

Work-Life Balance & Special Leave Policy

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Version Control Table

Version number and issue number	Date	Author	Reason for Change	Description of Changes Made
V1.2 2015013 (Policy/Documentation Group Chair Approval)	January 2015	Jane Simkins, HR Business Partner	Updated to make provision for doctors in training to be granted special leave.	Para 6.9 amended to incorporate this change.
V2	February 2017	Clare Hammond, HR Manager	Periodic Review	Changes to entitlement on carers leave and bereavement leave
V2.1	April 2019	Clare Hammond, HR Manager	New Afc terms & conditions	Child Bereavement leave
V3	September 2021	Serena Barnes, Trainee Associate HR Advisor	New AFC terms and conditions	Flexible working request changes, Carers Passport information and changes to Career Break maximum length
V3.1	April 2024	Clare Hammond, ER Manager	New legislation & Afc terms	Revised timeframe for flexible working requests, Addition of carers leave provision

Consultation Table

This document has been developed in consultation with the groups and/or individuals in this table:

Name of Individual or group	Title	Date
Healthroster Team		April 2024
Internal stakeholders		April 2024
Operational HR		June 2024
Workforce Policy Partnership Group		June 2024
Clinical Documentation and Policy Ratification Group. (Chairs action)		June 2024

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1. Introduction

- 1.1 This document makes provision for staff who wish to alter their working arrangements to achieve a better balance between their work responsibilities and personal commitments and also sets out the circumstances in which special leave may be granted.
- 1.2 This policy has been amended in line with the Children and Families Act 2014 which extends the right to request flexible working to all employees. Before June 2014 the right applied only to the parents of children under 17 or 18 in the case of parents of disabled children or to those caring for an adult. From June 2014 any eligible employee can apply to work flexibly for any reason. Employers are under no statutory obligation to grant a request to work flexibly if it cannot be accommodated on the grounds set out in paragraph 5.3.
- 1.3 1.1 Our People Strategy ([People Strategy \(esht.nhs.uk\)](http://esht.nhs.uk)), which is based on the NHS People Plan ([NHS England » NHS People Plan](#)), prioritises a culture that supports and grows our people.

Looking after our people means creating a positive, engaging working environment and keeping colleagues safe and healthy – both physically and psychologically. It is everyone's responsibility to contribute to an inclusive culture where all colleagues feel that they are treated according to trust values and demonstrate those values in our own compassionate behaviour, to inspire each one of us to thrive and develop to our full potential.

2. Purpose

2.1 Rationale

The aim of this policy is to set out the framework for staff and managers to follow when a member of staff wishes to submit a statutory request to work flexibly or take special leave.

2.2 Principles

2.2.1 This policy places importance on fairness and equity in consideration of requests from staff for flexible working arrangements; or for special leave.

2.2.2 This policy aims to cover the majority of instances where an employee may wish to have a flexible working pattern or where an employee requires special leave. There may be instances where requests do not fit in with any of the definitions described for flexible working or special leave. In these circumstances managers should discuss requests with the Human Resources Department.

2.2.3 An employee has the right to be accompanied, if they wish, at meetings held under this policy by either a colleague who is an employee of the Trust or a full time or trade union representative.

2.3 Scope

2.3.1 These arrangements apply to all employees of the Trust with the exception of bank staff.

2.3.2 This policy does not cover arrangements for maternity, adoption, paternity or parental leave as these are set out separately in the Family Leave Guidelines.

2.3.3 This procedure does not form part of any employee's contract of employment. It may be amended at any time and the Trust may depart from it depending on the circumstances of any case.

3. Definitions

3.1 Carer:

Someone who provides unpaid care and support to a spouse, civil partner, child, parent, a person who lives with the employee (other than a tenant, lodger or boarder) or a person who reasonably relies on the employee for care to a long-term disability, health condition, frailty, mental health problem, addiction or other health and care need. If you are looking after a child, including your own child, who has special physical or mental health support needs, then you are also a carer. There are exemptions from the requirement for long-term care, for example in the case of terminal illness

3.2 Dependant:

Husband, wife, partner, child, parent, a person who lives with the employee (other than as their lodger or boarder), or any other person who would reasonably rely on the employee for assistance if they fell ill or was injured or assaulted, or who would rely on the employee to make arrangements for the provision of care in the event of illness or injury.

3.3 Flexible Working includes:

- Part-time working
- Annualised hours
- Term time working
- Job Share
- Flexi time
- Agile Working – see Agile Working Policy

These are explained in more detail in [Appendix B](#).

3.4 Immediate relative:

Husband, wife, partner, parent / in-law, child, son/daughter-in law, siblings or relatives who live at the same address as the employee.

3.5 Special Leave includes:

- Bereavement Leave
- Leave for health related reasons
- Time off for dependants
- Urgent domestic distress
- Attendance at court
- Jury Service
- Reserve or cadet forces
- Leave to attend interviews
- Public duties
- Career break

3.6 Urgent domestic distress:

Examples include household fire, flood, and burglary.

3.7 "Working days":

refers to Monday to Friday (excluding public holidays). This is relevant for the purposes of notification and sharing documentation.

4. Accountabilities and Responsibilities

4.1. Chief Executive & Directors

Chief Executive and Directors are accountable for ensuring that robust systems are in place to ensure that managers and staff comply with the arrangements set out in this procedure.

4.2. Senior Managers

4.2.1 Senior managers are responsible for ensuring that line managers within their Clinical Units / Departments adhere to this policy and as such may be required to participate in the appeals process.

4.2.2 Senior management has the discretion to grant additional paid or unpaid special leave in circumstances other than those described in this policy.

4.3. All Managers and Supervisors

4.3.1 Line managers are responsible for ensuring that this policy is adhered to and that decisions are made fairly and consistently for each employee.

4.3.2 Line managers are responsible for recording all decisions made under this policy, informing payroll as appropriate, and completing all documentation and ensuring copies are retained on the individual's staff file.

4.4. Human Resources

4.4.1 The Deputy Director of Human Resources is responsible for regularly reviewing the effectiveness of the policy and providing reports to the Trust Board as required.

4.4.2 Human Resources Business Partners and Advisers are responsible for providing advice and guidance to managers and employees on the application of this policy and for attending meetings.

4.5. Trade Unions

Employees who are trade union representatives are responsible for explaining and clarifying the provisions set out in this policy and may be asked to accompany an employee to any meetings to assist the employee in making their case.

4.6. Employees

4.6.1 Employees are responsible for ensuring they are aware of all policies and understand their responsibilities in relation to them.

4.6.2 Staff are responsible for complying with this procedure and providing evidence as required.

5. Procedures and Actions to Follow

A positive work/life balance benefits both NHS employees through improved health and wellbeing, and employers because colleagues are more productive and satisfied at work. The Trust encourages open conversations between managers and colleagues seeking flexible working options following the process as detailed in this section.

5.1 Statutory right to request to work flexibly

5.1.1 Employees have a right to request flexible working from day one of employment

5.1.2 An employee can make up to 3 requests for flexible working in a rolling 12 month period (inclusive of any agile working requests).

5.1.3 The statutory right to request flexible working includes the right for all employees to ask for changes to:

- The number of hours worked
- The times of work e.g. the days of the week worked and start/finish times
- The place of work (see Agile Working Policy)

5.1.4 Applications will be considered for the following types of flexible working which are explained more fully in [Appendix B](#)

- A change to the hours worked
- A change to the times required to work
- Part-Time Working working anything less than full time hours
- Annualised Hours - Where the period over which the employees must work is defined over a whole year
- Term time working - an employee does not work during the school holidays, but their pay is paid equally throughout the year.
- Job Share - a form of part time working where 2 people share the responsibilities for one job between them. Both staff have equal responsibility for achieving the job role and objectives
- Flexi-Time - this allows employees to decide, with their manager, when to begin and end a working day

5.2. Application process – Flexible Working

5.2.1 Applicants should be aware that the consideration and the full decision process can take up to two months and therefore applications should be submitted to their line manager at least two months before the date of the proposed change.

