BRACEBRIDGE HEATH PARISH COUNCIL

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Shared Parental Leave policy

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1 Purpose

- 1.1 Bracebridge Heath Parish Council recognises that parents have joint responsibility for the care and upbringing of their children and aims to support employees where possible and appropriate in balancing the needs of home and work life.
- 1.2 Bracebridge Heath Parish Council complies with the Shared Parental Leave Regulations 2014, which provides a statutory right for an employee to take shared parental leave (ShPL) in connection with the birth of a child, or placement of an adopted child born on or after 5th April 2015.
- 1.3 Bracebridge Heath Parish Council provides maternity, paternity, adoption and other family related leave arrangements to support employees.
- 1.4 This policy and procedure aims to outline
 - the procedures to be followed for taking shared parental leave;
 - the expectations, benefits and entitlements to ensure that employees have a clear understanding of and comply with the relevant procedures.

2 Scope

2.1 This policy applies to all employees provided they meet the service requirements for eligibility.

3 Related legislation, policies and guidance

- 3.1 This policy should be read in conjunction with the following related legislation, policies and guidance:
 - Maternity and parental leave etc regulations 1999 (amended 2002, 2014 and 2024)

Bracebridge Heath Parish Council internal documents:

- Maternity leave policy
- Adoption leave policy
- Shared parental leave policy

4 Responsibilities and review

- 4.1 The Personnel committee is responsible for the review of this policy.
- 4.2 The policy will be reviewed every three years or earlier in response to changes in relevant legislation.

5 Shared parental leave principles

5.1 Shared parental leave (ShPL) is available to all members of staff and allows a mother / primary adopter and her partner to share the responsibility of working and caring for a child

provided that the mother/primary adopter returns to work prior to using all of her entitlement to maternity / adoption leave and / or statutory pay.

5.2 Shared parental leave is regarded as a period of unpaid leave.

6 Eligibility

- 6.1 To qualify for shared parental leave you must:
 - be the child's mother or primary adopter;
 - be the biological father of the child; or
 - be the mother's husband, or partner (including same sex relationships) or civil partner, or be the husband or partner (including same sex relationships) of the primary adopter;
 - have 26 weeks continuous service with Bracebridge Heath Parish Council.

7 Entitlement

- 7.1 Eligible parents will be able to share a maximum of 50 weeks leave and 39 weeks statutory pay, for the purpose of caring for a child within the first year of the child's life or in the year after the child is placed for adoption.
- 7.2 Shared parental leave cannot be taken until after the birth/placing of the child and only applies to babies born or children placed on or after 5th April 2015.
- 7.3 Partners do not have to work for Bracebridge Heath Parish Council, but they must satisfy minimum employment and earnings criteria.

8 Taking Periods of Leave

- 8.1 Shared Parental Leave (ShPL) must be taken in complete weeks, it can be taken:
 - as one continuous block;
 - in multiples of complete weeks.
- 8.2 The minimum ShPL that can be taken is one week.
- 8.3 Provided that both parents qualify for ShPL you can choose to take leave at the same time as your partner or you can take your leave separately.
- 8.4 You may take one or more periods of shared parental leave per pregnancy or adoption.

9 Conditions of Employment

9.1 During a period of shared parental leave individuals will be entitled to the same terms and conditions that would have applied had they not taken the leave, with the exception of remuneration.

- 9.2 All shared parental leave will be:
 - pensionable;
 - reckonable for incremental pay; and
 - included in any probationary period.

10 Right to Return

- 10.1 You have the right to return to the same job if you have been on shared parental leave plus any other type of leave for 26 weeks or less.
- 10.2 If you have been on leave for more than 26 weeks you have the right to return to the same job unless this is not reasonably practicable. If due to organisational change your role no longer exists you would be managed in accordance with the organisational change policy.

11 Keeping in Touch

- 11.1 Both parents who are eligible for shared parental leave may take up to a maximum of 20 keeping in touch (KIT) days between them. This is in addition to the 10 KIT days available during a period of maternity leave.
- 11.2 KIT days must be approved by the Parish Clerk.
- 11.3 Taking KIT days, which are days when you attend work, will not end your entitlement to shared parental leave or statutory pay. On a KIT day you will be paid for the number of hours that you work.

