Part 5: Equal opportunities
Section 30: General equality and diversity statement

General equality and diversity statement

30.1 All parties to this agreement commit to building a NHS workforce which is valued and whose diversity reflects the communities it serves, enabling it to deliver the best possible healthcare service to those communities. The NHS will strive to be a leader in good employment practice, able to attract and retain staff from diverse backgrounds and communities.

30.2 The parties will strive to ensure that:

- everyone working in the NHS should be able to achieve his or her full potential, in an environment characterised by dignity and mutual respect;

- the past effects of institutional discrimination are identified and remedial action taken;

- equality of opportunity is guaranteed;

- individual difference and the unique contribution that individual experience, knowledge and skills can make is viewed positively;

- job descriptions, person specifications and the terms and conditions of service fit with the needs of the service and those who work in it, regardless of age, disability, race, nationality, ethnic or national origin, gender, pregnancy or maternity, marriage or civil partnership, religion, beliefs, sexual orientation, domestic circumstances, social and employment status, HIV status, gender reassignment, political affiliation or trade union membership.

Making it happen

30.3 To achieve these goals all parties to this agreement will ensure that:
everyone knows what their responsibilities are in relation to equality and diversity and these are reflected in individual KSF outlines and development reviews;

- steps taken to promote equality and diversity are monitored;

- appropriate training is provided. This will include appropriate equality and diversity training for all staff and relevant skills-based training for line managers and others who play a key role in implementing equality and diversity policy;

- appropriate resources where appropriate, are made available to achieve these aims;

- the boards of NHS trusts (of NHS boards in Scotland) and other NHS organisations and senior managers will demonstrate their commitment and accountability for implementing these aims by measuring and monitoring progress through their equality schemes;

- the NHS will encourage other organisations, such as local authorities, education providers, contractors and recruitment agencies, to work in partnership with the service to achieve the aims of this agreement, including the application of its commissioning and procurement activities.

**Monitoring and review**

30.4 The NHS Staff Council will keep this agreement under review against best practice, as it develops, inside the NHS and elsewhere.

305 NHS employers and local staff representatives should review their local arrangements to ensure they produce outcomes that are consistent with this agreement. Annual 'equality audits' are recommended and these should include a review of:

- workforce data by race, gender, disability, sexual orientation, religion or belief, age and contract status (i.e part time);

- existing equality policies and procedures and any gaps requiring the development of new arrangements;
- data on pay and grading by race, gender, disability, sexual orientation, religion or belief, age and contract status i.e part time.

306 Where under-representation of particular groups is identified, employers should take advantage of the positive action provisions in the discrimination legislation, assuming that the detailed conditions in the legislation are met.

Definitions

307 Where the term "requires" is used in this agreement, this denotes a requirement set down in law.

308 Where "should" is used, this denotes that there is a national agreement to that effect.

309 The agreements contained in this part of the handbook should be taken as policy by NHS employers. Any advice on best practice should be taken as being recommended by the NHS Staff Council.

30:10 Where it is recommended that employers and local staff representatives agree arrangements, any advice on best practice is therefore guidance.

Scope

30:11 Each of the key areas to be addressed are contained in this handbook at sections 31 to 36, as follows:

- Section 31: Recruitment, promotion and staff development;
- Section 32: Dignity at work;
- Section 33: Caring for children and adults;
- Section 34: Flexible working arrangements;
- Section 35: Balancing work and personal life;
- Section 36: Employment break scheme.
still remains significant scope to develop local procedures to inform action.

30.13 Some NHS employers will have established procedures which have been agreed with their local staff representatives. Where such procedures are consistent with the principles outlined in this agreement, these should not be disturbed. However, local agreements should be reviewed and updated in light of legal and best practice.

Section 31: Recruitment, promotion and staff development

General

31.1 It is consistent with the delivery of the highest quality healthcare that all NHS employers should have fair and non-discriminatory systems for recruiting, developing and promoting people. Fair and open procedures that ensure that recruitment takes place from a diverse talent pool should be in place and those people with a responsibility for recruitment should be trained for their role.

31.2 Recruitment and promotion procedures should be regularly monitored to identify where and how they can be improved, and to enable the planning of potential positive action initiatives for under-represented groups (see 31.25 and 31.26).

31.3 Equality of access to opportunities for promotion and development should apply, regardless of protected characteristics, hours worked or any other non-standard term in the contract of employment.

31.4 Recruitment agencies used for finding permanent or temporary staff should be informed of this agreement and expected to follow fair and objective selection procedures. They should also be informed that their performance will be monitored in line with local arrangements.
31.5 Before any decision is made to advertise a job, NHS employers should decide that a real vacancy exists and should be clear about the requirements of the job. Opportunities for flexibility, as set out in Section 34, should be assessed and acted upon so as to attract as diverse a group of applicants as possible, without unnecessary conditions being applied.