The following principles as laid out in this section should also be followed regarding applications to accommodate specific individual circumstances that are anticipated to be required for a limited timeframe, e.g. less than 8 weeks. In such cases Line Managers would endeavour to facilitate this process within 2 weeks.

Colleagues returning from maternity leave should also follow this application process.

Please follow the Attendance Management Procedure for applications for flexible working as a reasonable adjustment due to ill-health.

5.2.2 Applications must be in writing via the online flexible working request form provided on the extranet. The form must be completed in full, signed and dated

5.2.3 Upon receipt of the written application the line manager will consider the request against the parameters set out in paragraph 5.3. Normally the manager should arrange to discuss the application and its implications with the employee but there may be occasions where a discussion is not needed in which case the manager can accept the application and notify the employee accordingly via the online outcome form within 1 month. The employee will be issued with confirmation of a variation to contract and made aware that there is no automatic right to revert to the previous working arrangements at a later date where there is a change in the number of contracted hours.

5.2.4 Where the manager can accommodate a compromise and this offer is mutually agreeable to the line manager and the applicant, the employee will be issued with a variation to contract letter and made aware that there is no automatic right to revert to the previous working arrangements at a later date where there is a change in the number of contracted hours. There is no requirement for HR to be present.

5.2.5 Where a compromise cannot be mutually agreed, and it is necessary to discuss the application a meeting should be arranged as soon as reasonably possible by the line manager and within 1 month A professional member of HR will be present at this meeting.

5.2.6 An employee has the right to be accompanied at this meeting by either a colleague who is an employee of the Trust or a full time or trade union representative.

5.2.7. Where the manager is not able to approve the request, it may be possible following discussion to reach a compromise and offer an alternative. In such cases it may be necessary to hold further meetings whilst the employee and manager consider the options. The outcome could be one of the following options and should be confirmed in writing:

- Offer of a modified work pattern
- Offer a trial period for the proposed work pattern (to be reviewed after an agreed period)
- Offer of options beyond immediate team that could accommodate request
- Refuse the application if there is no alternative

5.3. Consideration and decision – Flexible Working

5.3.1 Requests to work flexibly must be considered objectively. The line manager will give careful consideration to the request taking into account:

The impact on service provision

Cost implications

- How the remainder of the hours / work will be covered
- Whether the change would affect the rest of the team
- Whether the change would have an effect on the employee's pay.
- Whether the change would be compliant with the Working Time Regulations

5.3.2 Refusal of requests can be for business reasons only. These are set out in the legislation and include:

- The burden of additional costs
- Inability to meet patient/customer demands
- Inability to reorganise work amongst existing staff
- Inability to recruit additional staff
- Detrimental impact on quality or performance
- Insufficiency of work during periods employee proposes to work
- Planned structural changes

5.4. Managing Flexible Working Arrangements

5.4.1 Where a line manager receives more than one application to work flexibly it is not necessary to make value judgements about the most deserving request. Each application should be considered on its own merits in line with paragraph 5.3 above.

5.4.2 If the manager is unable to approve a request because a number of other employees are already working flexibly and any further flexible working arrangements would impact adversely on service provision then the manager may review the existing flexible working arrangements and discuss with staff if different working arrangements could be considered thereby creating capacity for granting new requests.

5.4.3 All flexible working arrangements will be reviewed annually to ensure that their continuation has no adverse impact on service provision and still meets the needs of the member of staff. The manager must give 2 months' notice of any changes to enable staff to make necessary arrangements.

5.5. Applications approved – Flexible Working

5.5.1 If the request can be accommodated the manager should complete the online outcome form specifying the new working arrangements and confirming the start date.

5.5.2 The manager and applicant will receive confirmation of the agreement for their records.

5.5.3 The manager will also make arrangements to notify ESR support of the changes via a staff changes form for a change in contracted hours and notify roster support for changes to working patterns.

5.6. Applications not approved – Flexible Working

If the request is refused the decision will be confirmed in writing giving details of the business grounds on which the application was rejected, the reasons why this applies in the circumstances, alternatives considered and informing the employee of their right of appeal.

5.7. Withdrawn applications – Flexible Working

5.7.1 Applications will be deemed to have been withdrawn, if:

5.7.2 The employee formally withdraws their application in writing,

5.7.3 The employee fails to attend 2 mutually arranged meetings to discuss the application without reasonable cause.

5.7.4 The employee fails to provide the manager with the required information related to the request without reasonable cause.

5.8. Appeal process – Flexible Working

5.8.1 The employee will have the right to appeal against the decision to refuse their request to work flexibly. Appeals must be made in writing, setting out the grounds for the appeal, and addressed to the Head of Department, with a copy to the Chief People Officer, within 14 calendar days of notification of the decision to reject the application.

5.8.2 An appeal hearing will be arranged, and the Trust will make arrangements for this to take place at a mutually convenient time to both parties as soon as reasonably possible and within two months of the original application.

5.8.3 A senior manager, who has not been involved in the original decision, will hear the appeal, with support from Human Resources. They will review the process/business grounds applied by the line manager for rejecting the original application.

5.8.4 The employee may be accompanied at the appeal hearing by a workplace colleague, or trade union representative. The companion may address the hearing or ask questions but may not answer questions on the employee's behalf.

5.8.5 The employee will be notified of the outcome of the appeal in writing within 5 working days of the appeal hearing. If the appeal is upheld, the employer's letter must specify the contract variation agreed to and the date from which it is to take effect. If the appeal is dismissed, the letter must set out the grounds for the decision and contain sufficient explanation as to why those grounds apply.

5.8.6 There is no further right of appeal, and this effectively ends the formal procedure within the Trust.

5.8.7 It is important that staff feel able to request flexible working, discuss it with their manager and have their application properly considered. Whilst it may not have been possible to grant a request for flexible working in one instance, it is important to emphasise that future applications will always be considered on their own merits.

5.9. Special Leave

5.9.1. General principles

This section sets out the provisions in which staff may be granted special leave in order to help them balance their work / life responsibilities. It has been formulated to encompass provisions made under employment law, NHS Terms and Conditions of Employment, and Medical & Dental Terms and Conditions of Service. The principal aim is to enable managers to provide a response to requests for special leave that is compassionate, fair and flexible.

5.9.2 Although medical and dental staff are covered by this procedure, it should be noted that there is also a separate procedure for medical and dental staff relating to professional and other types of leave.

5.9.3 All special leave allowances are based on a full-time working week of 37.5 hours. Employees who work part-time will be entitled to the same allowance calculated, where appropriate, pro rata to the number of hours they work.

5.9.4 Applications for special leave must be made using the form in [Appendix G](#) and submitted to the line manager in advance where reasonably practicable.

5.9.5 In cases where a special leave application cannot be completed in advance e.g. emergency leave, the individual must telephone their manager to obtain permission for special leave as soon as they are aware it is required. A special leave form must then be completed and submitted immediately upon their return to work.

5.9.6 Requests for special leave should not be unreasonably refused. In some cases line managers may wish to obtain appropriate supporting information e.g. copies of hospital appointment letters. Any personal sensitive information may be redacted.

5.9.7 If an employee takes special leave without seeking permission or which has been refused, or which is subsequently found to be not genuine the disciplinary process may be invoked.