12 Leave & Curtailment Notice

- 12.1 Anyone eligible and intending to take shared parental leave must submit a maternity / adoption leave curtailment notice, giving at least 8 weeks' notice stating that they wish to end their maternity or adoption leave early.
- 12.2 Once you have ended your maternity/adoption leave and have returned to work you will only be entitled to statutory pay during periods of shared parental leave and at that point you cannot revert back onto maternity leave.
- 12.3 Employees are encouraged to and should give careful consideration to the financial implications of ending your maternity / adoption leave early while still in receipt of occupational maternity / adoption pay.

13 Notice of Entitlement

- 13.1 Before taking leave, a notice of entitlement and intention to take shared parental leave, must be submitted. This may be submitted at the same time as the maternity / adoption curtailment notice or at a later date but it cannot be later than 8 weeks before the date of the first period of shared parental leave.
- 13.2 Requests for a single block of leave or more must be agreed by the Parish Council.
- 13.3 If a request is for more than a single block the Parish Council may:

- agree the request;
- decline the request due to organisational need;
- propose alternative dates.
- 13.4 Up to three separate requests for periods of shared parental leave and three withdrawal notices may be submitted. Any periods of leave that have been declined to not count towards these totals.

14 Declaration

- 14.1 The Shared Parental Leave Forms found in appendix 1 must be completed and submitted to the employee's line manager. These forms act as a declaration that the individual:
 - meets all the criteria to be eligible for shared paternity leave and pay;
 - has met the notification requirements as detailed above.
- 14.2 False declarations may subject the employee to the Parish Council's disciplinary procedure.

15 Version control and amendment history

| Date | Version | Revision / amendments made | Review date |
|-------------|---------|-----------------------------------|---------------|
| approved | Number | | |
| August 2016 | 1.0 | New policy | July 2017 |
| August 2018 | 2.0 | New format; forms added | August 2021 |
| August 2021 | 2.1 | Updated references to Finance and | August 2024 |
| - | | Policy committee | |
| November | 2.2 | Updated reference to committees | November 2027 |
| 2024 | | | |

Appendix 1 – Shared Parental Leave forms

| What forms need to be completed? | | | |
|----------------------------------|---------------------------|--------------------------|--------------------------------|
| | Both parents want to take | Just the mother wants to | Just the partner wants to take |
| | SPL | take SPL | SPL |
| Form 1 | YES | YES | YES |
| Form 2 | YES | YES | NO |
| Form 3 | NO | NO | YES |
| Form 4 | YES | NO | YES |

Form 1: Curtailment of maternity leave and pay (for mother's employer)

| SECTION A: General (must be completed) | |
|--|--|
| Please accept this as my notice to curtail my maternity leave. This for either I or my partner intend to take SPL. I understand that my matern Section B and that I can only reinstate my maternity leave if I revoke given in Section B. | nity leave will end on the date given in |
| Mother's surname | |
| Mother's first name(s) | |
| Child's expected date of birth | |
| Actual date of child's birth (if born) | |
| SECTION B: Curtailing maternity leave (must be completed) | |
| Date statutory maternity leave started/is intended to start | |
| Date statutory maternity leave will come to an end | |
| Total number of weeks of statutory maternity leave that will have | |
| been taken at the date that statutory maternity leave ends | |
| SECTION C: Signature (must be completed) | |
| Signature of mother | |
| Date signed | |

