



Tudor Grange Academies Trust

TGAT Paternity Policy (Birth)

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|-----------------------------|---------|--|
| October 2020 | 1.0 | New policy |
| October 2022 | 1.0 | Biennial review – no change to content |
| 08.04.2024 | 1.1 | Updated in line with legislative changes. Update para 3.1, new para 3.2, update para 4.2 and 4.4, section 6 update to entitlements table Update to section B of annex A. |
| 03.05.2024 | 1.2 | Correction of typographical errors |

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1 Scope

- 1.1 This policy provides paternity benefits which comply with both the letter and the spirit of the law and are in excess of statutory requirements. This policy applies to all employees and aims to inform them of their entitlement to contractual and statutory paternity rights. In the case of multiple births, the term child may be read as children and the term birth as births.
- 1.2 This policy applies to all employees, however if an employee as enhanced terms protected under TUPE, the enhanced terms will apply.
- 1.3 In the case of adoption, please refer to the Paternity Leave and Pay (Adoption) Policy and Employee Application Form.

2 Frequently Used Terms

- 2.1 The definitions in this paragraph apply in this guidance.

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| Expected week of childbirth (EWC) | The week, beginning on a Sunday, in which the doctor or midwife expects your child to be born. |
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| Parent | One of two people who will share the main responsibility for the child's upbringing (and who may be either the mother, the father, or the mother's partner if not the father). |
| Partner | Spouse, civil partner or someone living with another person in an enduring family relationship, but not a sibling, child, parent, grandparent, grandchild, aunt, uncle, niece or nephew. |
| Qualifying Week | The fifteenth week before the expected week of childbirth. |

3 Eligibility for paternity Leave

3.1 The employee must:

- Have been continuously employed by the employer for at least 26 weeks up to any day in the qualifying week.
- Be either the non-birthing parent of the child or the partner of the birthing parent; *and*
- Be taking the time off to support the mother or care for the child and have or expect to have responsibility for the child's upbringing; and
- Give written notice no later than 28 days before the requested leave date or the end of the expected week of childbirth, [EWC] if leave is expected to start immediately on the birth of the child of
 - a) the expected date of the child's birth
 - b) whether they wish to take one or two week's leave
 - c) when they want their Paternity Leave to start [see below]

3.2 If the employee opts to take one week they can give notice of a further week of paternity leave within 52 weeks of the child's birth.

3.3 If the employee is eligible and gives the required written notice they are entitled to take the leave; it cannot be refused or deferred by the employer.

4 The Entitlement to Paternity Leave and how it can be Taken

4.1 Paternity Leave is not available if the employee has taken any Shared Parental Leave in respect of the child.

4.2 The entitlement is to up to two weeks (either one block or two blocks totalling not more than two weeks) paid leave, to be taken within 52 weeks days of the birth date.

4.3 The leave can start on any day of the week, and whilst an employee can apply to take the leave on any date falling after the first day of the EWC, the leave cannot actually commence prior to the date on which the child is born. If the child is born later in the EWC, or later than the EWC, the leave must be delayed until the birth.

4.4 If the child is born earlier than expected, Paternity Leave must be taken between the date of birth and 52 weeks from the first day of the EWC.

4.5 If an employee specifies the date of birth as the day they wish to start their leave and they are at work on that day, their leave will begin on the next day.

5 Changing the Start Date of PL

- 5.1 If the employee wants to change the start date, they must give the following written notice:
- If they want to change their leave so it starts on the date of birth, at least 28 days before the first day of the EWC
 - If they want to change their leave so it starts on a particular date, 28 days before that date
 - If they want to change their leave so it starts a specified number of days after the birth, at least 28 days (minus the specified number of days) before the first day of the EWC; e.g. if the employee wants to start their leave 14 days after the birth and the EWC begins on 16 July, they must notify you of the new date on 2 July i.e. 28 days before 14 days after 16 July
- 5.2 When it is not possible to give the required written notice, for example when a child arrives late or early, the employee should inform you as soon as reasonably practicable as to any date changes that may occur.
- 5.3 Where an employee has changed the start date of their leave, they should fill in a new application form.

6 Paternity entitlements

TGAT Entitlements

| Service at qualifying week | All Staff |
|----------------------------|--|
| < 26 weeks service | 1 week paternity Leave at full pay only |
| >26 weeks service | 1 or 2 blocks of paternity leave at full pay totalling not more than 2 weeks (inclusive of Statutory entitlements) |

7 Employment Rights During Leave

- 7.1 An employee who takes Paternity leave has the right not to be dismissed or subjected to any other detriment by reason of taking the leave. Continuous service will continue to accrue during paternity leave for all employees.
- 7.2 During Parental leave an employee has a statutory right to continue to benefit from all the terms and conditions of employment which would have applied to them had they been at work, except for the terms relating to wages or salary. The employee remains bound by their obligations of good faith, as well as any contractual terms relating to the giving of notice, disclosure of confidential information, acceptance of gifts and benefits and freedom to participate in another business/work elsewhere.

