East Suffolk and North Essex NHS Foundation Trust

Family Leave Policy

Version 3.0

Approved by	SPF and EMC
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Implementation Date	18 June 2025
Next Review Date	17 June 2028
Accountable Director	Director of People and Organisational Development
Policy Author	Head of Employee Relations
Division and Department	Employee Relations, HR, Corporate
Keywords/terms	maternity, adoption, paternity, parental and fertility treatment.
Supersedes	Family Leave Policy v2.0

Summary of Key Changes since Last Approved Version:

Information regarding baby loss and neonatal leave added to the policy and supporting toolkit.

Policy Summary

Summary & Aim

To advise and inform trust employees of the arrangements regarding leave for maternity, adoption, paternity, parental and fertility treatment.

Applicable to:

All Trust Staff

Training:

Toolkit and advice from employee relations team

Contents

SECTION 1 – INTRODUCTION

1.1 Policy Statement and Rationale

East Suffolk and North Essex NHS Foundation Trust is committed to ensuring that all staff are treated fairly and equitably. This policy covers all aspects of maternity, adoption/ surrogacy paternity and parental leave, including fertility leave.

The overall objective is to ensure that there is a hospital-wide approach to the management of all aspects of family leave, which is communicated to and available to all staff.

This Policy and associated toolkits are intended to give the employee relevant information and is not an exhaustive account of all the regulations. Reference can be made where necessary to Section 15 and 35 of the Agenda for Change Terms and Conditions of Service handbook on Maternity, Paternity, Adoption, Parental and related leave and includes maternity provisions contained in the Employment Rights Act 1996 as amended by the Employment Relations Act 1999 and the Employment Act 2002. For medical staff reference can be made where necessary to the relevant national terms and conditions. Reference can also be made to the Health & Safety Executive (HSE) Pregnancy guide.

1.2 Background Information

This Policy incorporates the Paternity Leave regulations of April 2011, that enable mothers of babies due on or after 3 April 2011 to transfer up to six months of their maternity leave to the baby's father or the mother's partner when they return to work.

The Policy also incorporates the new Shared Parental Leave of April 2015 which gives working parents more choice in how they care for their child in the first year after the child's birth.

Maternity/Adoption/Surrogacy leave is the right to time off work to have the employees baby/baby placed with the employee and the right to return to the employee's post, or an alternative post, on no less favourable conditions.

The employee's entitlement to maternity provision will vary according to the employee's length of service within Trust and the National Health Service. The employee's personal decision of whether to return to work or not after maternity leave will also affect the employee's benefits.

Employees wishing to take time off for adoption purposes, where the child is known to them, or employees who are the Intended Parent through a surrogacy arrangement should refer to the Agenda for Change Handbook, Section 15, and paragraph 15.

Employees who are starting a family through a legal surrogacy arrangement will be provided with the equivalent entitlements to those which apply to adoptive parents, on the proviso that they can provide the required documentation, see Section 1.12 of the Family Leave toolkit for further information.