31.6 Each job should have a written job description and person specification. These should be reviewed regularly and at least every time a vacancy occurs to ensure that they remain relevant and are flexible, including making reasonable adjustments where people with disabilities apply. Should significant changes be made to a job description the usual job evaluation procedures should be followed to determine pay banding (see the NHS Job Evaluation Handbook)

31.7 Person specifications should outline the genuine minimum requirement and, where appropriate, any genuine occupational qualification (GOQ) necessary for the job to be done effectively. Emphasis should be placed on quality, rather than length of experience, and consideration should be given to experience gained outside paid employment. Qualifications should not be required solely to boost a post’s job evaluation score.

**Seeking applicants**

31.8 All jobs must be advertised in line with the organisation’s local policy and procedure.

31.9 Advertisements should be designed and placed to attract as wide a group of suitably qualified applicants as possible. Where recruitment agencies are involved they should be made aware of the requirements of this agreement and given clear instructions regarding the employer’s policies.

31.10 Advertisements should be expressed in clear language and be made available in a variety of formats e.g. large print or on audio and advice given to applicants should be consistent to avoid discrimination.
Forms of application

31.11 Where application forms are used they should be simple and to the point, requesting only that information which is essential to making an informed decision.

31.12 Applications should be accepted in a variety of formats to ensure equality of access.

31.13 Whichever type of application is adopted, a confidential means for equality monitoring applicants and the success of their application should be agreed at local level (see also 31.30 – 31.32).

Selection

31.14 Selection should always be a competitive process, except where a member of staff is being re-deployed to accommodate their disability, health needs, maternity, training or other similar situation.

31.15 Objective selection methods must be used and tangible evidence recorded for transparency of selection decisions (see also 31.30 to 31.32).

31.16 All applicants, where they request it, are entitled to know the reasons why their application has been unsuccessful.

31.17 When confirming an applicant’s right to work in the UK, recruiters must be careful not to make discriminatory assumptions about nationality checks.

Selection decision

31.18 Everyone involved in selection should be trained in undertaking fair and objective recruitment.

31.19 Selection decisions should be carried out by more than one person. Where a panel is appropriate, it should reflect the diversity of the local population/workforce.
Selection should be consistently applied and based upon clear criteria which are in line with the job description and person specification.

A written record of all decisions should be kept for a minimum of six months.

A means of monitoring the selection process should be agreed at local level.

**Selection processes and tools**

Interviews are one means of selecting job applicants. Consideration should be given to the options available. In all cases the process should suit the requirements of the job and be designed to bring out the best in the applicants.

All shortlisted applicants should be asked if they require any particular arrangements or reasonable adjustments to be made in the selection process, to enable ease of participation.

Applicants must not be asked about their health status prior to an offer of employment. Organisations are encouraged to adopt processes such as those outlined in the DWP’s Disability Confident scheme (https://disabilityconfident.campaign.gov.uk/) to ensure equality of recruitment experience.

**Positive action**

As set out in the general statement in Section 30, positive action measures are permitted where the conditions set down in legislation are met.

An example of positive action can be targeted recruitment. Statements in advertisements, and the appropriate placement of advertisements, can encourage people from under-represented groups to apply.
Training and development

31.28 Every new employee should undergo a comprehensive induction programme, including training in diversity and inclusion policy and practice at work.

31.29 Every employee should have annual development reviews, sometimes referred to as appraisal, and a personal development plan.

31.30 Information on training and development opportunities should be widely publicised and the take up of such opportunities monitored as part of the diversity monitoring process.

Monitoring and review

31.31 Recruitment policies and practices should be monitored to ensure compliance with relevant legislative and contractual requirements.

31.32 Action should be taken by employers to analyse data on recruitment, promotion and training and address any issues in partnership with local staff representatives.

31.33 Records on recruitment and promotion, including reasons for decisions to employ or not, should be kept for a minimum of six months.

Amendment number 40: NHS TCS Advisory Notice 01/2019

Section 32: Dignity at work

Dignity at work

32.1 To deliver excellent care to patients, all NHS organisations need to be well led and have healthy, supportive, positive cultures that value diversity and promote inclusion for all staff groups. As part of this overall
commitment, NHS organisations have a duty to provide an inclusive culture in which all staff have the right to be treated with dignity and respect at work, where bullying and harassment is not tolerated and where staff feel safe to speak out and discuss matters of concern without fear of reprisal.

