Doncaster and Bassetlaw Teaching Hospitals
NHS Foundation Trust

Parenting Leave Policy

This procedural document supersedes: Parental Leave Policy – CORP/EMP 15 v. 15.1



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Executive Sponsor	Zoe Lintin - Director of People and Organisational Development
Author/reviewer:	Kelly Crawshaw, People Business Advisor
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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 16	April 2026	• Updated in line with 2026 Employment Rights Act. • Clear clarification included for breastfeeding risk assessment • Update to Return from Maternity Form • Appendix labels changed from alphabetical to numeral labelling system	Kelly Crawshaw
Version 15.1	April 2025	• Section 7.5 amended wording re payment of KIT days • Section 10 added Neonatal care leave and pay	Kelly Crawshaw
Version 15	May 2023	• Added to section 4.9 and 8.8 – pregnancies lost before 24 weeks are eligible to paid time off • Added to section 8 – legislative updates.	Kelly Crawshaw Joanne Dixon
Version 14	Dec 2022	• 5.2 change 'you' to All pregnant employees • 5.7 added return to work for DBTH or another NHS employer. • 5.7 paragraph 3 reworded to clarify when there would be a possible requirement to pay back maternity / adoption pay. • Added the required return of 3 months can include annual leave and commence med-month. • Added return to work must be within 15 months of maternity / adoption start date. • 5.8 added employees can request OMP averaged over 12 months. • 6.6 Added further reference to section 5.7 & 5.8 for clarity. • 7 changed 'mother' to 'employee who has given birth'. • 7.3 Added return to work criteria for shared parental leave. • 8.2 added link to NHS Employers maternity guidance for rotational doctors and dentists. • 8.5 added further clarification that KIT / SPLIT days are paid on return to work. • 8.6 Added • 9.6 changed 'woman' to 'employee'. • 19 Added Appendix N to the list • Page 64 Added Appendix L – return to work notification form.	Kelly Crawshaw Joanne Dixon

Version 13	Sept 2021	**Amendment** • Change of payroll provider. Policy amended to reflect payroll provider move to Victoria Pay Services.	Elizabeth Watkinson
Version 12	December 2019	**Amendment** • NHS Employers comprehensive, published guidance on shared parental leave, referenced and added under section 7.1.	Tully Monk
Version 11	Sept 2019	• Change of name • Complete review of policy to ensure legislative compliance and compliance with national terms and conditions • Additional information to explain pay calculations • Review of all forms and guidance and inclusion of a standard letter for managers	Tully Monk/ Joanne Dixon
Version 10	April 2015	• Addition of Shared Parental Leave and Statutory Shared Parental Pay at section 6a. End date of Additional paternity leave added.	Tracey Davies
Version 9	August 2014	• Complete review of policy and combined with other policies.	John Scott
Version 8	June 2012	• Section 11- Amendment to detail how accrual of annual leave whilst on Maternity Leave does include Bank Holidays	Kerstie Stevens
Version 7	February 2012	• Addition of Appendix 8 – confirmation of return-to-work date	Jayne Lang
Version 6	October 2011	• General Update • References updated • Appendix 1 updated and re-designed • Appendix 7- New information on Doctors on Rotation	Kerstie Stevens
Version 5	May 2010	• Item 2 - Duties and Responsibilities added and paragraphs re-numbered accordingly. • Paragraph 5 amendment to wording • Paragraph 7 clarifications that for the purpose of calculating maternity leave and pay, the EWC will commence on the day your baby is due. • Paragraph 15 amended to reflect extension of non-cash benefits up to 52 weeks. • Appendix 4 - Application to change hours- amendments for monitoring purposes/ to mirror flexible working policy request form • Paragraph 10 - amended to reflect changes in requesting flexible working • Paragraph 11- Premature birth - changes for a child who may remain in hospital for a particular period	Kerstie Stevens

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ABBREVIATIONS

Additional Maternity Leave/Adoption Leave (AML/OAL)
The entitlement to a further period of up to 26 weeks unpaid leave regardless of how long you have worked for the trust.

Antenatal Care
Antenatal care refers to pregnancy-related care provided during in the course of your pregnancy by health professionals.

Average Weekly Earnings
An employee's "average weekly earnings" for the purposes of calculating statutory maternity pay (SMP) are their earnings during the eight-week period prior to their qualifying week (the qualifying week is the 15th week before the expected week of childbirth). Earnings for these purposes include any remuneration on which the employer is liable to pay class 1 national insurance contributions. They therefore include bonus payments, overtime and commission.

Childbirth
Childbirth means the live birth of a child, or a still birth after a pregnancy lasting at least 24 completed weeks.

Compulsory Maternity Leave
These are the two weeks immediately following the date of childbirth. No employee may work in these two weeks.

Continuous Service
Service with Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, or any other NHS Trust as listed in annex 1 of the NHS agenda for change handbook, including the Northern Ireland health service, is counted for occupational maternity pay. A break of less than 3 months will not constitute a break in service.

Expected Date Of Childbirth (EDC)
This is the date on which your baby is due

Expected Week Of Childbirth (EWC)
The expected week of childbirth means the week, beginning at midnight between Saturday and Sunday, in which it is expected that your baby will be born.

Keep In Touch (KIT) Days / Shared Parental Leave in Touch Days Split
Keeping in touch days are formal arrangements to allow you to undertake work of some kind during maternity / adoption / or shared parental leave. You cannot be required to take up keeping in touch days – participation is not compulsory. The statutory provision allows for up to ten keeping in touch days in any period of maternity or adoption leave. You and your partner can both work up to 20 shared

parental leave in touch days (split) during shared parental leave. These days are in addition to the 10 'keeping in touch' (or KIT) days already available to those on maternity or adoption leave.

Working more than the 10 KIT and/ or 20 split days will bring the maternity/ adoption/ shared parental leave and pay to an end. The number of days and the activity to be undertaken must be agreed between you and your line manager.

Matching Certificate
This is the certificate that confirms that a child has been matched for adoption and when the child is expected to be placed for adoption with you.

Maternity Certificate (form MAT B1)
This is the certificate completed by the doctor or midwife that confirms the date on which the baby is due.

Medical Evidence
Your doctor or midwife will issue you with a form MAT B1 form, usually in your 24th to 26th week of pregnancy. This should be handed in as soon as possible to your manager so that the trust has formal confirmation of your expected week of childbirth. The trust cannot start paying maternity pay under either scheme without this certificate.

You do not need to produce documentation to show that you are fit to work past your 29th week of pregnancy, although you should still discuss this with your doctor or midwife, and only work for as long as he/she recommends. In exceptional circumstances your manager may ask you to see an occupational health adviser to ensure that the work you do will not cause any harm to either you or your baby.

Occupational Maternity / Adoption Pay (OMP/OMA)
This is a payment, paid by the trust which is dependent on your length of service with the NHS.

Ordinary Maternity/Adoption Leave (OML/OAL)
The entitlement to a period of 26 weeks leave regardless of how long you have worked for the NHS. This will be unpaid unless an employee qualifies for statutory maternity pay or maternity allowance.

Paternity Leave (Pl)
Paternity leave is a period of two weeks leave, to be taken following your child's birth/adoption, this applies if you are the biological or adoptive fathers, nominated carer or same sex partner. It must be taken within 56 days of the birth of the child.

Qualifying Week
This is the 15th week before the EWC.

SAP1 Form
This form is for VPS to fill in and give to employees who are not entitled to statutory adoption pay.

Shared Parental Pay/Leave

If you're eligible and you or your partner end maternity or adoption leave and pay (or maternity allowance) early, then you can take the rest of the 52 weeks of maternity or adoption leave as shared parental leave (SPL) or take the rest of the 39 weeks of maternity or adoption pay (or maternity allowance) as statutory shared parental pay (ShPP).

Spp1 Form

This form is for VPS to fill in and give to employees who are not entitled to statutory paternity pay.

Statutory Maternity/Adoption Allowance (SMA/SAA)

Allowance paid by department of work and pensions to those employees, who do not qualify for statutory maternity/ adoption pay.

Statutory Maternity/Adoption Pay (SMP/SAP)

Statutory maternity pay is an allowance paid by the trust on behalf of the department for work and pensions (DWP) if you have been working for the trust for at least 26 weeks at your 25th week of pregnancy and you pay national insurance contributions.

The Lower Earnings Limit (LEL)

The lowest point of earnings at which you still are obligated to contribute national insurance. The LEL that applies to you is the one which is current on the Saturday at the end of your qualifying week. The LEL changes every year.

POLICY AND PROCESS AT A GLANCE

Maternity/Adoption	Paternity	Shared Parental	Parental (Unpaid)
What is it?	**What is it?**	**What is it?**	**What is it?**
Up to 52 weeks maternity leave (Ordinary Maternity/Adoption leave is 26 weeks, followed by Additional Maternity/Adoption Leave). By law you must take a minimum of two weeks leave after childbirth.	Two weeks paid time off to provide care for a new-born baby/newly placed adopted child.	It allows parents to choose how they wish to share up to 50 weeks leave to care for a newborn baby/newly placed adopted child.	Up to 18 weeks unpaid leave to look after or to make arrangements for your child (children). It must be taken by the child's 18th birthday.
Statutory Maternity/Adoption Pay (SMP/SAP) is for 39 weeks. First six weeks at 90%, of AWE followed by 33 weeks at SMP rate or 90% of AWE whichever is lower. Occupational Maternity/ Adoption pay is 8 weeks full pay, 18 weeks half pay plus SMP/ SAP, and 13 weeks SMP / SAP only.	It can start from the date of the baby's birth or any day of the week following the birth and must be taken within 52 weeks of the birth of the child.	It allows parents to choose how they wish to share up to 37 weeks of pay plus up to an additional 13 weeks of unpaid leave in order to care for a newborn baby/newly placed adopted child. Leave and pay must be taken before the child's first birthday	It can be taken in week blocks up to 18 weeks in total.
A right to return to work: to your own job (if you come back to work within 26 weeks), or to a similar job (if you come back after 26 weeks).	You will return to the same job; on the same terms and conditions; and will not be subjected to any disadvantage, unfair treatment or dismissal.	A right to return to work: to your own job (if you come back to work within 26 weeks), or a similar job (if you come back after 26 weeks.	You will return to the same job; on the same terms and conditions; and will not be subjected to any disadvantage, unfair treatment or dismissal.
Paid time off to attend antenatal care appointments/official adoption meetings.	You are also entitled to further unpaid parental leave and to request flexible working.	You may also be entitled to any unused statutory maternity/adoption pay up to a maximum of 37 weeks	
Who does this apply to?	**Who does this apply to?**	**Who does this apply to?**	**Who does this apply to?**
The leave applies to anyone who is pregnant, or the primary carer in adoption.	The father can be either the baby's biological father, or the partner (same sex)/husband or civil partner of the mother, or someone who has, or expects to have, responsibility for the baby's upbringing.	SPL can only be used by two people: The mother/adopter and one of the following: - the father of the child (in the case of birth) or - the spouse, civil partner or partner of the child's mother/ adopter.	Natural or adoptive parents or people with parental responsibility under the Children's Act.
To receive statutory maternity/adoption leave pay, you must have 26 weeks' continuous service (at the 15th week before the week the baby is due/child is due to be placed). To receive Occupational Maternity/ Adoption Pay you must have one year's continuous NHS service by the 11th week before the due date/ placement date.		The mother/adopter of the child must be/have been entitled to statutory maternity/adoption leave or they must be/have been entitled to statutory maternity/adoption pay or maternity allowance and must have ended or given notice to reduce any maternity/adoption entitlements.	

Maternity/Adoption
How do I apply/get more information?
Read this guidance.
Tell your manager that you are pregnant and the likely dates of absence/date of placement in your family.

Paternity
How do I apply/get more information?
Tell your manager that you plan to take paternity leave before the end of the fifteenth week, before the baby is expected.
Tell your manager: when the baby is due; when you plan to take the time off; and how long you are taking.

Shared Parental
How do I apply/get more information?
Read this guidance and see information provided via the links to the internet.
Tell your manager that you intend to apply for shared parental leave and complete the forms included in this guidance.

Parental (Unpaid)
How do I apply/get more information?
First application to your manager 21 days before you plan to take the leave.

Neonatal Care Leave
Neonatal Care Leave and Pay
How do I apply / get more information?
Additional leave where a baby born on or after 6 April 2025 receives neonatal care for at least 7 continuous days, starting within the first 28 days after birth.
One week of leave is available for each full week the baby receives neonatal care, up to a maximum of 12 weeks. Leave must be taken in full-week blocks and within 68 weeks of the baby's birth.
Notify your manager as soon as reasonably practicable and provide the relevant dates and details of neonatal care.
Managers should support the employee, confirm entitlement, keep appropriate records and submit the required pay notification to VPS where neonatal care pay applies.
The employee should send the completed Neonatal Care Leave application to their manager, who will complete the ad hoc change form and submit it to VPS where leave or pay needs to be recorded.

