• If the employee returns to work for a minimum of 3 months they will receive the difference in payments between Scheme C and Scheme B
APPLICATION FOR MATERNITY LEAVE AND/OR MATERNITY PAY

NAME: ..............................................................................

EMPLOYEE NUMBER: ..............................................

EXPECTED DATE OF CONFINEMENT:

MATB1 Form:  ATTACHED/NOT ATTACHED (Please delete as appropriate)
(Certificate of Confinement)

Please complete Section 1 – if you do not intend to return to duty.

Please complete Section 2 – if you do intend/or are considering returning to duty.

Section 1: I do not intend to return to work and my last day of service will be: ............... I wish/do not wish to continue to pay pension contributions during my 39 weeks statutory maternity leave period. (Please delete as appropriate).

SIGNED ……………………………………….   DATE.……………………………

Section 2:

I apply for maternity leave and/or pay in accordance with * Scheme............ I intend to commence maternity leave on.................. I agree to the conditions of service governing maternity leave and undertake to continue in the service of NHS Doncaster Clinical Commissioning Group or another NHS employer for a minimum period of three months after the expiry of my leave.

I am aware that:

- If I intend to return to work earlier than anticipated I must give NHS Doncaster Clinical Commissioning Group 28 days notice, in writing. Failure to give confirmation could result in disciplinary action being taken.

- Should I fail to return to work for NHS Doncaster Clinical Commissioning Group or another NHS employer, I shall be liable to refund the whole of the
maternity pay received, less any Statutory Maternity Pay to which I am entitled or entitlement to payment under Scheme C.

- If I pay pensions contributions now and if I am subject to pension payments on my return to work, I shall be liable for payments during any *unpaid* period of maternity leave I might take.

- It is my responsibility to have read and understood the above policy and sought appropriate advice regarding my personal circumstances prior to deciding which scheme is appropriate.

*SIGNED:* ...........................................  *DATE:* ......................................

* Please indicate whether you are taking Scheme A, B, C or D.
CONFIDENTIAL
PREGNANT WORKERS RISK ASSESSMENT

PLEASE RETURN THIS FORM TO YOUR MANAGER WITH A COPY TO HR DEPARTMENT WITH YOUR MAT B1 FORM (WHEN AVAILABLE)

<table>
<thead>
<tr>
<th>Assessment No</th>
<th>Health and Safety Office Use</th>
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Please print details clearly

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<th>Department:</th>
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<th>Name of assessor:</th>
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<table>
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<tr>
<th>Date:</th>
<th>Name of New/Expectant Mother</th>
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<th>Is this a multiple pregnancy</th>
<th>Gestation (weeks)</th>
<th>Expected Date of Confinement</th>
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<th>Yes</th>
<th>No</th>
<th>Date</th>
<th>Assessor</th>
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<tr>
<td>Has a general workplace assessment been carried out for this department?</td>
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Please tick “YES” or “NO” and enter any comments in the space provided

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<tr>
<th>COSHH</th>
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<tbody>
<tr>
<td>Is the new/expectant mother likely to be exposed to any hazardous substances or biological agent?</td>
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<tr>
<td>Is she up to date with her immunisation programme? (ask employee to check with GP and confirm back to you if they are likely to be exposed to any hazardous substances)</td>
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<td>Have specific COSHH assessments been</td>
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<th>Yes</th>
<th>No</th>
<th>Comments</th>
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MANUAL HANDLING
Is the new/expectant mother likely to undertake any manual handling tasks?
Have specific assessment(s) been carried out for her?
Is any remedial action necessary?
Has remedial action (if required) been carried out?
Is lifting equipment available if required?

VDU (Visual display) EQUIPMENT
Does the new/expectant mother use VDU equipment?
Has her workstation been assessed?
Have any problems been highlighted?
If required, has remedial action been taken/initiated?

