

# **ANNUAL LEAVE FOR CONSULTANTS AND SAS DOCTORS**

## **(MD9)**

If you require a copy of this policy in an alternative format (for example large print, easy read) or would like any assistance in relation to the content of this policy, please contact the Equality and Diversity team on 01803 656680.

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<b>Date of Issue:</b>	April 2017	<b>Next Review Date:</b>	April 2019
<b>Version:</b>	1	<b>Last Review Date:</b>	February 2017
<b>Author:</b>	Medical HR		
<b>Directorate:</b>	Workforce and Organisational Development		
<b>Approval Route</b>			
<b>Approved By:</b>		<b>Date Approved:</b>	
LNC		November 2002	
LNC		September 2014	
LNC		February 2017	
<b>Links or overlaps with other policies:</b>			
<i>Need to list all policies that are referred to, or have links to this policy. List them in numeric order.</i>			

### Amendment History

Issue	Date	Reason for Change	Authorised
2	May 2005		
3	November 2006		
4	December 2007		
5	November 2009		
6	March 2011	Clarification of exceptional circumstances for payment for unused annual leave and Bank Holiday Calculator for part-time staff added	LNC
7	November 2011	Further clarification of application and sign-off process	LNC
8	March 2013		LNC
9	July 2014	2 additional leave days for SAS doctors	LNC
10	Sept 2014	Agreement to move the annual leave year to Apr-Mar as of 1st April 2016	LNC
1 (new template)	Feb 2017	New policy Template and clarification of bank holiday entitlement.	LNC

## Rapid Equality Impact Assessment

<b>Policy Title (and number)</b>	Annual Leave for Consultants & SAS Doctors				
<b>Policy Author</b>	HR Directorate				
<b>Version and Date (of EIA)</b>	April 2017 version 1				
<b>Associated documents (if applicable)</b>					
<b>RELEVANCE: Does the aim/purpose of the policy relate to each of the aims of the Public Sector Equality Duty?</b>					
• Eliminate unlawful discrimination or other conduct prohibited by the Equality Act 2010					Yes <input type="checkbox"/> No <input type="checkbox"/>
• Advance equality of opportunity between people from different groups					Yes <input type="checkbox"/> No <input type="checkbox"/>
• Foster good relations between people from different groups					Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>SIGNIFICANCE AND IMPACT: Consider the nature and extent of the impact, not the number of people affected.</b>					
Does the policy affect service users, employees or the wider community? (if no, proceed to sign off)					Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the policy affect service delivery or business processes?					Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the policy relate to an area with known inequalities (deprivation/unemployed/homeless)?					Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>EQUALITY ANALYSIS: How well do people from protected groups fare in relation to the general population?</b>					
<i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>					
Is it likely that the policy/procedure could treat people from protected groups less favorably than the general population? (see below)					
<b>Age</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Disability</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Sexual Orientation</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Race</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Gender</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Religion/Belief (non)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Gender Reassignment</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Pregnancy/ Maternity</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Marriage/ Civil Partnership</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is it likely that the policy/procedure could affect particular 'Inclusion Health' groups less favourably than the general population? (substance misuse; teenage mums; carers; travellers; homeless; convictions; social isolation; refugees)					Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.					
What if any, is the potential for interference with individual human rights? (consider the FREDA principles of Fairness/ Respect/ Equality/ Dignity/ Autonomy)					
N/A					
<b>RESEARCH AND CONSULTATION</b>					
What is the reason for writing this policy? (What evidence/ legislation is there?)					
Guidance on annual leave entitlement and arrangements					
Who was consulted when drafting this policy/procedure? What were the recommendations/suggestions?					
Local Negotiating Committee medical and dental					
<b>ACTION PLAN: Please list all actions identified to address any impacts</b>					
<b>Action</b>				<b>Person responsible</b>	<b>Completion date</b>