1 INTRODUCTION

We want to support our colleagues to deliver our service for patients by providing them with clear and accessible guidance on employment terms, entitlements, and arrangements. By providing colleagues and managers with a clear, up-to-date, and accurate policy, that can assist when making informed decisions regarding a colleague's future.

The Trust will ensure that this leave does not cause any long-term disadvantage in relation to learning needs and/or self-development. Taking a period of maternity/adoption/ shared parental or paternity leave will not affect the pay step date, pay awards or continuous NHS or Trust service.

If an employee feels aggrieved by the interpretation or application of this policy, they should refer to the Trust's Grievance and Resolution Procedure.

2 PURPOSE

This policy covers arrangements for maternity leave, paternity, adoption and shared parental leave. The terms of this policy apply equally to same sex partnerships. A glossary of definitions used in this policy is included in Appendix 1.

This Policy is intended to give employees and their managers, relevant information and is not an exhaustive account of all the regulations. This policy applies to all Trust employees.

3 DUTIES AND RESPONSIBILITIES

3.1 Employees

- Co-operate with the requirements of the leave procedures.
- Make every effort to attend meetings arranged.
- Ensure reasonable notice is given and sufficient notice of any intention to take leave or pay to your manager in accordance with this policy.

3.2 Managers

- Deal promptly with requests for leave.
- View any applications with an open mind and follow a fair and justifiable decision-making process.
- Maintain appropriate records of applications in line with best practice for information governance.
- Ensure any agreed arrangements are communicated to VPS (Victoria Pay Services) in a timely manner so that pay and leave may be applied correctly.
- Ensure VPS are notified of any return to work and entitlement to payment for KIT/ SPLIT days upon the employee's return.

- Ensure a pregnancy risk assessment is completed as soon as the manager is notified of the pregnancy, reviewed regularly throughout the pregnancy, and updated promptly where there is any change to the employee's role, working environment, working pattern, health, pregnancy-related advice, or any identified workplace risk.

3.3 HR Department/VPS

- Provide support, advice and guidance on all matters relating to the operation of this policy.
- To advise managers on the processing of any maternity/adoption/shared parental leave and paternity leave applications.
- HR will review and maintain the policy through agreed forums within the Trust.

4 MATERNITY LEAVE

4.1 Leave Entitlement

Pregnant employees are entitled to take up to 52 weeks Maternity Leave. This consists of two parts: 26 weeks of Ordinary Maternity Leave (including 2 weeks compulsory maternity leave), followed by 26 weeks of Additional Maternity Leave. By law, you may not return to work until two weeks after the birth of your child.

4.2 Notifying Your Manager

When employees are aware they are pregnant, managers should be informed of the expected week of childbirth (EWC) as soon as reasonably practicable. The point at which the manager is informed of the pregnancy, consideration of the working environment and any potential hazards or risks should take place. A discussion should be had with the line manager regarding the date on which an employee wants to begin their maternity leave. This cannot be earlier than the 11th week before the EWC. A risk assessment will then be arranged by a member of the management team.

An application form for Maternity Leave should be completed no later than the end of the 15th week before the EWC. All formal documentation (the original MAT B1 form signed by a GP or midwife) must be attached to the application form at the point of submission. A manager will write to the employee within 28 days to confirm the arrangements for maternity leave. The employee's manager will submit the application form for Maternity Leave and the original MATB1 to VPS so that VPS are able to calculate maternity pay entitlements.

4.3 Antenatal Appointments

All pregnant employees have a statutory right to receive reasonable paid time off for antenatal care, regardless of their length of service or the number of hours they work, where the appointment falls

within normal working hours. These can include relaxation and parent-craft classes recommended by a doctor, midwife, or health visitor as part of the pregnancy care.

After the first appointment, line managers should be shown details on the appointment card and discuss the time off that is required for future appointments, so that managers may arrange cover. For exceptional operational reasons, colleagues may be asked to change appointments, and this should be complied with if this practical. Similar arrangements apply for paid time off for post-natal care.

If a manager is considering asking an employee to rearrange an antenatal or postnatal appointment due to exceptional operational reasons, they must consult their People Business Partnering Team before making the request, to ensure the decision is appropriate, reasonable and does not place the employee or baby at risk.

4.4 Starting Your Leave

Maternity leave may start any time between the 11th week before the EWC and the date of birth, providing that the employee has notified their manager. You can vary the date later if at least 28 days' notice is given.

Maternity leave will begin automatically if the pregnant employee is absent from work for any pregnancy related illness during the four weeks (Sunday to Saturday before the EWC, regardless of when maternity leave was planned to begin. The first date of maternity leave will be the day after the first day of absence. If the pregnant employee is sick earlier than this, or as a result of a reason other than the pregnancy, the absence will be recorded as sickness in the normal manner.

Maternity leave will also commence automatically if the pregnant employee gives birth before the maternity leave period was due to start. Notification to the Trust should be in writing as soon as is reasonably practicable of the date the child was born, and maternity leave will begin from the day after birth. If the baby is born prematurely (before the 11th week before the EWC) and where a baby requires neonatal care, colleagues / managers should give consideration to Neonatal Care Leave and Pay entitlements and should avoid asking the employee to confirm a return to work while the baby remains in neonatal care, unless the employee raises this themselves.

A colleague could make an agreement with the line manager for the leave to be split, taking a minimum of two weeks maternity leave immediately after childbirth and the rest when the baby is discharged from Hospital should they wish to do so. The manager will confirm any date changes in writing.

4.5 Maternity Pay

Maternity Pay Entitlements will be dependent on an employee's individual situation. Refer to Appendix 9 for the flow chart detailing Maternity Pay Entitlements.

4.6 Statutory Maternity Pay and Maternity Allowance

If an employee has at least 26 weeks' continuous service at the start of the 15 week before the child is born, and workers meet the lower earnings limit (LEL), there will normally be an entitlement to receive SMP whether or not a colleague intends to return to work.

SMP is payable at two rates for a maximum of 39 weeks. For the first six weeks a rate of 90% of average weekly earnings (AWE) salary is paid, the following 33 weeks is paid at SMP rate or 90% of AWE whichever is the lower.

Statutory pay rates can be found on the HM Revenues and Custom website:
Maternity pay and leave: Pay - GOV.UK

If an employee has less than 26 weeks continuous service at the start of the 15 weeks before the child is born there may be an entitlement to claim Maternity Allowance (MA). More information is available on the Gov.UK website Maternity Allowance - GOV.UK. Colleagues will need to contact their local job centre plus to obtain information on how to apply. An SMP1 form will be required, which VPS will provide directly, once the MATB1 and maternity leave form are submitted.

4.7 Occupational Maternity Pay

Pregnant employees will receive Occupational Maternity Pay (OMP) if they have 12 months or more continuous service with one or more NHS employers at the beginning of the 11th week (Sunday to Saturday) before the EWC and intend to return to work for DBTH or another NHS Employer for a minimum of 3 months. OMP is paid as follows: 8 weeks full pay, followed by 18 weeks half pay plus SMP, followed by 13 weeks of SMP only. The final 13 weeks are unpaid.

Full pay is calculated by taking the average over the 8-week period prior to the qualifying week. This will include all pay the employee would receive in the 2 months up to and including the last normal pay day before the end of the qualifying week. The qualifying week is 15 weeks before the expected week of childbirth.

Should an employee opt to receive OMP; in order to avoid repaying this, they must return to work at DBTH or another NHS employer for a minimum of 3 months following the end of maternity leave.

Employees may also be liable to repay the difference between Statutory Maternity Pay and the Occupational Maternity Pay received if they do not return to work for DBTH or another NHS Employer within 15 months of the start date of the maternity leave. The 3 months can be mid-month to mid-month and already accrued annual leave can count towards this time. A period of unpaid leave would not count towards the 3-month requirement.

If the employee returns to another NHS Employer other than DBTH they must provide evidence of the new employment to their manager. Maternity pay will be paid into the same bank account on the

same date that would normally have received the salary and will be subject to the usual deductions for tax, National Insurance (NI) and pension contributions.

4.8 The Calculation of Pay

To qualify for SMP average weekly earnings must be at least equal to the lower earnings limit (LEL). The LEL that applies is the one which is currently on the Saturday at the end of the qualifying week. The LEL changes each year and is determined by the government.

To calculate average weekly earnings VPS will average the gross earnings over a period of at least 8 weeks up to and including the last payday before the end of the qualifying week. The qualifying week is the 15th week before the week in which the baby is due.

For the purposes of working out SMP, 'pay' is taken to mean the gross pay that is due to the pregnant employee before any tax, NI, or pension deductions. VPS will consider the gross pay that was received in the set period, as long as it counts for National Insurance (NI) contributions (or would count if enough was earned or were old enough to pay NI contributions).

If the employee receives sick pay, overtime payments, enhancements, or arrears of pay or holiday pay this is all included to work out the SMP, if they are received within the set period. It is when the money is paid that counts, not when it was actually earned.

This means that enhancements, overtime, arrears or other payments are included in the statutory pay calculation only if they are actually paid within the relevant 8-week period, even where they relate to work undertaken outside that period; payments earned during the relevant period but paid after it will not normally be included.

If there is a salary sacrifice arrangement in place during the period used to work out SMP, the average weekly earnings calculation will be based on the contractual earnings that count for NI contributions. This means that the average weekly earnings will be based on the pay after the salary sacrifice is deducted. This could also mean that the average weekly earnings may not reach the lower earnings limit for the payment of statutory maternity pay.

For additional information on the impact of any salary sacrifice and lease car arrangements during the period of maternity leave please refer to the contractual documentation that was signed by the employee at the time of taking the salary sacrifice. Any additional queries regarding the impact on maternity pay please contact VPS on 0114 305 2220.

Entitlement to maternity pay may be affected where employees become pregnant again before their current maternity leave has finished. Maternity leave does not break continuity of service so colleagues will have the same right to take maternity leave as with the first pregnancy. However, if the employee does not return to work (or does not return for very long) they may not earn enough to qualify for Statutory Maternity Pay (SMP) for their second period of maternity leave. This is because the SMP entitlement is based on their average earnings over the 8-week period before the 15th week before the baby is due (qualifying weeks). The same applies to the calculation for Occupational

Maternity Pay. Even if the employee does not qualify, they are likely to qualify for Maternity Allowance (MA) instead. Maternity allowance is determined by the government.

Returning to work for at least the 8-week qualifying period for SMP may boost the pay received for the second maternity leave period. This is because the first six weeks of SMP are paid at 90% of the average earnings which were received during the 8-week qualifying period, and Occupational Maternity Pay is based on the same 8-week qualifying period. By contrast, MA is capped at a set rate, or 90% of the employee's average weekly earnings before tax if less. Details of the capped rate can be found at https://www.gov.uk/maternity-allowance/what-youll-get

Employees can take the OMP entitlement averaged up to 12 months; to request a breakdown the employee can email VPS at this mailbox. sth.dbthpayrollenquiries@nhs.net

For further information on how maternity pay is calculated please see Section 15 of the NHS Agenda for Change Terms and Conditions of Service Handbook Section "Calculation of Maternity Pay".

4.9 Baby Loss

In the event of pregnancy loss occurring after the 24th week of pregnancy (referred to as a stillbirth), employees are entitled to the full amount of Maternity / Paternity Leave, just as they would be if their baby were born alive. To ensure eligibility for leave and pay, employees are asked to provide supporting documentation to their manager, such as a stillbirth certificate issued by the registrar or a certificate or notification from the attending midwife or doctor.

Parents who experience a still birth from the 24th week of pregnancy will also be eligible for child bereavement leave in addition to the provisions set out in this policy DBTH Special Leave Policy (incorporating Carer's and Emergency Leave) CORP/EMP 47).

If an employee experiences the loss of a baby before the end of the 24th week of pregnancy (known as a miscarriage), the colleague will be entitled to 10 days paid leave, after this normal sick pay provisions would apply.

The above also applies to ectopic pregnancies, molar pregnancies and termination of pregnancy.

5 ADOPTION LEAVE

5.1 Leave Entitlement

Statutory Adoption Leave is 52 weeks. It consists of:

- 26 weeks of Ordinary Adoption Leave
- 26 weeks of Additional Adoption Leave

Only 1 person in a couple can take adoption leave.

You will **not** be eligible for Adoption leave or pay if you:

- Arrange a private adoption
- Become a special guardian or kinship carer
- Adopt a stepchild
- Adopt a family member or stepchild
- Are a foster carer

Where adoption leave and pay do not apply, managers should consider alternative support, such as unpaid parental leave, annual leave, flexible working, special leave or temporary adjustments. Managers should contact the People Business Partnering Team if they are unsure which option is appropriate.

5.2 Notifying Your Manager

An employee must notify their manager within 7 days of being matched with a child. The employee must also inform their manager in writing:

- How much leave is required
- The leave start date
- The date of placement (the date the child is to be placed with the employee)

If a surrogate is used to have a baby the employee must tell their manager, the due date and when they wish to start the leave at least 15 weeks before the expected week of birth. This must be provided in writing.

5.3 Adoption Appointments

The main adopter will be able to take paid time off for up to five adoption appointments. The secondary adopter will be entitled to take unpaid time off for up to two appointments.