1.3 Definitions

Ordinary Maternity / Adoption Leave (OML/OAL)	The entitlement to a period of 26 weeks leave regardless of how long an employee has worked for the NHS. This will be unpaid unless an employee qualifies for Statutory Maternity Pay or Maternity allowance.
Additional Maternity / Adoption Leave *(*AML/AAL*)*	The entitlement to a further period of up to 26 weeks unpaid leave regardless of how long an employee has worked for the Trust.
NI	National Insurance contributions
Statutory Maternity / Adoption Pay (SMP/SAP)	The minimum level of Maternity/Adoption Pay that an employee is entitled to through State provision if an employee has 26 weeks continuous with this Trust by the 15th week before their EWC and paid sufficient National Insurance (NI) Contributions.
Statutory Maternity / Adoption Allowance (SMA/SAA)	Allowance paid by Department of Work and Pensions to those employees, who do not qualify for Statutory Maternity Pay. Eligibility is determined by the above Government Departments.
Occupational Maternity / Adoption Pay (OMP/OMA)	Based on eligibility. Maternity/Adoption Pay, which is payable by your Employer.
Expected week of confinement (EWC)	The week in which the baby is due to be born.
Qualifying Work (QW)	Qualifying week: 15th week before the EWC.
MatB1 Form	The certificate provided by the employee's GP or Midwife, anticipating the potential date of the birth of their baby. Usually issued to employees between 24-26 weeks into pregnancy.
KIT Days	The employee's entitlement to Keep in Touch days.
DWP	Department for Work and Pensions
Ordinary Paternity Leave (OPL)	The entitlement of a father, or mother's partner, to take 2 weeks leave up to 52 weeks from the birth of the child.
Additional Paternity Leave (APL)	The entitlement of a father, or mother's partner, to take a further period of between 2 to 26 weeks leave, provided the mother has returned to work with maternity leave remaining.
Shared Parental Leave	The new system to enable mothers to share 50 weeks of their 52 weeks maternity leave and 37 weeks of their 39 weeks statutory maternity pay with their partner when they opt into it.

SECTION 2 – DUTIES AND RESPONSIBILITIES

2.1 The Director of Human Resources has overall responsibility for this policy. The Deputy Director of People and Organisational Development is the lead officer and is responsible for monitoring compliance and effectiveness. The Head of Employee Relations is the Responsible Officer for this policy.

2.2 Directors and managers at all levels are responsible for managing this policy for all staff under their direct line management.

2.3 Other Responsibilities

2.3.1 HR are responsible for providing advice to managers and staff on the process and consistent Trust-wide application.

2.3.2 The Workforce team are responsible for providing advice to managers and staff on the relevant pay and benefits and on the process and consistent Trust-wide application.

2.3.3 Occupational Health and Wellbeing

- Provide confidential support and guidance to employees regarding any health issues
- Signpost employees to the full range of services available for support and assistance.
- Provide written advice to managers regarding the employee's fitness to work.
- Provide advice to managers on any reasonable adjustments to the workplace or an employee's job that may support them in attending regularly for work e.g. if the employee has pregnancy related health issues

2.3.4 Trade Union representatives are responsible for providing the necessary support to their members of staff concerned including attending relevant meetings. They should also have a knowledge and understanding of this Policy.

SECTION 3 – FAMILY LEAVE GUIDANCE

3.1 Associated policies

- Absence Policy
- Flexible Working Policy
- Leave Policy (annual leave and special leave)
- New and Expectant Mothers Risk Assessment Policy
- Pay Progression Policy

3.2 Associated toolkits

Family leave toolkit which includes:

- Maternity and Adoption Leave
- Paternity (Maternity Support) Leave
- Parental Leave
- Fertility Treatment Leave
- Shared Parental Leave
- Baby loss (miscarriage) leave
- Neonatal Care Leave and Pay

3.3 Equality Impact Assessment

An Equality Impact Assessment has been undertaken and this document complies with current legislation.

SECTION 4 – TRAINING AND EDUCATION

Education / Training Need	Staff Group	Method of Training / education	Responsibility for Training	Timescale to complete
Relating to compliance with this policy	All staff	Human Resources and Senior Managers across the Trust will be responsible for training and education in the event that an individual need arises.	Human Resources and Senior Managers	On going

SECTION 5 – DEVELOPMENT AND IMPLEMENTATION INCLUDING DISSEMINATION

5.1 This policy has been written in accordance with the terms of the Development and Management of Trust wide Procedural Documents Policy and has involved the following who will lead on its implementation within the Trust:

- Director of Human Resources
- Deputy Director of Human Resources
- Head of Employee Relations

5.2 Advice was sought from the Local Counter Fraud Specialist.

5.3 This document was submitted to the Trust's Staff Partnership Forum, Policy Sub Group and Joint Union Committee

5.4 The document was submitted to the Director of Human Resources and Staff Partnership Forum for approval prior to submission to the Operational Delivery Group for ratification.