## Contents

1.	POLICY STATEMENT .....	5
2.	PURPOSE .....	5
3.	SCOPE .....	5
4.	EQUALITY AND DIVERSITY STATEMENT .....	5
5.	ROLES AND RESPONSIBILITIES .....	5
6.	ENTITLEMENT .....	6
8.	PROCEDURE .....	10
9.	APPLYING FOR ANNUAL LEAVE (see Flow Chart C) .....	10
10.	CARRY FORWARD OF ANNUAL LEAVE.....	11
11.	EXCHANGE ANNUAL LEAVE ENTITLEMENT FOR PAYMENT .....	11
12.	ENTITLEMENT ON LEAVING.....	12
13.	TRAINING AND AWARENESS.....	12
15.	CONTACT DETAILS.....	12
16.	MONITORING, AUDIT AND REVIEW PROCEDURES.....	13
Appendix A:	ANNUAL, STUDY/PROFESSIONAL LEAVE APPLICATION.....	14
Appendix B:	CONSULTANT AND SAS DOCTORS AUTHORITY TO EXCHANGE ANNUAL LEAVE ENTITLEMENT FOR A LUMP SUM PAYMENT .....	16
Appendix C:	Flow Chart - Annual and Study/ Professional Leave Approval Process.....	17
Appendix D:	Calculation of Bank Holidays Entitlement Part-time Staff.....	18
Appendix E:	Bank Holiday Calculator .....	19
Appendix F:	Annual leave examples.....	20

## 1. POLICY STATEMENT

- 1.1 Torbay and South Devon NHS Foundation Trust (the 'Trust') is committed to developing and maintaining working arrangements that enable staff to achieve a work life balance. The Trust recognises the importance of annual leave in helping staff to achieve this.

## 2. PURPOSE

- 2.1 The aim of this policy is to provide a uniform and equitable approach in the calculation of annual leave and bank holiday entitlements and arrangements for Consultant and SAS Doctors.

## 3 SCOPE

- 3.1 This policy applies to all Consultant and SAS Doctors employed by Torbay & South Devon NHS Foundation Trust, together with those on a joint contract with the organisation and another employer.
- 3.2 It does not apply to trainee doctors for whom separate provisions apply.

## 4 EQUALITY AND DIVERSITY STATEMENT

- 4.1 The Trust is committed to preventing discrimination, valuing diversity and achieving equality of opportunity. No person (staff, patient or public) will receive less favourable treatment on the grounds of the nine protected characteristics (as governed by the Equality Act 2010): sexual orientation; gender; age; gender re-assignment; pregnancy and maternity; disability; religion or belief; race; marriage and civil partnership. In addition to these nine, the Trust will not discriminate on the grounds of domestic circumstances, social-economic status, political affiliation or trade union membership.
- 4.2 The Trust is committed to ensuring all services, policies, projects and strategies undergo equality analysis.

## 5 ROLES AND RESPONSIBILITIES

### Managers are responsible for:

- 5.1.1 Ensuring that individuals are aware of the procedures for requesting annual leave within their own department and are responsible for authorising any leave requests
- 5.1.2 Ensuring that staff are aware of their annual leave entitlements.
- 5.1.3 Ensuring that annual leave is planned and subject to the needs of the service. Managers should ensure that all staff spread their leave over the year to avoid excessive levels of leave at the same time or towards the end of the leave year
- 5.1.4 Keeping records for annual leave requests

- 5.1.5 Adjusting annual leave entitlement on notification from employee that service entitlement has been reached

**Employees are responsible for:**

- 5.2.1 Familiarise themselves with this policy and request annual leave in accordance with the policy and local department procedure /guidelines
- 5.2.2 Ensuring that their annual leave is planned and taken across the annual leave year.
- 5.2.3 Requesting and obtaining authorisation for any leave requests prior to booking any arrangements outside of work eg travel, accommodation, package holiday
- 5.2.4 Notifying their line manager when their length of service reaches a point which requires adjustment to their annual leave entitlement

**6 ENTITLEMENT**

- 6.1 Medical Staff are entitled to 6 weeks annual leave per year
- 6.2 The annual leave year runs from 1<sup>st</sup> April-31<sup>st</sup> March for all Medical and Dental staff applicable under this policy.

**Consultants**

- 6.3 As per Schedule 18 of the Terms & Conditions – Consultants (England) 2003, annual leave should be discussed at the annual Job Plan review. Dates for annual leave and the arrangements for the Consultant's work to be done in his or her absence should be incorporated into the agreed Job Plan, or alternatively agreed at least 6 weeks in advance, if possible. Subject however to suitable arrangements having been made, consultants may take up to two days of their annual leave without six weeks notice provided that they give notification beforehand.

