



***Harrogate and Rural District
Clinical Commissioning Group***

ADOPTION LEAVE APPENDICES DOCUMENT

**These appendices are to be used in accordance with the
Adoption Section
of the
Maternity, Maternity Support (Paternity), Adoption and Parental Leave Policy,
HaRD 014**

- Appendix 1 Adoption Leave Options / Entitlements
- Appendix 2 A1 - Application for Adoption Leave
- Appendix 3 Initial Letter (Adoption Leave)
- Appendix 4 Letter to employee (Adoption Leave)
- Appendix 5 KIT Record

ADOPTION LEAVE OPTIONS / ENTITLEMENTS

	Returning to work following Adoption Leave	Not returning / undecided whether to return to work following Adoption Leave
12 months or more continuous service with NHS at the end of the week prior to being matched with a child	<p><u>OPTION 1</u></p> <ul style="list-style-type: none"> • 8 weeks at Full Pay including any SAP, MA or equivalent benefits receivable • 18 weeks at Half Pay reduced only where half pay plus SAP, MA or equivalent benefits exceeds full pay • 13 weeks at SAP (if payable) • 13 weeks Unpaid Leave 	<p><u>OPTION 2</u></p> <ul style="list-style-type: none"> • 6 weeks SAP, paid as 90% of Full Pay (of average weekly earnings) • 33 weeks at the lesser of standard rate SAP or 90% of average weekly earnings • 13 weeks Unpaid Leave
More than 26 weeks but less than 12 months continuous service with NHS at the end of the week prior to being matched with a child	<p><u>OPTION 3</u></p> <ul style="list-style-type: none"> • 39 weeks at the lesser standard rate of SAP or 90% of average weekly earnings • 13 weeks Unpaid Leave 	<p><u>OPTION 4</u></p> <ul style="list-style-type: none"> • 39 weeks at the lesser standard rate of SAP or 90% of average weekly earnings • 13 weeks Unpaid Leave
Less than 26 weeks continuous service with NHS at the end of the week prior to being matched with a child	<p><u>OPTION 5</u></p> <ul style="list-style-type: none"> • 52 weeks Unpaid Leave 	<p><u>OPTION 6</u></p> <ul style="list-style-type: none"> • 52 weeks Unpaid Leave

PERSONAL INFORMATION		
Full Name	Assignment Number:	
Job Title:	Base:	
Line Manager:	Hours Worked:	
Date of Appointment with NHS:	Date Joined this Organisation:	
Address for Correspondence:		
		Postcode:
E-mail Address:		
Contact Numbers:		
Home:	Work:	Mobile:
ADOPTION OPTIONS		
I wish my first day of adoption leave to be:		
Matching Certificate Attached:	Yes / No	If not, please forward as soon as reasonably practicable
I have read and understood the Adoption Leave Policy and I wish to take the following Adoption Leave (please tick)		
Option	Detail	Tick
Option 1	I have 12 months or more continuous service with the NHS and I wish to take 52 Weeks Adoption Leave including 39 weeks occupational and statutory adoption pay, plus up to 13 weeks unpaid leave. I am entitled to return to work at any time up to 52 weeks after the date I left work, and if I do return earlier I will inform the organisation in writing 28 days before I return of this intention. I understand I must return to work with *organisation* or another NHS organisation for a minimum period of 13 weeks. In the event of failing to return to work, I agree that I shall be liable to repay any money not due to me.	
Option 2	I have 12 months or more continuous service with the NHS, but I am undecided at this stage about my commitment to return to work. Please therefore, pay my Statutory Adoption Pay only. In the event of my return to work for a minimum period of 13 weeks, the organisation will pay the balance of my Occupational Adoption Pay.	
Option 3	I have more than 26 weeks service with *organisation* but less than 12 months continuous service with the NHS at the beginning of the week I have been notified by the Adoption Agency of being matched with a child and maybe entitled to Statutory Adoption Pay. I will remain absent from work for up to a total of 52 weeks, after which I will be returning to work.	
Option 4	I have more than 26 weeks continuous service with the NHS at the beginning of the week I have been notified by the Adoption Agency of being matched with a child and will not be returning to work. Please arrange for payment of my Statutory Adoption pay.	
Option 5	I have less than 26 weeks continuous service with the NHS at the beginning of the week I have been notified by the Adoption Agency of being matched with a child and will be taking unpaid Adoption Leave for a period of up to 52 weeks after which I will be returning to work.	