8 The Right to Return from Paternity Leave

- 8.1 An employee who has exercised their right to take SPL usually has the right to return to the same job that they were employed to do immediately prior to taking the leave. This right depends on the SPL having been one of the following under regulation 13:

- An isolated period of leave.
- The last of two or more consecutive periods of statutory leave (maternity, adoption, shared parental leave, parental and paternity leave) which did not include any:
- Period of parental leave of more than four weeks; or
- Period of statutory leave which when added to any other periods of statutory leave (excluding parental leave) taken in relation to the same child means that the total statutory leave taken in relation to that child totals more than 26 weeks.

8.2 If the above does not apply, and it is not reasonably practicable for the employer to return the employee to the job they were doing before their SPL, the employer is entitled to propose an alternative job for the employee to return to which is both suitable for them and appropriate for them to do in the circumstances.

8.3 The employee's right to return under regulation 13 is a right to return both:

- With their seniority, pension rights and similar rights:
- In a case where the employee is returning from consecutive periods of statutory leave which included a period of additional maternity leave or additional adoption leave, as they would have been if the period(s) of their employment prior to the additional maternity or adoption leave [as the case may be] were continuous with the period of employment following it; and
- In any other case, as they would have been had the employee not been absent.
- On terms and conditions not less favourable than those which would have applied had the employee not been absent on OSPL.

9 Time of to accompany a pregnant woman to an antenatal appointment

9.1 Employees and qualifying agency staff accompanying an expectant mother to her ante-natal appointments are entitled to unpaid leave for up to 2 appointments. Staff should complete the form at annexe C and forward to their line manager at least 10 days prior to the appointment.

10 Informing Payroll that an Employee will be taking SPL

10.1 The employee must complete the attached form Annexe A (teachers) or Annexe B (Associate staff). The original signed copy should be kept on the employee's personnel file and a copy of the completed form sent to the payroll team who will action the portal and forward the required documentation to the Trust's payroll providers.

10.2 Sections A to D are to be completed by the employee. Section E is to be completed by the line manager and must be signed by them to enable processing.

| Annex A | |
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| All STAFF Application for Statutory Paternity Leave (SPL) and Pay (SPP) BIRTH | |
| Section A – Employee Details (to be completed by the employee) | |
| Employee name: | |
| Address for correspondence: | |
| Payroll reference: | |
| National Insurance No: | |
| Name of school/academy employing: | |
| Post title/s: | |
| Relevant service and notice week: | |
| Copy of evidence attached: | Yes: <input type="checkbox"/> No: <input type="checkbox"/> |
| Section B – Application for SPL | |
| I [insert name] _____ confirm that I meet the qualifying conditions for SPL in that I: (You MUST be able to confirm all three conditions, please tick) | |
| a) wish to take SPL to care for the child and/or support the child’s mother, and | <input type="checkbox"/> |
| b) will be responsible for the child’s upbringing (apart from the mother), and | <input type="checkbox"/> |
| c) I am either: | <input type="checkbox"/> |
| i) the non-birthing parent of the child; or | <input type="checkbox"/> |
| ii) the partner of the child’s birthing parent; or | <input type="checkbox"/> |
| iii) living with the child’s birthing parent in an enduring family relationship and am NOT the child’s mother’s parent, grandparent, sister, brother, aunt or uncle | <input type="checkbox"/> |
| The mother has received a medical certificate confirming the EWC, (i.e. MAT BI Form) and the expected EWC is: Sunday date: _____ Actual date of birth: _____ | |
| I would like to take [one week OR a split period of Paternity leave] (Please delete as appropriate) . | |
| I would like my SPL to start (Please select and, where necessary complete one of the following) : | |

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| a) On the date of birth | <input type="checkbox"/> |
| b) _____[insert number] days after the date of birth | <input type="checkbox"/> |
| c) On _____ [insert date] (note that this date must be later than the expected week of childbirth) | <input type="checkbox"/> |
| Section C– Application for Statutory Paternity Pay (SPP) | |
| Please refer to the attached guidance document ‘the entitlement to SPP’ and tick the one applicable statement. | |
| a) I understand that I am not entitled to SPP as I do not meet the earnings threshold. I am applying for SPL only. (You will be sent form SPP1 to confirm) | <input type="checkbox"/> |
| b) I understand that I am entitled to SPP and contractual enhancement. Please arrange payment of 1 week at full pay inclusive of SPP. | <input type="checkbox"/> |
| c) I understand that I am entitled to SPP and contractual enhancement. Please arrange payment of 2 weeks at full pa inclusive of SPP. | <input type="checkbox"/> |
| Section D – Declaration | |
| All of the information I have provided on this form is accurate | |
| Print name: | |
| Signed: | |
| Date: | |
| Please return this form to your Line manager. | |