5.4 Starting Adoption Leave

Adoption leave can start up to 14 days before the date the child starts living with the adopters (for UK adoptions), when the child arrives in the UK or within 28 days of this date (overseas adoptions), or the day the child is born or the day after (if a surrogate has been used to have a child).

An employee must give 28 days' notice of when they wish to start Adoption Leave/ Pay. Their manager must then respond within 28 days confirming the arrangements. An employee must also tell their manager within 28 days if the date for placement changes. The manager will submit the application

form for Adoption Leave/ Pay and the original matching certificate to VPS so that VPS may calculate the pay entitlements.

5.5 Statutory Adoption Pay (SAP)

In order to be eligible to receive Statutory Adoption Pay an employee must:

- Have worked for the employer continuously for at least 26 weeks by the week they were matched with a child.
- Provide proof of the adoption. Proof of the adoption must show the following:
    - name and address of the adopter and that of the agency
    - the match date – e.g., matching certificate
    - the date of placement –e.g., a letter from the agency
    - the relevant UK authority's official notification confirming that the adopter is allowed to adopt (overseas adoptions only)
    - the date the child arrived in the UK –e.g., a plane ticket (overseas adoptions only)

- If a child is conceived via surrogacy the employee must have worked continuously for their employer for at least 26 weeks by the 15th week before the baby's due date; intend to apply for a parental order and expect the order to be granted. The employee must provide a written statement to confirm they have applied for or will apply for a parental order within 6 months after the child's birth. This must be signed in the presence of a legal professional.

If the employee is not eligible for adoption pay, then VPS will send the employee a SAP1 form explaining why they are not eligible.

Statutory Adoption Pay is paid for up to 39 weeks. The weekly amount is:

- 90% of the average weekly earnings for the first 6 weeks
- Statutory adoption pay is capped at a set rate or 90% of your average weekly earnings (whichever is lower between the 2) for the next 33 weeks. The up to date set rate can be found at https://www.gov.uk/adoption-pay-leave/pay

5.6 Occupational Adoption Pay

Where the child is below the age of 18 then adoption leave and pay will be in line with the maternity leave and pay provisions set out in this policy.

Eligibility for occupational adoption pay will be 12 months' continuous NHS service ending with the week in which the employee is notified of being matched with the child for adoption. This will cover the circumstances where employees are newly matched with the child by an adoption agency.

The provision to avoid possible liability for repaying enhanced adoption pay will be in line with the maternity and pay provisions set out in section 4.7 & 4.8.

5.7 How Statutory Adoption Pay is Calculated

This is calculated on the "relevant period". This is usually an 8-week period before the Matching Week (MW). The end of the relevant period is the last normal payday on or before the Saturday of the MW. The start of the relevant period is the day after the last normal payday falling at least 8 weeks before the end of the relevant period. Pay is calculated in the same way that maternity pay is calculated see section 4.8 above.

6 SHARED PARENTAL LEAVE (SPL) AND SHARED PARENTAL PAY (SHPP)

Parents now have a greater choice in how they share time off work and care in the first year of their child's life. The new rules also apply to adoption or surrogacy. Shared Parental Leave and Pay may be available if the employee or their partner has ended their maternity or adoption leave or pay early. An employee who has given birth must take a minimum of 2 weeks' maternity leave following the birth. The remaining leave will be available as SPL. The remaining pay may be available as Shared Parental Pay. More information including Statutory Pay Rates can be found on the Gov.UK website: https://www.gov.uk/shared-parental-leave-and-pay/what-youll-get

6.1 Eligibility

If a mother decides not to take the full maternity leave entitlement, the mother and the partner can opt-in to shared parental leave. Both parents must meet a set of eligibility criteria:

- They must have been continuously employed for at least 26 weeks by the end of the 15th week before the expected week of childbirth.
- They must remain continuously employed until the week before any period of shared parental leave starts.
- They already have or expect to have main responsibility for caring for the child.
- The mother is entitled to statutory maternity leave.
- The mother has curtailed her entitlement to maternity leave or has returned to work.
- They have provided their employers with notice of entitlement and their intention to take shared parental leave (see below).
- They have provided any evidence requested by their employer within 14 days of the request. This may include a copy of the birth certificate, or a declaration from the parents confirming the date and place of the child's birth if the birth certificate is not yet available, and the name and address of the other parent's employer.
- Give correct notice including a declaration that your partner meets the employment and income requirements that permit you to receive SPL. At least 8 weeks before the start of the leave period.

If an employee is eligible and the employee or their partner end maternity or adoption leave and pay (or Maternity Allowance) early, the employee or their partner 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 (up to a maximum of 37 weeks) as Statutory Shared Parental Pay (ShPP)

SPL can be taken in up to 3 separate blocks. This leave may also be shared with the partner if they are eligible Shared parental leave scenarios | NHS Employers. Parents can choose how much of the SPL each of them will take. The employee cannot be prevented from taking the amount of SPL they have requested with relevant notice however; the Trust has authority over how and when it is taken. The Agenda for Change Handbook Section 15 sets out the process for booking and varying of shared parental leave.

SPL and ShPP must be taken between the baby's birth and first birthday (or within 1 year of adoption). Where a mother or adopter takes 51 weeks or more of the 52 weeks of maternity or adoption leave that is available to them, then no shared parental leave can be created.

NHS Employers has published comprehensive guidance on how Shared Parental Leave and Pay may be taken or shared by using a number of worked examples. This guidance has been listed on the Trust Hive under Policies and Procedures: Employment and Work Life Balance and can also be found at the following link:

6.2 Statutory Shared Parental Pay

Employees can be eligible to receive Statutory ShPP if one of the following applies:

- they qualify for Statutory Maternity Pay or Statutory Adoption Pay
- they qualify for Statutory Paternity Pay and have a partner who qualifies for Statutory Maternity Pay or Maternity Allowance or Statutory Adoption Pay

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. ShPP is paid at the Statutory Pay Rate or 90% of your average weekly earnings, whichever is lower.

6.3 Occupational Shared Parental Pay

From 1st April 2019 Shared Parental Pay has been enhanced to the same levels as occupational maternity/adoption pay.

Eligibility for this enhanced level of pay will mirror current eligibility requirements for occupational maternity/adoption pay, as set out in Section 15 of the NHS Agenda for Change Terms and Conditions of Service.

The Trust will not pay more than 26 weeks (8 weeks full pay including the two weeks compulsory leave, and 18 weeks half pay) to employees accessing occupational maternity or adoption or shared parental pay in aggregate to an eligible couple, this is irrespective of whether one or both parents are NHS Employees as shared parental leave and pay is a joint entitlement.

The employee must return to work for DBTH or another NHS employer within 3 months of the end of your shared parental leave

6.4 How to Apply for SPL/ShPP

An employee must give their employer 8 weeks' written notice of their entitlement to SPL and ShPP, including:

- their partner's name
- 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 childcare will be a sharing responsibility with their partner

An employee must also include a 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

To apply for Shared Parental Leave/Pay please complete the form in Appendix 3.

After receiving this notice, the manager has 14 days to request:

- a copy of the child's birth certificate
- The name and address of the partner's employer.

The employee must provide this information within 14 days if it is requested. Following discussion, the manager should confirm in writing:

- The employee's paid and unpaid shared parental leave entitlements (statutory and/or occupational);
- The confirmed leave pattern, including start and end dates, for each block of shared parental leave the manager and employee have agreed will be taken;
- Confirmation of the notification process and the required notice periods for instances where agreed blocks of leave need to be amended; and
- The length of any period of accrued annual leave which it has been agreed may be taken following the end of shared parental leave.

7 OTHER TERMS RELATING TO MATERNITY, ADOPTION, SHARED PARENTAL LEAVE/PAY

7.1 Agency or Bank Work (including NHS Professionals)

Agency or bank work (including with NHS Professionals) does not count as continuous NHS Employment and therefore cannot be counted as service for the purposes of leave and pay under this policy.

7.2 Fixed Term or Training Contracts

If a contract expires after the 11th week before the expected week of childbirth, or after notification of being matched for adoption, or during your maternity/ adoption/ shared parental leave, the employee may be entitled to the same maternity/adoption/ shared parental pay as if the employee had a permanent contract (subject to the eligibility criteria as stated above). If the employee has the required service to be entitled to maternity/ adoption/ shared parental pay, the fixed term contract will be extended so the employee can take 52 weeks of Maternity/Adoption/ Shared Parental leave.

Employees who do not satisfy the eligibility requirements for occupational maternity pay in line with the eligibility requirements outlined above and whose contract ends after the 15th week prior to the expected week of childbirth but before the 11th week prior to the expected week of childbirth, will not be entitled to occupational maternity leave but statutory maternity pay may be payable. and the contract will be extended to the date that the statutory pay ceases.

If an employee is not eligible for maternity/ adoption/ shared parental pay the contract will terminate on the existing date of termination. VPS will provide the employee with an SMP1/ SAP1 detailing the reason why there is no entitlement to statutory pay and the employee may be entitled to Maternity Allowance (contact the local job centre plus for further information).

Where a contract expires during maternity/adoption/ shared parental leave, there will not be an entitlement to return to work.

If the employee is a medical practitioner or are participating in a planned rotation of appointments as part of a training programme, they have the right to return to the same post or in the next planned post with the same or another authority, irrespective of whether the contract would have ended if pregnancy and birth had not occurred. In this case, the employee's contract will be extended to enable them to complete the training programme. Further information on maternity/adoption/ shared parental leave for Doctors in Training can be found on the NHS Employers website at: www.nhsemployers.org

General maternity guidance published by NHS Employers in October 2022 and updated in March 2024 can be found here General maternity guidance for rotational doctors and dentists in training | NHS Employers this includes the qualifying criteria.

7.3 Annual Leave and Bank Holidays

An employee's entitlement to annual leave and bank holidays accrues during maternity/adoption/ shared parental leave, whether it is paid or unpaid. If an employee has outstanding annual leave, it should be agreed with their manager whether some or all of the leave should be taken before the maternity/adoption leave starts. If this is not possible, the employee should discuss the possibility of taking accrued annual leave when they return from maternity/adoption/ shared parental leave, either in a single period or to allow a short period of part-time working, especially where they may be carrying annual leave/bank holidays over into a new leave year.

If an employee does not intend to return to work, they should ideally take all their outstanding annual leave for the entire period of maternity/ adoption leave prior to start of maternity/ adoption leave.

An employee cannot take annual leave during a period of maternity/ adoption leave. If an employee does so this will bring the maternity/ adoption leave to an end. An employee may request to take a period of annual leave following the end date of maternity/ adoption leave by applying for annual leave in the usual way. Following the end of maternity/ adoption/ shared parental leave an employee may also make an application for a period of unpaid leave in line with the career break policy or for a period of statutory unpaid parental leave, details of which are given in this Policy under Section 9 for Unpaid Parental Leave.
Where the employee is unable to take their full entitlement because they are on any parental leave, the outstanding balance should be carried forward and agreed with the manager, including how and when it will be taken before or after the leave period.

7.4 NHS Pension

Pension rights and contributions are dealt with in line with the provisions of the NHS Pension Scheme. During periods of paid maternity/adoption/ shared parental leave, an employee and the Trust will continue to make pension contributions.

During periods of unpaid maternity/adoption/ shared parental leave, any occupational pension rights will continue to accrue. If an employee is already making contributions to the NHS Pension Scheme and then decides to take the option of unpaid maternity/adoption/ shared parental leave, the employee will be required to pay the accumulated contributions to cover the period of unpaid maternity/adoption/ shared parental leave. VPS will automatically make arrangements to deduct the contributions from the unpaid period of maternity/adoption/ shared parental leave in the first monthly salary following a return to work.

If an employee changes their mind and decides not to return to work, the employee will still be liable for contributions to the scheme and arrears may be payable. If there are any queries regarding pension arrangements during your maternity/adoption/ shared parental leave, please contact VPS.

7.5 Keeping in Touch Arrangements

A manager will discuss voluntary arrangements for keeping in touch if the employee is planning to return to work. An employee may wish to attend work, receive occasional work-related updates, or attend for training/development.

For those on maternity and adoption leave they can attend work for up to 10 Keeping in Touch (KIT) days to facilitate a smooth return to work.

For shared parental leave (SPL) both employee and their partner may work up to 20 days during SPL. These are called 'shared parental leave in touch' (or SPLIT) days. These days are in addition to the 10 'keeping in touch' (or KIT) days already available to those on maternity or adoption leave.

Any days of work will not extend the maternity/ adoption/ shared parental leave period. Keeping in touch days are optional - both employee and manager must agree to them.

Days can be taken consecutive and can be shorter than a normal working day, though working for a part of any day counts as one of the KIT/ SPLIT days. KIT/ SPLIT arrangements must be agreed by both employee and manager, and neither can insist on KIT/ SPLIT days being used.

KIT/ SPLIT days are paid at the employee's normal hourly rate as if they were at work if taken during the unpaid part of your maternity/adoption/ shared parental leave. If a KIT/ SPLIT day is taken during paid maternity/adoption/ shared parental leave, then the employee will be paid at the normal hourly rate with an adjustment made to the SMP/ SAP/ ShPP and OMP/ AOP/ ShPP calculation for that week.