5.10. Bereavement

5.10.1 Where bereavement occurs within the employee's immediate family (e.g. husband, wife, partner, parent), a maximum of 5 days paid leave may be granted plus a day to attend the funeral. Any extension to this must be at the manager's discretion and agreed in advance where possible.

5.10.2 Employees may be permitted to take paid time off to attend the funeral of a member of the extended family, e.g. grandparents and that of a work colleague subject to the needs of the service.

5.11 Child Bereavement Leave

5.11.1 A bereaved parent is anyone who had responsibility as one of the primary carers for a child who is now deceased. This includes adoptive parents, legal guardians, individuals who are fostering to adopt, and any other parent/child relationship that the employing Trust deems to be reasonable. For example, this may include grandparents who have had caring responsibilities for a child, or instances where someone other than the biological parent is the primary carer (this could be the case where the parents of the child have separated).

5.11.2. For this agreement, there is no requirement for the child to be under 18 years of age.

5.11.3. All bereaved parents will be eligible for a minimum of two weeks of child bereavement leave; as the result of the death of more than one child, the parent is entitled to leave in respect of each child. A bereaved parent will not be required to demonstrate any eligibility criteria such as a death certificate or any other official documents in order to access bereavement leave or pay.

5.11.4 All bereaved parents will be entitled to two weeks' occupational child bereavement pay which will include any entitlement to statutory parental bereavement pay. Pay is calculated on the basis of what the individual would have received had they been at work. This will be based on the previous three months at work.

5.11.5. Where both parents of a deceased child work in the Trust, the entitlements in this section will apply to both members of staff.

5.11.6. Parents who experience a still birth from the 24th week of pregnancy will be eligible for the provisions set out in the Family Leave Policy.

Bereavement leave and pay will be available where staff were to become parents under surrogacy arrangements.

5.11.7 Bereaved parents do not have to take the two weeks of leave in a continuous block. The employee should agree with their line manager the leave they wish to take. Taking child bereavement leave is an individual choice, it is not compulsory for the employee to take child bereavement leave.

5.11.8. Bereaved parents may request to take child bereavement leave at any point up to 56 weeks following the death of the child. Should the parent wish to take child bereavement leave immediately following the death of a child they shall be able to do so upon informing their line manager that they will be absent from work for this purpose. Should the parent wish to take child bereavement leave at another time, after the initial period following the death, they should give their line manager reasonable notice of their intention to take the leave at this time.

5.12. Leave for health-related reasons

5.12.1 Staff are expected to make medical, general practitioner and dental appointments in their own time where possible or at the beginning/end of a shift in order to limit the disruption to the service.

5.12.2 The manager has the authority to refuse time off for routine appointments. If urgent, the employee can make a case stating why it is impossible to have an appointment outside of work time. Managers will then have the discretion to grant appropriate time off and to request that staff make up the lost time at a later date.

5.12.3 Paid leave should be considered and may be granted where an employee has a hospital, antenatal or specialist appointment, including those held within primary care settings e.g. Diabetes, Epilepsy clinics.

5.13. Leave for IVF treatment

5.13.1 Staff undergoing IVF treatment may be granted paid leave for two treatment cycles as follows for each cycle:

- Two days to cover initial and review consultation appointments
- Five days for IVF treatment

5.13.2 In addition it should be noted that a medical certificate for one week may be given following the day case egg collection surgical procedure if deemed necessary by the medical practitioner.

5.13.3 Staff with partners who are undergoing IVF treatment should be granted paid leave in accordance with the first paragraph above.

5.14. Time off for dependants and urgent domestic distress

5.14.1 Managers will have the discretion to grant up to 3 days total paid leave in any rolling twelve-month period for the purposes of the emergency care for dependants or dealing with incidents of urgent domestic distress. If further time off is necessary then staff will be able to utilise annual leave or TOIL; should these be exhausted managers may authorise staff to take a reasonable amount of unpaid time off, subject to the needs of the service. Examples would include

- To provide assistance when a dependant falls ill, gives birth or is injured or assaulted
- To make longer term care arrangements for an ill or injured dependant
- To deal with the death of a dependant

- To deal with an unexpected disruption or breakdown of care arrangements of a dependant
- To deal with an unexpected incident involving an employee's child during school hours
- Fire, flooding or burglary at the employee's home

N.B Time off for dependants cannot be used for an inset day at a child's school as these are known in advance to enable employees to organise childcare arrangements.

5.14.2 The staff member must inform their manager, as soon as is reasonably practicable, of the reason for the absence and how long they expect to be absent.

5.15 Carers Leave and Passport

5.15.1 Carer's can request up to 5 working days of unpaid leave in a rolling 12-month period based on a full-time working week of 37.5 hours. Employees who work part-time will be entitled to the same allowance calculated, where appropriate, pro rata to the number of hours they work.

Carer's leave can be used for providing care or making arrangement for the provision of care for a dependant who requires long-term care. A dependant can be a spouse, civil partner, child, parent, a person who lives with the employee (other than a tenant, lodger or boarder) or a person who reasonably relies on the employee for care.

Carer's leave and can be taken either in individual days or half days, up to a block of one week.

5.12.2. Carer's leave is available from day one of employment and employees can self-certify their eligibility, colleagues will not be required to provide evidence or explain how the leave will be used. Any false application for carer's leave may result in action under the Trust's Disciplinary Procedure.

5.15.3 Where staff should give a written for a request for carer's leave with no less than 3 days for a half day, **or** if more than 1 day's leave twice as long as the leave requested E.g. 2 day's leave would need 4 days' notice.

The line manager should record the leave on healthroster as carer's leave – unpaid.

The line manager may postpone a period of carer's leave where the service would be unduly disrupted if the employee were to take the leave during the period requested.

In such a case, the line manager will give notice in writing of the postponement stating the reason for it and specifying suggested dates for the employee to take carer's leave. Such notice will be given no more than seven days after the employee's notice was given to the line manager and prior to the requested start date of the leave.

For time off to deal with an emergency please refer to section 5.14.

5.15.4 A Carer's passport will identify an employee as a carer and can help employees frame discussions with their line manager, which might include conversations around flexible working and other support available. This conversation involves balancing the needs of the individual with the needs of the service in line with current policies.

5.15.5 If an employee changes manager or department, the Carers Passport provides a straightforward way to carry that flexibility and support into their new role but ensuring the balance of individual needs and service needs is still met.

5.15.6 The Carers Passport will be reviewed periodically and if there is a change in circumstance.

5.15.7 Further details of the Carers Passport is set out in Appendix I ([Staff who are carers \(Employee support\) - tasks and guides \(esht.nhs.uk\)](#))

5.16. Attendance at a court or tribunal as a witness

Paid leave may be granted for attendance at court or a tribunal as a witness where attendance is with the consent of the Trust or a legal obligation. Refer to the “Supporting Staff involved in incidents, complaints or claims” policy

5.17. Jury Service

5.17.1 Staff summoned for jury service are legally required to attend court and will be granted leave with pay for a maximum of two weeks. Staff should inform the court that they will not be available for cases which are likely to extend beyond two weeks.

5.17.2 Staff are expected to return to work if attendance does not extend to the full normal working day.

5.18. Reserve or cadet forces

Staff who are members of the Reserve or Cadet Forces please refer to the Armed Forces Policy.

5.19. Leave to attend interviews

5.19.1 Time off for attendance at external interviews should be taken as annual or unpaid leave, as agreed with the manager.

5.19.2 In accordance with their contract Doctors in training may be granted up to 3 days per annum special leave to attend interviews.