Grade	Entitlement	Total
Consultants (on new contract with 7 or more years service as a Consultant)	30 days + 2 statutory days + 2 extra days	34
Consultants (on old contract <u>or</u> with less than 7 years	30 days + 2 statutory days	32

service as a Consultant)		
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6.4 Part-time Consultants are entitled to the above allowances, pro rata

### Locum Consultants

6.5 Locum Consultants are entitled to annual leave on the same basis as substantive consultants under the provisions of Schedule 18 of the Terms & Conditions of Service. Annual leave will be accumulated during the tenure of a locum contract on a pro-rata basis.

6.6 Annual leave must be agreed at least **six weeks** in advance and cover should be arranged in accordance with Policy No. 17 – Guidance for Arrangements for Cover of Absence of Leave.

### Senior Hospital Doctors

Grade	Entitlement	Total
Associate Specialist	30 days + 2 statutory days	32
	Over 7 years' service as Associate Specialist = 30 days + 2 statutory days + 2 extra days	34*
Staff Grades	Less than 2 years service = 25 days + 2 statutory days	27
	Over 2 years service = 30 days + 2 statutory days	32
	Those who had an entitlement to 6 weeks leave in their immediately previous employment	34*
	Over 7 years service = 30 days + 2 statutory days + 2 extra days	
CMO's	Less than 5 years service = 25 days + 2 statutory days	27
	Over 5 years service = 30 days + 2 statutory days	34*
	Over 7 years service = 30 days + 2 statutory days + 2 extra days	
Hospital Practitioners	6 weeks per annum per session (eg 2 sessions worked = 2 sess x 6 weeks = 12 sessions)	

	(12 sessions = 6 days)	
Clinical Assistants	6 weeks per annum per session (eg 3 sessions worked = 3 sess x 6 weeks = 18 sessions (18 sessions = 9 days)	

\* the additional 2 days for SAS doctors was agreed at LNC in July 2014.

- 6.7 Part-time Senior Hospital Doctors are entitled to the above allowances, pro rata.
- 6.8 Where less than a full week's leave is requested, there must be a discussion between the doctor and Directorate Manager responsible for signing off the application to ensure a reasonable balance between DCC and SPA time is taken.
- 6.9 Annual leave is to be used whenever a member of the Medical Staff intends to absent themselves from work, except for other previously agreed reasons. The annual leave entitlement does NOT relate solely to those days of the week when any direct clinical care programmed activities/sessions are worked, it includes supporting programmed activities/sessions i.e. leave is a day in which you are not available to return to work.
- 6.10 If a member of the Medical Staff falls sick during annual leave and produces a statement to that effect, he or she will be regarded as being on sick leave from the date of the statement. The member of Medical Staff must telephone their Directorate on their first day of sickness to ensure annual leave is reimbursed. A self certificate may cover days 1 to 7 of the period of sickness. Medical Staff must then obtain a medical certificate for subsequent days.

#### Calculation of entitlement:

For example a Consultant on a 40h contract who has been working for more than seven years and has six weeks of leave a year, there will also be an entitlement to eight days public holidays, plus 2 statutory days and 2 days extra leave every year (see table above). This is how the leave entitlement should be calculated

$40\text{h per week} / 5 \text{ days per week} = 8 \text{ hrs per day}$

$6 \text{ weeks} \times 5 \text{ days} \times 8\text{hrs} = 240\text{hrs for Annual leave}$

$12 \text{ days} \times 8 \text{ hours} = 96\text{hrs for the public holidays, statutory days and extra days}$

$240 + 96 = 336 \text{ hours of leave per year}$

## 7. BANK HOLIDAY ENTITLEMENTS

- 7.1 In addition to the basic annual leave entitlement employees are entitled to a Bank/Public holiday allowance. The hours an employee would normally work on a Bank Holiday to be taken as leave should be deducted from the 'Total Leave Entitlement'.
- 7.2 Part-time staff are entitled to a pro-rata Bank/Public holiday allowance. This allowance is calculated in hours to provide equity for all by ensuring that staff do not either lose out or gain in comparison to full-time colleagues or colleagues working differing work patterns ie a part-time person who works Mondays would benefit from dis-proportionality more Bank Holidays to someone who does not work on a Monday were these arrangements not applied. For the calculation to be applied and arrangements see Appendix C.
- 7.3 The recognised Public/Bank Holidays are as follows:
- Good Friday
  - Easter Monday
  - May Day
  - Spring Bank Holiday (late May)
  - August Bank Holiday
  - Christmas Day\*
  - Boxing Day\*
  - New Year's Day\*
- \*If these dates fall on a weekend (Sat and/or a Sun) the official Bank/Public Holiday days will be the following Monday (and Tuesday in the case of both Christmas Day and Boxing Day falling at the weekend).
- 7.4 Where Easter falls wholly or partly in March, the Bank/Public holidays will be deemed to be part of the leave year's entitlement as it falls. If this situation occurs then the entitlement the following year will be calculated as having less the number of Bank/Public holidays that fell in the previous year (either one or two as appropriate).
- 7.5 The Bank/Public holiday period is defined as the 24 hour period from the midnight leading in to the Bank/Public holiday to midnight on the day of the Bank/Public holiday.
- 7.6 If an employee who has exhausted their Bank/Public holiday provision wishes or is required to take leave on a further Public/Bank holiday, the time taken will be deducted from the basic annual leave entitlement. This may be the case for someone who works part-time and the majority of Bank/Public holidays fall on their usual working day.

## 8. PROCEDURE

8.1 Leave will be granted in line with needs of the service and appropriate cover arrangements being in place. Each department must ensure that they have the correct number of people in work to ensure that a safe service is deliverable (this must take into account potential sickness, special leave etc).

8.2 All leave should be applied for a minimum of **six weeks** in advance of the leave start date. Shorter notice may be allowed at the discretion of the Clinical Director. Although Senior Hospital Doctors may take up two days of their total annual leave entitlement without seeking formal permission, this is subject to their giving notification beforehand and appropriate cover arrangements being confirmed for fixed sessions or agreement from the Clinical Director that commitments may be changed.

It is in the interests of Medical Staff and essential for the service that adequate cover arrangements for leave are arranged at Directorate level. Medical staff are required, by the Terms and Conditions of Service, to deputise for absent colleagues 'so far as is practicable', even where this involves interchange of staff between hospitals. Arrangements for deputising must be agreed in advance of sign-off, either among the staff concerned within the Directorate or Clinical Team or by a rota manager. Arrangements for cover should be clearly indicated on the Annual Leave form. The Clinical Director must have approval from the Medical Director for any locum cover which will be exceptional.

8.3 Medical Staff should not be expected to take on cover for temporarily absent colleagues if the duties involved are unreasonable and beyond their competence.

8.4 Annual leave is recorded by the relevant specialty, usually the practice manager. Individuals are expected to keep a record of annual leave as well, so they are aware of outstanding days.

8.5 Doctors/ Dentists who are not in the Trust when they are scheduled for SPA or DCC admin should book this time accordingly either as annual leave or study leave even if an SPA session is worked at home or at any other site (this should be clearly marked in the job plan). If they are not able to return to the Trust if a clinical need was to arise then it should be booked as leave.

## 9. APPLYING FOR ANNUAL LEAVE (see Flow Chart C)

9.1 A minimum of six weeks' notice must be given of a request for leave

9.2 Applications for leave should be checked by the Operational Manager to ensure that adequate cover is available and then authorised by the Clinical Director or their nominee, the Clinical Director's by the Medical Director and the Medical Director's by the Chief Executive. Leave must not be assumed to be approved until it has been authorised by the relevant signatory.

9.3 The leave approval process (as described in the Flow Chart at Appendix C) should be completed within the five working days time frame. Requests made

with less than six weeks notice will only be granted by the Clinical Director or their nominee under exceptional circumstances.