32.2 For the purposes of this agreement, the following definitions apply:

**At work** - includes any situation that can be identified with either the requirements of the employer, or with social events linked to the same employment. It includes any place where NHS care is delivered.

**Bullying** - offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power which may undermine, humiliate, denigrate or injure the recipient. This can include “cyber-bullying” or other actions that may take place outside of the workplace but are linked to that employment.

**Harassment** - unwanted conduct affecting the dignity of staff in the workplace that may be related to any personal characteristic of the individual e.g. age, gender, disability, religion/belief, sexual orientation, ethnicity, pregnancy and maternity, marriage and civil partnerships, gender reassignment, political opinion or trade union membership, and may be persistent or an isolated incident.

In all cases of bullying and harassment it will be for the recipient to define what is inappropriate or demeaning behaviour.

**Victimisation** - Treating someone badly because they have taken action, or supported someone else to take action, under a policy relevant to this section.

**Freedom to speak up** – can include but is not limited to whistleblowing and duty of candour.

**Bullying and harassment**
with local staff representatives, draw up a policy statement informed by best practice.

32.4 The policy should apply to all staff, contractors and employees of other organisations who are on site, volunteers, visitors and patients at the point of service delivery and embrace the concept of zero tolerance.

32.5 It should be the responsibility of employers, through publication and promotion, to ensure that all concerned are aware of this policy and of sources of available support; that managers and staff are aware of the expectations which flow from the policy and what to do if these are not met. This should include, but not be limited to, appropriate training to support the promotion and application of this policy, including training for staff on how to challenge problem behaviours.

32.6 Managers have a responsibility to model the standards of acceptable behaviour expected of staff. They should ensure their own behaviour could not be construed as personal harassment by acting with fairness and equity. This includes using their judgement to correct standards of conduct or behaviour which could be seen as harassment, and to remind staff of these standards. Each member of staff carries responsibility for his or her own behaviour.

32.7 The policy statement should outline the organisation’s strategic response, including, but not limited to commitments to -

- Working in partnership with staff side representatives on this issue
- Identifying the nature and extent of bullying and harassment in the organisation
- Consulting with staff, to listen and learn from their experiences
- Set and publish a baseline goal and action plan for improvement
- Evaluate progress

32.8 The procedure for dealing with complaints against members of staff should be seen as separate and different from the grievance procedure, and should recognise the difficulties being experienced by complainants.
32.9 It is recommended that there is a separate procedure for dealing with complaints by members of staff against patients, visitors or employees of other organisations.

32.10 The procedures should advise complainants that they may, if they wish, deal with their complaint informally, by directly (or with the assistance of a colleague) requesting the behaviour to stop.

32.11 All complaints should be taken seriously and investigated promptly and thoroughly.

32.12 The procedure for complaints against other staff members should ensure that:

- There are rights of representation similar to the grievance procedure and complainants should have access to trained advisers to help them to deal with the process of complaint;

- there is specific provision to deal with cases where the alleged harasser manages, or is managed by, the complainant;

- an alleged harasser has the right to be informed in writing of the complaint made against them.

- Any formal investigation should be undertaken by a trained investigator operating outside their normal area of responsibility with a report produced for the responsible line manager who will determine the outcome and next steps.

- Confidentiality should be maintained, as far as is compatible with thorough investigation and the effective handling of each case, and steps should be taken to ensure that complainants and witnesses remain free from victimisation

- There is a right of appeal.

- Appropriate action can be taken in the event of vexatious allegations being made
- No one should suffer victimisation as a result of making a complaint under the policy.

**Freedom to speak up**

32.13 The ability to discuss and/or report concerns openly without fear of reprisal or victimisation is essential in order for staff to play their important role in service improvement and driving up the quality and safety of patient care.

32.14 Therefore, employers should, in partnership with local staff representatives, draw up a freedom to speak up policy statement and procedure for ensuring that staff can discuss and/or raise concerns without adverse consequences. Such a policy statement should include the legal protection afforded to eligible whistleblowers, and take into account other statutory requirements and commissioning contract specifications. It should also make clear the escalation routes for reports and lines of accountability.

32.15 Organisations that chose to appoint “guardians” or “champions” for this policy should ensure that they are recruited from all occupational bands and service areas, and reflect the diversity of the workforce.

*Pay circular (AforC): 01/2019 amendment number 40*

**Section 33: Balancing work and personal life (England, Wales & NI)**

**General**
response, ensuring policies which support and promote a work/life balance are agreed in partnership.

33.2. Key to achieving work life balance is the provision and availability of flexible working opportunities accompanied by policies which support managers to take the time to understand what each person needs. Flexible working is part of a wider commitment by the NHS to improve the quality of working life. It also supports the retention of existing staff including those returning to work after family-related leave.