5.19.3 Staff identified as ‘at risk’ of redundancy will be granted leave to attend interviews in accordance with the Trust’s Organisational Change and Employment Protection Policy

5.19.4 Time off for attendance for internal interviews should be facilitated, as agreed with the manager.

5.20. Leave for Public Duties

5.20.1 Employees who hold certain public positions may be granted leave without pay to attend meetings and carry out other related work at the discretion of the manager and subject to the needs of the service. The provisions cover Justices of the Peace and members of the following public bodies:

- A local authority
- A statutory tribunal
- A police authority
- A prison visiting board/committee
- A relevant health body
- A relevant education body
- The Environment Agency
- Relevant professional body

5.20.2 Staff are expected to return to work if attendance at any of the above does not extend to the full normal working day.

5.21. Employment / career breaks

5.21.1 An employment break provides the opportunity for staff to take an unpaid break from work and ensures they can resume their career with the Trust. In return the Trust benefits from retaining trained and skilled employees.

5.21.2 Employment breaks can be used for long term carer responsibilities, training/ study leave, working abroad or travel.

5.21.3 To be eligible for an employment break staff must have a minimum of 12 months continuous service with the Trust.

5.21.4 The minimum length of the break is three months and the maximum length is 18 months.

5.21.5 All breaks are subject to agreement with the employee's manager taking into account the needs of the service. Where a career break has been agreed the manager must complete a notification of staff changes form via the extranet.

5.21.6 Employment breaks will not normally be permitted to staff who wish to take up paid employment elsewhere except for work overseas or charitable work which could broaden NHS experience. However staff will be able to undertake paid work for the Trust on a temporary basis, through the Staff Bank.

5.21.7 Staff and managers are expected to arrange and agree 'keep in touch' arrangements to ensure that the employee's knowledge and skills are kept up to date as far as is possible.

5.21.8 Further details and the application process are set out in [Appendix H](#).

5.22. Appeals Process – Special Leave

Where a request for Special Leave has been declined an individual may appeal against this decision following the process set out in paragraph 5.8 above.

6. Equality and Human Rights Statement

An Equality and Human Rights Impact Assessment has been carried out as detailed in appendix A.

7. Training

Please refer to the [Induction Policy and Procedure](#) and [Mandatory Training Policy](#) and the Training Needs Analysis.

8. Document Monitoring Table

Element to be Monitored	Lead	Tool for Monitoring	Frequency	Responsible Individual/Group/ Committee for review of results/report	Responsible individual/ group/ committee for acting on recommendations/action plan	Responsible individual/group/ committee for ensuring action plan/lessons learnt are Implemented
Data entry on ESR	HR	ESR	Annually	Division / Dept. Management Team	Division / Dept. Management Team	Division / Dept. Management Team
Applications	HR	Online applications & outcomes	Annually	Division / Dept. Management Team	Division / Dept. Management Team	Division / Dept. Management Team

Equality and Health Inequalities Impact Assessment (EHIA) template

Undertaking EHIA helps us to make sure that our services and policies do not inadvertently benefit some groups more than others, ensuring that we meet everyone's needs, and our legal and professional duties.

This is important because:

- Assessing the potential for services and policies to impact differently on some groups compared with others is a legal requirement.
- People who find it harder to access healthcare services are more likely to present later when their disease may be more progressed, have poorer outcomes from treatment, and need more services than other groups who have better access.

The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society. It is against the law to discriminate against anyone because of:

- age
- gender reassignment
- being married or in a civil partnership
- being pregnant or on maternity leave
- disability
- race including colour, nationality, ethnic or national origin
- religion or belief
- sex
- sexual orientation.

These are called 'protected characteristics'. The Act requires that public sector organisations meet specific equality duties in respect of these protected characteristics. This is known as the public sector equality duty.

Public Sector Equality Duty

Public bodies have to consider all individuals when carrying out their day-to-day work – in shaping policy, in delivering services and in relation to their own employees.

Public bodies must have due regard to the need to:

- eliminate discrimination
- advance equality of opportunity
- foster good relations.

Armed Forces Covenant Duty

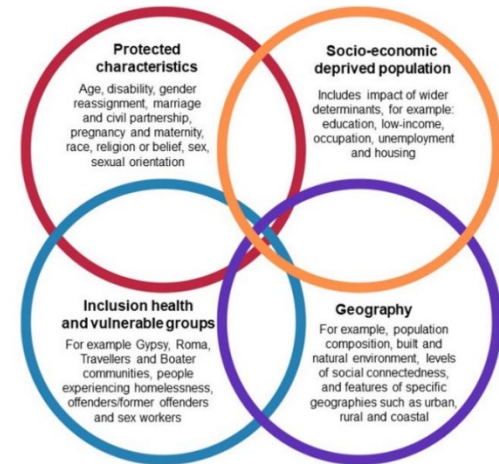
The new Covenant Duty raises awareness of how Service life can impact on the Armed Forces community, and how disadvantages can arise due to Service when members of that community seek to access key local services. The Duty requires organisations to pay due regard to the Covenant principles when exercising functions in healthcare. “Due regard” means that we need to consciously consider the unique obligations and sacrifices made by the Armed Forces; that it is desirable to remove disadvantages faced by the Armed Forces community; and that special provision may be justified in some circumstances.

Health Inequalities Duties- Equity for all

In addition to our legal duties in relation to Protected Characteristics, the Health and Social Care Act and other legislation, NHS Planning Guidance and sector specific recommendations require the NHS to have regard to the need to address health inequalities (or differences in access to or outcomes from healthcare) and take specific action to address them.

Figure 1 shows the different population groups, factors associated with where we live, or our individual circumstances, which separately, or when combined, influence access to and outcomes from health care.

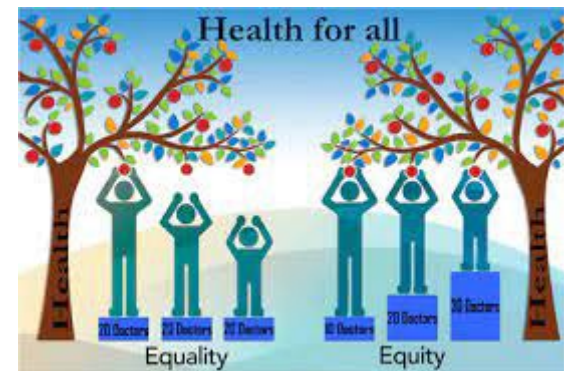
Getting equal outcomes may require different inputs (or services). In completing an EHIA it's important to think about whether a one size fits all approach will generate the same good outcomes for everyone, or whether we might need to make some tweaks or adjustments to enable everyone to benefit equally. The health tree diagram shows that unless we think about the needs of different people, equal services might generate unequal outcomes.



The Health Tree¹

The following principles, drawn from case law, explain what we must do to fulfil our duties under the Equality Act:

- **Knowledge:** everyone working for the Trust must be aware of our equality duties and apply them appropriately in their work.
- **Timeliness:** the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.



¹ https://www.researchgate.net/figure/Equality-and-equity-of-medical-resources-distribution_fig2_323266914

- **Real Consideration:** the duty must be an integral and rigorous part of your decision-making and influence the process.
- **Sufficient Information:** you must assess what information you have and what is needed to give proper consideration.
- **No delegation:** the Trust is responsible for ensuring that any contracted services which provide services on our behalf can comply with the duty, are required in contracts to comply with it, and do comply in practice. It is a duty that cannot be delegated.
- **Review:** the equality duty is a continuing duty. It applies when a policy/process is developed/agreed, and when it is implemented/reviewed.
- **Proper Record Keeping:** to show that we have fulfilled our duties we must keep records of the process and the impacts identified.

NB: Filling out this EHIA in itself does not meet the requirements of the equality and health inequalities duties. All the requirements above must be fulfilled or the EHIA (and any decision based on it) may be open to challenge. Properly used, an EHIA can be a tool to help us comply with our equality and health inequalities duty and as a record that to demonstrate that we have done so. It is advised that you complete the short EHIA training session on MyLearn before completing this EHIA.