For work areas that use E-Roster the line manager of the employee should keep a record of any KIT/ SPLIT days worked by using the Keeping in Touch option on E-Roster. Areas that do not utilise E-Roster should keep a clear record of KIT/ SPLIT days in accordance with local procedures. Once a KIT day has been worked the manager should notify Victoria Pay Services of the date(s) worked and the number of hours worked. The manager must do this by completing an "ad hoc change form" and submitting it to VPS. This applies to all areas of work regardless of whether E-Roster is in use. KIT / SPLIT days will be paid in the next available pay period following receipt of the completed ad hoc change form.
KIT/SPLIT days must be used before the end of maternity, adoption or shared parental leave to support a smoother return to work, such as refresher training, e-learning, policy updates or workplace familiarisation; however, this is the employee's choice and must be agreed with their manager.

7.6 Working During The Maternity / Adoption / ShPL Period (Paid / Unpaid)

If an employee has more than one job and works for another employer, whilst receiving Statutory Maternity Pay (SMP), and was employed at the 15th week before Expected Week of Childbirth (EWC), the employer should continue to pay SMP.

If an employee works for another employer whilst receiving SMP but this commenced after the baby is born, this can affect the SMP received.

It is the employee's responsibility to inform DBTH that they are also working for another employer, as per CORP/FIN 04 Standards of Business Conduct and Employees Declarations of Interest Policy.

Any work done in a self-employed capacity during SMP, then such work will not affect SMP.

It is possible to carry out bank or agency shifts during the unpaid period of your maternity/ adoption/ ShPL.

7.7 Professional Registration

Professional Registration must be maintained or renewed in line with the Professional Registration Policy COPR/EMP 11. An employee will not be allowed to work KIT/ SPLIT days if professional registration is not maintained.

7.8 Return to Work

If an employee returns to work during or at the end of the first 26 weeks of Ordinary leave, they are entitled to return to their job on the same terms and conditions as previous. If the employee takes additional leave (more than 26 weeks) and it isn't reasonably practicable to return to the same job, they are entitled to return to a suitable job on terms and conditions that are no less favourable.

If there is no right to return because the contract of employment would have ended if pregnancy and childbirth had not happened, the repayment provisions set out above will not apply.

The employee should specify with their manager (and on your applications form) whether they intend to return to work and also the date on which they intend to return to work. If the employee wishes to return to work at an earlier date they must give their manager 8 weeks' notice. Employees are encouraged to discuss a return-to-work date at the earliest possible opportunity, so that suitable arrangements may be put in place.

If the employee does not provide the required notice of an early return to work the Trust may postpone your return until a date that would secure the 8 weeks' notice. If the employee still returns to work before this date, the Trust is under no obligation to pay you during the period of postponement.

If the employee is sick and unable to return to work on the date agreed, the Trust's normal procedures for managing sickness absence will apply and the employee should notify their manager in the usual way.

If the employee wishes to resign during or after a period of maternity/adoption/ shared parental leave, they should provide written notice in the usual manner to your manager. This may result in the employee being required to repay some or all of your occupational maternity/adoption/ShPP.

Colleagues who intend to breastfeed or express milk following their return to work are required to inform the Trust in writing of their intention to continue breastfeeding, prior to their return to work (at least 28 days prior to a return). This written notification can be provided by email to the line manager;

Once notification is received appropriate arrangements and risk assessments can be put in place. Colleagues should work collaboratively with their line manager to identify any necessary adjustments, including suitable break times and access to a private space for expressing and storing milk.

Employees are expected to follow agreed procedures for the safe storage and handling of expressed milk and to raise any concerns promptly if the arrangements are not meeting their needs. Open communication will help ensure that appropriate support is maintained in line with health and safety requirements. Further manager guidance can be found in Appendix 11.

If an employee would like to apply for a period of unpaid parental leave, career break or a flexible working arrangement after the period of maternity/adoption/ shared parental leave, they should be referred to Appendix 1 in the Policy on Unpaid Parental Leave or the Trust's Flexible Working Policy CORP/EMP 48.

There is no automatic right for an employee to reduce their hours or return to work on different conditions, but the manager will consider the request in line with the Trust's Flexible Working Policy and explain their decision in writing.

When an employee returns to work, the manager will update the employee on developments that have occurred in their absence, including new and amended policies and arrange any necessary training.

The line manager will need to complete the Return to Work from Maternity Leave Notification Form to ensure that your assignment is correctly updated by VPS.

This is an electron form and can be found here - Return to Work from Maternity Leave Notification – Fill in form

For the purposes of repayment of occupational maternity/ adoption/ ShPP, the following do not constitute a return to work:

- Career break
- Unpaid parental leave

A list of frequently asked questions and answers in relation to maternity, adoption, shared parental leave/pay are detailed in document entitled FAQ for Maternity / Adoption Leave**.** In addition to this a fact sheet on maternity rights can be found on the Working and Families website: Working Families | Advice & information

8 PATERNITY LEAVE

8.1 Eligibility

An employee must be taking time off to look after the child and be one of the following:

- The baby's biological father
- The partner/husband of the mother (or adopter), this includes same sex partners
- The child's adopter
- The intended parent (if they are having a baby through a surrogacy arrangement)
- Employed by the trust up to the date the child is born or placed with the adopting parents.

The flow chart in Appendix 10 summarises entitlement to Paternity Leave/Pay.

An employee is still eligible to Paternity Leave or Pay if the baby is stillborn after the end of the 24th week of pregnancy or born alive at any point during the pregnancy.

An employee cannot get Paternity Pay and Leave if you've taken paid time off to attend adoption appointments.

This is because paid adoption appointment leave is only available to the main adopter. If an employee takes paid time off for adoption appointments as the main adopter, they cannot also take paternity leave and pay for the same adoption placement. The other adopter may instead be eligible for unpaid time off for up to two adoption appointments and may qualify for paternity leave/pay, subject to the normal eligibility criteria.

From 6 April 2026, you can choose to take Paternity Leave (PL) before or after a period of Shared Parental Leave (SPL).

8.2 Rates of Pay

Rates of pay for Paternity Leave depend on an employee's individual situation.

8.3 Statutory Paternity Pay

An employee is entitled to up to two weeks' statutory Paternity Leave. From 6 April 2026, Paternity Leave is a day-one right (no qualifying service is required for the leave itself). Eligibility for Statutory Paternity Pay (SPP) is separate and continues to be subject to statutory service and earnings requirements. Statutory Paternity Pay is paid at the nationally set rate or 90% of earnings (whichever is lower).

If an employee is not eligible for Statutory Paternity Pay, then VPS will notify you using the SPP1 form.

8.4 Occupational Paternity Pay

This provision builds on statutory paternity leave and pay and applies to the father of the child (including adoptive fathers), the mother's spouse or partner (whether opposite or same sex) or nominated carer.

If an employee has twelve months continuous service with the NHS before your child is expected to be born, or placed into Adoption, they will be entitled to Occupational Paternity Pay. This is paid at full pay for two weeks.

8.5 Leave Entitlement

An employee can choose to take either 1 or 2 weeks and get the same amount of leave if the partner has a multiple birth (such as twins).

An employee can take this leave as either one block of two weeks or 2 blocks of 1 week each. A week is the same number of days that the employee would normally work in a week - for example, a week is 2 days if you only work on Mondays and Tuesdays.

The leave cannot commence before the baby is born and must end within 52 weeks following the child's birth.

There are separate rules and arrangements if an employee wishes to take paternity leave in relation to an adoption or surrogacy. In these circumstances paternity leave may start:

- on the date of placement
- an agreed number of days after the date of placement
- on the date the child arrives in the UK or an agreed number of days after this (overseas adoptions only)
- the day the child is born or the day after if you're working that day (surrogate parents)
  Leave must be taken within 56 days of the date of placement or the child's arrival in the UK (overseas adoptions).

8.6 Antenatal Appointments

Fathers, partners and civil partners of a pregnant employee are entitled to unpaid time off during working hours to accompany 2 ante-natal appointments. Fathers, partners and civil partners of a pregnant employee can take up to 6.5 hours per appointment. There is no legal right to paid time off for antenatal appointments. However, the manager may allow an employee to take annual leave, swap shifts or make time up. Not all scans and appointments are booked together, or a person may have a complex pregnancy where each appointment they could be told bad news. Why can a partner only get unpaid time off for 2 as birthing people require support from partners.

8.7 Notifying Your Manager

An employee should tell their manager by the end of the fifteenth week before the baby is expected. Include when the baby is expected, the date the employee wants to start leave and how long you want to take.

The employee must complete and submit the application form (Appendix 4) to their line manager at least 28 days before the date you expect the leave to start. The manager may ask for medical evidence, such as a copy of the MAT B1 form or Matching Certificate.

8.8 Baby Loss

If an employee's partner experiences the loss of a baby before the end of the 24th week of pregnancy, the colleague will be entitled to 5 days' paid leave, after this normal sick pay provisions would apply. Trust recognises that pregnancy loss before 24 weeks is a significant loss and provides paid leave under this policy, with any additional support considered on a case-by-case basis.

Parents who experience a still birth from the 24th week of pregnancy will also be eligible for child bereavement leave in addition to the provisions set out in this policy DBTH Special Leave Policy (incorporating Carer's and Emergency Leave) CORP/EMP/47.

8.9 Bereaved Partner's Paternity Leave

From 6 April 2026, Bereaved Partner's Paternity Leave provides eligible parents with a right to take time off where the child's mother or primary adopter dies within the first year after the child's birth or placement for adoption. This leave is separate to, and in addition to, any entitlement to Paternity Leave and/or Parental Bereavement Leave. Would this mean that unpaid paternity leave would apply after bereavement leave and parental leave. Although shared parental leave can't take place would they be entitled to the remaining period of paid leave.

Bereaved Partner's Paternity Leave is a separate entitlement and does not transfer any remaining maternity, adoption or shared parental pay from the deceased parent.

The statutory entitlement is up to 52 weeks of unpaid leave (subject to meeting the relevant statutory eligibility criteria). Managers should contact HR for support in confirming entitlement and arranging leave/pay options, including signposting to bereavement support. Would this take them to after the first birthday. So, all leave can follow on from each other.

An employee will return to the same job on the same terms and conditions.

9 UNPAID PARENTAL LEAVE

9.1 Entitlement

Natural or adoptive parents or people with parental responsibility under the Children's Act may take up to eighteen weeks unpaid leave to look after or to make arrangements for the good of a child or children. This leave may be taken up to the child's 18th birthday. This is recorded on ESR/ERoster. From 6 April 2026, Unpaid Parental Leave is a day-one right (no qualifying service is required). Foster parents do not have the right to Parental Leave.

Parents must take leave in blocks of one week up to eighteen working weeks. However, if the child has a disability, you can take shorter periods, including individual days. 18 weeks is available for each child. The limit on how much parental leave each parent can take in a year is 4 weeks for each child.

Parental leave applies to each child not to an individual's job.

A period of unpaid parental leave will count as continuous employment with the Trust, although pay and most contractual benefits are suspended. The employee will not accrue annual leave during unpaid parental leave. The employee's occupational pension rights are preserved until you return to work but if you want the period to be counted for pensionable service, you must make up the necessary employer's and employee's contributions via VPS Pensions. It is your responsibility to make the necessary arrangements. In order to do this please contact VPS.

9.2 Notifying Your Manager

An employee must provide 21 days' notice before the intended start date of parental leave. If the employee or their partner are having a baby or adopting, it is 21 days before the week that the baby or child is expected.

The first application for parental leave for each child should be supported by evidence of parental responsibility: either the child's birth certificate, adoption matching certificate/official notification, or documents from a court detailing acquired formal parental responsibility.

If an employee wishes to take parental leave immediately after the birth of their child, they must also provide a copy of the MAT B1 certificate and a copy of your child's birth certificate. This is in addition to any entitlement to paternity leave. It is recommended that the employee talk to their manager as early as possible so that covering arrangements can be made.

Apply using the form in Appendix 5. Your manager will confirm whether it can be agreed and advise VPS so that the period of parental leave can be recorded and pay deducted accordingly.

9.3 Delaying the Parental Leave

A manager will agree to the leave wherever possible. If they refuse, they must be able to demonstrate a significant reason, such as serious disruption to the service. This must be communicated to you within 7 days of your original written request. Your leave can be postponed for up to six months and your entitlement will not be lost if it is postponed by the Trust beyond your child's 18th birthday at the request of your employer.

Serious disruption should only be relied on where the manager can evidence a significant impact on safe staffing, patient care or service delivery, and managers must seek advice from the People Business Partnering Team before postponing parental leave.

If an employee has given 21 days' notice, the Trust will not postpone any period of unpaid parental leave immediately after the birth or adoption of a child. The leave will start on the day your child is born, regardless of whether your child is born early or late.

You may ask to change the dates of agreed parental leave, and your manager should agree to changes, if reasonably practicable.