**Flexible working arrangements**

33.3 In order to meet the evolving needs of patients, the NHS needs to be able to attract, recruit and retain a diverse workforce. Individual working needs are variable, and where possible we need working practices which ensure staff can work in a manner that best suits their personal needs and preferences. Having appropriate working arrangements which are adaptable and flexible both to employees and employers will ensure that we will continue to have the workforce we need to deliver excellent patient care for the future.

33.4 The following national principles have been established to support employing organisations develop their local policies.

**Right to request flexible working**

33.5 All NHS employees covered by this section and who are employed by an organisation listed in Annex 1 have the contractual right to request flexible working from day one of employment.

33.6 Employees can make more than one flexible working request per year and can do so regardless of the reasons for them. This does not preclude other statutory or handbook entitlements where flexible working may be relevant.
33.7 When advertising any job, employing organisations will need to consider how they promote the right to request flexibility from day one and the availability of flexible working options.

33.8 To support a positive culture of flexible working, employers will need to consider how they support and encourage open conversations about flexible working. Examples of opportunities to talk about flexible working include at one-to-one line management / supervision meetings, team / departmental meetings, as part of wellbeing conversations, or as part of recruitment, induction, and annual appraisal processes.

33.9 Local flexible working policies developed in partnership will need to ensure equality of access to flexible working, as far as practicable, regardless of role, shift pattern, team or pay band.

**Flexible working options**

33.10 Employers and trade unions should work through local partnership arrangements to develop and communicate options for flexible working including, but not limited to, the following:

- Fixed working patterns to give certainty over hours worked and/or location
- Part-time working (any number of hours under 37.5)
- Flexi-time around core hours including staggered start and finish times
- Compressed/elongated hours to allow work to be condensed or stretched in a regular pattern or over a specific time period, such as seasonal working
- Average hours working patterns to allow a set number of hours to be averaged out over an agreed reference period e.g., annualised; bi-annualised; quarterly; monthly
- Term-time working
- Job-share
• Team self-rostering

• Homeworking for some or all of the working pattern

33.11 Employers will need to consider how these options are communicated to all staff at recruitment, induction, and in regular one-to-one meetings.

**Applications for flexible working**

33.12 Employers and trade unions should work in partnership to agree arrangements for considering applications for flexible working in a fair and consistent manner.

33.13 The standardised process should:

• cover all requests and incorporate the provisions for doing so, including the timescales set out in the statutory requirements.

• encourage applicants to identify if their request is to facilitate a reasonable adjustment for a disability as set out in the Equality Act 2010.

• promote the support that Trade Union representatives can provide to individuals in completing their application.

**Employer consideration of requests**

33.14 Employers will need to ensure that all requests are treated with due consideration, including any equality implications, and with an emphasis on exploring and mutually agreeing solutions.

33.15 Local partnerships should agree an appropriate policy process and supportive guidance for line managers which sets out how flexible working requests are managed.

33.16 Local policy processes should include:
• An initial exploratory stage with the employee to look at all the options for reaching a mutually agreeable outcome

• Where – following full exploration – requests have not been agreed, an escalation stage to see if there are any further options beyond the immediate team within the organisation that could be mutually agreed

• A final stage which

• for agreed solutions will confirm and document with the employee agreed implementation arrangements to include timeframe and duration or permanence of the change and any review dates if applicable

• for requests that have not been agreed will provide objectively justified and specific written reasons, including alternatives considered, together with details of the appeals process

All policies should be supported by:

• A central means for logging and monitoring requests for flexible working.

• Appropriate training, clear supporting materials and ready access to advice for line managers.

Flexible working appeals

33.17 Employers and trade unions should work in partnership to agree arrangements for a standard appeal process which is accessible to all staff. Employees have the right to be represented by a trade union representative in the appeal meeting.

33.18 Considerations for those hearing appeals would include:

• whether the local process had been appropriately followed

• whether all appropriate options had been fully considered
33.19 Policies and processes agreed to support flexible working should be subject to an Equality Impact Assessment.

33.20 Organisations should ensure that data relating to applications for flexible working and outcomes of decisions are recorded and regularly reported through the usual joint partnership and governance structures. This information should be included in an organisation’s published annual statutory public sector duty reports. The published information should demonstrate outcomes for flexible working applications disaggregated by each protected characteristic of the Equality Act 2010. In addition, organisations should consider reporting outcomes by occupational group and also by department.

33.21 The results should be used for regular joint review and revision where necessary of policies and procedures to ensure continuing effectiveness and equity of access.

33.22 Over time, organisations should also assess the data on flexible working to identify any unintended impact of flexible working on career development and progression.