| Form 2: Notification that mother is intending to take SPL (for mother's employer) | | | |
|---|---|--|--|
| SECTION A: General (must be completed) | | | |
| Please accept this as notification that I (the mother) am entitled to and intend to take SPL. | | | |
| Mother's surname | | | |
| Mother's first name(s) | | | |
| Partner's surname | | | |
| Partner's first name(s) | | | |
| Partner's address | | | |
| Partner's National Insurance number | | | |
| Child's expected date of birth | | | |
| Actual date of child's birth (I will provide this information as soon reasonably practicable following birth and before I take any SPL | | | |
| SECTION B: Maternity entitlement details (all answers that a | pply must be completed) | | |
| Date started (or intends to start) statutory maternity leave | | | |
| Date statutory maternity leave ended (or will end) | | | |
| Total number of weeks of statutory maternity leave that will have been taken at the date that statutory maternity leave ends | | | |
| SECTION C: Amount of SPL available (must be completed) | | | |
| Total number of weeks of SPL created (52 weeks less total num | per | | |
| of maternity weeks taken and any SPL from a previous notice ar | | | |
| revocation) | | | |
| Total number of weeks of SPL I (the mother) intend to take | | | |
| Total number of weeks of SPL my partner intends to take | | | |
| SECTION D: Indication of mother's leave intentions (must be completed but is not binding) | | | |
| I (the mother) currently expect to take SPL as follows: | | | |
| From (dd/mm/yy) to (dd/mm/yy) | | | |
| SECTION E: Mother's declaration (must be completed) | | | |
| The following points apply in all circumstances where a mo | her is entitled to maternity leave: | | |
| I am giving notice that I am entitled to and intend to take SPI | | | |
| I have, or will have, been continuously employed for 26 weel | as at the end of the 15 th week before the week in | | |
| which the child is due | | | |
| I will remain employed with this employer until any period of SPL that I intend to take | | | |
| • I had (or will have) the main responsibility for the care of the child at the time of the child's birth (along with my partner who has made the declaration below) | | | |
| I am entitled to maternity leave, my maternity leave period is reduced and the remaining weeks are now available as SPL | | | |
| | | | |
| I will inform my employer immediately if I am no longer caring for my child I will give my employer a copy of my child's birth certificate or a declaration of the date and place of the birth | | | |
| I will give my employer a copy of my child's birth certificate or a declaration of the date and place of the birth where no certificate is available if my employer asks for this within 14 days of the date of this notice | | | |
| I will give my employer the name and address of my partner's employer or a declaration that they do not | | | |
| have an employer if my employer asks for this within 14 days of the date of this notice | | | |
| I (or my partner) have given a period of SPL notice | | | |
| The information provided in this declaration is accurate and meets the notification requirements for SPL | | | |
| Signature of mother | | | |
| Date mother signed | | | |
| SECTION F: Partner's declaration (must be completed) | | | |
| | | | |

- I am the father of the child, or at the date of the birth I was/will be the mother's spouse, the mother's civil partner and/or the mother's partner living with her and the child in an enduring relationship
- I had (or will have) the main responsibility for the care of our child at the time of the birth (along with the child's mother)
- I have been (or will have been) employed or self-employed in England, Scotland or Wales in 26 weeks of the 66 weeks before the expected week of birth
- I have (or will have) earned in total at least £390 in 13 weeks of the 66 weeks before the expected week of childbirth
- I consent to the amount of SPL which the mother intends to take, as set out above.
- I consent to the mother's employer processing the information I have provided
- The information provided in this declaration is accurate.

| Signature of partner | |
|----------------------|--|
| Date partner signed | |

Form 3: Notice confirming that partner is taking SPL but mother is not (for mother's employer) SECTION A: General (must be completed)

| Please accept this as notification that I (the mother) do not intend to take SPL but that my partner will be. | | |
|---|--|--|
| Mother's surname | | |
| Mother's first name(s) | | |
| | | |
| SECTION B: Confirmation | | |
| I am either not entitled to SPL, or I do not intend to take SPL. | | |
| I declare that my partner has given a notice to their employer to take SPL. | | |
| I consent to my partner's intended claim for SPL. | | |
| SECTION C: Signature (must be completed) | | |
| Signature of mother | | |
| | | |
| Date signed | | |
| | | |