PERSONAL PROTECTIVE EQUIPMENT (PPE)
Is the new/expectant mother required to use/wear any personal protective equipment (does not include uniform)
Has training been given to her on how to use/wear PPE correctly?
Does she find PPE comfortable to wear/use?
Has maternity uniform been ordered or obtained?

MACHINERY/EQUIPMENT
(any equipment excluding substances, structural items, vdu or private car)
Is the new/expectant mother likely to use any machinery/equipment?
Does any of the machinery/equipment used present a greater risk to her than to any other worker?
Has she been trained/informed regarding the use/hazards of the equipment?

DRIVERS
Does she drive a vehicle as an integral part of her job?
Is the vehicle driving position adjustable for driver comfort?

ENVIRONMENT
Does the department have sufficient welfare facilities? (e.g. toilets, washing facilities, drinking water)
Is the temperature and ventilation generally comfortable?
Is lighting stable and sufficient?
Is there sufficient space for workers?
Is the area kept clean and tidy?
Are the floors even and intact?

OTHER (including security and working hours)
This section is for the assessor to highlight any other risk within the workplace NOT already covered by the above sections (e.g. violence and aggression, working hours, pace or type of work)
Have any other areas of concern been highlighted? (please explain)
Has remedial action been initiated/taken – please explain

Physical condition/Minor disorders condition/minor disorders
Please enter a brief statement describing general fitness/physical condition of the new/expectant mother at the time of assessment. For example is she suffering from any of the following; morning sickness, backache, fatigue or any other condition which could affect her well being.

Recommendations for Action

Please ensure all signatures are obtained. Please file the above assessment with the employee’s maternity leave papers etc in their personal file and forward any concerns to the health and safety officer for further information/investigation.

<table>
<thead>
<tr>
<th>Signature of new/expectant mother</th>
<th>Signature of Senior Manager</th>
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<tr>
<td>Date:</td>
<td>Date:</td>
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<td>Signature of individual carrying out assessment:</td>
<td>Date:</td>
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APPLICATION FOR ADOPTION, MATERNITY SUPPORT (PATERNITY) AND PARENTAL LEAVE

Applicants must complete Section A and either Section B, C or D

Section A (to be completed by the Applicant)

Name:…………………………………………… Employee Number:………………………………………

I wish to apply for adoption leave/maternity support (paternity) leave/parental leave (please delete as appropriate). I understand that if I provide any false information in support of my request for paid/unpaid leave I may be subject to disciplinary proceedings, which may lead to disciplinary action, including dismissal. I, therefore, confirm that the leave requested below is in accordance with the reason stated.

Section B – Adoption Leave

I wish to apply for:

a) 26 weeks ordinary adoption leave
b) 26 weeks additional adoption leave

(please tick all that apply)

The dates applied for are:…………………………………………………………………………………………

I also agree to return to work for a minimum period of three months with NHS Doncaster Clinical Commissioning Group or other NHS Employer. I also confirm that I meet the criteria outlined within the Maternity, Adoption, Maternity Support and Parental Leave Policy.

Signed by Employee: ……………………………… Date: ………………………………

Section C – Maternity Support (Paternity) Leave

I wish to apply for ......... weeks paid leave to be taken on the following dates and confirm that I meet the criteria outlined within the Maternity, Adoption, Maternity Support and Parental Leave Policy. I wish to apply for ordinary maternity support pay/statutory maternity support pay or unpaid leave (please delete as appropriate).

Signed by Employee…………………………………. Date:  ………………….... ............
**Section D – Parental Leave**

I wish to apply for ............ days/weeks unpaid parental leave (maximum of 18 weeks)

The dates applied for are:- ........................................................................................................

Signed by Employee:........................................ Date:........................................

**Section E – To be completed by the Line Manager**

I confirm that Leave under Section

B- Adoption Leave .... Number of days/weeks
C- Paternity Leave .... Number of days/weeks
D- Parental Leave ......Number of days/weeks

Has been approved/rejected. The reasons for rejecting the application are:-

........................................................................................................................................