**Supporting Carers**

33.23 All NHS employers must have a carer’s policy to address the needs of people with caring responsibilities and to meet the requirements of the ‘right to request’ flexible working legislation for carers of children and dependant adults (see Employment Relations Act for definition of ‘carer’). This policy should emphasise the benefits of flexible working arrangements, balancing work and personal life and employment breaks (Section 34).

33.24 A carer’s policy will cover both child and dependant care.

33.25 Childcare covers a range of care choices for children from birth up to age 14 years and a child with disabilities up to the age of 18 years.

33.26 Dependant care covers a range of options to meet the needs of dependant adults including the needs of dependant young people over the age of 14, where an employee is involved in substantial and regular
care sufficient for them to seek a change in their permanent contract of employment.

33.27 Dependant care should also cover (but not be restricted to) care of older relatives, a civil partner, spouse, or a partner, those with a disability who may require hospital or care appointments/assessments and such related matters.

33.28 The policy should be drawn up jointly between employers and local staff side representatives. This should cover:

- the needs of those with caring responsibilities relative to matters such as place of work, working patterns (including shift patterns) and hours worked;

- support for those with caring responsibilities particularly related to specific difficulties in recruiting and retaining people in certain job categories;

- equality of access to care and affordability, respecting the diversity of personal domestic circumstances;

- guidelines on eligibility;

- how the policy relates to other sections in this part, in particular those covering leave and flexible working arrangements;

- the range of options open to carers, i.e. crèche facilities, childminders, workplace nurseries, allowances, school and holiday play schemes, term-time contracts, home working, annualised hours, compressed hours, and other options as outlined in flexible working arrangements. The policy should be clear as to why certain options are available;

- partnership options with other employers and trades unions;

- allocation of senior management responsibility for the operation and monitoring of the policy.

33.29 Where a decision is taken not to offer particular forms of support, the policy should indicate where other arrangements are available to help people with caring responsibilities, and what alternative ways of working
exist. In addition, employees have the right to appeal against the decision.

33.30 Applications and outcomes should be monitored annually, in partnership with local staff representatives.

33.31 Monitoring information should be analysed and used to review and revise policies and procedures to ensure their continuing effectiveness.

33.32 Applications and outcomes, from both employer and employees, should be recorded and kept for a minimum of one year.

**Other forms of leave**

33.33 When developing local arrangements for other forms of leave they are based on the principles of equity of access and communication, they should be wide ranging, facilitative and ensure no detriment for pay progression.

**Parental leave**

33.34 This should be a separate provision from either maternity or maternity support (paternity) leave, adoption leave (see Section 15), and Shared Parental Leave (SPL), and should provide a non-transferable individual right to at least 18 weeks’ leave. Leave is normally unpaid, but may be paid by local agreement.

33.35 Parental leave should be applicable to any employee in the NHS who has nominated caring responsibility for a child under the age of 18.

33.36 Leave arrangements need to be as flexible as possible, so that the leave may be taken in a variety of ways, by local agreement. Parental leave can be added to periods of maternity support (paternity) leave, maternity leave, adoption leave, and Shared Parental Leave.

33.37 Notice periods should not be unnecessarily lengthy and should reflect the period of leave required. Employers should only postpone leave in exceptional circumstances and give written reasons. Employees may
also postpone or cancel leave that has been booked with local agreement.

33.38 During parental leave the employee retains all of his/her contractual rights, except remuneration and should return to the same job after it. Pension rights and contributions shall be dealt with in accordance with NHS Superannuation Regulations. Periods of parental leave should be regarded as continuous service.

33.39 It is good practice for employers to maintain contact (within agreed protocols) with employees while they are on parental leave.

**Shared Parental Leave**

33.40 Information on shared parental leave in the NHS can be found at Section 15.

33.41 Staff not eligible for occupational shared parental pay may be entitled to statutory pay during shared parental leave. To qualify for statutory pay the employee and their partner must first meet certain qualifying conditions as described in the relevant legislation. Details of the qualifying conditions can be found on www.gov.uk.

**Leave/time off for domestic reasons, civic/public duties**

33.42 This form of leave should cover a range of needs as described at the beginning of this section, from domestic emergencies through to bereavement/compassionate leave (see below).

33.43 These provisions should cover all employees.

33.44 Payment may be made by local agreement, but the expectation is that relatively short periods of leave for emergencies will be paid.

33.45 If the need for time off continues, other options may be considered, such as a career break.
33.46 Applicants for the above forms of leave should be entitled to a written explanation if the application is declined.

33.47 Appeals against decisions to decline an application for leave should be made through the grievance procedure.

Bereavement/compassionate leave

33.48 Bereavement/compassionate leave is leave that is granted to an employee if they experience the bereavement of a dependant. Also see Section 23.