5.5 Once ratified, this document will be made available on the Trust's Intranet. Those managers mentioned in sections 2 and 4.1 will champion its implementation and advise staff accordingly.

SECTION 6 – MONITORING COMPLIANCE AND EFFECTIVENESS

The process for monitoring compliance with the effectiveness of this policy is as follows:

Aspect being monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
Monitoring compliance with and effectiveness of this document	Case review and feedback from Trust staff involved in managing the policy and procedures. Remedial action for non-compliance with the policy and procedures will be the responsibility of the Division/Line Managers.	By the Deputy Director of People and Organisational Development	Employee Relations Team	Monitored annually

6.2 This document will be reviewed by the Director of People and Organisational Development (or nominated deputy) and the Policy Sub Group of the Staff Partnership Forum three years from the date of ratification, unless any change is required due to changes in legislation or case law or any other reason.

SECTION 7 – CONTROL OF DOCUMENT INCLUDING ARCHIVING ARRANGEMENTS

7.1 Once ratified by the Executive Management Committee, the Responsible Officer will forward this document to the Information Governance Department for a document index registration number to be assigned and for the document to be recorded onto the central hospital master index and central document library of current documentation.

7.2 In order that this document adheres to the Hospital's Records Management Policy, the Information Governance Department will:

- Ensure that the most up-to-date version of this document is stored on the documentation library.
- Archive previous versions of this document.
- Retain previous versions of this guideline for a period of time in accordance with the NHS Records Retention and Disposal Schedule.

SECTION 8 – SUPPORTING COMPLIANCE AND REFERENCES

8.1 This document will support the Trust's compliance with its legal obligations as set out in the:

- Employment Act 2002
- Maternity and Parental Leave Regulations 1999
- Maternity and Parental Leave (Amendment) Regulations 2001, updated April 2015
- Civil Partnerships Act 2004
- Employment Rights Act 1996
- Equality Act 2010
- Health and Safety at Work Act (1974)

DOCUMENT CONTROL

Archive date i.e. date guideline no longer in force	*To be inserted by Information Governance Department when this document is superseded. This will be the same date as the implementation date of the new document.*
Date document to be destroyed i.e. 25 years after archive date	*To be inserted Information Governance Department when this document superseded*

Previous published version history:

Registered document number	Version Number	Date of Issue	Date of archive
3118	**1.0**	29 Sept 2020	13 July 2022
3718	**2.0**	13 July 2022	18 June 2025
3718	**3.0**	18 June 2025	

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Trust documents may be disclosed as required by the Freedom of Information Act 2000.

Sharing this document with third parties

As part of the Trust's networking arrangements and sharing best practice, the Trust supports the practice of sharing documents with other organisations. However, where the Trust holds copyright to a document, the document or part thereof so shared must not be used by any third party for its own commercial gain unless this Trust has given its express permission and is entitled to charge a fee.

Release of any strategy, policy, procedure, guideline or other such material must be agreed with the Lead Director or Deputy/Associate Director (for Trust-wide issues) or Business Unit/ Departmental Management Team (for Business Unit or Departmental specific issues). Any requests to share this document must be directed in the first instance to *the Responsible Officer*.

For further advice see the Development and Management of Trust wide Procedural Documents Policy

Full Equality Analysis (Impact Assessment) Template

Please complete Step 1 below;
If an Equality Analysis is found to be relevant in Step 1, please go on to complete Steps 2 - 9 below

Please ensure that the MANDATORY FIELD in STEP 1 is completed
If an Equality Analysis is found to be required,
Please also ensure that the MANDATORY FIELD in STEP 7 is completed
For support with undertaking this Equality Analysis please contact Head of Equality Diversity and Inclusion at: EDI.Team@esneft.nhs.uk

Step 1: Screening & Establishing Relevance

Public Sector Equality Duty (PSED)
Under the Equality Act 2010, all policies, decision, projects, proposals should be assessed for their relevance to equality. The public sector equality duty (PSED) requires that when exercising its functions a public body must have due regard to the need to:

- Eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act;
- Advance equality of opportunity between people who share a protected characteristics and those who do not;
- Foster good relations between people who share a protected characteristic and those who do not.