- 9.4 Leave should be applied for using the electronic version of the Annual, Study/ Professional Leave Application form at Appendix A.
- 9.5 The leave application form should be completed electronically and circulated as an attachment via email. The email chain and form should together confirm cover arrangements (from the individual who has agreed to provide cover or from the appropriate manager where this task is coordinated as part of rota/ cover management arrangements).
- 9.6 The applicant should receive a response from the Clinical Director or their nominee advising whether or not the request has approved within 48 hours and not more than five working days of the submission of the leave application email. The Clinical Director is responsible for ensuring that there are appropriate arrangements in place to ensure that these expectations are met ie a nominated deputy in place for roles critical to the sign-off process.

## **10 CARRY FORWARD OF ANNUAL LEAVE**

- 10.1 Medical Staff are normally expected to use their full annual leave entitlement within the leave year.
- 10.2 Where employees are prevented by the Trust from taking the full allowance of annual leave before the end of their leave year, they shall be allowed to make up the deficiency during the ensuing leave year at a time to be mutually agreed
- 10.3 Subject to the needs of the service Medical Staff may carry forward up to five days unused leave to their next leave year. However, in exceptional circumstances the carry over of leave in excess of five days may be authorised at the discretion of the Divisional General Manager or Clinical/Medical Director.

## **11. EXCHANGE ANNUAL LEAVE ENTITLEMENT FOR PAYMENT**

- 11.1 Alternatively to carrying forward annual leave, in exceptional circumstances Medical Staff may exchange up to five days of their annual leave for the equivalent in pay as a lump sum payment (pro-rata for part time staff).
- 11.2 Exceptional circumstances would relate to operational requirements that have prevented the taking of annual leave. For consideration of buy-out of unused annual leave up, to the maximum of five days, all of the following essential criteria should be met:

Operational Need - The consultant/ SAS doctor has provided cover for an absent colleague or colleagues or worked on a key project that has significantly impacted upon their ability to take their annual leave in the outgoing leave year.

Regular Leave Management Discussions – There has been ongoing discussion regarding the difficulties being encountered in scheduling leave between the Clinical Director/ Medical Director and the individual, including the early

consideration of the possible options for dealing with up to five days untaken leave eg schedule leave at end of out-going leave year, and or carry-over or payment.

Feasibility of Taking Excess Leave in Incoming Leave Year – The operational pressures will continue into the incoming leave year meaning that it is highly unlikely that any carried over leave days will be able to be taken in the new leave year.

- 11.3 An “Authority to Exchange Annual Leave Entitlement for a Lump Sum Payment” form (Appendix B) must be submitted six weeks prior to the end of an individuals annual leave year to the appropriate Divisional General Manager and Chief Executive for approval. The exceptional circumstance must be clearly documented.
- 11.4 Pay for the days exchanged will be calculated proportionate to your working week at your Programme Activities/sessional rate of pay applicable at the time of your application and will be paid in the following month’s salary.

## **12. ENTITLEMENT ON LEAVING**

- 12.1 Staff who leave the organisation will receive 1/12th of their annual leave entitlement for each complete calendar month worked in the current leave year, less any annual leave taken plus the benefit of any outstanding Bank Holiday hours that have occurred in the leave year prior to the date of leaving.
- 12.2 Where the leave due to an employee exceeds what they have taken, payment will be made for the balance in the final pay packet.
- 12.3 Where the total leave taken exceeds the total leave earned, a deduction for the balance will be made in the final pay packet.

## **13 TRAINING AND AWARENESS**

- 13.1 Advice and support will be provided by the Medical HR team to support staff and managers in adhering to this policy and their understanding of dealing with Annual Leave for Medical Staff.
- 13.2 The Medical HR team will raise awareness of this policy through the publication of information on ICON and to advise staff of changes to the policy through the staff bulletin and ratification processes.

## **15 CONTACT DETAILS**

- 15.1 Any queries regarding this policy should be directed to the Medical HR team of the Directorate of Workforce and Organisational Development.
- HR Helpline – 01803 655754 (ext. 55754)
  - HR department – 01803 654506

**16. MONITORING, AUDIT AND REVIEW PROCEDURES**

- 16.1 This policy will be monitored and audited on a regular basis. A full review will take place every two years by the Directorate of Workforce and Organisational Development unless legislative changes determine otherwise.