........................................................................................................................................

........................................................................................................................................

Signed(Manager):........................................ Date:........................................

Copy to: HR for recording
Personal File
Payroll
NOTIFICATION OF ENTITLEMENT AND INTENTION TO TAKE SHARED PARENTAL LEAVE

Employees with a child due to be born or placed for adoption on or after 5 April 2015 who wish to take shared parental leave (SPL) to share the main caring responsibilities with the other parent/partner should submit this form to the Head of Human Resources, at least eight weeks before the start date of the first period of SPL.

To be entitled to SPL you must:

- be the mother, father, or main adopter of the child, or the partner of the mother or main adopter (referred to in this form as a parent)
- have (or share with the other parent) the main responsibility for the care of the child
- have at least 26 weeks’ continuous service at the 15th week before the expected week of birth or at the week in which the main adopter was notified of having been matched for adoption with the child (known as the ‘relevant week’)
- still be in continuous employment until the week before any SPL is taken.

The other parent must have at least 26 weeks’ employment (employed or self-employed) out of the 66 weeks prior to the relevant week and have average weekly earnings of at least £30 during at least 13 of those weeks.

Please refer to the CCG Maternity/Adoption/Maternity Support (Paternity)/Parental Leave and Shared Parental Leave Policy guidelines for further information before completing this form.

Section 1 – Basic Details

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<th>Full name of employee:</th>
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### Based at:

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### Hours of work:

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### Employee number:

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### Full name of Line Manager:

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<th>Full name of Line Manager:</th>
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### CCG start date:

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### NHS start date:

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<th>NHS start date:</th>
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### Contract expiry date:

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<th>Contract expiry date:</th>
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#### (if applicable)

### Child’s expected date of birth/date of placement for adoption:

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<th>Child’s expected date of birth/date of placement for adoption:</th>
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### Child’s actual date of birth/date of placement for adoption (if known):

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<th>Child’s actual date of birth/date of placement for adoption (if known):</th>
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### Start date of mother/main adopter’s maternity/adoption leave (or pay period*):

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<th>Start date of mother/main adopter’s maternity/adoption leave (or pay period*):</th>
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### End date of mother/main adopter’s maternity/adoption leave (or pay period*):

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<th>End date of mother/main adopter’s maternity/adoption leave (or pay period*):</th>
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* The start and end dates of the statutory maternity/adoption pay or maternity allowance period if the mother/main adopter is not entitled to statutory leave.

### Section 2 - Shared Parental Leave Details

The total amount available is 52 weeks minus the number of weeks’ leave/pay already taken by the mother/main adopter according to the dates given in the previous section.

### Total number of weeks’ SPL available:

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<th>Total number of weeks’ SPL available:</th>
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### Number of weeks’ SPL you intend to take:

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<th>Number of weeks’ SPL you intend to take:</th>
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### Number of weeks’ SPL the other parent intends to take:

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<tr>
<th>Number of weeks’ SPL the other parent intends to take:</th>
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</table>
Indication of start and end dates of SPL that you intend to take:

This indication is non-binding. You must submit a formal period of leave notice for each period of SPL you wish to request for it to be binding. Complete the section below if you wish your request for any/all of these periods of leave to be treated as a period of leave notice.

Do you wish the dates indicated for the period(s) of leave to constitute a formal (binding) period of leave notice? (delete as appropriate)

YES / NO / YES for the following dates only:

Section 3 - Shared Parental Pay Details

The total amount of shared parental pay (ShPP) which may be available is 39 weeks minus the number of weeks’ pay already taken by the mother/main adopter according to the dates given in Section 1.