Option 6	I have less than 26 weeks continuous service with the NHS at the beginning of the week I have been notified by the Adoption Agency of being matched with a child and will not be returning to work.	
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SIGNATURES

I confirm have read the Adoption Policy and attachments and fully understand and accept the conditions that permit such leave to be granted to me

Signed (Employee): _____ **Signed (Manager):** _____

Print Name: _____ **Print Name:** _____

Date: _____ **Date:** _____

Please forward the original of this form to the Human Resources Team **within 7 days** of being notified of being matched with a child.

Office Use Only - Matching Certificate Seen? Yes / No Copy of forms taken and sent to payroll (date and initials)

DATE

Private & Confidential

Human Resources Team
North Yorkshire & Humber CSU

ADDRESS
ADDRESS
ADDRESS

Tel no
Email:

Dear (NAME),

RE: ADOPTION LEAVE - (NAME) – (N.I. NUMBER) - (ASSIGNMENT NUMBER)

Thank you for advising me that you have started the process to adopt a child.

Please find enclosed the Application for Adoption Leave form which will need to be completed by yourself, signed by your Manager and sent to the above address together with your Matching Certificate.

Once we have all the relevant forms and information we require, I will write to you further confirming your specified dates of Adoption Leave and all other relevant information you will require whilst on Adoption Leave. This will also include our Adoption / Childcare pack containing useful information within in.

If you would like to discuss your entitlement with a member of the Human Resources Team, please do not hesitate to contact me and we can arrange this for you.

With best wishes

Human Resources Support Officer

CC: Line Manager

DATE

Private & Confidential

Human Resources Team
North Yorkshire & Humber CSU

ADDRESS
ADDRESS
ADDRESS

Tel no:
Email:

Dear (NAME),

RE: ADOPTION LEAVE AND PAY - (NAME) – (N.I. NUMBER) - (ASSIGNMENT NUMBER)

Congratulations and thank you for advising me about your successful match to adopt a child, and the date your child is due to be placed. I can confirm I have received your application for Adoption Leave. As requested in your application form, you have chosen the following option:

(Delete as required)

OPTION 1

- **8 weeks at full pay including any SMP, Adoption Allowance (AA) or equivalent benefits receivable;**
- **18 weeks at half pay reduced only where half pay plus any SAP, Adoption Allowance (AA) or equivalent benefits payable exceeds full pay;**
- **13 weeks at SAP, if payable;**
- **13 weeks unpaid leave.**

Or

OPTION 2

- **6 weeks SAP, paid as 90% of full pay (average weekly earnings);**
- **33 weeks at the lesser of standard rate SAP or 90% of average weekly earnings;**
- **13 weeks unpaid leave.**

Or

OPTION 3 AND 4

- **6 weeks at 90% of full pay;**
- **33 weeks at the lesser of standard rate SAP or 90% of average weekly earnings;**
- **13 weeks unpaid leave.**

Or

OPTION 5 AND 6

- **52 weeks Unpaid Leave**

You have indicated you wish your Adoption Leave to start on (INSERT DATE). However if you wish to change this date you must, if at all possible, advise me at least 28 days before your new proposed start date, or 28 days prior to your original start date; whichever would occur soonest due to the change.

If you decide to return to work before your Adoption Leave is due to end on (INSERT DATE), you must give me at least 8 weeks' notice of the date you intend to return to work to ensure Payroll can be informed accordingly.

Absence on Adoption Leave, whether paid or unpaid, counts as service towards the normal annual increment. Annual leave will continue to accrue during Adoption Leave, whether paid or unpaid, however Bank Holidays do not accrue.

Pension contributions will be deducted from your salary as normal during paid Adoption Leave and continue to be payable during unpaid leave. On return to work, arrears of contributions will be recovered and deducted from your salary over an agreed period. Please contact the pensions department direct to make the necessary arrangements.

Before you begin your Adoption Leave please discuss and arrange with your manager how you will keep in touch during your time off. This is to enable you to continue to be in receipt of the most recent staff team briefs, current vacancies, or any other relevant and important information. There is also the option of Keep in Touch days, which would enable you to work for up to 10 voluntary occasions during your adoption leave without losing any Statutory Adoption Pay. Please see Appendix 17 for further details.