33.49 Employees have a statutory right from day one of their employment to bereavement/compassionate leave.

33.50 Policies developed in partnership with local staff side representatives should entitle employees to paid bereavement/compassionate leave including for funeral/memorial services taking into account all religious or belief obligations. The policy should be used in conjunction with other relevant policies for example sickness absence and flexible working. See section 15 regarding statutory legislation for employees who suffer a stillbirth after 24 weeks.

Monitoring and review

33.51 Employers will need to ensure that their leave policies and procedures regarding balancing work and personal life operate fairly and transparently and do not advantage any group of staff over another.

33.52 All applications and outcomes should be recorded, and records should cover all information necessary to ensure that there is equitable access to leave provisions. Each leave provision, including applications for and decisions about, should be reviewed annually by employers in partnership with local staff representatives.
used to review and revise policies and procedures to ensure their continuing effectiveness and equity of access.

Section 33: Balancing work and personal life (Scotland)

General

33.1 A positive work/life balance benefits both NHS employees through improved health and wellbeing, and employers as staff are more productive and satisfied at work. Employers should have a strategic response to this issue and any policies supporting work/life balance should be agreed in partnership and should seek to balance the requirements of delivering a first-class service with the needs of employees.

33.2 Key to achieving work life balance is the provision and availability of flexible working opportunities. Flexible working can be an effective means of supporting staff as part of a wider commitment by the NHS to improve the quality of working life. It also supports the retention of existing staff including those returning to work after maternity leave.

33.3 In addition NHS employers should provide employees with access to leave arrangements which recognise the additional personal commitments staff may have. This form of leave should cover a wide range of needs including, but not limited to, parental responsibilities, carer’s leave, time off for dependants, personal and family reasons, civic/public duties, domestic crisis/emergencies e.g. fire/flooding, being the victim of crime (including hate crime) and bereavement. It should take into account all religious or belief obligations and associated activities. All forms of leave should have regard to legal requirements and the need to ensure equity of access across all protected characteristics.
33.4 All NHS employees have the ‘right to request’ flexible working. Policies should emphasise the benefits of flexible working arrangements, balancing work and personal life and employment breaks (Section 34).

33.5 In considering the provisions of this section employers should also have regard to the provisions in Sections 2 (England and Wales) or Section 2 (Scotland and Northern Ireland), Maintaining round the clock services and Annex 29: Principles for harmonised on-call arrangements.

33.6 Employers are required to consider flexible working options for all staff in the workplace, for example:

- staff with a disability and staff with health conditions;
- staff returning to work following maternity/paternity leave, parental leave, adoption leave or Shared Parental Leave;
- staff in need of temporary changes to their employment arrangements, for example, following a domestic crisis, bereavement or sickness absence.
- staff with caring responsibilities

33.7 The UK population is ageing and the number of people living with long term conditions is increasing. NHS employers are likely to see the number of employees requesting to work flexibly grow as its own workforce ages and these employees are supported to stay in work.

33.8 New working arrangements should only be introduced by mutual agreement, whether sought by the employee or the employer.

33.9 Policies for flexible working should be made clear to all employees. Flexible working arrangements should be available to all employees. All jobs should be considered for flexible working; if this is not possible the employer must provide written, objectively justifiable reasons for this and give a clear, demonstrable operational reason why this is not practicable. Employees have a right to appeal the decision.

33.10 Employers should develop policies on flexible working which, as far as is practicable, should include:
• part-time working, where a person works to a pattern and number of hours by mutual agreement;

• job sharing, where two or more people share the responsibilities of one or more fulltime job(s), dividing the hours, duties and pay between them;

• flexi-time, where employees can choose their own start and finish time around fixed core hours;

• annual hours contracts, where people work a specific number of hours each year, with the hours being unevenly distributed throughout the year.

• flexible rostering, using periods of work of differing lengths within an agreed overall period;

• compressed hours, where employees work their total number of agreed hours over fewer working days for example compressing a five day working week into four days

• term-time working, where people work during the school term but not during school holidays;

• school-time contracts;

• tele-working, where people work from home for all or part of their hours with a computer or telecommunication link to their organisation;

• voluntary reduced working time, where people work reduced hours by agreement at a reduced salary;

• fixed work patterns where, by agreement, days off can be irregular to enable, for example, separated parents to have access to their children and flexible rostering;

• flexible retirement depending on the pension scheme of the individual staff member.

• varieties of shift patterns that enable the service to balance its need as well as allow staff to have a work life balance.
make reference to the ACAS Code of Practice and guidance in this respect which can be found at www.acas.org.uk.