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| Section E – Authorisation (to be completed by the Senior Authorising Officer) |
| I authorise the paternity leave and pay as detailed above. |
| Print name: |
| Signed: |
| Date: |
| This form should be retained on the employee's personnel file. Please forward a copy for payroll processing. |

| Annex B | |
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| ASSOCIATE STAFF Application for Statutory Paternity Leave (SPL) and Pay (SPP) | |
| And maternity support leave (BIRTH) | |
| The maximum amount of combined maternity support leave and paternity leave is 2 weeks. | |
| Section A – Employee Details (to be completed by the employee) | |
| Employee name: | |
| Address for correspondence: | |
| Payroll reference: | |
| National Insurance No: | |
| Name of school/academy employing: | |
| Post title/s: | |
| Relevant service and notice week: | |
| Copy of evidence attached: | Yes: <input type="checkbox"/> No: <input type="checkbox"/> |
| Section B | |
| Associate staff Only – Maternity Support Leave Employed Under Green Book Terms | |
| I will be the child’s father or the partner or nominated carer of an expectant mother at or around the time of birth. I wish to take 5 days paid maternity support leave in order to provide care for the child and support the mother commencing on [date]_____ | |
| I also meet the qualifying condition for SPL indicated under section 1 above and wish to take 1 week’s SPL following this to commence on [date] _____ | |
| I am not eligible for maternity support leave. I intend to take (please tick): | |
| 1 week SPL | <input type="checkbox"/> |
| 2 consecutive weeks SPL | <input type="checkbox"/> |
| Commencing on [date] _____ which is: | |
| a) the date on which it is anticipated the child will be born; or | <input type="checkbox"/> |
| b) _____[insert number of days] after the date on which the child is expected to be born | <input type="checkbox"/> |

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| I understand that I must provide 28 days' written notice if I wish to change the start date of my SPL. | <input type="checkbox"/> |
| I understand that all my SPL must be taken within 56 days of the date of birth (except where the child is born earlier than the EWC) | <input type="checkbox"/> |
| I understand that SPL is not available if, I have taken any shared parental leave in respect of the child. | <input type="checkbox"/> |
| Section C– Application for Statutory Paternity Pay (OSPP) | |
| Please tick the one applicable statement. | |
| d) I understand that I am not entitled to SPP as I do not meet the earnings threshold. I am applying for SPL only. (You will be sent form SPP1 to confirm) | <input type="checkbox"/> |
| e) I understand that I am entitled to SPP and contractual enhancement. Please arrange payment of my 1 week at full pay inclusive of Spp. | <input type="checkbox"/> |
| f) I understand that I am entitled to SPP and contractual enhancement. Please arrange payment of my 2 weeks at full pay inclusive of SPP | <input type="checkbox"/> |
| If you have elected under Section B to take your entitlement to maternity support leave this will be paid. | |

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| Section E – Declaration | |
| All of the information I have provided on this form is accurate | |
| Print name: | |
| Signed: | |
| Date: | |
| Please return this form to the line manager. | |

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| Section F – Authorisation (to be completed by the line manager) | |
| I authorise the paternity leave and pay as detailed above. | |
| Print name: | |
| Signed: | |
| Date: | |
| This form should be retained on the employee's personnel file. Please forward a copy for payroll processing. | |

Annex C

TIME OFF TO ACCOMPANY A PREGNANT WOMAN TO AN ANTENATAL APPOINTMENT

Employees and qualifying agency workers accompanying an expectant mother to her ante-natal appointments are entitled to **unpaid** leave for 1 or 2 appointments. If you wish to take time off, please complete this form and forward it to your line manager at least 10 days prior to the appointment.

Employee name: Job title:

I confirm that I (delete as appropriate):

am the baby's father;

am the expectant mother's spouse, her civil partner, or partner (of either sex) in an enduring relationship and am not a relative of the woman;

am the intended parent of a child who is expected to be born to a surrogate mother and expect to be entitled to and intend to apply for a parental order in respect of that child.

I confirm that: the purpose of taking the time off is to accompany a pregnant woman to antenatal appointment(s).

Yes No Please tick

I confirm that: the appointment has been made on the advice of a registered doctor, registered midwife or registered nurse.

Yes No Please tick

The time and date and location of the appointment(s): *insert details of 1 or 2 appointments*

I understand that any false information that I give on this form may result in disciplinary proceedings being taken against me.

Signature of employee:

Date:

Authorising Manager:

Signature of authorising manager:

Date: