



# ULSTER UNIVERSITY

## POLICY GUIDANCE ON SHARED PARENTAL LEAVE

and

## STATUTORY SHARED PARENTAL PAY

## **Introduction**

The University recognises the challenges that may arise when parents have to balance work and childcare responsibilities. To help achieve this balance it is now possible for University employees and their partners to share rights to maternity leave and the statutory element of maternity pay. This will give employees more flexibility and choice when deciding on caring commitments during the first year following the birth of a child.

The purpose of this guidance document is to outline the key facts in regard to employee's rights to sharing maternity leave and the statutory element of maternity pay.

The rights outlined in this guidance document are in compliance with the statutory rights detailed in the Work and Families (Northern Ireland) Act 2015.

## **What is Shared Parental Leave?**

Shared Parental Leave (SPL) provides eligible parents with options beyond traditional maternity leave during the first year following the birth of their child (or the first year following matching in the case of adoption).

If you are an employee of the University and you are on maternity leave or due to take maternity leave you can decide to curtail the duration of your maternity leave and share the balance of your maternity leave with your partner (subject to eligibility criteria). Your partner's entitlements will be determined by his/her employer's arrangements for SPL however it is worth noting that all employers in Northern Ireland are required to have in place arrangements to facilitate SPL.

If you are an employee of the University and your partner is on maternity leave she may curtail her maternity leave and share the remaining balance of her maternity leave with you (subject to eligibility criteria).

SPL can be requested as a continuous block of leave or in up to three separate blocks but must be taken within one year of the birth of the child.

## **What is Statutory Shared Parental Pay?**

Statutory Shared Parental Pay (ShPP) provides for the sharing of the statutory element of maternity pay (SMP). A mother may curtail the duration of her maternity pay period and share the remaining balance of her SMP with her partner (subject to eligibility criteria).

If you are an employee of the University and you are on maternity leave or due to take maternity leave you can decide to curtail the duration of your maternity leave and share the statutory element of your maternity pay with your partner. When you return to work as normal you will receive your normal salary. Your partner may then apply to their employer for payment of the remaining balance of the statutory element of your maternity pay.

If you are an employee of the University and your partner is in receipt of statutory maternity pay she may curtail the duration of her maternity pay period and share the remaining balance of the statutory element of her maternity pay with you. During this period you will cease to be entitled to your normal pay from the University but you will receive a payment equivalent to SMP (subject to eligibility criteria).

## **Who is eligible for SPL and ShPP?**

If you are an employee of the University and you decide to curtail the duration of your maternity leave and share the remaining balance of your maternity leave and/or the statutory element of your maternity pay with your partner the following eligibility criteria will apply (i.e. if you are the partner giving away the share):

- You must be eligible for statutory maternity leave and/or SMP.
- You must have at least 26 weeks continuous employment by the end of the 15<sup>th</sup> week before the child is due.
- You and the partner in receipt of the SPL and ShPP must share in the care of the child.
- You must take a minimum of two weeks maternity leave immediately after the birth of the child.
- You must provide the University with 8 weeks notice of your intention to commence and/or vary SPL and ShPP.
- Your partner must contact their employer to ensure that they satisfy the conditions of their employer's SPL and ShPP arrangements.

If you are an employee of the University and your partner decides to curtail her maternity leave and share the remaining balance of her maternity leave and/or the statutory element of her maternity pay with you the following eligibility criteria apply (i.e. if you are the partner in receipt of the share):

- You must provide the University with 8 weeks notice of your intention to commence a period of SPL and/or ShPP.
- You and your partner must share in the care of the child.
- You must have been in employment (which may include self-employment) for at least 26 weeks during the 66 weeks before the baby is due.
- You must have earned at least £30 per week on average for 13 of the 66 weeks before the baby is due.
- Your partner must be eligible for statutory maternity leave and/or SMP.
- Your partner must have at least 26 weeks continuous employment by the 15<sup>th</sup> week before the child is born.
- Your partner must take a minimum of two weeks maternity leave.
- Your partner must contact their employer to ensure that they satisfy the conditions of their employer's SPL and ShPP arrangements.

Please note that ShPP is paid at the statutory rate set by the Government equivalent to SMP (£138.18 per week as at March 2015 although this normally increases annually. For the current rate of SMP please visit [www.nidirect.gov.uk](http://www.nidirect.gov.uk)) or 90% of your average weekly earnings if this is lower than the rate set by government (i.e. the maximum ShPP which any University employee can receive is £138.18 per week as at March 2015). If you are in receipt of ShPP you will cease to receive your normal salary for the duration of the sharing period and instead will receive payment at the statutory rate.

## **If I am on maternity leave from the University or due to commence maternity leave and I wish to share my leave and/or my SMP with my partner, who works for another employer, what do I and my partner need to do?**

You must notify the University that you wish to curtail the duration of your maternity leave and maternity pay. To do so you should complete the proforma at Appendix A. You and your partner also need to complete and sign the 'Joint Declaration of Entitlement' at Appendix B.

You will receive a reply to your request within 14 days. During these 14 days your manager may discuss the details of your request with you.

Your partner should contact their employer to establish the requirements of their employer's SPL and ShPP scheme. The schemes offered by other employers may vary but it is likely that your partner's employer will ask you to provide a further 'Joint Declaration' to confirm that you have curtailed the duration of your maternity leave and the duration of your SMP period. It is also likely that your partner's employer will provide this information to HMRC to ensure that only one of you is claiming statutory payments (i.e. either SMP or ShPP).

**If my partner, who works for another employer, is on maternity leave or due to commence maternity leave, and wishes to share her leave and/or SMP with me what do I and my partner need to do?**

You and your partner must jointly complete the proforma entitled the 'Joint Declaration of Entitlement' at Appendix B. As part of this your partner must provide a signed declaration that she will curtail her maternity leave period and will cease to claim SMP. You and your partner should note that the University may be required to share this information with HMRC.

You will receive a reply to your request within 14 days. During these 14 days your manager may discuss the details of your request with you.

**How much of the normal statutory maternity leave period and SMP can be shared?**

The maximum period of statutory maternity leave is 52 week (subject to eligibility) and up to 50 of these weeks can be shared. You cannot take Shared Parental Leave in the two weeks immediately following the birth of the child.

The maximum number of weeks of SMP which can be shared is 37(subject to eligibility for SMP).

**Does SPL and ShPP have to be taken in one continuous block?**

No. It is possible for SPL and ShPP to be split into a maximum of three blocks.

An employee of the University has an automatic right to take a continuous block of SPL and ShPP provided they meet the eligibility criteria detailed above.

While the University will consider requests for an individual maternity leave or SMP period to be shared in up to three discontinuous blocks there is no automatic entitlement to the second and third block of SPL or ShPP.

**Can SPL or ShPP be cancelled or changed after it commences?**

Yes, provided you give the University at least eight weeks notice of the cancellation or change.

If you have already requested SPL and/or ShPP and wish to vary this request or book a further period of SPL and/or ShPP you must complete the request form at Appendix 3.

**I am employed by the University and on SPL. Do I continue to accrue annual leave while I am on SPL?**

Yes. You will continue to accrue annual leave during any period while you are on SPL.

It is however your responsibility to ensure that you plan how to use your annual leave before and after the period of SPL so that you exhaust your leave entitlement during the leave year in line with your contract of employment.

**I am employed by the University and on SPL .Will the University continue to contribute to my pension while I am on SPL?**

You will have to decide if you wish to pay your normal employee contributions to your pension provider. If you continue to pay your contributions during your period of SPL the University will continue to make the normal employer contributions. You should consult directly with the University's Pension Manager.

**I am employed by the University and on SPL. Am I entitled to occupational sick pay from the University while I am on SPL?**

No. You can however cancel your SPL provided that you give eight weeks' notice to the University.

**I am employed by the University and on SPL. Is there any provision for 'Keeping in Touch (KIT)' days similar to those in the University's maternity leave policy?**

Yes. During your SPL the University may make reasonable contact with you and you may make contact with the University.