## Appendix A: ANNUAL, STUDY/PROFESSIONAL LEAVE APPLICATION

Form must be submitted for approval a minimum of **six weeks** in advance of the planned leave  
**FORM MUST BE FULLY FILLED or it will be returned. If question not applicable type N/A in the box.**

**NAME OF APPLICANT** (type in box):  Tel/Bleep

GRADE:  SPECIALTY:  DIRECTORATE:

### • DETAILS OF LEAVE:

Type of Leave:

Number of days to be taken (choose from drop down list): 0 . 0

fill out if >3 weeks leave

Duration of leave requested: From (type in box dd-mm-yyyy):

To: (type in box dd-mm-yyyy):  (inclusive)

Amount of Leave remaining **AFTER** this claim is processed  
**(Admin staff type in box then return the form):**

Type of Course: Internal Number of CME Points (choose from drop down list): Not known

ALL to give brief course details below (with a copy of programme, if applicable.) including where course it is to be held, and confirm this is on your PDP or it may be refused. For F2/CT/ST trainees note in box below your objectives for attending

Will expenses be claimed? Yes if YES check appropriate box below (if known please give amount or estimate **likely** expense):

Course Fee	<input type="checkbox"/>	£	<input type="text"/>
Traveling	<input type="checkbox"/>	£	<input type="text"/>
Subsistence	<input type="checkbox"/>	£	<input type="text"/>
Accommodation	<input type="checkbox"/>	£	<input type="text"/>

**IMPORTANT:** Please submit all receipts with **claim form**, not this leave request form.

Amount of Study leave funding remaining **BEFORE** this claim is processed  
**(Admin staff type in box then return the form)** → £

How will expenses be paid by applicant? (Detail any grants held) Applicant to reclaim all relevant costs from trust (if necessary, give details below):

### 3. COVER ARRANGEMENTS

I have asked  to cover my on call duties and He has agreed to do so.

**OR**  
Is a Locum is required? No From: (type in box dd-mm-yyyy):   
To: (type in box dd-mm-yyyy):  (inclusive)

My non- on call duties are to be performed by (nominate name and date/time)

4. **NAME/ELECTRONIC**  **SIGNATURE** Date: (dd-mm-yyyy):

Approved by  Departmental Manager Date: (dd-mm-yyyy):

A

Details to be recorded locally and *copy returned, by e-mail, to applicant* within 5 working days of submission

**Appendix B: CONSULTANT AND SAS DOCTORS AUTHORITY TO EXCHANGE ANNUAL LEAVE ENTITLEMENT FOR A LUMP SUM PAYMENT**

Written authority must be given to the Staff Payments Manager agreeing to the conversion of such leave to a lump sum payment and certifying that the total annual leave entitlement will be reduced accordingly.

Consultants and SAS Doctors may in exceptional circumstances convert up to five annual leave days (pro-rata for part-time staff) for the equivalent in pay,

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**AUTHORITY TO EXCHANGE ANNUAL LEAVE ENTITLEMENT  
FOR A LUMP SUM PAYMENT**

Please note – this form **MUST** be completed and forwarded to the Payroll Service Manager

NAME: \_\_\_\_\_ PAYROLL NO. \_\_\_\_\_

GRADE: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

HOSPITAL: \_\_\_\_\_

Consultants and SAS Doctors may in exceptionally circumstances exchange a **MAXIMUM** of five days of their annual leave for the equivalent in pay (pro-rata for part-time staff)

I wish to exchange  days annual leave for the equivalent in pay.

Exceptional circumstance for not been able to take annual leave: .....

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Employee)

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
Divisional General Manager

and

: \_\_\_\_\_ DATE: \_\_\_\_\_  
Chief Executive

I certify that the annual leave records for this employee have been amended.