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<th>Total number of weeks’ ShPP available:</th>
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<th>Number of weeks’ ShPP you intend to claim:</th>
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<th>Number of weeks’ ShPP the other parent intends to claim:</th>
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<tr>
<th>Indication of start and end dates of your ShPP periods:</th>
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Section 4 – Employee notice of curtailment of maternity/adoption leave

Complete this section if you are the employee named in this notice and you are the mother or main adopter. You must give at least eight weeks’ notice of your curtailment date. If you are entitled to maternity leave the curtailment date must be at least two weeks after the birth of your child.

I wish my maternity/adoption leave to end on __________ (insert date).
Section 5 – Employee declaration

I confirm that I meet the following conditions:

- I am the mother, father, or main adopter of the child, or the partner of the mother or main adopter
- I have (or share with the other parent) the main responsibility for the care of the child and I am taking SPL in order to care for the child
- I have at least 26 weeks’ continuous service at the 15th week before the expected week of birth or at the week in which the main adopter was notified of having been matched for adoption with the child (known as the ‘relevant week’)
- I intend to be in continuous employment until the week before any SPL is taken
- (If I am claiming shared parental pay) I have average weekly earnings equal to or above the Lower Earnings Limit over the eight week period ending with the relevant week
- I agree to inform the company immediately if I cease to meet the conditions for entitlement to SPL or ShPP.

If you are the mother/main adopter:

- I have submitted a curtailment of maternity/adoption leave notice by completing Section 4 above.

Signed: _____________________________ Date: _____________________________

Section 6 – Declaration of other parent

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>National Insurance Number:</td>
</tr>
</tbody>
</table>

I confirm that I meet the following conditions:

- I have least 26 weeks’ employment (employed or self-employed) out of the 66 weeks prior to the 15th week before the expected week of birth or at the week in which the main adopter was notified of having been matched for adoption with the child (known as the ‘relevant week’)
- I have average weekly earnings of at least £30 during at least 13 of the 66 weeks prior to the relevant week
- I agree to inform your employee immediately if I cease to meet the two conditions above
• I consent to your employee taking SPP and ShPP as set out in Sections 2 and 3 above.

If you are the mother/main adopter:

• I have curtailed my maternity leave and pay/adoption leave and pay/maternity allowance or will have done so by the time your employee starts shared parental leave

I consent to you processing the information contained in this declaration.

Signed: ___________________________ Date: ___________________________

Manager’s Declaration:

I have discussed shared parental leave with the above and I am aware of her/his intentions. We have also discussed annual leave entitlement, and made arrangements for contact during shared parental leave.

I have completed a change form as applicable.

Signed: ___________________________ Date: ___________________________

Once completed, please forward this form together with your MAT B1 or Matching Certificate to the HR team, at least 8 weeks prior to the commencement of your Shared Parental Leave.

----------------------------------------------------------------------------------------------------------------

HR Use Only:

<table>
<thead>
<tr>
<th>Date application and Mat B1 / Matching Certificate received:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date ESR checked for Salary Sacrifice Scheme:</td>
</tr>
<tr>
<td>Date leave commences:</td>
</tr>
<tr>
<td>Approved by:</td>
</tr>
<tr>
<td>Date Approved:</td>
</tr>
</tbody>
</table>
NOTIFICATION TO TAKE A PERIOD OF SHARED PARENTAL LEAVE

Please complete and return this form to the Head of Human Resources.

Use this form to give notice to take a period of shared parental leave (and pay if applicable), giving at least eight weeks' notice of the start date of the leave. You may submit up to three periods of leave notices.

You must have previously submitted the notice of entitlement and intention to take leave form, and had your eligibility for shared parental leave confirmed.

If a continuous period of leave is requested in a period of leave notice, you will be entitled to take that period of leave and this will be confirmed in writing. If you request discontinuous periods of leave in this notice and it is not practicable to accommodate your requested pattern of leave your manager will discuss alternative options with you.