By mutual consent you can also carry out some work on behalf of the University on a limited number of days known as 'Shared Parental Leave Keeping In Touch (SPLIT)' days. SPLIT days must be agreed in advance between you and the University. You are not required to agree to work on SPLIT days and the University is not required to grant requests from you for SPLIT days. The remuneration arrangements for SPLIT days will be agreed between you and the University in advance.

**I am adopting a child. Do I have any rights in regard to SPL and ShPP?**

Yes. Exactly the same rights will apply. The primary adopter will have the right to share his/her adoption leave and/or Statutory Adoption Pay with his/her partner during the first year following matching (subject to the eligibility criteria detailed above).



**Shared Parental Leave & Shared Statutory Parental Pay**

**Request to Curtail Maternity Leave/Adoption Leave**

This form should be completed by University employees who wish to curtail the duration of their maternity leave/adoption leave and share their entitlement to maternity leave/adoption leave and/or the statutory element of their maternity/adoption pay with their partner.

Eligibility criteria for Shared Parental Leave (SPL) and Statutory Shared Parental Pay (ShPP) are detailed in the attached guidance document.

**1. Details of the employee who wishes to curtail their maternity leave or adoption leave. (Hereafter referred to as you).**

<b>Employee Name</b>	
Staff Number	
Job Title	
School/Department	

**2. Details of your partner who wishes to accept the share.**

Name of your Partner	
Your Partner's Employer	
Partner's National Insurance Number	

**3. Details of your maternity leave or adoption leave.**

3(a) To be completed if maternity leave/pay is to be curtailed.

Have you received confirmation from the University that you are eligible for Statutory Maternity Pay (SMP)? Yes/No

When is your SMP period due to commence? \_\_\_\_\_

3(b) To be completed if adoption leave/pay is to be curtailed.

Have you received confirmation from the University that you are eligible for Statutory Adoption Pay? Yes/No

When is your Statutory Adoption Pay period due to commence? \_\_\_\_\_

#### 4. Details of the period

The table below details the proposed dates for the SPL and should be completed jointly by both partners.

	Start Date	Number of weeks to be shared*
SPL Period One		
SPL Period Two		
SPL Period Three		

The table below details the proposed dates for the ShPP and should be completed jointly by both partners.

	Start Date	Number of weeks to be shared*
ShPP Period One		
ShPP Period Two		
ShPP Period Three		

**Note:** While the University will consider requests for an individual maternity leave to be shared in up to three discontinuous blocks there is no automatic entitlement to the second and third block of SPL or ShPP.

\*SPL and/or ShPP must be taken in weeks rather than days.

I hereby request that I curtail my maternity leave/adoption leave for the purpose of commencing a period of SPL and/or a ShPP arrangement with my partner.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE:** You and your partner must also jointly complete Appendix B 'Declaration of Entitlement to Shared Parental Leave & Shared Statutory Parental Pay

***This form should be sent to your Line Manager who will forward a copy to the HR Department.***

**To be completed by the Line Manager.**

Date notification of intention to share received: \_\_\_\_\_

If the employee has requested SPL to be taken in more than one block do you agree to the second and third block (there is no automatic entitlement to the second and third block)? You may wish to consult with your HR Business Partner before completing this section.

Yes/No/N/A

If 'No' please explain why the second and/or third block of SPL cannot be granted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***After completing this section the Line Manager must forward this proforma to the HR Department.***

**To be completed by HR Business Partner.**

Has the employee also completed Appendix B? Yes/No

Confirmation Letter sent to employee Signed: \_\_\_\_\_ Date \_\_\_\_\_

Actioned on HR Database Signed: \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by Salaries and Wages.**

Curtailment actioned on payroll Signed: \_\_\_\_\_ Date \_\_\_\_\_



**Joint Declaration of Entitlement to  
Shared Parental Leave & Shared Statutory Parental Pay**

**This form must be completed jointly by both the employee who is accepting the share and by the partner who is giving the share.**

Eligibility criteria for Shared Parental Leave (SPL) and Statutory Shared Parental Pay (ShPP) are detailed in the attached guidance document

**1. Details of the person who wishes to give a share of their maternity leave or adoption leave to their partner.**

<b>Name</b>	
National Insurance Number	
Staff Number	
Job Title	
Employer's Name	
Employer's Address	

**2. Details of the person who wishes to accept a share of their partner's maternity leave or adoption leave.**

<b>Name</b>	
National Insurance Number	
Staff Number	
Job Title	
Employer's Name	
Employer's Address	

**3. Details of the maternity leave or adoption leave.**

What is/was the expected date of birth/matching?	
What was the actual date of birth/matching?	
On what date did/will the mother or primary adopter commence maternity/adoption leave?	



#### 4. Details of Proposed Dates

The table below details the proposed dates for the SPL and should be completed jointly by both partners.

	Start Date	Number of weeks to be shared*
SPL Period One		
SPL Period Two		
SPL Period Three		

The table below details the proposed dates for the ShPP and should be completed jointly by both partners.

	Start Date	Number of weeks to be shared*
ShPP Period One		
ShPP Period Two		
ShPP Period Three		

\*SPL and/or ShPP must be taken in weeks rather than days.

**Note:** While the University will consider requests for an individual maternity leave to be shared in up to three discontinuous blocks there is no automatic entitlement to the second and third block of SPL or ShPP.

#### 5. Declaration from the Mother or Primary Adopter

This is a formal declaration from the mother or primary adopter of the child.

Are you the Mother/Primary Adopter of the child?	Yes/No
Are you entitled to Statutory Maternity Leave or Statutory Adoption Leave?	Yes/No
Have you worked for the same employer for 26 weeks by the end of the 15 <sup>th</sup> week before the child is due to be born?	Yes/No
Have you given your employer written notification of your intention to curtail your maternity leave and/or SMP period?**	Yes/No
Do you and your partner named at 6 below share in the care of the child?	Yes/No
Have you/will you take at least 2 weeks maternity leave/adoption leave immediately following the birth/matching of the child?	Yes/No
What is the name of your employer?	
What is your employer's address?	
What is your National Insurance Number?	
I hereby declare that the information above is true and accurate and I recognise that it is my responsibility to check my eligibility for SPL and/or ShPP. I also understand that the University may pass this declaration to HMRC and may retain a copy of this declaration.	
Print Name: _____ Signed: _____ Date: _____	

**\*\*If the mother or primary adopter is employed by the University Appendix A must also be completed.**

**6. Declaration from the partner who wishes to accept a share of their partner's maternity leave or adoption leave.**

This is a formal declaration from the partner who wishes to accept a share of their partner's maternity leave or adoption leave.

Do you and your partner named at 5 above share in the care of the child?	Yes/No
Are you the father of the child, or the mother's partner, or civil partner, or spouse?	Yes/No
Have you been in employment (which may include self-employment) for at least 26 weeks during the 66 weeks before the child is/was due?	Yes/No
Have you earned at least £30 per week on average for 13 of the 66 weeks before the baby is due?	Yes/No
Have you and your partner agreed to the amount of shared leave detailed at 4 above?	Yes/No
What is the name of your employer?	
What is your employer's address?	
What is your National Insurance Number?	
<p>I hereby declare that the information above is true and accurate and I recognise that it is my responsibility to check my eligibility for SPL and/or ShPP. I also understand that the University may pass this declaration to HMRC and may retain a copy of this declaration.</p> <p>Print Name: _____ Signed: _____  Date: _____</p>	

**Note:** If you are an employee of the University and you receive ShPP payments to which you are not eligible you will be required to reimburse any money received.

***This form should be sent to your Line Manager who will forward a copy to the HR Department.***

<b>To be completed by the Line Manager.</b>	
Date received: _____	
<p>If the employee has requested SPL to be taken in more than one block do you agree to the second and third block (there is no automatic entitlement to the second and third block)? You may wish to consult with your HR Business Partner before completing this section.</p> <p style="text-align: right;">Yes/No/N/A</p>	
<p>If 'No' please explain why the second and/or third block of SPL cannot be granted.</p> <p>_____</p> <p>_____</p>	
<p><b>Signed:</b> _____ <b>Date:</b> _____</p> <p><b>After completing this section the Line Manager must forward this proforma to the HR Department.</b></p>	
<b>To be completed by HR Business Partner.</b>	
<p>If the person providing the share is an employee of the University has she/he also completed Appendix A? Yes/No/N/A</p>	
Confirmation Letter sent to employee	Signed: _____ Date: _____
Actioned on HR Database	Signed: _____ Date: _____
<b>To be completed by Salaries and Wages.</b>	
Partner in receipt of share moved to SMP (if employed by Ulster)	Signed: _____ Date: _____