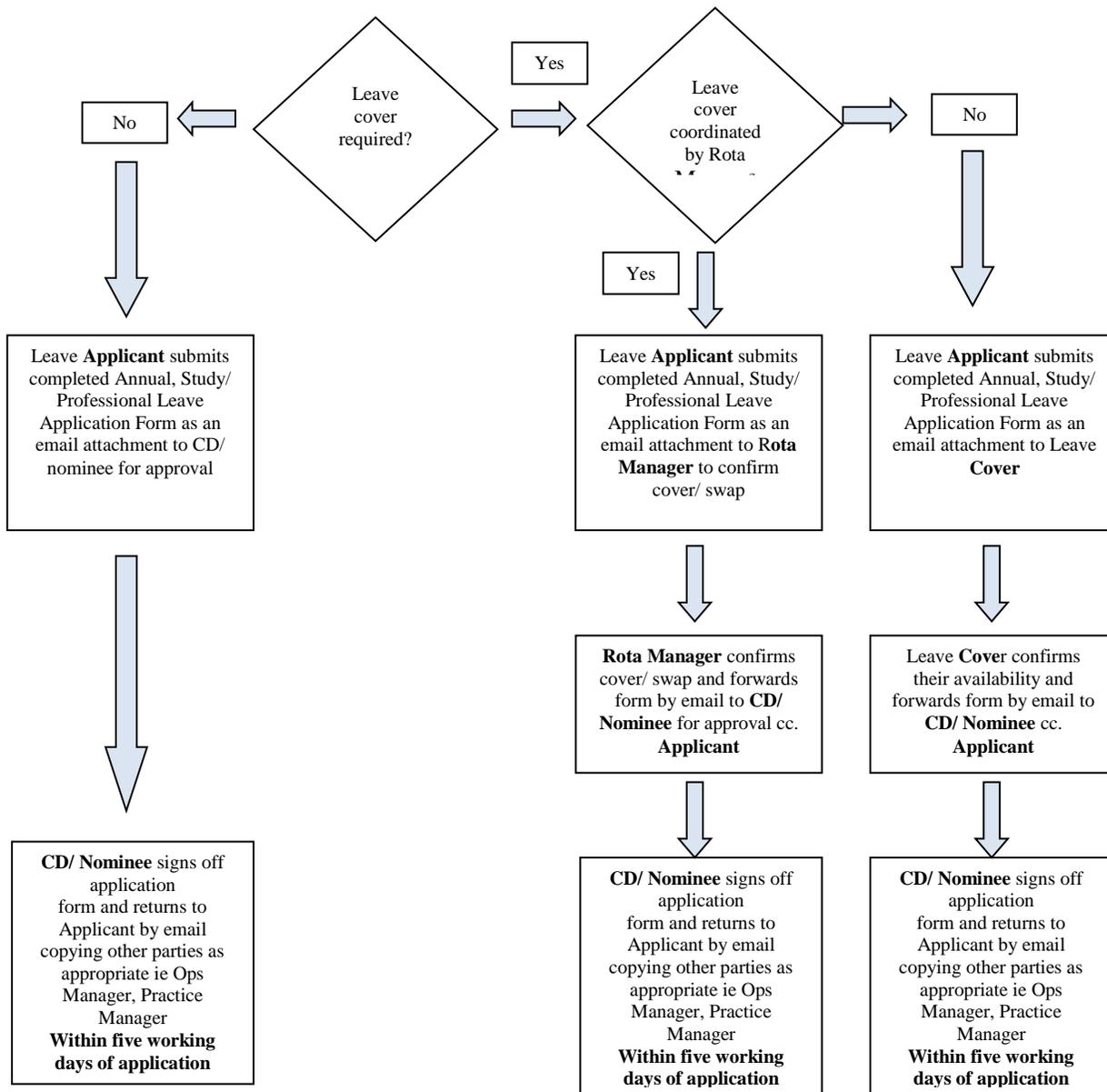
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Practice Manager of relevant specialty)

**FOR FINANCE USE ONLY:**

Number of days leave to be exchanged:  Equivalent in Pay: £ \_\_\_\_\_

Entered on ESR for payment: SIGNED: \_\_\_\_\_ Payroll Officer

## Appendix C: Flow Chart - Annual and Study/ Professional Leave Approval Process



### Guiding Principles:

1. Leave will be granted in line with needs of the service and subject to appropriate cover arrangements being in place
2. Leave should be pro-actively managed to ensure appropriate levels of cover and advance planning for peak leave times such as Christmas, New Year and major national events
3. Leave should be applied for a minimum of six weeks in advance of the leave start date
4. Leave requests made with less than six weeks notice will only be granted under exceptional circumstances
5. The leave approval process is subject to confirmation of any required cover
6. The Medical Director must approve any locum cover which will be on an exceptional basis
7. The leave approval process should be completed within five working days of the application being submitted
8. CDs must ensure that deputies are assigned to cover the absence of people key to leave sign-off

## Appendix D: Calculation of Bank Holidays Entitlement Part-time Staff

### Bank Holiday Entitlement Calculator

At the beginning of the leave year the bank holiday entitlement is calculated in hours based on the average hours worked each week using the following calculation (see Table):

$$\frac{\text{Weekly Contracted Hours} \times 8 \text{ Bank Holidays}}{5}$$

e.g A doctor working 33 hours per week is entitled to 53 hours in their leave year.