| Form 4: Notification that partner is intending to take SPL (for partner's employer) | | | |
|--|-------------------------|--|--|
| SECTION A: General (must be completed) | | | |
| Please accept this as notification that I (the mother | 's partner) am entitled | to and intend to take SPL. | |
| Partner's surname | | | |
| Partner's first name(s) | | | |
| Mother's surname | | | |
| Mother's first name(s) | | | |
| Mother's address | | | |
| Mother's National Insurance number | | | |
| Child's expected date of birth | | | |
| Actual date of child's birth (I will provide this informative reasonably practicable following birth and before I t | ake any SPL) | | |
| SECTION B: Maternity entitlement details (all an | | ist be completed) | |
| Date mother started (or intends to start) maternity le | eave | | |
| Date mother's maternity leave ended (or will end) | | | |
| Total number of weeks of maternity leave taken wh | en maternity leave | | |
| ends SECTION C: Amount of SPL available (must be | completed) | | |
| The total number of weeks of SPL created depends | | e and pay entitlements: | |
| If the mother is entitled to maternity leave & SM | | | |
| maternity leave taken | | | |
| If the mother is entitled to maternity leave but n | ot to SMP or MA, the | total created will be 52 weeks less any | |
| weeks maternity leave taken | uture entitled to OM | | |
| If the mother is not entitled to maternity leave b less any weeks of SMP/MA that was paid | but was entitled to SIM | P/MA, the total created will be 52 weeks | |
| If the mother previously revoked her curtailment | t notice SPL that was | s taken by the partner must be deducted | |
| Total number of weeks of SPL created (50 max) | | | |
| Total number of weeks of SPL the partner intends t | o take | | |
| Total number of weeks of SPL the mother intends to take (if applicable) | | | |
| SECTION D: Indication of Partner's leave intentions (must be completed but is not binding) | | | |
| I (the partner) currently expect to take SPL as follow | WS: | | |
| From (dd/mm/yy) to (dd/m | m/yy) | | |
| From (dd/mm/yy) to (dd/mm/yy) SECTION E: Partner's declaration (must be completed) | | | |
| The following points apply in all circumstances | : | | |
| I am giving notice that I am entitled to and inter | | | |
| • I am the father of the child, or at the time of the | | | |
| and/or the mother's partner living with her and the child in an enduring relationship | | | |
| I have been continuously employed for 26 weeks at the end of the 15th week before the week in which the child is due | | | |
| | any pariod of CDL that | t Lintand to take | |
| • I will remain employed with this employer until any period of SPL that I intend to take | | | |
| I have the main responsibility for the care of our child at the time of the child's birth (along with the child's mother who has made the declaration below) | | | |
| • I will give my employer a copy of my child's birth certificate or a declaration of the date and place of the birth | | | |
| where no certificate is available if my employer asks for this within 14 days of the date of this notice I will give my employer the name and address of the mother's employer or a declaration that she does not | | | |
| have an employer if my employer asks for this within 14 days of the date of this notice | | | |
| • I will inform my employer immediately if I am no longer caring for our child or if my partner revokes her notice to curtail her maternity leave or SMP/maternity allowance period | | | |
| I (or my partner) have given a period of SPL notice | | | |
| The information provided in this declaration is accurate and meets the notification requirements for SPL | | | |
| Signature of partner | | | |
| Date partner signed | | | |
| · · · | | | |

SECTION F: Mother's declaration (must be completed)

The following points apply in all circumstances:

- I had (or will have) the main responsibility for the care of the child at the time of the birth (along with my partner who has made the declaration above)
- I am entitled to maternity leave in respect of the child and I have curtailed (or will curtail) my entitlement to maternity leave (or I have returned to work)
- I have, or will have, been employed or self-employed in England, Scotland or Wales in 26 weeks of the 66 weeks before the expected week of childbirth
- I have (or will have) earned in total at least £390 in 13 weeks of the 66 weeks before the expected week of birth
- I will immediately inform my partner if I revoke my notice to curtail my maternity leave or if I am not entitled to maternity leave
- I consent to my partner's intended SPL as set out above
- I consent to my partner's employer processing the information I have provided
- The information provided in this declaration is accurate and meets the notification requirements for SPL

| Signature of mother | |
|---------------------|--|
| Date mother signed | |