**Request to Vary or Book Shared Parental Leave**

This form is for use by employees who have already submitted a 'Joint Declaration of Entitlement to Shared Parental Leave and/or Shared Statutory Parental Pay' (Appendix B) and now wish to vary or book a further period of Shared Parental Leave and/or Shared Statutory Parental Pay.

1. Details of the person who wishes to give a share of their maternity leave or adoption leave to their partner.

<b>Name</b>	
National Insurance Number	
Staff Number	
Job Title	
Employer's Name	
Employer's Address	

2. Details of the person who wishes to accept a share of their partner's maternity leave or adoption leave.

<b>Name</b>	
National Insurance Number	
Staff Number	
Job Title	
Employer's Name	
Employer's Address	

3. Details of previously submitted Joint Declaration of Entitlement(Appendix B)

On what date did you submit Appendix B to your Manager?	
Who did you submit it to?	
Please summarise the details of the Shared Parental Leave and/or Shared Parental Pay which you originally requested in Appendix B.	

**4. Details for how you wish to vary the request detailed in the previously submitted Joint Declaration of Entitlement.**

Do you wish to vary the dates specified in the previously submitted Joint Declaration of Entitlement?

**Yes/No** (delete as appropriate)

If you do not wish to vary the request detailed in your Joint Declaration but you do wish to book an additional sharing period please go to question 5 below.

If you do wish to vary the request detailed in your Joint Declaration please outline below how you wish to vary your original request.

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**5. Details of any further period(s) of shared parental leave and/or shared parental pay.**

The table below details the proposed dates for the Shared Parental Leave and should be completed jointly by both partners.

	<b>Start Date</b>	<b>Number of weeks to be shared*</b>
Shared Parental Leave Period One		
Shared Parental Leave Period Two		
Shared Parental Leave Period Three		

The table below details the proposed dates for the Statutory Shared Parental Pay and should be completed jointly by both partners.

	<b>Start Date</b>	<b>Number of weeks to be shared*</b>
Statutory Shared Parental Pay Period One		
Statutory Shared Parental Pay Period Two		
Statutory Shared Parental Pay Period Three		

\*Shared Parental Leave and/or Statutory Shared Parental Pay must be taken in weeks rather than days.

**6. To be completed by the partner who wishes to give a share of their maternity leave or adoption leave to their partner.**

I hereby declare that the information above is true and accurate and I recognise that it is my responsibility to check my eligibility for SPL and/or ShPP. I also understand that the University may pass this declaration to HMRC and may retain a copy of this declaration.

Print Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**7. To be completed by the partner who wishes to accept a share of their partner's maternity leave or adoption leave to their partner.**

I hereby declare that the information above is true and accurate and I recognise that it is my responsibility to check my eligibility for SPL and/or ShPP. I also understand that the University may pass this declaration to HMRC and may retain a copy of this declaration.

Print Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

***This form should be sent to your Line Manager who will forward a copy to the HR Department***

**To be completed by the Line Manager.**

Date received: \_\_\_\_\_

If the employee has requested SPL to be taken in more than one block do you agree to the second and third block (there is no automatic entitlement to the second and third block)? You may wish to consult with your HR Business Partner before completing this section.

Yes/No/N/A

If 'No' please explain why the second and/or third block of SPL cannot be granted.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

***After completing this section the Line Manager must forward this proforma to the HR Department.***

**To be completed by HR Business Partner.**

If the person providing the share is an employee of the University has she/he also completed Appendix A? Yes/No/N/A

Confirmation Letter sent to employee Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Actioned on HR Database Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by Salaries and Wages.**

Partner in receipt of Share moved to SMP (if employed by Ulster) Signed: \_\_\_\_\_ Date: \_\_\_\_\_