- If a Bank Holiday falls on a day that is a normal work day the hours due to be worked on that day are deducted from the bank holiday leave entitlement.
- If this results in more Bank Holidays being taken than the entitlement, the short-fall is deducted from the basic annual leave entitlement.
- If this results in less than the Bank Holiday leave being taken the excess is added to the basic leave entitlement.

**Appendix E: Bank Holiday Calculator**

<b>Weekly Basic Contracted Hours</b>	<b>Hourly Entitlement For Full Leave Year (8 BANK HOLIDAYS)</b>	<b>Weekly Basic Contracted Hours</b>	<b>Hourly Entitlement For Full Leave Year (8 BANK HOLIDAYS)</b>
40	64	20	32
39.5	63.5	19.5	31
39	62.5	19	30.5
38.5	62	18.5	29.5
38	61	18	29
37.5	60	17.5	28
37	59	17	27
36.5	58.5	16.5	26.5
36	57.5	16	25.5
35.5	57	15.5	25
35	56	15	24
34.5	55	14.5	23
34	54.5	14	22.5
33.5	53.5	13.5	21.5
33	53	13	21
32.5	52	12.5	20
32	51	12	19
31.5	50.5	11.5	18.5
31	49.5	11	17.5
30.5	49	10.5	17
30	48	10	16
29.5	47	9.5	15
29	46.5	9	14.5
28.5	45.5	8.5	13.5
28	45	8	13
27.5	44	7.5	12
27	43	7	11
26.5	42.5	6.5	10.5
26	41.5	6	9.5
25.5	41	5.5	9
25	40	5	8
24.5	39	4.5	7
24	38.5	4	6.5
23.5	37.5	3.5	5.5
23	37	3	5
22.5	36	2.5	4
22	35	2	3
21.5	34.5	1.5	2.5
21	33.5	1	1.5
20.5	33	0.5	1

## Appendix F: Annual leave examples

Below are some examples of how annual leave can be calculated and deducted.

### Example 1 (calculation):

A Consultant works Tues/Weds/Thurs & Fri mornings 28 hours/7 PAs and has had more than 7 years' service.

The annual leave has been calculated as follows:

$34 \text{ days} / 10 \times 7 = 23.8 \text{ days}$  or  $28 \text{ hours} \times 34/5 = 190.4 \text{ hours}$

The bank holiday has been calculated as follows:

$28 \text{ hours} \times 8/5 = 44.8 \text{ hours}$  or 5.6 days

Therefore the total leave for the year would equate to 29.4 days or 235.2 hours

### Example 2 (deduction):

Two Consultants both work 2.5 PA's per week (10 hours) and have less than 7 years' service.

Consultant A works 2.5 PAs in one day

Consultant B works 2.5 PAs over two days (5 hours each day)

Their total leave for the year would equate to 10 days or 80 hours

If you deduct the leave by days, Consultant A will have 10 weeks annual leave opposed to Consultant B who will only have 5 weeks annual leave; therefore the leave for Consultant A & B will need to be deducted as hours rather than days.

### Example 3 (deduction)

Two Consultants both work 10 PA's per week (40 hours) and have more than 7 years' service.

Consultant A works Mon-Fri, 8 hours per day

Consultant B works Tues-Fri, 10 hours per day

The total leave for the year would be 34 days or 272 hours (including statutory and additional days), plus bank holidays.

Consultant A will have 5 days taken for a week's annual leave

Consultant B will need to have a week's annual leave deducted in hours; if it was deducted in days then they would receive 8.5 weeks of leave opposed to Consultant A who would receive 6.8 weeks.