33:12 All people with flexible working arrangements should have access to standard terms and conditions of employment, on an equal or pro-rata basis, unless different treatment can be justified for operational reasons. Working hours should be compliant with the Working Time Directive (WTD).

Supporting carers

33:13 All NHS employers must have a carer’s policy to address the needs of people with caring responsibilities and to meet the requirements of the ‘right to request’ flexible working legislation for carers of children and dependant adults (see Employment Relations Act for definition of ‘carer’). This policy should emphasise the benefits of flexible working arrangements, balancing work and personal life and employment breaks (Section 34)

33:14 A carer’s policy will cover both child and dependant care.

33:15 Childcare covers a range of care choices for children from birth up to age 14 years and a child with disabilities up to the age of 18 years.

33:16 Dependant care covers a range of options to meet the needs of dependant adults including the needs of dependant young people over the age of 14, where an employee is involved in substantial and regular care sufficient for them to seek a change in their permanent contract of employment.

33:17 Dependant care should also cover (but not be restricted to) care of older relatives, a civil partner, spouse, or a partner, those with a disability who may require hospital or care appointments/assessments and such related matters.

33:18 The policy should be drawn up jointly between employers and local staff side representatives. This should cover:
worked;

- support for those with caring responsibilities particularly related to specific difficulties in recruiting and retaining people in certain job categories;

- equality of access to care and affordability, respecting the diversity of personal domestic circumstances;

- guidelines on eligibility;

- how the policy relates to other sections in this part, in particular those covering leave and flexible working arrangements;

- the range of options open to carers, i.e. crèche facilities, childminders, workplace nurseries, allowances, school and holiday play schemes, term-time contracts, home working, annualised hours, compressed hours, and other options as outlined in flexible working arrangements. The policy should be clear as to why certain options are available;

- partnership options with other employers and trades unions;

- allocation of senior management responsibility for the operation and monitoring of the policy.

33.19 Where a decision is taken not to offer particular forms of support, the policy should indicate where other arrangements are available to help people with caring responsibilities, and what alternative ways of working exist. In addition, employees have the right to appeal against the decision.

33.20 Applications and outcomes should be monitored annually, in partnership with local staff representatives.

33.21 Monitoring information should be analysed and used to review and revise policies and procedures to ensure their continuing effectiveness.

33.22 Applications and outcomes, from both employer and employees, should be recorded and kept for a minimum of one year.
33.23 When developing local arrangements for other forms of leave they are based on the principles of equity of access and communication, they should be wide ranging, facilitative and ensure no detriment for pay progression.

**Parental leave**

33.24 This should be a separate provision from either maternity or maternity support (paternity) leave, adoption leave (see section 15), and Shared Parental Leave (SPL), and should provide a non-transferable individual right to at least 18 weeks’ leave. Leave is normally unpaid, but may be paid by local agreement.

33.25 Parental leave should be applicable to any employee in the NHS who has nominated caring responsibility for a child under the age of 18.

33.26 Leave arrangements need to be as flexible as possible, so that the leave may be taken in a variety of ways, by local agreement. Parental leave can be added to periods of maternity support (paternity) leave, maternity leave, adoption leave, and Shared Parental Leave.

33.27 Notice periods should not be unnecessarily lengthy and should reflect the period of leave required. Employers should only postpone leave in exceptional circumstances and give written reasons. Employees may also postpone or cancel leave that has been booked with local agreement.

33.28 During parental leave the employee retains all of his/her contractual rights, except remuneration and should return to the same job after it. Pension rights and contributions shall be dealt with in accordance with NHS Superannuation Regulations. Periods of parental leave should be regarded as continuous service.

33.29 It is good practice for employers to maintain contact (within agreed protocols) with employees while they are on parental leave.
33.30 Information on shared parental leave in the NHS can be found at Section 15.

33.31 Staff not eligible for occupational shared parental pay may be entitled to statutory pay during shared parental leave. To qualify for statutory pay the employee and their partner must first meet certain qualifying conditions as described in the relevant legislation. Details of the qualifying conditions can be found on the www.gov.uk.

**Leave/time off for domestic reasons, civic/public duties**

33.32 This form of leave should cover a range of needs as described at the beginning of this section, from domestic emergencies through to bereavement/compassionate leave (see below).

33.34 These provisions should cover all employees.

33.35 Payment may be made by local agreement, but the expectation is that relatively short periods of leave for emergencies will be paid.

33.36 If the need for time off continues, other options may be considered, such as a career break.

33.37 Applicants for the above forms of leave should be entitled to a written explanation if the application is declined.