Protected Characteristics
If the work being undertaken is going to have an effect or impact on people, i.e. patients, staff and/or the public, you need to analyse the effect on equality for all protected characteristics – namely: Age, Disability, Sex, Race, Gender Reassignment, Sexual Orientation, Religion and Belief, Pregnancy and Maternity, Marriage and Civil Partnership and any other identified groups (for example Carers, homeless people, Gypsies and Travellers, sex-workers and migrant groups).

Brief summary of the work being undertaken

To advise to advise and inform trust staff of the arrangements regarding leave for maternity, adoption, paternity and fertility treatment.

Is there a potential for this work to have an effect or impact on patients, staff and/or members of the public?

No

Is the PSED relevant to this work?

Yes

MANDATORY FIELD

Please explain how you have reached your conclusion that the work being undertaken is or isn't relevant to the PSED/affects protected characteristics:

The policy affects people's entitlement to family leave i.e. maternity, paternity

If you have concluded that an Equality Analysis is necessary, please continue the equality analysis below by following Steps 2 to 9:

Step 2: Responsibility, Development, Aims and Purpose

Which organisation, including named individual lead, holds overall responsibility for the policy / strategy / service redesign, review?

Head of Employee Relations

Who else has been involved in the development?

Employee Relations Team

Purpose and aims:
Briefly describe the overall purpose and aims of the work. For a new service, describe the rationale and need for the proposal, referring to evidence sources. For a change in service or pathway, specify exactly what will change and the rationale / evidence, including which system priority this will contribute to.

Who is intended to benefit from the implementation of this piece of work?

All trust staff

What are the key outcomes/ benefits for the groups identified above?

Access to all entitlements relating to family leave

Does it meet any statutory requirements, outcomes or targets?

Type here… Yes.

Does it contribute to the NHS Equality Delivery System (EDS2) Goals?
(Tick all that apply)

- ☐ Goal 1 – Better health outcomes
- ☐ Goal 2 – Improved patient access and experience
- ☑ Goal 3 – Representative and supported workforce
- ☐ Goal 4 – Inclusive leadership

Step 3: Protected Characteristics and the PSED – Analysis of Impact

Provide analysis of both the positive and negative impacts of the proposal against each of the protected characteristics, providing details of the evidence used.
Use both qualitative and quantitative evidence as appropriate. If the work is targeted towards a particular group or groups – provide justification e.g. women only services. Any gaps in evidence should be accounted for and included in your Action Plan (Step 8).
The following links provide the most recent population, demographic and health inequalities information to support your analysis:

Background Documents: Suffolk JSNA Essex JSNA

Age Consider and detail impact and evidence across all age groups.	None
Disability Consider and detail impact and evidence on disability (this includes physical, sensory, learning, long-term conditions and mental health).	None
Sex Consider and detail impact and evidence on both males and females.	None
Race Consider and detail impact and evidence on all ethnic groups.	None
Religion and/or Belief Consider and detail impact and evidence on people of different religions, beliefs and on people of no religion.	None
Sexual Orientation Consider and detail impact and evidence on people of different sexual orientations.	None
Gender Reassignment Consider and detail impact and evidence on transgender people.	None
Pregnancy and Maternity Consider and detail impact and evidence on work arrangements, breastfeeding etc.	The policy reinforces the entitlements for those taking any form of family leave
Marriage and Civil Partnership Consider and detail impact and evidence on employees who are married or in a civil partnership.	None