<table>
<thead>
<tr>
<th>Full name of employee:</th>
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</thead>
<tbody>
<tr>
<td>Home address:</td>
</tr>
<tr>
<td>Job Title:</td>
</tr>
<tr>
<td>Based at:</td>
</tr>
<tr>
<td>Hours of work:</td>
</tr>
<tr>
<td>Employee number:</td>
</tr>
<tr>
<td>Name of Line Manager:</td>
</tr>
</tbody>
</table>

Shared parental leave dates:

<table>
<thead>
<tr>
<th>Start date</th>
<th>End date</th>
<th>Number of weeks</th>
</tr>
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</table>

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</table>
Shared parental pay dates (if applicable):

<table>
<thead>
<tr>
<th>Start date</th>
<th>End date</th>
<th>Number of weeks</th>
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</thead>
<tbody>
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Signed: _____________________________  Date: ______________________

**Manager’s Declaration:**
I have discussed shared parental leave with the above and I am aware of her/his intentions.

Shared parental leave dates agreed:

<table>
<thead>
<tr>
<th>Start date</th>
<th>End date</th>
<th>Number of weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

We have also discussed annual leave entitlement, and made arrangements for contact during shared parental leave.

I have completed a change form as applicable.

Signed: _____________________________  Date: ______________________

**HR use only:**

Date leave commences:  
Approved by:  
Date Approved:
NOTIFICATION OF VARIATION OR CANCELLATION OF INTENTION TO TAKE SHARED PARENTAL LEAVE

Please complete and return this form to the Head of Human Resources.

Use this form to vary or cancel the information you have previously provided regarding the amount of shared parental leave/pay you and the other parent each intend to take. You must give at least eight weeks’ notice before both the new date and the original date for varying the leave request.

You must have previously submitted the notice of entitlement and intention to take leave form, and had your entitlement to shared parental leave confirmed.

If you (or the other parent) have already submitted a binding period of leave notice for any of the periods detailed below, please confirm this where indicated.

Both parents must sign the declaration to indicate their agreement to any variation or cancellation.

<table>
<thead>
<tr>
<th>Full Name of employee:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Address:</td>
<td></td>
</tr>
<tr>
<td>Contact Tel No:</td>
<td></td>
</tr>
<tr>
<td>Employee No:</td>
<td></td>
</tr>
<tr>
<td>Name of other parent:</td>
<td></td>
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</tbody>
</table>

Shared Parental Leave Details

<table>
<thead>
<tr>
<th>Number of weeks’ SPL you intend to take:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Number of weeks’ SPL the other parent intends to take:</td>
<td></td>
</tr>
<tr>
<td>Indication of start and end dates of</td>
<td></td>
</tr>
</tbody>
</table>
SPL that you intend to take:

*This indication is non-binding. You must submit a formal period of leave notice for each period of SPL you wish it to be binding.*

List any dates of SPL which you have already submitted to the CCG on a binding period of leave notice:

List any dates of SPL which the other parent has already submitted on a binding period of leave notice to his/her employer:

### Shared Parental Pay (ShPP) Details

<table>
<thead>
<tr>
<th>Number of weeks’ ShPP you have claimed/intend to claim:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Number of weeks’ ShPP the other parent has claimed/intends to claim:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indication of start and end dates of your ShPP periods:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### Original Shared Parental Leave dates to be cancelled

<table>
<thead>
<tr>
<th>Start Date</th>
<th>End Date</th>
<th>Number of weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Declaration

We confirm that we agree to the variation(s) / cancellation(s) detailed above.

Signature of employee:__________________________ Date:__________________

Signature of other parent:________________________ Date:__________________

Manager’s Declaration:

I have discussed shared parental leave with the above and I am aware of her/his intentions. We have also discussed annual leave entitlement, and made arrangements for contact during shared parental leave.

I have completed a change form as applicable.

Signed:_____________________________________ Date:__________________

HR Use Only:

<table>
<thead>
<tr>
<th>Date leave commences:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved by:</td>
</tr>
<tr>
<td>Date Approved:</td>
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