SECTION A ADMINISTRATIVE INFORMATION

This form is a central part of how the Trust makes sure and can demonstrate to others that we are meeting our legal duties; and how we can assure ourselves that all patients will get the best outcome for them from our services.

<p>A completed copy of this form must be provided to the decision-makers in relation to your proposal. The decision-makers must consider the results of this assessment when they make their decision about your proposal. Function/policy/service name and number:</p>	<p>Work-Life Balance and Special Leave Policy/ Agile Working Policy</p>		
<p>Main aims and intended outcomes of the function/policy/service and summary of the changes you are making (if existing policy/service):</p>	<p>These updated policies ensure we comply with current legislation and Afc terms and conditions for Flexible working.</p>		
<p>How will the function/policy/service change be put into practice?</p>			
<p>Who will be affected/benefit from the policy?</p>	<p>All substantive colleagues</p>		
<p>State type of policy/service</p>	<p>Policy</p>	<p>Service ?</p>	
	<p>Business Case ?</p>	<p>Function ?</p>	<p>Existing</p>

Is an EHIA required? NB :Most policies/functions will require an EA with few exceptions such as routine procedures	Yes	
	No <input type="checkbox"/> (If no state reasons)	
Accountable Director: (Job Title)	Chief People Officer	
Assessment Carried out by:	Name: Clare Hammond	
Contact Details:	734616	
Date Completed:	03/05/24	

SECTION B ANALYSIS AND EVIDENCE

Analysis of the potential impact – Equality and Health Inequalities Duties

For this section you will need to think about all the different groups of people who are more likely to experience poorer access or have poorer outcomes from health and care services. For each group please describe in the first column the potential impact you have identified, in the second column explain how you have arrived at this conclusion and what information you used to identify the potential impact, and in the third column say what you are going to do to prevent it from happening, or which elements of a service or policy specifically address the potential impact. Key things to remember.

- Everyone has protected characteristics but some groups who share one or more protected characteristics may be more likely to have poorer outcomes or access compared with others – and it is this potential that the EHIA process seeks to identify and address.
- The information included here should be proportionate to the type and size of the policy/service/change.
- An update to a policy should demonstrate that you have considered the potential for the policy to impact differently on different groups and taken steps to address that.
- A minor policy update is likely to need to be much less comprehensive than an EHIA for a major service change.
- You will need to know information about who uses or could use your service/policy will apply to (the population). You can use information about current patients or staff, and about the general population the Trust serves.

3. PROTECTED CHARACTERISTICS - Main potential positive or negative impact of the proposal for protected characteristic groups summarised

Please write in the box below a brief summary of the main potential impact (positive or negative) Please state **N/A if your proposal will not impact adversely or positively on the protected characteristic groups listed below, but make sure you include information on how you know there will be no impact.**

The policy has the potential to ensure that employees from all protected groups enjoy equal access to a range of flexible leave and working options, and to sustainable employment within the Trust. This will be particularly important to employees who are disabled, have long term conditions or who have caring responsibilities. The policy has the potential to foster good relations by providing fair and transparent procedures and guidance for managers to make decisions on requests for flexible leave and working options, whilst balancing requests with the Trust's need to deliver its services. Clear grievance and appeals procedures are included, giving all employees a remedy in case of an unfavourable decision.

Protected characteristic groups	Summary explanation of the <i>potential</i> positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback	Action that will be taken to address the potential for negative impact.
Age: older people; middle years; early years; children and young people.	These policies are applicable to all age groups. Emergency and compassionate leave can be requested in response to family emergencies, bereavement or to attend funerals. As employees become older, they often find themselves dealing with more of these issues, so this provision could be particularly beneficial for this age group.	There are no restrictions on age for any provisions in these policies.	
Disability: physical, sensory and learning impairment; mental health condition; long-term conditions.	These policies have a positive impact on those colleagues who have a disability or long term health conditional by promoting flexible and agile working. Medical leave, short term unpaid leave and flexible working might particularly benefit disabled employees and those with long term condition since management of such conditions might involve regular medical or therapeutic appointments. An employee, having recovered from disability-related sickness absence, might not feel ready to return to work and so might request some unpaid leave	Considers flexible/agile working as part of any adjustments that will enable colleagues to remain in work and provides allowances for leave for health-related reasons	
Gender Reassignment and/or people who identify as Transgender	These policies have a positive impact on gender reassignment by promoting flexible working, time off for any treatment or procedures	These policies are applicable to all irrespective of gender reassignment or identifying as transgender.	

Protected characteristic groups	Summary explanation of the <i>potential</i> positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback)	Action that will be taken to address the potential for negative impact.
Marriage & Civil Partnership: people married or in a civil partnership.	These policies are applicable to all colleagues	These policies are applicable to all irrespective of marriage or civil partnership status.	
Pregnancy and Maternity: before and after childbirth and who are breastfeeding.	These policies are applicable to all irrespective of pregnancy or maternity status, and flexible working will support time off for dependents, IVF treatment etc	These policies are applicable to all irrespective of gender reassignment or identifying as transgender.	
Race:	Colleagues from multicultural backgrounds are more likely to have dependents and close family members living abroad, resulting in a need to take extended or unplanned leave to fulfil caring and family responsibilities, respond to family emergencies, etc	These policies are applicable to all irrespective of race.	
Religion and belief: people with different religions/faiths or beliefs, or none.	Colleagues from some minority religious/belief communities are more likely to need to travel abroad to fulfil religious obligations, such as pilgrimages. 9-day fortnights may be requested by employees from any faith community to support more regular religious observances or commitments.	These policies are applicable to all irrespective of religion or belief.	
Sex:	These policies have a positive impact on gender by promoting flexible working, time off for dependents, IVF treatment		
Sexual orientation	In adopting inclusive definitions of family, partner, dependents and caring responsibilities, the draft policy minimises the potential for lesbian, gay and bisexual employees to be treated unfairly in the application of flexible leave and working policies. Such	These policies are applicable to all irrespective of sexual orientation.	

Protected characteristic groups	Summary explanation of the <i>potential</i> positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback)	Action that will be taken to address the potential for negative impact.
	treatment could be driven by attitudinal discrimination, heterosexist assumptions or a lack of understanding of the legal rights of these protected groups.		
Veterans/Armed Forces Communities	This policy positively promotes the armed forces policy.		

4. HEALTH INEQUALITIES -Potential positive or adverse impact for people who experience health inequalities summarised

Please briefly summarise the main potential impact (positive or negative) on people at particular risk of health inequalities (as listed below). **If the policy/procedure is unrelated to patients, this sections does not require completion.**

Please state none if you have assessed that there is not an impact, but please make sure you complete the 'how do you know this' column to demonstrate that you have considered the potential for impact. **If you identify the potential for impact for one or more of these groups please complete the full assessment in Appendix A**

Groups who face health inequalities ²	Summary explanation of the potential positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback)	Action that will be taken to address the potential for negative impact.
<p>This includes all groups of people who may have poorer access to or outcomes from healthcare services. It includes: People who have experienced the care system; carers; homeless people; people involved in the criminal justice system; people who experience substance misuse or addiction; people who experience income or other deprivation; people with poor health literacy; people living in rural areas with limited access to services; refugees or asylum seekers; people in or who have been in the armed force; other groups who you identify as potentially having poorer access and outcomes.</p>	<p>There is strong evidence that where an NHS workforce is representative of the community that it serves, patient care and the overall patient experience is more personalised and improves</p>	<p>NHS England » Belonging in the NHS</p>	

SECTION C ENGAGEMENT

5. Engagement and consultation

a. Talking to patients, families and local communities can be a rich source of information to inform health care services. If you are making substantial changes it's likely that you'll have to undertake specific engagement with patients. For smaller changes and policies you may have undertaken some engagement with patient groups, gained insight from routine sources e.g. patient surveys, PALS or Complaints information or information from Healthwatch, you may also have looked at relevant engagement that others have undertaken in the Trust, or locally. Have any engagement or consultative activities been undertaken that considered how to address equalities issues or reduce health inequalities? Please place an x in the appropriate box below.

Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
---	-----------------------------

b. If yes, please ensure all stakeholders are listed in the consultation table at the beginning of the policy.

SECTION D SUMMARY OF FINDINGS

Reflecting on all of the information included in your review-

6. EQUALITY DUTIES: Is your assessment that your proposal will support compliance with the Public Sector Equality Duty?

Please add an x to the relevant box below.

	Tackling discrimination	Advancing equality of opportunity	Fostering good relations
The proposal will support?	X	X	X
The proposal may support?			
Uncertain whether the proposal will support?			

7. HEALTH INEQUALITIES: Is your assessment that your proposal will support reducing health inequalities faced by patients?

Please add an x to the relevant box below.

	Reducing inequalities in access to health care	Reducing inequalities in health outcomes
The proposal will support?		
The proposal may support?	X	X
Uncertain if the proposal will support?		

8. Outstanding key issues/questions that may require further consultation, research or additional evidence. Please list your top 3 in order of priority or state N/A

Key issue or question to be answered	Type of consultation, research or other evidence that would address the issue and/or answer the question
1	
2	
3	

9. EHIA sign-off: (this section must be signed)

Person completing the EHIA:	Employee Relations Manager	Date: 03/05/24
Line Manager of person completing:	Employee Relations Lead	Date: 03/05/24

Appendix A

Breakdown of Groups who are more likely to experience health inequalities:

Groups who face health inequalities ³	Summary explanation of the potential positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback	Action that will be taken to address the potential for negative impact.
Looked after			

Groups who face health inequalities ³	Summary explanation of the potential positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback)	Action that will be taken to address the potential for negative impact.
children and young people			
Carers of patients			
Homeless people. People on the street; staying temporarily with friends /family; in hostels or B&Bs.			
People involved in the criminal justice system: offenders in prison/on probation, ex-offenders.			
People with addictions and/or substance misuse issues			

Groups who face health inequalities ³	Summary explanation of the potential positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback)	Action that will be taken to address the potential for negative impact.
People or families on a low income			
People with poor literacy or health Literacy: (e.g. poor understanding of health services poor language skills).			
People living in deprived areas			
People living in remote, rural and island locations			
Refugees, asylum seekers or those experiencing modern slavery			
People who have served in			

Groups who face health inequalities ³	Summary explanation of the potential positive or adverse impact of your proposal	How do you know this? (include here a brief explanation of what information you have used to identify potential adverse impact e.g. NICE guidance, local data, evidence reviews, stakeholder or patient feedback	Action that will be taken to address the potential for negative impact.
the Armed Forces			
Other groups experiencing health inequalities (please describe)	<p>Recent ONS statistics show that people with a long term health condition or disability have an unemployment rate of 12.2% and an economic inactivity rate of 40.8% (compared to 7.4% and 15.8% respectively among people who were not long term disabled). (ONS, Labour Market Statistics, November 2013:</p> <p>The Kings Fund has reported that: “Many people with long-term physical health conditions also have mental health problems. These can lead to significantly poorer health outcomes and reduced quality of life”. At the same time, health and social care services in England “are not currently organised in a way which supports an integrated response to the dual mental and physical health care needs of patients”. (Kings Fund, 2012, Long-term conditions and mental health: These reports highlight the extent of the barriers to employment faced by disabled people. Given an often-fragmented healthcare environment, they also highlight the need for employers to adopt flexible leave and work-life balance policies which enable disabled people to sustain employment and maintain a healthy work-life balance.</p>	<p>http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcn%3A77-283783</p> <p>The cost of co-morbidities:</p> <p>http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/long-term-conditions-mental-health-cost-comorbidities-naylor-feb12.pdf)</p>	

Sources of Information on the East Sussex population and sources of community or patient insight.

Population Data

[State of the County 2021 Focus on East Sussex](#)

[East Sussex JSNA](#)

[Community Insight](#)

[Further Reading on Equality and Health Inequalities](#)

[Training](#)

Appendix B: Options For Flexible Working

OPTIONS FOR FLEXIBLE WORKING

A change to the hours staff work or a change to the times when staff are required to work

Part time working - This is the most common form of flexible working and refers to any member of staff who is contracted to work less than full time hours. Filling roles on a part time basis can give service benefits such as having more staff available at busy times or on busy days, or can help recruitment to difficult to recruit to posts as it widens the pool of people who may be interested in the job. It also supports the Trust's aim of having a diverse workforce, as a lack of part time job vacancies can be a barrier to work for those people with caring responsibilities. This is particularly so for people seeking more senior graded jobs on a part time basis.

Annualised hours -. Annualised hours give organisations and staff extra flexibility to vary patterns of work across each year according to service needs and individual preference. They are particularly useful where there are predictable fluctuations in activity levels for staff over different times of the year. The total number of hours to be worked in the full year and the pattern of working is agreed at the outset of employment.

Whilst the hours worked each week/month may vary, the salary remains constant throughout the 12 months. The set amount of hours worked are divided into two groups: Core Hours, whereby the employee works set hours throughout the year as a standard contract, e.g., every Saturday each week for 48 weeks at 8hours. Reserve Hours, outside of the core hours, management can require the employee to work when the need arises. Staff will be given at least 3 weeks' notice of when these hours are to be worked. It should be noted that the reserve hours cannot exceed the number of core hours and the total contracted hours cannot exceed the full time hours requirement for the post. In annualised hours schemes, the hours actually worked need to be recorded on a timesheet, one can be found at Appendix C, with an overview record sheet at Appendix D, and this should be closely monitored by the employee and manager on a regular basis, every quarter, to ensure both core and reserve hours for the period have been worked. The quarterly review will allow time to plan how the contracted hours will be fulfilled in the event that the reserve hours remain outstanding for that period. The balance of hours must be worked within the financial year. If an employee is absent due to sickness or annual leave, the number of hours recorded will be whatever the arrangement to work that day is.

Term time working - Term time working is an arrangement whereby an employee works only those periods when schools are open, enabling them to provide care for their dependants during the school holidays. The arrangement may also be used because of the needs of the service e.g., widely used in a department which provides a school nursing service and when the service itself is quieter.

The primary objective is to attract and retain qualified, skilled and experienced employees who might otherwise not join or might have to leave the Trust's employment because they are unable to work during the school holidays. It generally means that staff will work on the basis of a fixed number of term time hours per week during school term time only and that the school terms will last a fixed number of term time weeks during each academic year, i.e. 1 September to 31 August. Staff will notify the Trust by no later than the 1 August each year of the number of term time weeks for the coming academic year. The annual salary also takes into account the paid annual leave entitlement, which will be paid. Annual leave accrues during term time only and is expected to be taken during the school holidays. There is no entitlement to paid annual leave outside of the school holiday periods. Payment is proportioned equally throughout the year. During school holidays, there is no requirement to attend for work or perform any duties under this contract, unless the Trust specifically requests so in special circumstances, e.g global pandemic, although there is no obligation to do so

Job share -. It is best if the work is divided equally and each partner undertakes a proportion of the work of the post and receives a salary corresponding to the hours worked. The proportions need not be 50:50 but can fit to the needs of the individuals and the service. It requires a high degree of co-operation between the partners who may be expected to provide reasonable cover on a full time basis whenever practicable in the absence of their job share partner. This may include cover for sickness absence, annual leave, training

courses. This will be agreed between the manager and the job sharer. Handover periods will also need to be built into the arrangement, and there is a need for the sharers to be able to work positively together.

Where a pre-matched pair applies to share a job, it should be established whether each person wishes their application to be considered only in partnership with their sharer. All short listed candidates who wish to job share will be interviewed and pre-matched pairs should be interviewed separately initially and then together to ensure compatibility. If only one of the pair is considered suitable for appointment and that person is the most suitable candidate, or if a single sharer applies for a post and they are the best candidate, they should be placed on hold and the job re-advertised, either to find a suitable partner or a suitable full time applicant. It would not be expected to advertise the post more than twice in a 6 month period. Where a current staff member wishes to job share their present job, and the job is considered suitable for sharing, the second half of the job should be advertised, and again, the expectation is that the post would not be advertised more than twice in a 6 month period. Consideration should be given to the cost of external advertising and a decision may be made to advertise internally only. The job share arrangement will only formally commence once a suitable partner has been found to fill the existing vacancy. If no suitable partner is found and the post had not previously been a job share, then the existing employee should be informed that there is no possibility of a job share and the original contract will continue.

Flexi time -. Its use is normally most appropriate for office workers, administrative and clerical staff and enables staff to be able to miss the worst of the rush hour and manage their journey to work better. It also allows for employees to be able to manage commitments outside of work at the start or finish of the working day. Managers must agree with each member of staff a general pattern of attendance, i.e. the normal starting and finishing times each day including the times for lunch breaks. There are recommended core times of work, e.g. between 1000 and 1530 but staff could start work from 0800 and work as late as 1800, depending on the nature of their work and the hours within which a service must be available, e.g. 0900 to 1700. Colleagues will be expected to provide a degree of cover for each other throughout the hours of service and during times of peaks in workload or sickness absence. This allows flexibility to design each day according to personal needs, workload and the needs of the service. It is imperative that contracted hours are met within any calendar month and this is the responsibility of both the line manager and the staff member.

The introduction of flexi time is to enable staff to respond flexibly to service demands, whilst continuing to provide the highest quality service, to ensure that where appropriate staff are able to exercise personal control over their working hours. Once agreed, a flexi plan should be implemented using Appendix E. Parameters should be agreed such as the span of hours over which the system operates – that is the earliest and latest permissible start and finish times and core times that the employees must be present.

Extra hours worked will be taken as whole or flexi half days at a time agreed with the manager. No more than one standard day is to be accumulated at any one time without the specific agreement of the manager. These days or half days will normally be taken within the next 8 weeks. In exceptional circumstances, where a manager is unable to allow a member of staff to take flexi days or half days within the 8 week period, the member of staff will be allowed to carry this forward to the next 4 weeks. Hours less than standard for the month worked are to be made up in the next 8 weeks. This arrangement for flexi or half days will be local and Payroll need not be notified. Failure to make up the debit hours within the agreed time limit will result in adjustment to the employee's pay unless the manager can agree an extension of time in which to make up the hours. No more than one standard day should be in debt at any one time unless the manager agrees to this.

Appendix C: Annualised Hours Monthly Timesheet

Annualised Hours Monthly Timesheet

Name:	Month:
Job Title:	Dept:

BREAKDOWN OF HOURS WORKED THIS MONTH:

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31									

TOTAL HOURS WORKED THIS MONTH (not inc a/l, BH)	
ANNUAL LEAVE TAKEN THIS MONTH	
BANK HOLIDAY TAKEN THIS MONTH	

TOTAL
 (including A/L & B/H taken)

Signed(Employee):	Date:
Signed (Manager):	Date:

Annualised Hours Record sheet Overview of Year

Name:	Period:	Contracted to work:
Job Title	Dept.	A/L entitlement: BH entitlement:

Contracted to work box should correspond with Total box at bottom

	Month	Hours worked	AL taken	BH taken	Total
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
Total					Total

Signed(Employee):	Date:
Signed (Manager):	Date:

Flexi Time Agreement

Name:	Hours:
Job Title:	Dept.:

This Agreement sets out the terms and conditions for the above named to work under the Flexi Time Scheme and should be read in conjunction with the Flexible Working Policy.

- 1 The standard hours for each working day are:
- 2 The Departmental core hours are: to:
- 3 The Departmental flexi hours are: to:
- 4 The minimum lunch break to be taken is:
- 5 Credit hours of no more than one standard day may be accumulated at any one time
- 6 Credit hours accumulated must be taken within the following 8 weeks, with management agreement
- 7 Debit hours of no more than one standard day may be accrued at any one time
- 8 Debit hours must be made up within the next 8 weeks
- 9 Failure to make up debit hours will result in an adjustment to pay
- 10 Flexi Time sheets must be completed on a daily basis and submitted to the Line Manager at the end of each 4 week period
- 11 Team members must have local arrangements to ensure that all service hours are covered
- 12 Staff who wish to leave the Flexi Time Scheme or Trust employment must ensure that outstanding credit hours are taken. No payment will be made for credit hours
- 13 Staff who wish to leave the Flexi Time Scheme or Trust employment must ensure that outstanding debit hours are made up or their pay will be adjusted accordingly

I have read the Work Life Balance and Special Leave Guidelines and I agree to the terms and conditions of the Flexi Time Scheme as set out above.

Signed:	Date:
---------	-------

Appendix F: Flexi-Time Record Sheet Overview of Month

Flexi-Time Record Sheet Overview of Month

Name:	Hours:
Job Title:	Dept.:

CORE HOURS	AM	From:	To:	PM	From:	To:
Carried Forward Hours:						
Date	Day	AM		PM		Hours worked
		Start	Finish	Start	Finish	
	Mon					
	Tues					
	Wed					
	Thurs					
	Fri					
	Sat					
	Sun					
		TOTAL HOURS WORKED THIS WEEK:				
		STANDARD HOURS:				
		CREDIT HOURS TO DATE:				(+)
		DEBIT HOURS TO DATE:				(-)

Signed(Employee):	Date:
Signed (Manager):	Date:

Application for Special Leave

PART A <i>(To be completed by the employee)</i>			
Name		Assignment No.	
Job Title		Dept / Ward	
Type of leave requested			
Period of absence:			
From	To	No. of days	
Signed		Date	
PART B <i>(Manager to complete either (1) or (2) below)</i>			
(1) Special Leave request authorisation			
This is to confirm that Special Leave has been authorised for the above named for the following dates:			
From	To	No. of days	Paid / Unpaid
Manager's Name <i>(Please print)</i>		Job Title	
Signed		Date	
Details entered on ESR		Date:	
(2) Special Leave request NOT authorised <i>(Please give brief reasons below)</i>			
Manager's Name <i>(Please print)</i>		Job Title	
Signed		Date	

- When completed this form should be given to the employee

Employment / Career Break Guidelines

1. Application Process

The employee should apply formally, in writing, to their line manager giving at least 3 months' notice of the request for an employment break. The line manager will consider the request against the following selection criteria and, if necessary, take advice from Human Resources. The manager should notify the employee of their decision within 6 weeks of the original request. Where a career break has been agreed the manager must complete a notification of staff changes form via the extranet.

2. Selection criteria

Effect on service delivery (the line manager must give active consideration to how the employee's absence could be reasonably covered)

The employee's work performance and attendance

The employee's length of service with the Trust

Potential benefits to the individual and the organisation

If the request is declined, reasons for the refusal should be given to the employee in writing.

3. Keeping in Touch Arrangements

3.1 Prior to commencement of the employment break the manager and employee will agree the arrangements for keeping in touch.