Other Excluded Groups / Multiple and social deprivation Consider and detail impact and evidence on groups that do not readily fall under the protected characteristics such as transient communities, ex-offenders, asylum seekers, sex-workers, people living in rural areas etc.	None
Public Sector Equality Duty (PSED) Provide detail on how the proposal impacts on: • Eliminating unlawful discrimination, harassment and victimisation; • Advancing equality of opportunity between people who share a protected characteristic and those who do not; • Fostering good relations between people who share a protected characteristic and those who do not.	Accessible process for all which promotes a fair and equitable process.
Duties as to Reducing Inequalities Provide detail on how the proposal impacts on: • Reducing inequalities between patients with respect to their ability to access health services; • Reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services.	No impact on patients

Step 4: Human Rights

The FREDA principles (fairness, respect, equality, dignity and autonomy) are a way in which to understand human rights and is a core element of the NHS Constitution.

You should consider and evidence how your proposal impacts on these principles and so respects human rights. For example, the principle of Autonomy informs the right to respect for private and family life and so could be about involving people in decisions made about their treatment and care. *Note*: as the Equality principle is evidenced in previous steps it is not included below.

FREDA principle:	Evidence of Impact:
Fairness	Applies to all staff and is a fair and equitable process
Respect	Applies to all staff and respects the protected characteristics of staff
Dignity	Applies to all staff and ensures all staff are treated with dignity
Autonomy	Individual needs considered

Step 5: Engagement and Involvement (Duty to involve)

How have you involved users, carers and community groups in developing this proposal?

Please give details of any research / consultation drawn on (desk reviews – including complaints, PALS, incidents, patient and community feedback, surveys etc.)	Not applicable
Also please give details of any specific discussions or consultations you have carried out to develop this proposal: For example, discussions or consultations with users, carers, protected characteristic groups and / or their representatives, other communities of interest (e.g. user groups, forums, workshops, focus groups, open days etc.)	Not applicable
How have you used this information to inform the proposal? For example, has the proposal been altered in consideration of any the information outlined above?	Not applicable

Have you involved any other partner agencies? For example, Local Authorities, Health and Well-being boards, Public Health, NHS Trusts, GP Practices, CSU or CCGs - please give details of any involvement to date or planned.	Not applicable

Step 6: Monitoring Arrangements

Please outline how equality and diversity issues will be monitored to ensure that the proposal/service does not result in a disproportionate impact on any protected group:

For example, are there contractual requirements to provide equality monitoring data on those accessing the service or making complaints?	Yearly to ensure compliance

Which committee or group will receive updates on the monitoring?

Please include details of how often reports will be presented.	HR Assurance and Employee Relations as and when legislation changes

Step 7: Decision Making

Next Step

Taking the equality analysis and the engagement into consideration, and the duties around the Public Sector Equality Duty, you should now identify what your next step will be for the proposal.

Four decision steps are available:

A. **Continue with the proposal as it is**
B. **Adjust the proposal to consider the issues identified above**
C. **Stop and remove the current proposal**
D. **Carry out further analysis of data/information prior to any final recommendations**

Please select

A.

Please give a rationale for the decision that you have chosen:

As the legislation changed we had to amend the policy.

Step 8: Action Plan

Action	What will it achieve or address?	Lead Person	Deadline

Review date:

Step 9: Sign Off

Director / Senior Responsible Officer*	Kate Read
Date signed	
Presented to <INSERT NAME> Committee	
Publication date	

***The Director / Senior Responsible Officer needs to be assured that there is sufficient information about the likely effects of the proposal in order to ensure proper consideration is given to the statutory duties.**

1) For review and support send the completed draft Equality Analysis with your document to the Head of Equality Diversity and Inclusion: **EDI.Team@esneft.nhs.uk**
2) Once reviewed make arrangements to have the EA put on the relevant Committee agenda
3) Use the Action Plan (Step 8) to record the changes you are intending to make to the document and specify a review date.