(IF STATED RETURNING ON APPLICATION)

If you decide not to return to work following your Adoption Leave you must still give the required notice period as per your contract of employment, ensuring you return to work for the required 3 month period, to comply with regulations or you may be liable to pay back any Adoption pay received less SAP.

Please do not hesitate to contact me if you have any questions about any aspect of your adoption entitlement.

With best wishes
Human Resources Support Officer

MATERNITY KEEP IN TOUCH

Keeping In Touch (Kit) Occasions

The employee will be able to work **up to a maximum of 10** voluntary occasions during his/her Maternity, Additional Maternity Support (Paternity) or Adoption Leave without losing any Statutory Maternity/Additional Maternity Support (Paternity) /Adoption Pay.

KIT occasions are intended to help employees keep in touch with the workplace and could also help ease eventual return to work. The type of work done could be attending work for a training course, team meetings or for an appraisal interview. These are just examples, but whether employees take advantage of these occasions is their choice. Time that is worked should be agreed by both employee and their manager. Their manager does not have any right to insist that the employee works any KIT occasions.

Any work carried out as a KIT occasion, (the minimum time is half an hour) will be counted as a whole KIT occasion. They can be taken as single days; hours; in blocks of two or more days; or can be taken consecutively. In order to ensure that employees still qualify to receive SMP, SAPP or SAP **no more than 10 occasions should be worked during the entire Maternity/Additional Maternity Support (Paternity) /Adoption Leave period.**

Payment for KIT

Payment will be received for any KIT occasions that are worked, paid at the employees basic rate for the hours worked. However the employee will not be able to take their earnings above full pay by receiving payment for KIT. The amount of pay received for KIT will vary depending on where they occur in an employee's Maternity/Additional Maternity Support (Paternity) /Adoption Leave (e.g. if the employee is on full pay they will receive no additional pay but if they are on unpaid leave then they would receive the full hourly rate for the time worked) as explained in the table below.

When the KIT occasion occurs	How much will be paid
Weeks 1-8 of Maternity / Adoption leave	No additional payment if already receiving full pay
Weeks 9-26 of Maternity / Additional Maternity Support (Paternity) (20 weeks after birth or placement of child) / Adoption leave	Hourly rate will be paid until full pay is met for that week
Weeks 27-39 of Maternity / Additional Maternity Support (Paternity) / Adoption leave	Hourly rate will be paid until full pay is met for that week
Weeks 40-52 of Maternity / Additional Maternity Support (Paternity) / Adoption leave	Full hourly rate for the hours worked as this period of maternity is taken as unpaid leave.

It is also possible for employees to claim the time back that they work as time in lieu. This may be of particular interest when the hours work fall at the beginning of the Maternity / Additional Maternity Support (Paternity) / Adoption leave period when no or little extra pay would be received for the hours worked.

Either payment of hours worked will be given *or* time in lieu may be taken. It is not possible for an employee to receive payment for hours worked and then claim the time back in lieu as well.

Payment for hours worked as Keep in Touch will be paid when the employee returns to work.

A change form should be submitted to inform payroll of your return to work date and any changes to be made e.g. working hours. Hours worked should be recorded on the KIT Record Form and submitted to Payroll in order to claim payment, where eligible.

If you require any further information please refer to the Maternity/Paternity/Adoption sections within this policy, or contact the Human Resources Team.

Keep in Touch Record

After carefully reading the guidelines on the previous page, please record any hours worked as Keep in Touch whilst on Maternity, Additional Maternity Support (Paternity) or Adoption leave in the table below. Payment for hours worked will be paid when the employee returns to work.

Name of employee:

Base:

Payroll (assignment) number: _ _ _ _ _

Type of Leave: Maternity / Additional Maternity Support (Paternity) / Adoption Leave (delete as appropriate.)

Date	Week number of leave	Start time	Finish time	Total hours worked (excluding breaks)	Please indicate: time in lieu or payment

Employee's signature:

Manager's signature:

Once signed by both employee and Manager, please forward a copy to:

Human Resources Team, North Yorkshire & Humber CSU, Health House, Grange Park Lane, Willerby, HU10 6DT

Human Resources Team, North Yorkshire & Humber CSU, Unit 1, Triune Court, York, YO32 9GZ