The manager will keep a record of any parental leave taken on your personal file using the parental leave record sheet (see Appendix 6).

The manager may ask an employee's previous employer about any previous periods of parental leave or may ask for a signed declaration about the amount of parental leave that already taken.

9.4 Return to Work

An employee is entitled to return to the same job. A period of parental leave cannot count towards the obligation of a mother to return to work for three months to qualify for the higher maternity benefits as provided by the NHS maternity scheme.

If an employee does not wish to return to work after a period of parental leave they should resign in writing to your manager in the usual manner giving your contractual notice.

10 NEONATAL CARE LEAVE AND PAY

10.1 Neonatal Care Leave (NCL)

All employees that are mothers, birthing-parents, fathers and non-birthing parents are entitled to NCL from their first day in employment if their child receives neonatal care for more than 7 continuous days, before the baby reaches 28 days of life.

The length of the of NCL will be dependent on how long the child spends in hospital. You will be entitled to up to 12 weeks of NCL and a minimum entitlement of one week. NCL must be taken in continuous blocks of one or more weeks.

NCL is an addition to existing parental leave entitlements and can be taken on top of any other leave the employee may be entitled to, including maternity and paternity leave. However, NCL must be taken within 68 weeks of the baby's birth.

NCL cannot be claimed twice by the same employee respect of multiple births where the babies are receiving care at the same time. The maximum amount of leave for that employee remains at 12 weeks.

Tier 1 and Tier 2 periods of leave are available and further details of both are available via NHS Employers Neonatal care legislation | NHS Employers
(this link will be updated when added to T&C's

10.2 Neonatal Care Leave - Eligibility

Parents are eligible if the baby was born on or after 6 April 2025 and has received medical or palliative neonatal care for at least seven consecutive days within the first 28 days after birth. There are three categories of medical care within the Act that constitute as neonatal care:

1. Any medical care received in hospital.
2. Medical care received elsewhere following discharge from an inpatient stay hospital. The care must be under the direction of a consultant and includes ongoing monitoring and visits to the child by healthcare professionals.
3. Palliative or end of life care.

10.3 Neonatal Care Pay - Eligibility

Eligible parents must meet the minimum requirements relating to continuity of employment which is at least 26 weeks' continuous service with your current employer at the end of the relevant qualifying week. The relevant qualifying week will be dependent on the type of family related pay the employee is entitled to as per https://www.gov.uk/browse/benefits/families. Workers must also earn on average of at least £123 a week, they will receive a weekly rate of statutory neonatal care pay.

As of 6 April 2025, this will be £187.18 or, 90% of average weekly earnings where the figure will be less than £187.18.

To access neonatal care pay, the employee should send the completed Neonatal Care Leave application (Appendix 1) to their manager. The line manager must then complete the ad-hoc change form, found on the Hive and send it through to dbth.esrpayrollapprovals@nhs.net.

Parents may be asked to provide reasonable evidence confirming the baby received neonatal care, including the baby's date of birth and the start and end dates of neonatal care. Detailed clinical information is not required. Any evidence provided must be handled confidentially.

11 HEALTH & SAFETY FOR NEW AND EXPECTANT MOTHERS

Management of Health & Safety at Work Regulations 1999 places a legal requirement on employers to assess the risks/hazards to both mother and unborn child and breastfeeding women, and to take steps to eliminate or reduce the risks as far as is reasonably practicable.

A specific additional risk assessment must be carried out for every pregnant employee using the guidance in Appendix 7. So, it is best practice to inform your manager as early as possible.

12 LEARNING/SUPPORT

There is no formal training in support of this policy. However, support in the interpretation and application of the policy can be obtained in the first instance from your line manager or from the HR Services Department.

In addition, colleagues should contact VPS regarding any individual queries about pay related to the above terms.

Learning requirements for colleagues will be determined by their role and the competencies required to work safely and effectively. These requirements include national, local and role-specific mandatory learning and are set in line with Trust and professional standards.

Role-specific learning will be defined by the relevant subject matter expert or topic lead and coordinated through the Trust's agreed governance arrangements.

All mandatory and role-specific learning requirements, completion status and competency records will be held in the colleague's personal Electronic Staff Record (ESR).

For further guidance, please see: **CORP/EMP 66 – Mandatory Learning Policy and DBTH Mandatory Learning Framework**

13 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
• That the use of maternity, adoption, shared parental, paternity and parental leave is actively managed and there is documentary evidence of this;	Divisional/ Directorate Managers will monitor with support from HR Business Partners	Annually	Any significant issues will be escalated to the Divisional/ Directorate Director and/or to the Deputy

• Decisions regarding the allocation of maternity, adoption, shared parental, paternity and parental leave have been fairly applied in line with policy and there have been no successful challenges of those decisions			Director of P&OD or to the Director of People and Organisational Development.

14 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27), the Equality Diversity and Inclusion Policy (CORP/EMP 59) and the Civility, Respect and Resolution Policy (CORP/EMP 58).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 12)

15 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

CORP/EMP 03 Grievance and Resolution Policy (grievance and Disputes at Work)

CORP/EMP 27 Equality Analysis Policy

CORP/EMP 47 Special Leave Policy (Incorporating Carer's and Emergency Leave)

CORP/EMP 48 Flexible Working Policy

CORP/EMP 59 Equality Diversity and Inclusion Policy

CORP/FIN 04 Standards of Business Conduct and Employees Declarations of Interest Policy - *This Policy is intended to give you and your manager relevant information and is not an exhaustive account of all regulations. You should refer, where necessary to Sections 15 and 35 of the Agenda for Change Terms and Conditions of Service handbook on Maternity, Paternity, Adoption, Parental and related leave which includes maternity provisions contained in the Employment Rights Act 1996 as amended by the Employment Relations Act 1999 and the Employment Act 2002. Reference should also be made to the Health & Safety Executive (HSE) Pregnancy guide.*

16 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: https://www.dbth.nhs.uk/about-us/our-publications/information-governance/

17 REFERENCES

Pay queries please contact VPS on 0114 305 2220 or via the appropriate email address on the Trust intranet.

Employment Rights Act 2025 https://www.legislation.gov.uk/ukpga/2025/36 (as implemented from 6 April 2026), including day-one rights to Paternity Leave and Unpaid Parental Leave, the ability to take Paternity Leave before or after Shared Parental Leave, and Bereaved Partner's Paternity Leave.
Gov.UK website
https://www.gov.uk/

Maternity and Parental Leave Regulations 1999 and amendments:
https://www.legislation.gov.uk/uksi/1999/3312/contents/made

NHS Terms and Conditions of Service
https://www.nhsemployers.org/

Shared Parental Leave Regulations 2014
https://www.legislation.gov.uk/ukdsi/2014/9780111118856

Support for Families
https://www.workingfamilies.org.uk/advice-information/

APPENDIX 1 – NEONATAL LEAVE APPLICATION FORM

Application Form – Neonatal Care Leave and Pay

Please complete all sections of this form and return it by email to your manager. Please refer to the policy for additional information.

Name (Mr/Mrs/Miss/Ms/Dr)	
Assignment Number	
Address	
Postcode	
Home Telephone	
Job Title	
Band/Grade	
Division	
Department	
Extension Number	
Base	
Contract Type	Fixed-term Temporary / Permanent
If fixed-term temporary, contract end date	
Contracted hours per week	
Date of commencement of employment with this Trust	
Baby/Babies date of birth	
In adoption cases, date of placement	
Number of weeks of neonatal care leave requested	
Requested leave start date	
Requested leave end date	
Leave is being taken to care for the baby/babies	Yes / No
I confirm I am eligible to take neonatal care leave	Yes / No

I confirm that the information provided in this application is accurate to the best of my knowledge. I understand that I should refer to the Neonatal Care Leave and Pay Policy for additional information about eligibility, notification requirements and pay.

Employee signature	
Date	

Manager Actions

Has the ad hoc change form been completed?	Yes / No
Manager comments	
Manager name	
Manager signature	
Date	

Ad Hoc Change Form to be emailed to dbth.esrpayrollapprovals@nhs.net.

APPENDIX 2 – MATERNITY/ ADOPTION LEAVE/PAY APPLICATION FORM

Name:		**Assignment No:**	
Post:		**Hours:**	
Department:		**DBTH Start Date:**	
		NHS Start Date:	
I have attached a copy of my MATB1 / Matching Certificate			Yes/No
Expected week of childbirth/ adoption placement:			
My employment status is (please circle)			Fixed term/ permanent
If fixed term – my contract end date is:			

Section A – Options for Pay Please select one option from the list below for Pay options. Please ensure you have read the Parental Leave Policy, which explains eligibility for occupational maternity / adoption pay **IF YOU ARE NOT SURE WHICH SCHEME YOU ARE ELIGIBLE FOR PLEASE SEE FLOWCHART (Appendix K in the Parenting Leave Policy)**		**Please tick appropriate scheme**
Scheme 1	**You are eligible for Occupational Maternity Pay and Statutory Maternity Pay AND** **You intend to return to work in the NHS for a minimum of 3 months after maternity / adoption leave** (you are paid your full salary for 8 weeks and half salary for 18 weeks plus any SMP entitlement, plus 13 weeks SMP)	
Scheme 2	**You are eligible for Occupational Maternity Pay and Statutory Maternity Pay AND** **You do not intend to return to work (or are not sure)** (you are paid 90% of your full pay for 6 weeks and 33 weeks SMP entitlement. If you do return to work for 3 months following your maternity / adoption leave, then you will be paid the difference between what you were paid and what you would have been paid had you taken Scheme 1)	
Scheme 3	**You are eligible for SMP only (not OMP)** (you are paid 90% of your salary for 6 weeks plus 33 weeks SMP)	
Scheme 4	**You are eligible for Occupational Maternity Pay but NOT Statutory Maternity Pay** (You are paid 8 weeks full pay, plus 18 weeks half pay by the Trust. On receipt of your SMP1 form, from VPS, and you will need this to apply for Maternity Leave Allowance, more details can be found here:)	
Scheme 5	**You are NOT eligible for Occupational Maternity Pay OR Statutory Maternity Pay** (you are entitled to 52 weeks unpaid maternity leave. You may be entitled to Maternity Allowance, please see link above for more information)	

Section B – Please Circle the statement that applies to you:	
I intend to return to work	Yes / No
I have yet to decide about returning to work, should I return to work the full entitlement will be paid	Yes / No
I do not intent to return to work	Yes / No
I have discussed my annual leave entitlement and agreed a plan with my manager to utilise my leave before and/ or after my maternity/ adoption leave	Yes / No
I am aware that if I am a member of the NHS Pension Scheme, I shall be liable for payments during any unpaid period of maternity leave I might take. [These will be deducted by VPS on my return from maternity leave.]	Yes / No

Please complete the information below:	
Date of commencement of * Maternity / *Adoption leave:	
If intending to return to work, please give expected date of return:	

Declaration: If you do intend to return to work or if you are not sure

I understand that if I fail to return to work for a minimum period of 3 months after the expiry of *Maternity / *Adoption leave, I am liable to refund occupation maternity/adoption payments received less any Statutory Maternity / Adoption Pay entitlements; unless I submit a copy of my letter of appointment to another NHS employer after the expiry of my maternity / adoption leave (excluding colleagues on fixed term contracts)

I have read the section on Maternity / Adoption benefits, which I understand and accept.

Signed		Date	

Declaration: If you do NOT intend to return to work (Scheme 3 or Scheme 5)

I have read the section on Maternity / Adoption benefits, which I understand and accept. I also understand that completion of this form does not replace the normal requirements for notice and that, if I have not already done so I am required to submit my resignation stating the date I intend to terminate my employment

Signe		Date	

This form should be completed and submitted to your line manager, a copy should be kept on your personal file, and a copy submitted to VPS

APPENDIX 3 – SHARED PARENTAL LEAVE/PAY APPLICATION FORM

Name:		**Assignment No:**	
Post:		**Hours:**	
Department:		**DBTH Start Date:**	
		NHS Start Date:	
I have attached a copy of the Birth / Matching Certificate			Yes/No

The Baby / Placement is Due on:			
I wish to take:-	Shared Parental Leave	From	Until
		From	Until
		From	Until
	Shared Parental Pay	From	Until

For Shared Parental Leave/Pay requests, please complete the details below			
Partner's Name		Partner's National Insurance Number	
Partner's Address			
Date Maternity /Adoption **Leave** Commenced			
Date Maternity / Adoption **Leave** to End			
Date Maternity/Adoption **Pay** Commenced			
Date Maternity/Adoption **Pay** to End			
Total Number of weeks SPL remaining (max. 50)			
Total Number of weeks ShPP remaining (max. 37)			
Number of weeks **leave** partner to take			
Number of weeks **leave** you will take			
Number of weeks **pay** partner to take			
Number of weeks **pay** you will take			

Declaration:
You must be able to place a tick in all three of the bullet points below to get Shared Parental Leave and Shared Parental Pay

• I am	The baby's Mother/Adopter Or The baby's biological Father Or Married to or partner of the Mother / Adopter Or	o o o

	Living with the Mother / Adopter in an enduring family relationship, but am not an immediate relative		o
• I have responsibility for the Child's upbringing			o
• I will take time off work to support the mother or care for the child			o
Signed		Date	

Partner Declaration: You must be able to place a tick in all four of the bullet points below to get Shared Parental Leave and/or Shared Parental Pay			
NAME			
• I have	Been an employed or self-employed earner in Great Britain for a total of 26 weeks in the 66 week period leading up to the child's expected week of birth or adoption matching date and have earned an average of £30 or more during 13 of those weeks.		o
• I/My partner has curtailed their Maternity/Adoption leave. I/My partner has curtailed their Maternity/Adoption pay.			o o
• I meet the earnings and eligibility test and qualify for Shared Parental Leave and Pay – check your eligibility at: https://www.gov.uk/shared-parental-leave-and-pay			o
• I give consent that my partner named at the top of this application takes the Shared Parental Leave/Pay as requested.			o
• I agree to information on this form being used to calculate Shared Parental Leave/Pay			o
Signed		Date	

Application for Shared Parental Leave and/or Pay authorised by:			
Signed		Date	
Name		Job title	

This form should be completed and submitted to your line manager, a copy should be kept on your personal file, and a copy submitted to VPS.

APPENDIX 4 – PATERNITY LEAVE/PAY APPLICATION FORM

Name:		**Assignment No:**	
Post:		**Hours:**	
Department:		**DBTH Start Date:**	
		NHS Start Date:	
I have attached a copy of the MATB1 / Matching Certificate			Yes/No

The Baby / Placement is Due on:			
I wish to take:-	Paternity Leave	From	Until

Declaration: You must be able to place a tick in all three of the bullet points below to get Statutory Paternity Pay and Paternity leave.		
• I am	• the baby's biological father • the partner/husband of the mother (or adopter), this includes same sex partners • the child's adopter • the intended parent (in cases of surrogacy)	o o o o
• I have responsibility for the Child's upbringing		o
• I will take time off work to support the mother or care for the child		o

Signed		Date	

Application for Paternity Leave and Pay authorised by:			
Signed		Date	
Name		Job title	

This form should be completed and submitted to your line manager, a copy should be kept on your personal file, and a copy submitted to VPS.

APPENDIX 5 – UNPAID PARENTAL LEAVE APPLICATION FORM

Name:		**Assignment No:**	
Post:		**Hours:**	
Department:		**DBTH Start Date:**	

I wish to take a period of unpaid Parental leave from the date	From	To
This is a total of	Weeks	Hours
Name of child to whom this Parental Leave relates		
This child is a disabled child for the purposes of Parental Leave		Yes / No
My relationship to the child is		
Purpose of the leave is		

Declaration

- I have considered my request carefully, including any impact financial or otherwise, to me personally
- I can confirm that the request has been made only in order to help me care for a child who requires it and that I meet the eligibility requirements outlined in Section 10 of the policy.
- I have declared to my manager any previous parental leave taken for this child (in either this job or previous employment).
- I understand that any misrepresentation of the facts surrounding a request may result in disciplinary action and that the Trust reserves the right in such circumstances to request evidence in support of the facts given in this application.
- I confirm that the request has been made for the reasons stated and that the information I have given on this form is correct and complete as far as I know and believe.

Pensionable Employees

I understand that when I return to work I will be liable for the payment of pension contributions in respect of unpaid Parental Leave. Under normal circumstances, the period over which contributions will be recovered shall equate to the length of the unpaid Parental Leave

Signed		Date	

Application for Unpaid Paternity Leave authorised by:			
Signed		Date	
Name		Job title	

This form should be completed and submitted to your line manager, a copy should be kept on your personal file, and a copy submitted to VPS.

APPENDIX 6 – UNPAID PARENTAL LEAVE RECORD FORM

Name:		**Assignment No:**	
Post:		**Department**	
NHS Start Date:		**DBTH Start Date:**	
Child's Name:		**Child's Date of Birth:**	
Evidence Provided – Please tick one Child's Birth Certificate: o MAT B1: o Documentation of acquired formal parental responsibility: o Adoption Matching Certificate/Official Notification: o			

Parental Leave Remaining	Dates Requested	Employees Signature	Manager's Signature	Date Authorised
17 weeks				
16 weeks				
15 weeks				
14 weeks				
13 weeks				
12 weeks				
11 weeks				
10 weeks				
9 weeks				
8 weeks				
7 weeks				
6 weeks				
5 weeks				
4 weeks				
3 weeks				
2 weeks				
1 week				
0 weeks				

Manager to ensure this form is completed and retained on the employee's personal file

APPENDIX 7 – RISK ASSESSMENT – PREGNANT, NEW & BREASTFEEDING PARENT

GUIDANCE FOR MANAGERS WHEN CARRYING OUT RISK ASSESSMENTS FOR PREGNANT HEALTHCARE WORKERS

The following information is based upon guidance from the Association of NHS Occupational Health Physicians (ANHOPS) in accordance with the European Union Council Directive 92/85/EEC. Details of this can be found on the HSE website.

Generic hazards	**Preventative or risk control measures**
Mental and physical fatigue and working hours	It may be necessary to adjust working hours temporarily, as well as the timing and frequency of rest breaks, and to change shift patterns. Expectant mothers can still work night shifts unless there is a specific identified risk. In this instance the employee must provide a medical certificate from their doctor or midwife stating that they must not work nights. Occupational Health may also have identified that night work could impact on the individual's health and safety. If this is the case, then the employee must be offered suitable alternative daytime work. If this is not possible, the employee must be suspended form work on paid leave for as long as necessary to protect their and the health and safety of their child.
Postural problems connected with the activities of new or expectant mothers	Ensure that the hours, volume and pacing of work are not excessive and that, where possible, the employee has some control over how work is organised. Fatigue can be addressed with longer and more frequent breaks.
Extremes of heat or cold	Pregnant workers should not be exposed to prolonged excessive heat or cold at work
Work in a high-pressure atmosphere, for example pressurised enclosures	Pregnant workers should not work in high-pressure atmospheres.
Display screen equipment use	Pregnant women do not need to stop working with VDUs. However, to avoid problems caused by stress and anxiety, women who are pregnant and are worried about working with VDUs should be given the opportunity to discuss their concerns with someone adequately informed of current authoritative scientific information and advice. Eye changes can occur so an eye test in pregnancy may be beneficial.

Work at heights	The employer must ensure that pregnant workers do not work at heights (e.g. ladders and scaffolds)
Working alone	Depending on their medical condition, help and support needs to be available when required and emergency procedures (if needed) must take into account factors affecting the pregnant women.
Occupational stress	Employers will need to take account of known stress factors ('stressors') (such as shift pattern, job security, workloads, etc.) and the particular factors affecting pregnant women. If significant stressors are identified a stress risk assessment should be carried out.
Standing activities	Physiological changes during pregnancy (increased blood and systolic volume, general dilatation of blood vessels and possible compression of abdominal or pelvic veins) promote peripheral congestion while standing. Venous compression may reduce the venous return from the pelvis which leads to compensatory increases in the maternal heart rate and to contractions of the uterus. If the compensation is insufficient, this may lead to dizziness and faintness. Continuous standing (and/or walking) for long periods during the working day also contributes to an increased risk of premature childbirth Ensure that seating is available where appropriate. Constant sitting or constant standing is both inadvisable. It is better to alternate between the two. If this is not possible, provision should be made for breaks.
Manual Handling	Manual handling of heavy loads is considered to pose a risk to pregnancy, such as risk of foetal injury and premature birth. The risk depends on strain, i.e. the weight of the load, how you lift and how often it occurs during work time. As the pregnancy progresses, a pregnant worker is at greater risk from manual handling injury. This is due to hormonal relaxation of the ligaments and the postural problems of advancing pregnancy. There can also be risks for those who have recently given birth, for example after a Caesarean section there is likely to be a temporary limitation on lifting and handling capability. Breastfeeding mothers may experience discomfort due to increased breast size and sensitivity. The changes an employer should make will depend on the risks identified in the assessment and the circumstances of the business. For example, it may be possible to alter the nature of the task so that risks from manual handling are reduced for all workers, including new or expectant mothers. Or it may be necessary to address the specific needs of the worker and reduce the amount of physical work, or provide aids for her in future to reduce the risks she faces.

Lack of rest and other welfare issues (includes passive smoking	Provide access to somewhere where the employee can sit or lie down comfortably in private and without disturbance, at appropriate intervals. Expectant mothers must be warned of any risk from passive smoking.
Risk of kidney disease (lack of toilet facilities)	Working practices need to be adapted, for example, in continuous processing and team working situations, Appropriate measures must enable expectant and nursing mothers to leave their workstation/activity short notice, and more frequently than normal.
Hazards as a result of inappropriate nutrition	New and expectant mothers' particular needs concerning rest, meal and refreshment breaks may be established in consultation with the individual.
Unsuitable or absent facilities regarding pregnancy	Protective measures must include: -access to a private room in which to breastfeed or express breast milk. -use of secure, clean refrigerators for storing expressed breast milk whilst at work, and facilities for washing, sterilising and storing receptacles. -time off (without penalty) to express milk or breastfeed. -Acknowledgement of work base community vs hospital base
Noise	The employer must ensure that workers who are pregnant, who have recently given birth or who are breastfeeding, are not exposed to noise levels exceeding upper exposure action value of 85 dB(A) and wear hearing protection when working in mandatory hearing protection zones.
Vibration (includes whole body vibration)	Excessive vibration should be avoided. It should be recognised that use of personal protective equipment by the mother will not protect the unborn child from a vibration hazard.
Traveling Traveling either inside or outside the establishment or on business	Traveling in the course of work, and to and from the workplace, can be problematic for pregnant women, involving risks including fatigue, vibration, stress, static posture, discomfort and accidents. These risks can have a significant effect on the health of new and expectant mothers. Where travel for business is required, advice should be taken from Occupational health and the women's health care providers with regard to flying, vaccinations and prophylactic treatments.
Ionising Radiation	As soon as a pregnant woman informs the organisation of her condition, the protection of the unborn child must be comparable with that provided for members of the public. The equivalent dose to the unborn child has to be as low as

	reasonable achievable, and will not usually exceed 1mSv during at least the remainder of the pregnancy. Special attention should be paid to the possibility of nursing mothers encountering radioactive contamination and they should not be employed where there is a significant risk of such contamination.
Antimitotic (cytotoxic) Drugs In the long term these drugs cause damage to genetic information in sperm and eggs. Some can cause cancer. Absorption is by inhalation or through the skin. Assessment of the risk should look particularly at preparation of the drug for use (pharmacists, nurses), administration of the drug and disposal of waste (chemical and human).	There is no known threshold limit and exposure must be avoided or reduced. Those trying to conceive a child or who are pregnant or breastfeeding should be fully informed of the reproductive hazard. When preparing the drug solutions, exposure should be minimised by the use of protective garments (gloves, gowns and mask), equipment (flow hood), and good working practices. A pregnant worker preparing antineoplastic drug solutions should be transferred to other work.
Mercury Mercury and mercury Derivatives Organic mercury compounds could have adverse effects on the unborn child. Animal studies and human observations have demonstrated that exposure to these forms of mercury during pregnancy can slow the growth of the unborn baby, disrupt the nervous system, and cause the mother to be poisoned. Organic mercury is transferred from blood to milk. That may pose a risk to offspring, if a woman is highly exposed before and during pregnancy.	Prevention of exposure must be the first priority. Where it is not appropriate to prevent the risk, control of exposure may be by a combination of technical measures, along with good work planning and housekeeping, and the use of Personal Protective Equipment (PPE). PPE should only be used for control purposes if all other methods have failed. It may also be used as secondary protection in combination with other methods.
Anaesthetic gases The evidence for an association between exposure to anaesthetic gases and adverse	Assessment should be based on what is known about the adequacy of scavenging systems and the anaesthetic exposure levels. Special consideration may be needed in employees who are known to have a relatively poor obstetric history. It may be necessary to consider modification of work.

pregnancy outcomes is weak and largely based on data published prior to the introduction of more effective scavenging systems and the increased use of intravenous and local Analgesia.	Alternative safe tasks or paid leave may need to be considered and are more relevant in the first trimester of pregnancy where the aim is to achieve as low a risk as possible of spontaneous abortion. Control of risk may be achieved by reducing gas inductions, patient turnover and increasing employee's distance from the source. Work should be in well ventilated areas.
Chemicals and Substances. Does work involve contact with chemicals labelled as:- **R23, R24, R26, R27,** **R28:** Toxic **R33:** Danger of Cumulative effects. **R39:** Serious irreversible effects. **R40:** Limited evidence but may cause Carcinogenic effect. **R45, R49:** May cause Cancer. **R46:** May cause heritable genetic Damage. **R48:** May cause damage to health by prolonged exposure. **R60, R62**: Possible risk of impaired infertility. **R61, R63:** May cause harm to the unborn child. **R64:** May cause harm in breast feeding. **R68:** Possible risk of Irreversible effects.	**ALL** chemicals and substances should be immediately risk assessed against COSHH regulations. COSHH assessments should already be in place if these substances are being used on the trust premises. The actual risk to health of these substances can only be determined following a risk assessment of a particular substance at the place of work - i.e. although the substances listed may have the potential to endanger health or safety, there may be no risk in practice, for example if exposure is below a level which might cause harm. For work with hazardous substances, which include chemicals which may cause heritable genetic damage, employers are required to assess the health risks to workers arising from such work, and where appropriate prevent or control the risks. In carrying out assessments, employers should have regard for women who are pregnant, who have recently given birth or who are breast feeding. Prevention of exposure must be the first priority. Where it is not appropriate to prevent the risk, control of exposure may be by a combination of technical measures, along with good work planning and housekeeping, and the use of Personal Protective Equipment (PPE). PPE should only be used for control purposes if all other methods have failed. It may also be used as secondary protection in combination with other methods. Substitution of harmful agents should be made, if possible. **Remember that exposure may occur through skin absorption, ingestion, or most commonly, through inhalation of chemical aerosols.** If the new of expectant of breastfeeding mother is or is potentially exposed to any of the substances listed, please contact Occupational Health immediately for advice.
Biological Agents Many biological agents can affect the unborn child if the mother is infected during pregnancy. These	Risk assessment, which will take account firstly of the nature of the biological agent, how infection is spread, how likely contact is, and what control measures there are. These include physical containment and the usual hygiene measures. The use of available vaccines is to be

may be transmitted through the placenta while the child is in the womb, or during or after birth, for example through breastfeeding or through close physical contact between mother and child. Examples of agents where the child might be infected in one of these ways are Hepatitis, HIV, Herpes, TB, Syphilis, Rubella/Measles, Chickenpox, Mumps, Listeria, Toxoplasmosis, Typhoid, Parvovirus, Cytomegalovirus. For most workers, the risk of infection is not higher at work than from living in the community; but in certain occupations, exposure to infections are more likely. The chance of catching these infections can be minimised by using normal hygienic precautions, especially hand washing after patient contact	recommended, with due regard for any contra-indications for administering certain of them to women in the early stages of pregnancy. If there is a known high risk of exposure to a highly infectious agent, then it will be appropriate for the pregnant worker to avoid exposure altogether. The employer must ensure immunity testing for risk occupations, and job transfer or temporary leave during epidemics. Pregnant and breast feeding colleagues should avoid contact with the listed hazards. This includes contact with potentially infected people or biological samples. They must also avoid any undiagnosed rash compatible with systemic viral illness. If such contact occurs the individual should contact the Occupational Health Department/GP/Midwife for advice immediately.

Aspects of pregnancy which may require adjustments to work organisation

Apart from the hazards listed in the table, there are other aspects of pregnancy that may affect work. The impact will vary during the course of the pregnancy and their effect should be kept under review; for example, the posture of expectant mothers changes to cope with increasing size.

Aspects of pregnancy	**Factors in work**
Morning sickness	Early shift work Exposure to strong or nauseating smells/poor ventilation
Travel/transport	Backache Standing/manual handling/posture varicose veins/other circulatory problems/haemorrhoids, prolonged standing/sitting
Rest and welfare	Frequent/urgent visits to toilet
Regular nutrition	Proximity/availability of rest/washing/eating/drinking facilities
Hygiene	Difficulty in leaving job/work site

Comfort	Increasing size, Use of protective clothing/ work equipment, Work in confined areas/at heights Dexterity, agility, co-ordination, speed of movement, reach may be impaired, because of increasing size Postural demands e.g. bending over, reaching
Manual handling	Problems of working in restricted spaces
Fatigue/stress	Fatigue/stress: Overtime, Evening/night work, Lack of rest breaks, Excessive hours, Pace/intensity of work
Balance	(also relevant for breastfeeding mothers) Problems of working on slippery, wet surfaces

RISK ASSESSMENT FOR EXPECTANT, NEW AND BREASTFEEDING PARENT

Name		Manager	
Job Title		Date notified of pregnancy	

HAZARD	PRESENT	CONTROLS IN PLACE	ADEQUATE	FURTHER ACTION REQUIRED
BIOLOGICAL AGENTS				
Biological Hazard group 1, 2 & 3 See definitions below	Yes/No		Yes/No	
PHYSICAL AGENTS				
Shocks, vibration, movement	Yes/No		Yes/No	
Manual handling	Yes/No		Yes/No	
Personal protective equipment and clothing	Yes/No		Yes/No	
Excessive Noise	Yes/No		Yes/No	
Ironising radiation	Yes/No		Yes/No	
Non Ionising electro-magnetic radiation	Yes/No		Yes/No	
Extremes of cold or heat	Yes/No		Yes/No	
Physical fatigue	Yes/No		Yes/No	
Mental fatigue and stress	Yes/No		Yes/No	
Violence / aggression	Yes/No		Yes/No	
Working at height	Yes/No		Yes/No	
Excessive working hours (Overtime)	Yes/No		Yes/No	
Night Working	Yes/No		Yes/No	
Out of Hours / Lone Working	Yes/No		Yes/No	
Community working vs hospital working	Yes / No		Yes / No	
Standing for long periods	Yes/No		Yes/No	
Driving/travelling	Yes/No		Yes/No	
CHEMICAL AGENTS	Yes/No		Yes/No	

HAZARD	PRESENT	CONTROLS IN PLACE	ADEQUATE	FURTHER ACTION REQUIRED
Substances labelled R40, R45, R49, R60, R61, R63& R64, R68 under COSHH Regulations	Yes/No		Yes/No	
Mercury & Derivatives	Yes/No		Yes/No	
Cytotoxic Drugs	Yes/No		Yes/No	
Chemicals absorbed through the skin	Yes/No		Yes/No	
Carbon Monoxide	Yes/No		Yes/No	
Lead and derivatives	Yes/No		Yes/No	
Cigarette smoke	Yes/No		Yes/No	
WORKING CONDITIONS				
Ergonomics/Posture	Yes/No		Yes/No	
Workspace	Yes/No		Yes/No	
Working at height	Yes/No		Yes/No	
Display screen equipment	Yes/No		Yes/No	
Adequate facilities for rest/breaks/breastfeeding	Yes/No		Yes/No	
Slips / Trips / Falls	Yes/No		Yes/No	
Lifting and Carrying Loads	Yes/No		Yes/No	
PEEP Required	Yes/No		Yes/No	
OTHER HAZARD NOT LISTED				
	Yes/No		Yes/No	
	Yes/No		Yes/No	
	Yes/No		Yes/No	
	Yes/No		Yes/No	

Group 1) Exposure-prone procedures (Surgeons, F1 & F2 doctors on rotation, dental colleagues, operating department practitioners, theatre nurses, midwives, A&E doctors & nurses, and renal staff)

Group 2) Patient contact / Contact with blood or body fluids (All clinical employees, laboratory colleagues, service workers, estates maintenance, HSDU technicians, A&E clerical workers)

Group 3) Food handlers (Catering colleagues, and other employees who handle food or food products, or assist with feeding patients)

Review Dates	Reason For Review	Conclusion	Signature Of Manager	Signagure Of Employee

Please Note:

An individual risk assessment is completed for every new and expectant mother who is an employee of DBTH. This should be completed on the first day of notification of pregnancy and at least every 12 weeks thereafter. This should be monitored by the line manager. The assessment should be regularly reviewed by the manager during the pregnancy and will need a complete review once the employee is a new mother. New / breastfeeding mothers should report any difficulties in either complying with the assessment or completing work between these reviews

Each work activity should have an existing associated risk assessment. That assessment should be examined whilst completing the individual risk assessment for the new and expectant mother. A decision should be recorded when additional action is required and when it is taken. This should be as specific as possible.

If there is any difficulty in reaching agreement on appropriate control measures the Occupational Health and Wellbeing Service should be consulted as soon as any issues arise.

Where the risk assessment identifies that additional support may be required in an emergency evacuation, managers should consider whether a Personal Emergency Evacuation Plan (PEEP) is needed.

A copy of the individual assessment should be given to every new and expectant mother in employment.

If an employee presents a medical certificate stating they are unable to carry out particular duties, this must be brought to the immediate attention of the line manager.

Assessment completed by.....

Signature of Employee……. **Date…….**

APPENDIX 8 – MANAGERS CONFIRMATION TEMPLATE LETTER

DATE

Private and Confidential

NAME
ADDRESS

Doncaster Royal Infirmary
Armthorpe Road, Doncaster,
South Yorkshire DN2 5LT

Tel: 01302 366666
Fax: 01302 320098
www.dbh.nhs.uk

Dear **(Name of Employee)**

Congratulations and thank you for telling me about your pregnancy/ adoption and the date that your baby is due/ your child is being placed on. I am writing to you about your maternity/ adoption leave and pay.

Pay Entitlements

As we have discussed, you have applied for **(Scheme 1/2/3/4/5 *AMEND AS REQUIRED*)** as detailed in the Trust's policy, a copy of which you have been given. I will send your application form to VPS and VPS will notify you directly to confirm if you are eligible for SMP/ OMP.

If you are not entitled to SMP, then VPS will forward you the form SMP1 that explains why you do not qualify for Statutory Maternity Pay. You may, however, be entitled to Maternity Allowance. In order to claim Maternity Allowance you will need to complete a Maternity Allowance (MA1) Claim Form and you will need your SMP1 form as evidence to support your claim. Please visit the Gov website for more information here: https://www.gov.uk/maternity-allowance/how-to-claim

Notice to start/ end your maternity leave

You have requested to commence your maternity/adoption leave on ***insert date***, which means that your maternity/ adoption leave must end on ***insert date*** (i.e. 52 weeks).

If you want to change the date your leave starts you must, if at all possible, tell me at least 28 days before your proposed new start date or 28 days before **(insert date leave starts [1])** (your original start date), whichever is sooner.

You have indicated you wish to return from maternity leave on ***insert date***. If you decide you want to change the date of your return from maternity, you must give me at least 8 weeks' notice in writing.

If you decide not to return to work you must still give me proper notice, and as detailed in the Trust's policy you will be liable to refund in full, or in part, any maternity pay received in excess of Statutory Maternity Pay.

Your leave will commence automatically if you give birth before your maternity leave period was due to start. Please notify me in writing as soon as is reasonably practicable of the date you gave birth,

and your maternity leave will begin from the day after birth. If your baby is born prematurely (before the 11th week before the expected week of childbirth), you can agree with me for your leave to be split, taking a minimum of two weeks leave immediately after childbirth and the rest when your baby is discharged from Hospital. I will confirm any date changes in writing.

If your baby is born before commencement of your maternity leave/ pay then you must notify your manager, and your maternity leave/ pay will commence from the day after the birth.

Intention not to return to work

You have indicated that you do not intend to return to work after your maternity/ adoption leave, therefore your last day of service will be ***(Insert date).*** As you do
not intend to return to work for the Trust you must formally submit your resignation letter to me detailing the last date of your employment.

Pregnancy Risk Assessment

As your employer I want to make sure that your health and safety as a pregnant mother are protected while you are working, and that you are not exposed to risk.

We have already carried out risk assessments to identify hazards in the workplace that could be a risk to any employees. I will continue to review the risk assessment with you on at least a 12-week basis, or if you advise me of any changes in your health/ working conditions. If you have any further concerns, regarding your current risk assessment and specifically in relation to your pregnancy, please let me know immediately.