33.38 Appeals against decisions to decline an application for leave should be made through the grievance procedure.

**Bereavement/compassionate leave**

33.39 Bereavement/compassionate leave is leave that is granted to an employee if they experience the bereavement of a dependant. Also see Section 23.

33.40 Employees have a statutory right from day one of their employment to bereavement/compassionate leave.
33.41 Policies developed in partnership with local staff side representatives should entitle employees to paid bereavement/compassionate leave including for funeral/memorial services taking into account all religious or belief obligations. The policy should be used in conjunction with other relevant policies for example sickness absence and flexible working. See section 15 regarding statutory legislation for employees who suffer a stillbirth after 24 weeks.

Monitoring and review

33.42 Employers will need to ensure that their leave policies and procedures regarding balancing work and personal life operate fairly and transparently and do not advantage any group of staff over another.

33.43 All applications and outcomes should be recorded, and records should cover all information necessary to ensure that there is equitable access to leave provisions. Each leave provision, including applications for and decisions about, should be reviewed annually by employers in partnership with local staff representatives.

33.44 Applications and outcomes should be recorded and monitored in partnership with local staff side representatives, and data analysed and used to review and revise policies and procedures to ensure their continuing effectiveness and equity of access.

Section 34: Employment break scheme

Employment break scheme

34.1 NHS employers should provide all staff with access to an unpaid employment break scheme.
34.2 The scheme should be agreed between employers and local staff representatives.

34.3 The scheme should be viewed with other sections in this handbook, particularly those relating to flexible working, balancing work and personal life and provisions for carers, as part of the commitment to arrangements which enable employees to balance paid work with their other commitments and responsibilities.

34.4 The scheme should also enable employers to attract and retain the experience of staff, consistent with the NHS commitment to the provision of high quality healthcare.

34.5 The scheme should provide for people to take a longer period away from work than that provided for by the parental leave and other leave arrangements.

**Scope**

34.6 The scheme should explicitly cover the main reasons for which employment breaks can be used, including but not limited to childcare, eldercare, care for another dependant, training, study leave or work abroad. It should also indicate that other reasons will be considered on their merits.

34.7 People on employment breaks will not normally be allowed to take up paid employment with another employer, except where, for example, work overseas or charitable work could broaden experience. In such circumstances written authority from the employer would be necessary.

**Eligibility**

34.8 The employment break scheme should normally be open to all employees who have a minimum of 12 months of service.
Length of break

3410 The maximum length of break should be five years.

3411 It should be possible to take breaks, either as a single period or as more than one period.

3412 The minimum length of break should be three months.

3413 The length of any break should balance the needs of the applicant with the needs of the service.

3414 The scheme should have provision for breaks to be extended with appropriate notice, or for early return from breaks.

3415 All breaks should be subject to an agreement between the employer and applicant before the break begins (see also separate provisions in Section 12). The agreement should cover:

- the effect of the break on various entitlements related to length of service;
- a guarantee that, if the applicant returns to work within one year, the same job will be available, as far as is reasonably practicable;
- if the break is longer than one year, the applicant may return to as similar a job as possible;
- return to work at the equivalent salary level, reflecting increases awarded during the break;
- the notice period required before the return to work should be two months if the break is less than a year and six months if the break is more than a year;
- arrangements for keeping in touch during the break;
- requirements on the applicant to keep up to date with their relevant professional registration needs, including attendance at specified training
• training arrangements for re-induction to work;

• any other conditions required either by the employer or the applicant;

• NHS pension arrangements during the break. Further information for Scheme members in England and Wales can be obtained from the NHS Pensions website at www.nhsbsa.nhs.uk/Pensions. Members in Northern Ireland should refer to the HSC Pension Service website www.hscpensions.hscni.net. Members in Scotland should refer to the Scottish Public Pensions Agency circular 2009/13 which can be found on their website www.sppa.gov.uk

Return to work

34.16 Applicants should not have to resign to take an employment break, although there will be a change to the contract of employment.

34.17 The period of the break should count toward continuous employment for statutory purposes.

34.18 Other provisions depending upon length of service, i.e. contractual redundancy payments, leave entitlements etc, should be suspended for the period of the break (see also separate provisions in Section 12).

Appeals

34.19 Applicants should be entitled to a written reason for the refusal of any application.

34.20 Applicants may resort to the grievance procedure if a request for a break is refused.

Monitoring and review
34.22 The operation of the scheme should be monitored annually by employers, in partnership with local staff representatives. This will include consideration of diversity data.

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**Section 35: Unallocated**

Unallocated

Unallocated

Pay circular (AforC) 1/2019: amendment number 40

**Section 36: Unallocated**

Unallocated

Unallocated

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**Sections: 37 to 39 Unallocated**

Unallocated

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