3.2 Arrangements will need to take account of the length of the break and will usually include the employee coming in to work for a short period (e.g. two to four weeks in a year), subject to any professional requirements/restrictions that must be adhered to. This time will be paid at the rate applicable for the work done.

3.3 In addition arrangements should be agreed in regard to regular contacts including the receipt of Trust and Departmental briefings, updates and newsletters.

4. Returning to Work

4.1 Where the break is for less than one year every effort will be made to enable the employee to return to the same post in which they worked prior to going on an employment break.

4.2 Where the employment break is for more than one year, the employee may return to a similar post to that in which they worked prior to going on an employment break. Every effort will be made to offer the employee similar work at the same location. Where possible, this will be on the same spine/incremental point of the grade as was held at the time of commencing the break. The individual may have to be interviewed for the post.

4.3 Staff are required to give notice of their return to work: two months' notice for breaks of one year or less; six months' notice for breaks of more than one year.

4.4 The employee should then confirm their intended date of return at least two months prior to that date.

4.5 If there is no suitable vacancy, the return may be delayed by mutual agreement between the employee and their manager. If the individual rejects three suitable alternative offers of permanent employment, the Trust is under no obligation to offer further posts and the commitment to the individual ceases. Please refer to the "Ending Employment Policy"

4.6 Where necessary the employee will be given refresher training. The need for this will be assessed by the manager following discussion with the individual.

5. Terms & Conditions

- 5.1 An employment break shall not be regarded as a break in service, although the period of the break will not count as reckonable service for the purposes of incremental dates, annual leave entitlements, sick pay or redundancy payments.
- 5.2 All annual leave accrued by the employee should be taken before the break begins. Any annual leave that has been taken but not yet accrued will be deducted from the employee's last payment before their break.
- 5.3 Staff will be able to continue to pay into the Pension Scheme during their employment break for a period of 24 months. Staff should take advice from the Pensions Officer before entering into the employment break agreement.
- 5.4 Any Trust loans must be repaid before entering the agreement. Staff will also be responsible for any costs incurred through the Car Leasing scheme.
- 5.5 Trust accommodation must be vacated before entering the agreement.
- 5.6 Staff will not normally be permitted to work for another employer during the break without prior discussion and agreement with line Manager and Human Resources.

6. Working for Voluntary Organisations Providing Assistance and Aid to Developing Countries

- 6.1 In recognition of the fact that the Trust would want to particularly encourage employees who want to undertake voluntary work providing aid and assistance in "developing" countries, specific arrangements apply to this category of "individual employment break".
- 6.2 The voluntary aid project should be with a recognised charitable organisation and should result in some demonstrable health gains for the developing country.
- 6.3 Staff should submit a written request to their manager giving an outline of the voluntary aid project and details of the project sponsor.
- 6.4 All the usual conditions for individual employment breaks will apply, with the exception that the period spent on the voluntary aid project will count as reckonable service for the purposes of incremental dates, annual leave entitlement, sick pay and redundancy payments. The employee will not, however, be entitled to actual annual leave or sick pay during the period of their employment break.
- 6.5 Where the break is for less than one year every effort will be made to enable the employee to return to the same post in which they worked prior to going on an employment break.
- 6.6 Where the employment break is for more than one year, the employee may return to a similar post to that in which they worked prior to going on an employment break. Every effort will be made to offer the employee similar work at the same location. Where possible, this will be on the same spine/incremental point of the grade as was held at the time of commencing the break. The individual may have to be interviewed for the post.
- 6.7 In the event of an earlier than expected return for unexpected reasons, however, it may not be possible to effect a return to the original post immediately and temporary arrangements will need to be agreed.

- 6.8 It will not usually be practicable for the individual to adhere to keeping in touch arrangements and come into work for two to four weeks a year. Therefore suitable alternative arrangements should be agreed between the employee and their manager prior to the break. This may include a written summary of experience every four months and visits to the Department if the individual returns to the UK on a break from the project.

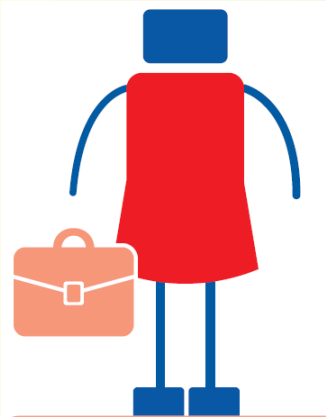
Appendix I: Carers Passport



East Sussex Healthcare
NHS Trust



Carers passport



Employee name

Manager

Date of discussion

This is designed to be a 'live' document to be reviewed periodically and when circumstances change, whether that is in a couple of months, or after a year.

Who is a carer?

A carer is an employee who, outside the workplace, provides unpaid care for family or friends who have a disability, illness or who need support in later life.

Around 1 in 9 of all employees juggles work with care, so it is more common than you might think.

Although most of us care at some point in our lives, it is also something that we are not prepared for and can come as a shock. It can be difficult to talk about some of these issues that you may not have raised in the workplace before.

This Carer Passport can be completed by any employee who has caring responsibilities which affect their work now or may do in the near future. It is supposed to be a "live" document that is reviewed and updated when circumstances change, whether the demands of the job, or the nature of the caring responsibilities.

What to do

Read our information about the Carer Passport scheme and why it is important for colleagues to be able to discuss their caring role at work.

The starting point for a Carer Passport is a conversation about caring and the flexibility required to manage it alongside work.

Here at ESHT we want to be a supportive employer and we also have to balance carers' need for flexibility with the needs of the organisation. We see the Carers Passport as an important tool for conversation to help this happen.

Who owns the Passport?

The employee owns the Carer Passport, but it should be logged centrally on ESR that it has been completed.

What is its scope?

The Carer Passport assumes that you are working within parameters set by employment law along with any existing Trust policies. Therefore any flexible working arrangements are subject to discussion within the service.

How much information?

Aspects of caring are highly personal, and an employee should not need to disclose detailed information about their caring role if they do not wish to.

Any information held under the scheme will relate to the carer, and no identifying information about the cared for person will be stored.

Additional information

You can make changes to the information within the passport when you need to. These should be shared with your line manager, and then recorded on the back page of the passport.

Preparing for the conversation

This outline will help you as a carer to think through your current situation — both in your caring role and at work.

1. Thinking about your caring role and how it affects your work
 - What are your caring responsibilities? (See ‘How much information?’ above)
 - How does this affect your work?
 - What impact does work have on your caring responsibilities?
 - How do you expect your caring role (and its impact) could change in future?

2. Finding out about potential options
 - Do you know what support is currently offered in the organisation?
 - Do you know about the organisation’s flexible working policies?
 - Are you aware of your right to request flexible working? You may decide to make a request or keep the conversation to informally agreed arrangements.

3. Getting support
 - Do you already receive any support in work to help combine caring with work?
 - What additional support would help you?
 - How can the needs of the team/organisation continue to be met?
 - Is there support you could get outside of work?
 - Would information and advice about support make a difference?

4. Note any other questions or issues

Managers

- Make sure you understand what support is available for working carers, by familiarising yourself with existing policies you have in place, such as flexible working, leave arrangements, etc.
- Find out more about caring and the impact it might have and what sort of adjustments might work.
- Do you know about Care First, our Employee Assistance provider?

Having the conversation

Use this template to keep a confidential record of the discussion.

Caring and work - describing the situation and its impact

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Potential options

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Getting support

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Any other questions/issues?

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Action

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Employee consent

I consent to my Line Manager / HR* keeping a copy of this record:

Employee signature: |

Date: |

Manager signature: |

Date: |

Date of review: |

Next planned
review date: |