Annual leave

You will continue to accrue your full annual leave entitlement during the period of your maternity/adoption leave. We have discussed the arrangements for you to take your leave and have agreed the following:

Insert details

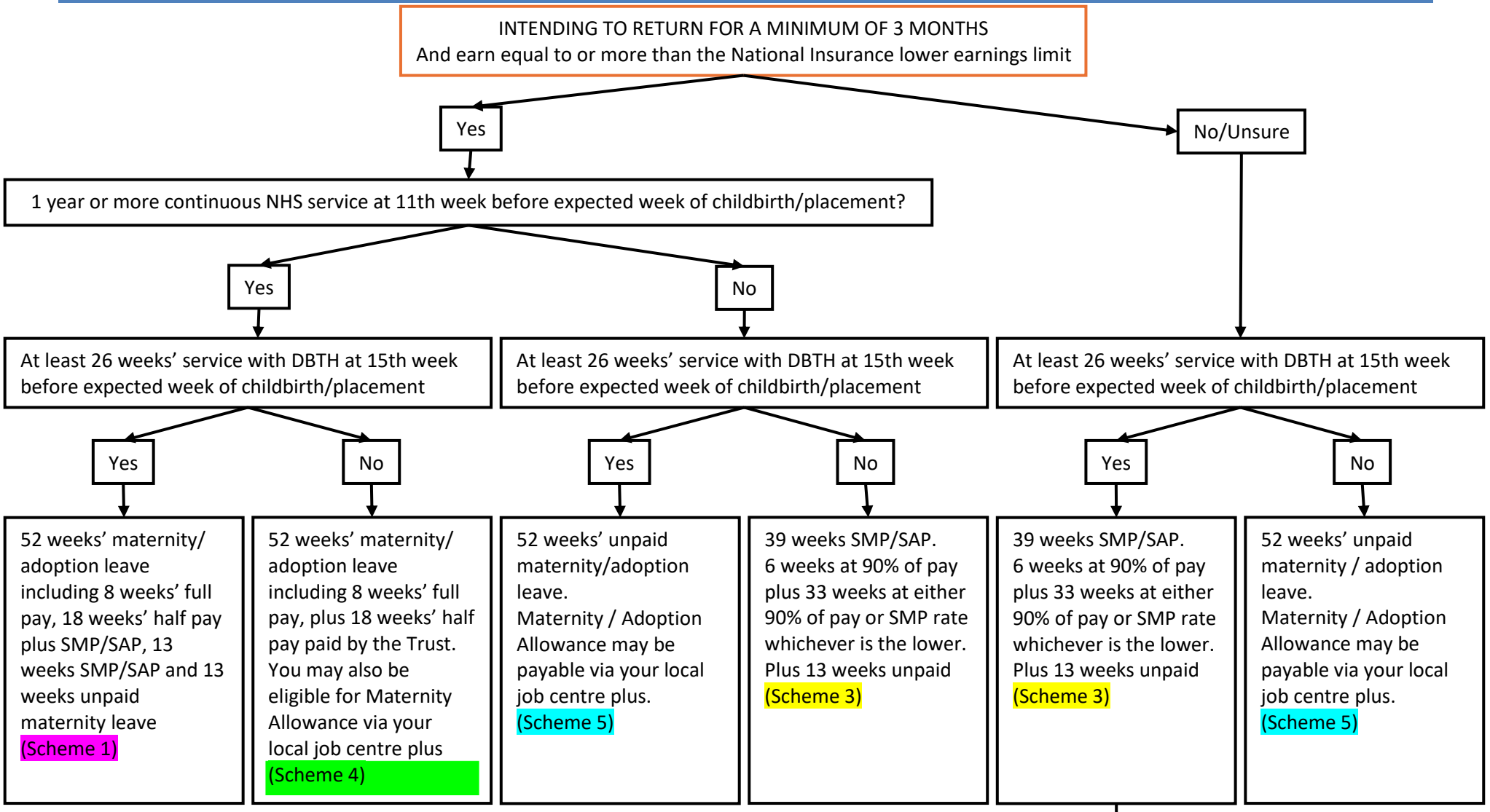
If you have any questions about any aspect of your maternity entitlement, please do not hesitate to get in touch with me. I wish you well during your pregnancy

Yours sincerely

Insert name of line manager
Insert Designation

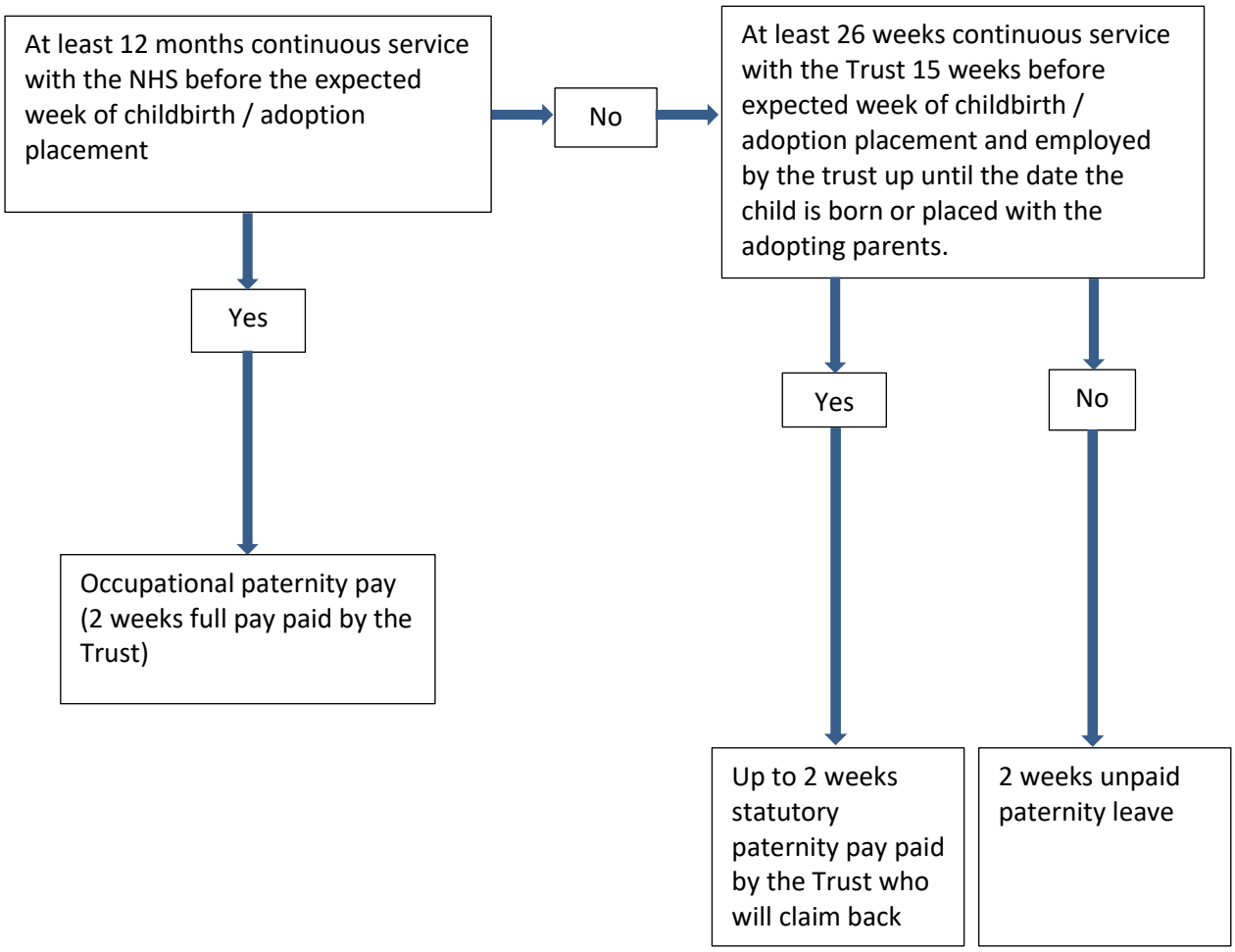
Cc personal file

APPENDIX 9 – FLOW CHART FOR MATERNITY / ADOPTION PAY



Scheme 2 - More than one year's service at 11th week. Deferred OMP/ OAP payable 3 months after return to work. You are paid 90% of your full pay for 6 weeks and 33 weeks SMP/SAP. If you do return to work for 3 months following your maternity/ adoption leave then you will be paid the difference between what you were paid and what you would have been paid had you taken scheme 1.

APPENDIX 10 – FLOW CHART FOR PATERNITY LEAVE



APPENDIX 11 – GUIDANCE FOR MANAGERS ON BREAST-FEEDING

Managers must ensure that any employee who notifies the Trust in writing of their intention to continue breastfeeding is fully supported.

Managers will conduct a timely risk assessment with the implementation of reasonable adjustments, including appropriate facilities and flexibility, in line with legal obligations and Trust policy.

Employees must be allowed reasonable time off to breastfeed or express milk as needed. Managers should ensure staff have access to a private area to make full use of this provision.

Where a colleague is community-based, managers should consider whether their working pattern allows safe and practical access to suitable facilities for expressing and storing milk. This should include arrangements for colleagues who may be undertaking visits, working away from a clinic base, or providing care in a service user's home for a prolonged period. Where appropriate arrangements cannot be identified locally, managers should seek advice from the People Business Partnering Team and/or Occupational Health.

More women are choosing to breastfeed and returning to work while still doing so. Around 70% of working mothers resume work within nine months of childbirth, and those with shorter maternity leave are more likely to continue breastfeeding upon return.

Employers are legally required under Health & Safety legislation to enable breastfeeding employees to continue after returning to work. There are also strong business reasons to support breastfeeding colleagues.

The Trust must support breastfeeding employees by ensuring that appropriate facilities and practical arrangements are considered and by taking prompt action where behaviour or comments are inappropriate. Managers should make clear that offensive remarks, jokes, intrusive questions or less favourable treatment because an employee is breastfeeding, expressing milk or has recently given birth will not be tolerated and may amount to harassment or direct sex discrimination under the Equality Act 2010. Any concerns should be addressed promptly and sensitively, with advice from the People Business Partnering Team where required.

Colleagues may find it helpful to use the forms in the Flexible Working Policy to make a request regarding breastfeeding at work. This can help managers make objective, and fair decisions regarding facilities and adjustments at work.

Facilities

1. A breastfeeding employee may ask for a private, hygienic, safe and secure area where they can express milk, this could be an unoccupied office or an area used for meetings that can be discreetly screened. If in doubt an employer should ask the employee what would be most appropriate. If after careful consideration, the manager is physically unable to provide an appropriate space, this

should be discussed with the employee to establish an appropriate facility which is mutually agreeable, for example in a private office in an adjacent department.

2. In order to express milk successfully, the mother needs to feel comfortable and relaxed. She needs to be in a private place where she is not going to be interrupted by a colleague. Having collected the breast milk the mother needs to keep it refrigerated until she can take it home. Fridge and storage.

3. Most areas have kitchen facilities that contain a fridge or cool area. Employers should consider enabling expressed milk to be stored there, perhaps secured in a re-sealable container for hygiene purposes. It would be good practice to discuss storage preferences with the employee.

4. Because babies are so vulnerable to infection, the mother needs to be able to wash her hands before expressing and she also needs to be able to wash and sterilise any equipment she uses.

5. Although private, the lady's toilet is never a suitable place to breast-feed or express milk. It is an unhygienic and unpleasant environment in which to feed a baby or collect milk.

Checklist of Facilities to offer:

- Use of a room that is warm, clean, and private, preferably with a lockable door, (e.g. sickroom or spare office). If the mother is using an electric breast pump or steam steriliser, the room should have an electric point available.
- Somewhere to wash her hands or equipment
- Somewhere clean to leave a steriliser or a bowl with sterilising solution or use of a microwave oven if there is one
- Use of a fridge to keep bottles of expressed milk before taking them home
- A low comfortable chair.

Breaks to Breast-Feed or Express Milk

6. The feeding pattern of babies varies according to their age, health, and the individual child. Ideally a breast-feeding employee should be allowed breaks either to visit the baby or to express breast milk at the time of the day that she would normally feed the baby at home. This will depend on the nature of the employee's work, if she attends meetings where it is impossible to take a break, or works with clients whose needs are immediate (e.g. hospital patients), an exact routine may be impossible, but a reasonable example may be to give either one hour long break or 2 half hour breaks. Nonetheless, the starting point for good practice should be to listen to what the employee herself wants to do.

7. Talk to the employee about what breaks she will need for expressing or breast-feeding. Some women find expressing milk quick and easy; others may take longer.

8. Remember that the number of breaks needed or their length may vary over time.

9. It is difficult or sometimes physically impossible to breast feed or express under pressure, it is therefore imperative that as a manager you, and her colleagues, make her feel relaxed and not timed.

10. Take the employee's needs as a breast-feeding mother into account when scheduling shifts or rotas. Variable shifts and night shifts may be particularly problematic for an employee trying to maintain her milk supply.

11. Do not require the employee to attend any training courses or meetings that will involve an excessively long working day, or night spent away from home. (if we aren't assigning training overnight away from home due to breastfeeding then why would we expect night shifts also take place?

12. If you need further advice about Infant Feeding, please contact the Infant Feeding Team at dbth.infantfeedingteam@nhs.net or on 01302 644845 (DRI) / 01909 572891 (BDGH)

APPENDIX 12 – EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	**Division**	**Assessor (s)**	**New or Existing Service or policy?**	**Date of Assessment**
CORP/EMP 15 v.15.1 Parenting Leave Policy	P&OD	Kelly Crawshaw	Existing	July 2026

1) Who is responsible for this policy? Human Resources

2) Describe the purpose of the service / function / policy / project/ strategy? Process/guidance on implementation of maternity, adoption, paternity, parental leave & pay legislation.

3) Are there any associated objectives? Provide consistent approach to implementation of legislation and terms & conditions across the Trust

4) What factors contribute or detract from achieving intended outcomes? – Employees may be unaware of their contractual and legislative rights

5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Yes, for Gender

- If yes, please describe current or planned activities to address the impact: The policy complies with legislative requirements

6) Is there any scope for new measures which would promote equality? No

7) Are any of the following groups adversely affected by the policy?

Protected Characteristics	**Affected?**	**Impact**
a) Age	No	
b) Disability	No	
c) Gender	No	
d) Gender Reassignment	No	
e) Marriage/Civil Partnership	No	
f) Maternity/Pregnancy	No	
g) Race	No	
h) Religion/Belief	No	
i) Sexual Orientation	No	

8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box

Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4

If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a* **Detailed Equality Analysis form – see CORP/EMP 27.

Date for next review:	May 2029 (Policy Valid Until November 2029)
Checked by:	Adam Evans
Date:	July 2026